



Republic of Zambia

Ministry of Health

Tobacco Control Strategic Plan 2022 – 2026

Towards the Prevention and Control of Non-Communicable Diseases in Zambia

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Foreword

The Government of the Republic of Zambia is pleased to introduce the first national multisectoral tobacco control strategic plan covering the period 2022-2026. The tobacco epidemic is one of the biggest public health threats the world has ever faced, killing more than 8 million people a year around the world. Zambia has not been spared from the negative health, social, environmental and economic impact of tobacco. In 2016, tobacco was responsible for deaths of over 7,100 Zambians representing 6 percent of all deaths. Without applying urgent and appropriate remedial actions, Zambia will soon witness an exponential growth in the number of tobacco related deaths. The burden is even more alarming among adolescents as more than a third of this young population are using tobacco, threatening the future of this generation. By ratifying the WHO Framework Convention on Tobacco Control in 2008, the Government of Zambia made a commitment to comprehensive action towards tobacco control.

The purpose of this plan is therefore to provide a comprehensive policy framework for tobacco control that will guide the tobacco control community to effectively reverse the impact of the tobacco epidemic. The plan has been worked out to conform to the 2030 Agenda for Sustainable Development target 3.4 which calls for a one-third reduction in premature mortality from NCDs by 2030. Its strategic priorities have been aligned to the provisions of the WHO Framework Convention on Tobacco Control. This is an important milestone as it is in line with Zambia's Vision 2030 which recognises health as a priority and key investment necessary for the achievement of sustainable development as stipulated in the Eighth National Development Plan and National Health Strategic Plan 2022-2026 (NHSP 2022-26^[MN1]).

This strategic plan addresses all the major areas of tobacco control and proposes actions that could have a positive impact on non-smokers and smokers. The key areas of focus include: strengthening the policy and legislative environment for tobacco control in accordance with WHO FCTC Articles and its implementation guidelines; reducing demand for tobacco products, reducing supply of tobacco products, protecting the environment and health, establishing mechanisms for surveillance, research, monitoring and evaluation.

This plan is not an end in itself, I would like to emphasise the fact that achievement of these ambitions will require whole of government and whole of society approaches involving civil society and cooperating partners and other stakeholders. It also requires building local partnerships, with a multisectoral oversight body to provide governance for tobacco control.

The plan is a product of a wide consultative process that involved all stakeholders and reflects the views and suggestions of many partners. I therefore invite all key sectors, Cooperating Partners and stakeholders to direct and intensify their efforts towards reducing smoking initiation, promoting cessation and creating a Zambia free from the adverse effects of tobacco. Let us make health everyone's responsibility.

ABBREVIATIONS/ACRONYMS

ACM	Annual Consultative Meetings
CCS Plans?	
CDC	Centers for Disease Control and Prevention
COVID 19	Coronavirus Disease 19
CPs	Cooperating Partners
CSO	Central Statistical Office
CVD	Cardiovascular Diseases
FGDs	Focus Group Discussions
FTA	Free Trade Area
GDP	Gross Domestic Progress
GRZ	Government of the Republic of Zambia
GYTS	Global Youth Tobacco Survey
HiAP	Health in All Policies
HMIS	Health Management Information System
IEC	Information Education and Communication
IHME	
ITC	The International Tobacco Control Policy Evaluation Project
KAP	Knowledge Attitude and Practice
LMICs	Low and Middle Income Countries
MCTI	Ministry of Commerce trade and Industry
MIBS	Ministry of Information and Broadcasting Services
MoF,	Ministry of Finance
MOH	Ministry of Health
MOJ	Ministry of Justice
MOLGRD	Ministry of Local Government and Rural Development
NCDs	Non-Communicable Diseases
NCM	National Coordination Mechanism for Tobacco Control
NDP	National Development Plan
NGOs	Non-Governmental Organizations
NHSP	National Health Strategic Plan
PPPs	Public Private Partnerships
RTI	
RYO	Roll-Your-own
SDGs	Sustainable Development Goals
SHS	Second Hand Smoke
SI	Statutory Instrument
SPs	Strategic Priorities
STEPS	
STOP	
SWAp	Sector Wide Approach
SWOT	Strengths Weakness Opportunities and Threats
TAPS	Tobacco Advertising Promotion and Sponsorship
TCC	Tobacco Control Committee

TOFAZA	Tobacco Free association of Zambia
TWGs	Technical Working Groups
UHC	Universal Health Coverage
UN	United Nations
UNDAF	United Nations Development Assistance Framework
UNDO	
WHO FCTC	World Health Organization Framework Convention on Tobacco Control
WHO	World Health Organization
WNTD	World No Tobacco Day
ZABS	Zambia Bureau of Standards
ZDA	Zambia Development Agency
ZDHS	Zambia Demographic and Health Survey
ZEMA	Zambia Environment Management Agency
ZMW	Zambian Kwacha
ZRA	Zambia Revenue Authority

CHAPTER 1: BACKGROUND

The tobacco epidemic is one of the biggest public health threats the world has ever faced, killing more than 8 million people a year around the world and costing the global economy USD1.4 trillion each year¹. More than 7 million of those deaths are the result of direct tobacco use while around 1.2 million are the result of non-smokers being exposed to second-hand smoke. Tobacco use in any form is harmful and no level of exposure to tobacco smoke is safe.

In 2018, at least 1.3 billion (19.2%) of the world's population were tobacco users of which 82% were male and 18% were female. Approximately 43 million children aged 13-15 used tobacco; 14 million girls and 29 million boys².

While tobacco use has been declining in the developed world, the African Region is experiencing an increase in the rate of tobacco use. This has been propelled by a lucrative, under-tapped market owing to a fast growth in population and tactics of the tobacco industry which has created an enabling environment for tobacco use particularly among young people³. In 2019, the prevalence of tobacco use in Sub Sahara Africa was estimated to be 14% with tobacco consumption estimates of 26% and 2.1 % for males and females respectively. At least 13% of adolescent girls used tobacco products with the prevalence rate among girls (4.6% to 36.6%) becoming as high as that for boys (7.8% to 36.5%)⁴.

In Zambia, tobacco contributed to over 7,100 deaths in 2016⁵. The prevalence of tobacco use in Zambia stands at 23% for male and 2% for female⁶. The situation is more alarming among adolescents where the prevalence has been increasing since 2002 with more than a quarter of adolescents aged 13-15 years using some form of tobacco in 2011.

Tobacco-attributable diseases include lung and heart diseases, chronic respiratory diseases, cancers, and diabetes – all of which may increase the severity of COVID-19⁷. Tobacco is also a known leading risk factor for Non-Communicable Diseases (NCDs) that account for at least 71 % of all global deaths with more than 80% of those deaths occurring in low and middle income countries⁸. Non Communicable

¹ WHO Report on the Global Tobacco Epidemic 2021,15

² WHO global report on trends in prevalence of tobacco use 2000-2025 third edition 2019

³ Tobacco Control Governance in Sub Sahara Africa, 2016

⁴ WHO Regional Office for Africa Fact Sheet 2021

⁵ Investment Case for Tobacco Control in Zambia, 2019

⁶ Zambia STEPS Survey 2017

⁷ WHO Report on the Global Tobacco Epidemic 2019

⁸ Non Communicable Disease Fact Sheet. World Health Organization 13 April, 2021

Diseases have impeded progress towards the achievement of the 2030 Sustainable Development Agenda aimed at reducing mortality due to NCDs by one third by 2030.

This document presents the first National Tobacco Control Strategic Plan 2022-2026 which seeks to provide guidance and a strategic framework for the prevention and control of tobacco use and exposure to tobacco smoke as well as NCD reduction in Zambia. This plan has been developed within the context of the National Health Strategic Plan (NHSP 2022-2026) which provides the overall strategic framework for health sector governance and development in Zambia using an inter-sectoral approach perspective, involving line ministries, civil society organizations (CSOs) and cooperating partners (CPs).

World Health Organization Framework Convention on Tobacco Control

In response to the global tobacco epidemic, the World Health Organization introduced the Framework Convention on Tobacco Control (WHO FCTC) in 2005 an international legally binding package of evidence based measures proven to reduce the harms of tobacco.

By ratifying the World Health Organization Framework for Tobacco Control (WHO FCTC), Zambia made a commitment to comprehensive action towards tackling the tobacco epidemic.

To date Zambia has not enacted a WHO FCTC compliant tobacco control legislation. However, some tobacco control measures have been in existence over the years which include regulation on Tobacco Advertising, Promotion and Sponsorship (TAPS) embedded in the Public Health Act of 1992, Statutory Instrument No.39 of 2008 on smoke free policies and taxation of manufactured cigarettes. These regulations have been reviewed to make them comprehensive and included in the draft WHO FCTC compliant tobacco control bill which is currently under consideration.

Zambia's progress on tobacco control is attributed to the technical and financial support rendered by the FCTC 2030 Project particularly on strengthening the legislative and policy environment for tobacco control and sustained public awareness and sensitization among policy makers and the general public. Table 1.1 shows status of implementation of Articles of the WHO FCTC in Zambia.

Table .1 Status of implementation of articles of the WHO FCTC in Zambia.

Article	Status
5.1	Draft tobacco control strategy in place
5.2	❖ Draft Terms of Reference for members of the National Coordination Mechanism (NCM) in place ❖ Appointment of NCM focal points from line ministries and civil society underway

5.3	❖ No prohibited contributions from the tobacco industry. The Zambia Development Agency Act permits provision of incentives to investors ❖ No code of conduct ❖ WHO FCTC compliant draft Bill in place
6	❖ Current tobacco tax is at 41.4% of the retail price of the most sold brand of cigarettes. However, still falls short of the WHO FCTC recommendation of 75%^[NM2] tax share of the retail price of tobacco ❖ no regular adjustment mechanism or re-evaluation procedure ❖ No taxes on smokeless tobacco products
8	❖ Statutory Instrument No.39 on Prohibition of Smoking in Public Places currently in place but not WHO FCTC compliant ❖ weak monitoring, surveillance and enforcement
9 and	❖ No surveillance and enforcement in place ❖ No legislation
9, 10 and	❖ No surveillance and enforcement in place ❖ No legislation
12	❖ Communication Plan near completion ❖ Capacity building programs to be strengthened and expanded to subnational levels
13	❖ No Comprehensive ban of Tobacco Advertising, Promotion and Sponsorship ❖ Public Health Act of 1992 includes regulation on TAPS although not FCTC compliant
14	❖ Only two facilities available countrywide ❖ Inadequate counsellors with appropriate technical expertise ❖ No active quit line ❖ No guidelines on tobacco dependence and smoking cessation
15	❖ Completion of stakeholder consultations on Zambia's ratification of the protocol to eliminate illicit trade in tobacco products ❖ A joint Cabinet Memorandum has been drafted ❖ Prevalence of illicit trade at 30% (approx. ZMW450 million annual revenue loss).
16	❖ No age restriction on purchase of tobacco product ❖ No prohibitions on import, export, manufacture and trade ❖ No legislation
20, 21 and	❖ No national policy for promotion of economically viable and sustainable alternative livelihoods

IMPLEMENTATION PLAN

1. SP 1: Strengthening the Policy and Legislative Environment for Tobacco Control

#	OBJECTIVE	#	STRATEGY
1.1	To develop a WHO FCTC compliant legal framework	1.1.1	Accelerate tobacco control bill towards enactment
1.2	To protect public health policies from industry interference	1.2.1	Develop and operationalise the legal frameworks on tobacco control
		1.2.2	Public awareness generated and policy makers (state actor) of tobacco control law on TI
		1.2.3	Active engagement of media houses, CSOs, academicians and community leaders
		1.2.4	Strengthen evidence-based enforcement
1.3	To establish a Tobacco Control Committee (TCC)	1.3.1	Constitution of the TCC
		1.3.2	Strengthen partnership with UN and Cooperating partners to support whole-of-government tobacco control
		1.3.3	Mainstreaming tobacco control program in national development programmes and plans such as HIV, MCH, TB and poverty reduction programs
1.4	Develop national guidelines to protect public health policies against tobacco industry interference	1.4.1	State and Non-State Actors Consultative meetings to develop guidelines

2. SP 2: Reducing Demand for Tobacco Products

2.1	To increase taxes on tobacco products and nicotine products to 75% by the end of the strategic period in line with the WHO FCTC obligations (Article 6)	2.1.1	Advocate for setting up of appropriate tax policies , legislation and periodic re-evaluation of tobacco tax
2.2	To Protect the public from exposure to Tobacco smoke (Article 8)	2.2.1	Designate and promote 100% smoke-free environments
		2.2.2	Create Public awareness on smoke-free environments
		2.2.3	Strengthen community engagement on tobacco use
		2.2.4	Strengthen legal enforcement
2.3	To regulate and ensure disclosure of contents and emissions of tobacco products (Articles 9 & 10)	2.3.1	Advocate for disclosure of content and emission of tobacco and nicotine products
2.4	To enhance the awareness of the harmful effects of tobacco and nicotine products through packaging and labelling (Article 11)	2.4.1	Ensure Tobacco Manufacturers are compliant with the legal requirements on packaging and labelling
2.5	To effectively communicate, educate, train and create public awareness on Tobacco Control activities (Article 12)	2.5.1	Educating Youths about dangers of tobacco use and to prevent experimentation and initiation through School based tobacco control programmes
		2.5.2	Creating awareness and promoting adherence to laws and regulations protecting youth from tobacco advertising, marketing, sponsorship and sales to under-age youth
		2.5.3	Educating the public about dangers of tobacco use
		2.5.4	Promoting quitting by smokers
		2.5.5	Creating awareness about dangers of second-hand smoke and promoting adherence to smoke free laws
		2.5.6	Building capacity of gate keepers and other tobacco control workers
		2.5.7	Educating tobacco growers on dangers of tobacco growing and alternative livelihoods.
		2.5.8	Create awareness on the dangers and control the use of smokeless tobacco
		2.5.9	Strengthen evidence-based planning and implementation
		2.5.10	Raising awareness among managers of institutions and workplaces of the harms of tobacco products and importance of complying with regulations prohibiting the use of tobacco products in indoor spaces

2.6	To ban all advertising, promotion and sponsorship of tobacco and nicotine products in order to reduce their consumption (Article 13)	2.6.1	Advocate for strengthening of existing laws and regulations
2.7	To scale up tobacco and nicotine products prevention and cessation programmes in Zambia (Article 14)	2.7.1	Enhancing existing de-addiction and cessation programmes
		2.7.2	Decentralization of prevention and de-addiction programmes
		2.7.3	Mainstreaming the implementation of de-addiction and cessation programmes in non- health sectors

3. SP 3: Reducing Supply of Tobacco Products

3.1	To eliminate all forms of illicit trade in tobacco and nicotine products (Article 15)	3.1.1	Strengthen monitoring of illicit trade of tobacco products in Zambia
		3.1.2	Strengthening Enforcement of the Protocol
3.2	To prohibit the sales of tobacco products to and by minors (Article 16)	3.2.1	Review of legislation limiting access of tobacco products to minors
		3.2.2	Stakeholder engagement on legislation limiting access of tobacco products to minors
3.3	To promote economically viable alternative livelihoods for tobacco farmers, workers and individual sellers. (Article 17)	3.3.1	Strengthen research in alternative livelihoods
		3.3.2	Developing information, communication and training programs
		3.3.3	Promote diversification

4. SP 4: Protection of the Environment and Health

4.1	To enhance protection of the environment and health (Article 18)	4.1.1	Protect the environment from hazards of tobacco cultivation, manufacturing and use
		4.1.2	Protect the health of persons involved in tobacco cultivation, processing and manufacturing

5. SP 5: Establishing Mechanisms for Surveillance, Research, Monitoring and Evaluation including Information Sharing on Tobacco Control

5.1	To promote national, regional and international research programmes in the field of tobacco control (Article 20)	5.1.1	Strengthen national, regional and international research programmes and collaboration in tobacco control
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6. SP 6: Submit to the Conference of Parties Periodic Reports on implementation of the Convention

6.1	To submit to the Conference of the Parties, through the Secretariat, periodic reports on the implementation of the FCTC	6.1.1	Information gathering through Stakeholder consultation
		6.1.2	Periodic reporting (every two years)
		6.1.3	Sharing best practices

7. SP 7: Strengthened Capacity for Implementation of the FCTC Obligations

7.1	To increase availability of skilled, motivated, equitably distributed staff to 10 provinces to contribute to the effective delivery of TC programs by 2026	7.1.1	Strengthen national and sub-national coordination of Tobacco Control Programs
		7.1.2	Capacity building of Tobacco Control Program Officers in the Provinces
7.2	To increase access to TC services through construction and rehabilitation of health facilities and acquisition of medical equipment in order to facilitate equity of access to quality health services.	7.2.1	Create and integrate Tobacco Control friendly spaces across a continuum of care by 2026
		7.2.2	Strengthen maintenance and rehabilitation of infrastructure
		7.2.3	Ensure provision of equipment and transport for Tobacco Control programs
7.3	To secure and include medicine and medical supplies for tobacco related ailments through an efficient and effective supply chain system.	7.3.1	Ensure provision of treatment modalities for tobacco related ailments
		7.3.2	Ensure provision of medicines and medical supplies for tobacco related ailments

8. SP 8: Establishing Mechanisms for Innovative Financing, Resource Mobilization International Collaboration and Technical Cooperation

8.1	To establish mechanisms for innovative financing, resource mobilization	8.1.1	Create a health fund from tobacco taxes to co finance the cost of health promotion and treatment of tobacco related medical conditions.
8.2	To establish mechanisms for international collaboration and technical cooperation	8.2.1	Create local, regional and international collaboration and technical cooperation –

BUDGET 2022 – 2026

1. SP 1: Strengthening the Policy and Legislative Environment for Tobacco Control

#	OBJECTIVE	#	STRATEGY	COST (ZMW)					TOTAL
				2022	2023	2024	2025	2026	
1.1	To develop a WHO FCTC compliant legal framework	1.1.1	Accelerate tobacco control bill towards enactment	2,605,058.42	26,134.40	-	-	-	2,631,192.81
1.2	To protect public health policies from industry interference	1.2.1	Develop and operationalise the legal frameworks on tobacco control	10,270,794.45	11,923,599.93	10,451,060.62	7,961,425.63	8,928,653.28	49,535,533.92
		1.2.2	Public awareness generated and policy makers (state actor) of tobacco control law on TI	-	616,035.96	-	-	-	616,035.96
		1.2.3	Active engagement of media houses, CSOs, academicians and community leaders	7,515,911.10	8,154,763.54	8,847,918.44	9,599,991.51	10,415,990.78	44,534,575.36
		1.2.4	Strengthen evidence-based enforcement	7,269,221.16	7,887,104.95	8,557,508.87	9,284,897.13	10,074,113.38	43,072,845.50
1.3	To establish a Tobacco Control Committee (TCC)	1.3.1	Constitution of the TCC	1,759,577.05	1,657,674.07	599,553.13	650,515.14	705,808.93	5,373,128.32
		1.3.2	Strengthen partnership with UN and Cooperating partners to support whole-of-government tobacco control	194,247.55	210,758.59	228,673.07	248,110.28	269,199.66	1,150,989.15
		1.3.3	Mainstreaming tobacco control program in national development programmes and plans such as HIV, MCH, TB and poverty reduction programs	771845.13	210758.5918	908635.3832	248110.2832	1069668.289	3209017.677
1.4	Develop national guidelines to protect public health policies against tobacco industry interference	1.4.1	State and Non-State Actors Consultative meetings to develop guidelines	10,229,448.57	11,052,333.59	11,991,781.95	607,226.46	658,840.71	34,539,631.28
SP 1 Total				40,616,103.42	41,739,163.62	41,585,131.47	28,600,276.44	32,122,275.04	184,662,949.98

2. SP 2: Reducing Demand for Tobacco Products

2.1	To increase taxes on tobacco products and nicotine products to 75% by the end of the strategic period in line with the WHO FCTC obligations (Article 6)	2.1.1	Advocate for setting up of appropriate tax policies , legislation and periodic re-evaluation of tobacco tax	967,435	2,529,292	2,744,282	1,238,744	1,340,729	8,820,482
2.2	To Protect the public from exposure to Tobacco smoke (Article 8)	2.2.1	Designate and promote 100% smoke-free environments	10,409,912	682,791	-	-	34,726,981	45,819,684
		2.2.2	Create Public awareness on smoke-free environments	4,665,733	916,470	1,385,220	6,178,683	1,495,387	14,641,493
		2.2.3	Strengthen community engagement on tobacco use	23,469,813	25,229,302	22,786,281	24,576,214	25,762,998	121,824,608
		2.2.4	Strengthen legal enforcement	33,425,291	32,822,648	35,612,573	42,716,679	41,924,012	186,501,203
2.3	To regulate and ensure disclosure of contents and emissions of tobacco products (Articles 9 & 10)	2.3.1	Advocate for disclosure of content and emission of tobacco and nicotine products	4,426,136	1,979,133	2,078,987	2,301,476	3,003,425	13,789,157
2.4	To enhance the awareness of the harmful effects of tobacco and nicotine products through packaging and labelling (Article 11)	2.4.1	Ensure Tobacco Manufacturers are compliant with the legal requirements on packaging and labelling	8,869,289	9,141,646	8,114,392	10,139,237	8,594,736	44,859,300
2.5	To effectively communicate, educate, train and create public awareness on Tobacco Control activities (Article 12)	2.5.1	Educating Youths about dangers of tobacco use and to prevent experimentation and initiation through School based tobacco control programmes	3,967,357	4,304,582	4,670,472	5,067,462	5,498,196	23,508,068
		2.5.2	Creating awareness and promoting adherence to laws and regulations protecting youth from tobacco advertising, marketing, sponsorship and sales to under-age youth	3,829,934	4,155,479	4,508,694	4,891,933	5,307,748	22,693,789
		2.5.3	Educating the public about dangers of tobacco use	6,502,260	6,457,704	7,006,609	7,602,171	8,248,355	35,817,099
		2.5.4	Promoting quitting by smokers	22,243,961	23,861,831	25,430,262	27,591,835	30,558,698	129,686,587
		2.5.5	Creating awareness about dangers of second-hand smoke and promoting adherence to smoke free laws	3,121,382	897,045	973,294	1,056,024	1,145,786	7,193,533

		2.5.6	Building capacity of gate keepers and other tobacco control workers	1,596,936	1,732,676	1,879,953	2,039,749	2,213,128	9,462,441
		2.5.7	Educating tobacco growers on dangers of tobacco growing and alternative livelihoods.	10,484,111	11,375,261	12,342,158	13,391,241	14,529,497	62,122,268
		2.5.8	Create awareness on the dangers and control the use of smokeless tobacco	3,557,919	3,860,342	4,188,471	4,544,491	4,930,773	21,081,996
		2.5.9	Strengthen evidence-based planning and implementation	7,922,272	9,926,497	9,326,297	10,119,032	12,679,007	49,973,105
		2.5.10	Raising awareness among managers of institutions and workplaces of the harms of tobacco products and importance of complying with regulations prohibiting the use of tobacco products in indoor spaces	1,752,414	1,901,369	2,062,985	2,238,339	2,428,598	10,383,706
2.6	To ban all advertising, promotion and sponsorship of tobacco and nicotine products in order to reduce their consumption (Article 13)	2.6.1	Advocate for strengthening of existing laws and regulations	2,897,983	3,144,312	3,411,578	3,701,563	4,016,195	17,171,632
2.7	To scale up tobacco and nicotine products prevention and cessation programmes in Zambia (Article 14)	2.7.1	Enhancing existing de-addiction and cessation programmes	3,503,482	4,621,085	4,906,585	3,656,138	4,468,892	21,156,183
		2.7.2	Decentralization of prevention and de-addiction programmes	3,974,757	4,312,611	4,679,183	4,784,220	5,508,451	23,259,223
		2.7.3	Mainstreaming the implementation of de-addiction and cessation programmes in non- health sectors	3,660,150	3,971,263	4,308,820	4,675,070	5,072,451	21,687,752
			SP 2 Total	165,248,528.83	157,823,338.81	162,417,098.87	182,510,300.47	223,454,042.12	891,453,309.10

3. SP 3: Reducing Supply of Tobacco Products

3.1	To eliminate all forms of illicit trade in tobacco and nicotine products (Article 15)	3.1.1	Strengthen monitoring of illicit trade of tobacco products in Zambia	7,246,337.42	-	-	9,178,658.31	-	16,424,995.73
		3.1.2	Strengthening Enforcement of the Protocol	13,265,220.60	13,551,107.40	7,083,388.22	5,718,494.64	4,982,018.35	44,600,229.21
3.2	To prohibit the sales of tobacco products to and by minors (Article 16)	3.2.1	Review of legislation limiting access of tobacco products to minors	232,892.00	252,687.81	274,166.28	297,470.41	322,755.40	1,379,971.90
		3.2.2	Stakeholder engagement on legislation limiting access of tobacco products to minors	10,183,001.37	11,048,556.49	11,987,683.79	13,006,636.91	14,112,201.05	60,338,079.61

3.3	To promote economically viable alternative livelihoods for tobacco farmers, workers and individual sellers. (Article 17)	3.3.1	Strengthen research in alternative livelihoods	6,340,415.41	6,859,855.97	7,464,095.53	8,098,543.65	8,570,316.49	37,333,227.06
		3.3.2	Developing information, communication and training programs	45,071,365.51	24,464,342.97	26,465,978.68	26,939,222.15	29,714,616.85	152,655,526.16
		3.3.3	Promote diversification	15,570,747.78	16,009,559.50	18,303,809.54	15,873,399.33	15,077,163.95	80,834,680.10
			SP 3 Total	97,909,980.09	72,186,110.15	71,579,122.04	79,112,425.41	72,779,072.08	393,566,709.76

4. SP 4: Protection of the Environment and Health

4.1	To enhance protection of the environment and health (Article 18)	4.1.1	Protect the environment from hazards of tobacco cultivation, manufacturing and use	2,456,151.98	75,884,093.19	1,008,267.18	1,093,969.89	1,186,957.33	81,629,439.56
		4.1.2	Protect the health of persons involved in tobacco cultivation, processing and manufacturing	38,191,734.61	42,061,740.62	16,947,594.90	-	-	97,201,070.13
			SP 4 Total	40,647,886.58	117,945,833.80	17,955,862.08	1,093,969.89	1,186,957.33	178,830,509.69

5. SP 5: Establishing Mechanisms for Surveillance, Research, Monitoring and Evaluation including Information Sharing on Tobacco Control

5.1	To promote national, regional and international research programmes in the field of tobacco control (Article 20)	5.1.1	Strengthen national, regional and international research programmes and collaboration in tobacco control	22,285,212.11	9,644,632.42	7,494,164.91	11,353,902.40	34,427,967.77	85,205,879.62
			SP 5 Total	22,285,212.11	9,644,632.42	7,494,164.91	11,353,902.40	34,427,967.77	85,205,879.62

6. SP 6: Submit to the Conference of Parties Periodic Reports on implementation of the Convention

6.1	To submit to the Conference of the Parties, through the Secretariat, periodic reports on the implementation of the FCTC	6.1.1	Information gathering through Stakeholder consultation	-	-	218,348.74	-	257,045.60	475,394.34
		6.1.2	Periodic reporting (every two years)	330,925.00	-	-	422,686.90	-	753,611.90
		6.1.3	Sharing best practices	1,065,907.52	626,758.40	1,281,686.73	737,835.66	1,508,833.66	5,221,021.97
			SP 6 Total	1,396,832.52	626,758.40	1,500,035.47	1,160,522.57	1,765,879.26	6,450,028.22

7. SP 7: Strengthened Capacity for Implementation of the FCTC Obligations

7.1	To increase availability of skilled, motivated, equitably distributed staff	7.1.1	Strengthen national and sub-national coordination of Tobacco Control Programs	4,355,103.20	4,725,286.97	5,126,936.36	5,562,725.96	6,035,557.66	25,805,610.15
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	to 10 provinces to contribute to the effective delivery of TC programmes by 2026	7.1.2	Capacity building of Tobacco Control Program Officers in the Provinces	3,196,417.03	3,468,112.48	3,494,671.32	4,082,748.71	4,429,782.35	18,671,731.90
7.2	To increase access to TC services through construction and rehabilitation of health facilities and acquisition of medical equipment in order to facilitate equity of access to quality health services.	7.2.1	Create and integrate Tobacco Control friendly spaces across a continuum of care by 2026	5,793,900.00	6,286,381.50	-	-	-	12,080,281.50
		7.2.2	Strengthen maintenance and rehabilitation of infrastructure	22,851,454.08	24,793,827.68	26,901,303.03	29,187,913.79	31,668,886.46	135,403,385.03
		7.2.3	Ensure provision of equipment and transport for Tobacco Control programs	12,857,250.00	13,950,116.25	-	-	-	26,807,366.25
7.3	To secure and include medicine and medical supplies for tobacco related ailments through an efficient and effective supply chain system.	7.3.1	Ensure provision of treatment modalities for tobacco related ailments	2,292,240.79	-	2,698,483.16	-	-	4,990,723.95
		7.3.2	Ensure provision of medicines and medical supplies for tobacco related ailments	5,425,000.00	5,886,125.00	6,386,445.63	6,929,293.50	7,518,283.45	32,145,147.58
			SP 7 Total	56,771,365.10	59,109,849.88	44,607,839.50	45,762,681.96	49,652,509.92	255,904,246.36

8. SP 8: Establishing Mechanisms for Innovative Financing, Resource Mobilization International Collaboration and Technical Cooperation

8.1	To establish mechanisms for innovative financing, resource mobilization	8.1.1	Create a health fund from tobacco taxes to co finance the cost of health promotion and treatment of tobacco related medical conditions.	2,218,108.36	-	-	-	-	2,218,108.36
8.2	To establish mechanisms for international collaboration and technical cooperation	8.2.1	Create local, regional and international collaboration and technical cooperation –	1,892,621.70	1,456,412.86	-	-	238,743.24	3,587,777.80
			SP 8 Total	4,110,730.06	1,456,412.86	-	-	238,743.24	5,805,886.16