

Executive Summary

In a global pandemic, where smoking is a risk factor for severe COVID-19 disease, the tobacco industry (TI) continued producing, distributing and selling its harmful products.

While governments have the power to tighten regulations on the industry during such trying times, unfortunately, the opposite seems to have happened. In many countries, governments chose to protect and even promote the TI. Tobacco is already responsible for about 8 million annual deaths globally and health and productivity losses cost around US \$1.4 trillion every year. Yet, governments were persuaded to pander to the demands and lobbying of this harmful industry and even accept its charity as shown in the Global Tobacco Industry Interference Index 2021 (the Index).

Although governments identified tobacco industry interference as a main obstacle to their efforts to implement tobacco control measures, many became vulnerable to the industry's tactics, succumbed to its interference and compromised on their policies to protect public health from commercial interests.

Several governments were persuaded by the doubletalk of transnational tobacco companies such as Philip Morris International (PMI), British American Tobacco (BAT) and Japan Tobacco International (JTI), which offered new tobacco products for approval and claimed they were moving away from cigarettes. In reality, they were selling more cigarettes and simultaneously obstructing government regulatory efforts that would affect cigarette sales.

The TI exploited the COVID-19 pandemic with a multi-pronged tactic to entice, persuade and coerce governments towards weaker

public health policies. Many governments, made vulnerable by the pandemic, freely accepted and endorsed charity from the TI, when such donations often come with strings attached, and compromised on policies. Instead of removing benefits to the industry, many governments made decisions that benefited the industry, particularly in lowering or not imposing taxes and delaying legislation or its implementation.

Many government officials met with industry executives in a non-transparent manner and were persuaded to allow this business to function as "essential" during the pandemic lockdowns. Conflict of interest situations rendered officials vulnerable to accept proposals from the industry and view it as a "partner" of economic recovery rather than a burden to public health and society.

This Index, the third in the series, covers **80 countries** documenting the status of government efforts in implementing the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) Article 5.3. Article 5.3 and its Guidelines outline how governments can protect public health policies from commercial and other vested interest of the TI and those who further its interests. Governments that followed these Guidelines were better able to safeguard their tobacco control efforts during the pandemic, while governments that didn't found their efforts being undermined, delayed or defeated by the industry.

The 80 countries are ranked (Figure 1) according to total scores provided by civil society groups, which prepared their respective country indices. The lower the score, the lower the overall level of interference, which augurs well for the country.

This Index shows that while no country has been spared from TI interference, some governments acted boldly to address the interference. Eighteen countries have made improvements in protecting their health policies, especially in applying greater transparency, not collaborating with the industry and adopting guidelines to provide a procedure for interaction with the industry.

Key findings

Several governments made progress toward protecting their policies from tobacco industry interference:

Botswana published its tobacco control law, which limits interaction between the government and the TI and prohibits partnerships with and giving incentives to the TI. The **Indian** Health Ministry adopted a code of conduct restricting the collaboration of officials with tobacco industries, while the **Cambodia** Ministry of Education, Youth and Sports banned all forms of partnership with the TI among educational facilities.

Health ministries, hospitals, health workers and law enforcement agencies in many countries were targeted by increased pandemic-related corporate social responsibility (CSR) activities:

Seven countries reported not receiving tobacco-related CSR, while many others, including at least six countries with bans or restriction on tobacco-related CSR activities, accepted charity from the industry during the pandemic. Some departments of health, who are front-liners in treating tobacco-related diseases, welcomed TI donations of ventilators, personal protective equipment (PPE) and funds.

Many governments compromised on tobacco tax policies:

At least eleven countries that received CSR charity from the industry compromised on tax policies. Governments accepted TI proposals using the pandemic as justification to apply lower taxes, provide a longer period in which to pay taxes or not increase taxes on tobacco. Tax increases were defeated in several countries.

At least 10 governments deemed the tobacco industry and cigarettes “essential” during the pandemic:

Governments, national and provincial, allowed the TI to operate during the pandemic and some deemed cigarettes as essential items to be sold during lockdowns. Governments that banned tobacco production during lockdown were often challenged by tobacco-friendly departments to reverse their decision or were even sued by the industry.

The TI convinced lawmakers in several countries to treat new tobacco products differently and favorably:

Lawmakers in **Kenya, Lebanon, Egypt** and **Spain** were persuaded to regulate electronic nicotine delivery systems (ENDS) and heated tobacco products (HTPs) differently from conventional tobacco products and, in some cases, even reverse previous bans on them.

The TI sabotaged tobacco control legislation in several countries:

There were delays in the tabling of tobacco control legislation in **Tanzania** and **Zambia**, while the implementation of existing legislation, particularly prominent pictorial health warnings (PHW), were postponed in **Ethiopia, Bolivia**, and plain packaging stalled in **Georgia** and **Turkey**.

Senior officials in several countries promoted the tobacco industry:

Tobacco companies secured visits from heads of state, ministers or other high-ranking officials in **Brazil, Fiji, Germany, Kenya** and **Zambia** to their factories who endorsed their business in inauguration ceremonies. Publicity of these visits in the media provided stamps of approval from high offices, which in turn compromises regulation. Senior officials in **Pakistan, Nicaragua** and **Poland** participated in industry activities related to the economy.

Governments forged agreements instead of regulations:

The TI effectively secured collaboration with governments in at least eleven countries through agreements, training programs and enforcement activities, especially on illicit trade, contrasting with FCTC requirements to limit interactions with the TI to only when strictly necessary for regulation. These include agreements to address illicit trade of tobacco in **Colombia, the Dominican Republic, Ethiopia, Italy** and **the Netherlands**.

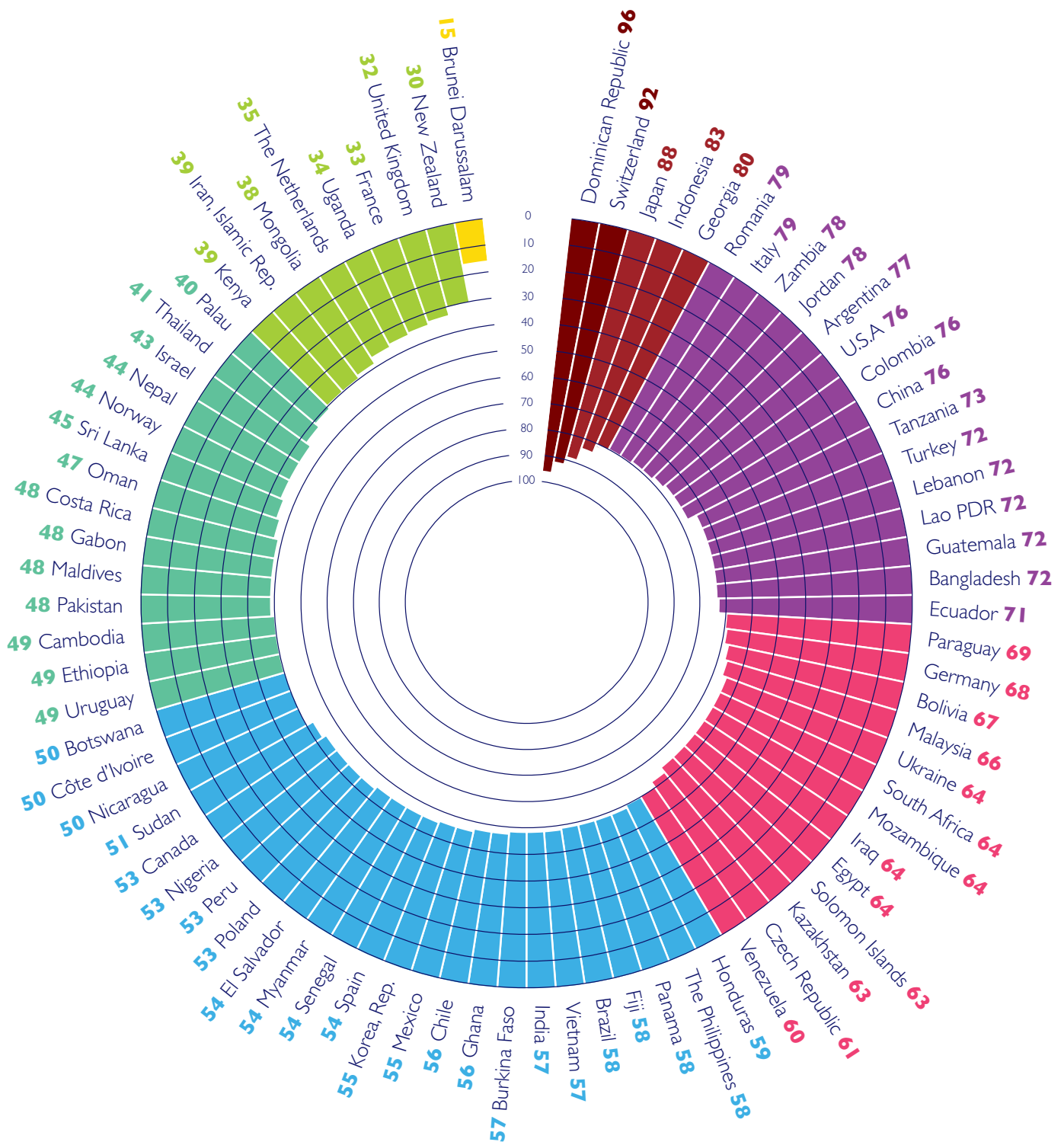
Conflicts of interest were present as former officials moved to the industry, and industry executives had access to policymaking:

Lawmakers made themselves vulnerable to industry interference by accepting political donations, being directly involved in the tobacco business or through the “revolving door” of former public officials joining the TI and vice versa. Nine countries reported revolving door problems, where former tobacco company executives in **Argentina, Colombia, Fiji, Georgia** and **Paraguay** were appointed as senior public officials.

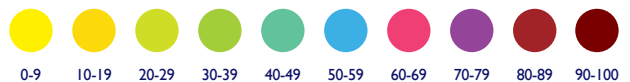
Non-Parties faced high levels of interference:

Five countries that have remained non-Parties to the WHO FCTC, namely **Argentina, the Dominican Republic, Indonesia, Switzerland** and the **U.S.A.**, faced high levels of TI interference that has undermined tobacco control outcomes. These governments encouraged tobacco businesses by providing incentives, sustaining industry-friendly legislation and promoting the TI internationally.

Figure I: Tobacco industry interference overall country ranking



The lower the score,
the better the ranking



Recommendations

Halting TI interference is in the hands of governments. The quicker governments act to meet their obligations, the better they can protect and advance their tobacco control policies. They must act on the recommendations in Article 5.3 Guidelines that call on governments to limit interactions with the industry to only when strictly necessary and to be transparent. Specific actions include the following:

- 1. The whole government, not just the health sector, must curb tobacco industry interference.** To reduce vulnerability to industry interference, a whole-of-government approach to implementing Article 5.3 is needed such as that done in Botswana, the Philippines and the U.K.
- 2. Endorsement of tobacco industry activities must stop.** Governments must limit interactions with the TI to only when strictly necessary for regulation and not endorse an industry that causes significant harm to society.
- 3. De-normalize so-called socially responsible activities of the tobacco industry.** Governments must reject CSR activities as these are a form of tobacco promotion and compromise the integrity of government officials to regulate tobacco when they endorse tobacco-related CSR activities.
- 4. Reject non-binding agreements with the tobacco industry.** Governments are often disadvantaged when they agree to cooperate with the TI. There should be no collaboration between governments and the TI.
- 5. Stop giving incentives to the tobacco industry.** The TI should not be granted incentives or any preferential treatment to run its businesses, which conflict directly with tobacco control policy.
- 6. Governments must divest from the tobacco industry.** State-owned enterprises should be treated like any other TI. Divesting from the tobacco business increases their independence from the industry so they can act freely to protect public health.
- 7. Require greater transparency for increased accountability.** Transparency when dealing with the TI will reduce instances of interference if government officials and the industry are held accountable. All interactions with the TI must be recorded and made publicly available.
- 8. Implement a code to provide a firewall.** To limit interactions with the TI, avoid conflicts of interest and strengthen transparency and accountability, governments must adopt a code of conduct with clear guidance on interactions with the TI.
- 9. Compel the tobacco industry to provide information about its business.** The tobacco industry should be made to disclose its expenditure on marketing, lobbying and philanthropic activities.

Global Center for Good Governance in Tobacco Control (GGTC), a STOP partner, utilized civil society reports on tobacco industry influence from 80 countries which cover about 83% of the world's population. The Global Tobacco Industry Interference Index is a survey to determine how governments are protecting their public health policies from commercial and vested interests of the tobacco industry as required under the World Health Organization Framework Convention on Tobacco Control (WHO FCTC). Detailed country reports and other tools are available at: www.globaltobaccoindex.org