



"RAISE TOBACCO TAXES TO REDUCE AND CURB TOBACCO CONSUMPTION AMONG YOUTHS IN UGANDA."

Today Uganda joins the rest of the world in recognizing the devastating effects of Tobacco use and exposure to tobacco smoke on human lives.

This year's WNTD is being commemorated at a time when the Tobacco Control Bill has been tabled before parliament for debate. It also coincides with a health awareness campaign facilitated by the Center for Health, Human Rights and Development (CEHURD) in four Universities of Makerere University, Uganda Christian University, Kampala Internal University and Nkumba University Funded by the United Nations Development Program (UNDP) Uganda Country office.

The campaign is based on findings from a survey done in the four Universities in 2013. The survey discovered that at least 50% of university students had no information as to what causes Non Communicable diseases. It should be noted that Tobacco is the leading cause of NCDs. And that majority of smokers in the world today begin smoking long before they are 18 years of age. The World Health Organization (WHO) estimates that 70 percent of premature deaths in adults are the result of behaviors begun during adolescence and youth. Behavioral researchers on Non Communicable Diseases (NCDs) have also established that behaviors associated with two of the key risk factors for NCDs—tobacco and alcohol use—are likely to start or become established during

adolescence.

In 2006, the Uganda demographic Health Survey established that 22% and 4% of Uganda's adult males and females between the ages of 15-49 respectively are habitual smokers, while the Global Youth Tobacco Survey (GYTS) of 2010 stated that 15% of boys and 13% of girls in secondary schools start smoking annually. In 2011, WHO Country NCD profile estimated Uganda's mortality due to NCDs at 64/1000 for males and 42/1000 for females and reported a daily tobacco smoking rate of 12.3% among males and 1.5% among females.

Today youths especially in urban areas are reported to be smoking Shisha - a glass-bottomed water pipe in which fruit-flavoured tobacco is covered in foil and roasted over charcoal. WHO studies report that smoking a pot of shisha is equated to one who has smoked 200 cigarettes, which factually means that shisha is a more dangerous option. Despite the growing popularity of shisha smoking among urban youths, university students and young professionals and the presence of National Environment (Control of Smoking in Public Places) Regulations of 2004 mandating a smoke-free environment, and prohibiting smoking in public places, the practice remains largely unregulated.

Tobacco use and exposure are a leading public health

problem in our country. They are a detriment to development and worsen poverty. Studies conducted in tobacco growing areas have reported that a tobacco farmer earns only 33% of the basic household expenditure of an average Ugandan; the farmer suffers cases of green tobacco sickness caused by poisoning from exposure to nicotine absorbed during cultivation and harvesting tobacco; the community is exposed to food insecurity as most of the land is devoted to tobacco farming; and four (4) in every ten (10) boys and six (6) of every ten (10) girls of school-going age are unable to join schools in tobacco-growing areas because they are working in Tobacco Fields.

As a party to the WHO Framework Convention on Tobacco Control (FCTC), Uganda is obliged to put in place and implement tax and price policies on tobacco products as a way to reduce tobacco consumption. Research has proven that increasing taxes on tobacco products effectively reduces consumption of tobacco products among poor people and acts as a deterrent to young people who would otherwise start smoking.

WHO reports that a tax increase that increases tobacco prices by 10% decreases tobacco consumption by up to 8% in low- and middle-income countries.

Furthermore, focusing on cessation measures for youths and adolescents presents Uganda with an opportunity to reinforce the benefits of positive behaviors that could cut the projected burden of

NCDs by half or more if we paid attention to health promotion and disease prevention.

Civil Society Organizations therefore urge the Government to;

- Increase taxes on tobacco products to levels that reduce tobacco consumption by youths in the financial year 2014/15. Uganda's taxation policy on Tobacco products is still lagging at a paltry 42%, far below the industry's international threshold of 70 per cent of retail price.
- Ban smoking in public places, advertising, promotion and sponsorship of tobacco related events that are aimed at encouraging youths to start smoking.
- Increase the resources for smoking cessation services in community health centers
- Offer smoke-free education and promotion in schools.
- Pass the Tobacco Control Bill of 2014: Enforcement measures in this bill will protect Ugandans from the devastating health, social, economic and environmental consequences of tobacco use and exposure to tobacco smoke by, imposing bans on smoking in public places and tobacco advertising, increasing taxes on tobacco products and restricting government alliances with the Tobacco Industry.

PRESS STATEMENT OF THE TOBACCO CONTROL FORUM ON WORLD NO TOBACCO DAY 2014

Uganda ratified the WHO Framework Convention on Tobacco Control (WHO FCTC) in 2007. The Convention was negotiated as a Global Intervention to protect present and future generations from the devastating health, environmental and socio-economic effects of tobacco. As a party to this convention Uganda was expected to have domesticated the treaty including enacting a comprehensive law by 2012.

Globally tobacco kills nearly 6million people worldwide including 600,000 non smokers exposed to second hand smoke. Tobacco use is a risk factor for many diseases and is linked to 71% of lung cancer, 42% of chronic respiratory diseases and about 10% of heart and blood vessel diseases. Other cancers linked to tobacco use reported at Mulago Cancer Institute (2002-2012) were cancers of the esophagus 20.4%, mouth 16.0%, stomach 13.7% and throat 12.6%.

The above does not include undiagnosed cancers and those treated in other health facilities. Tobacco contributes to increase in cases of communicable diseases such as tuberculosis and worsens outcomes in HIV cases because of its ability to lower the immunity.

Tobacco imposes an economic burden on the country not only through increased health expenditure to treat the chronic non communicable diseases but is also linked to poverty due to consuming 45% of household expenditure among smokers.

Research indicates that while the tobacco industry funds the inputs for tobacco growing is lucrative, farmers are pushed into a vicious cycle of poverty because of the labour intensiveness of the crop. Farmers are caught in a debt trap since the tobacco

industry has monopoly and determines the grades, the prices and deducts the loans for inputs despite the harvest which the farmers reap.

Tobacco growing degrades the environment through deforestation resulting from cutting forests in the search for fertile virgin land for growing tobacco and excessive use of wood for curing tobacco. Tobacco growing degrades soils by its heavy feeding on the soils and as a result food crops do not perform well where tobacco has been grown, leading to food insecurity and malnutrition. Moreover it is well established fact that raw tobacco causes green leaf disease and other conditions such as increased abortions and respiratory diseases among farmers who handle the leaf.

The theme for World No Tobacco 2014 is "Raise Taxes on Tobacco and Lower deaths". Article 6 of the WHO FCTC urges parties to increase the prices of tobacco through increasing taxes on tobacco as this has proved to be a very effective method of reducing tobacco consumption. Higher prices of tobacco products encourage cessation among existing users, prevent initiation of use among potential users and reduces the quantity of tobacco consumed among continuing users.

The current tax structure is three tiered with different types of taxes applied depending on content. The Government should simplify the system by applying a uniform rate on cigarettes. The taxes should also be raised annually so that prices are increased in keeping with inflation. In this way, taxing tobacco serves the dual purpose of promoting public health and generating revenue. The Ministry of Health urges Government to allocate a proportion of tax revenue to tobacco control and other health related programs.

It has been demonstrated, as exemplified by South Africa that a 10% increase in tobacco taxes leads to 8% decrease in consumption of tobacco in low income countries. A 70% increase in the price of tobacco could prevent up to a quarter of all deaths caused by smoking.

In line with the above recommendations, higher tobacco taxes save lives, help the young and the poor not to initiate or reduce use, and lead to increase in Government revenue.

The Ministry of Health has drafted a Tobacco Control Policy and Strategic Plan which are going through the adoption process. Uganda also participated in developing a protocol to eliminate illicit trade in tobacco products which has been presented to cabinet for signing and ratification. The protocol will institute a strong system to control illicit trade which increases cheap tobacco on the market and denies Government revenue. As a sector we strongly support the Draft Tobacco Control Bill currently being discussed in the Health Committee of Parliament. The Bill aims at protecting both non- users and users of tobacco. Tobacco is harmful in all its forms and there is no safe dose of tobacco. Therefore the Bill is intended to encourage users of tobacco to stop the habit.

The Bill if enacted into law will ensure a multi-sectoral approach to tobacco control through a Tobacco Control Committee by;

- Providing a tobacco free environment thus ensuring the right to health
- Instituting a comprehensive ban on tobacco advertising, promotion and sponsorship in turn protecting the young vulnerable people from tobacco use

- Ensuring adequate warning through pictures and graphics to inform users on dangers of tobacco.
- Protecting minors from accessing tobacco products and ban on sale of smokeless tobacco products such as kuber, electronic cigarettes and new products including shisha
- Regulating the chain of tobacco supply by empowering government agencies to be in charge instead of leaving the tobacco industry to self regulate.
- Protecting public health policies from commercial and other vested interests of the tobacco industry through limitation of interaction with public officers, partnership and endorsement of the tobacco industry including prohibiting corporate social responsibility

We applaud the call by His Excellency the President of the Republic of Uganda, to tobacco farmers during his visit to Koboko District where he encouraged them to adopt alternative crops to tobacco. Tobacco farmers in that area reported receiving 'peanuts' from their labour while the tobacco industry pockets astronomical profits. According to the Ministry of Finance, Planning and Economic Development tobacco taxes contribute 0.9% of the net revenue to the Government of Uganda.

To this end the Ministry of Health and all tobacco control partners call upon Parliament to urgently pass the Tobacco Control Act to protect Ugandans from disease, disability and death.

I wish all Ugandans a fruitful WORLD NO TOBACCO DAY.

