

FCA'S VIEWS ON SDG INDICATORS FOR TARGET 3.A ON FCTC IMPLEMENTATION

TOBACCO AFFORDABILITY

To accurately assess global progress on target 3.a under the health goal of the Sustainable Development Goals (SDG3) – *Strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate* – the Framework Convention Alliance (FCA) recommends that two indicators be used.

FCA agrees with the currently proposed indicator on age-standardized prevalence of tobacco use among persons aged 18 years and older, but recommends **a second indicator** to provide more rapid feedback on policy implementation under the WHO Framework Convention on Tobacco Control (FCTC).

The objective of the FCTC is “to protect present and future generations from the devastating health, social, environmental and economic consequences of tobacco consumption and exposure to tobacco smoke ... in order to reduce continually and substantially the prevalence of tobacco use and exposure to tobacco smoke”¹. Hence, monitoring prevalence of tobacco use at the global level is a valid and appropriate indicator to assess progress on target 3.a.

Rationale for a 2nd indicator: The 2015 WHO Global Tobacco Control Report (GTCR) identifies raising taxes on tobacco as the most effective way to reduce tobacco use, yet concludes that this measure, fully developed in FCTC Article 6 guidelines, remains under-utilized by many governments².

In addition, tobacco taxes are explicitly highlighted in the Addis Ababa Action Agenda, recently adopted at the Third International Conference on Financing for Development, as an effective and important tool to reduce tobacco consumption and health-care costs, as well as a potential revenue stream to finance development at country level³.

Therefore, we propose **tobacco affordability** as a second indicator for target 3.a. The indicator meets all criteria outlined by the UN Statistical Commission⁴.

WHO FCTC

The WHO Framework Convention on Tobacco Control (WHO FCTC) is the first treaty negotiated under the auspices of the WHO. An evidence-based treaty, it reaffirms the right of all people to the highest standard of health.

The FCTC contains a comprehensive set of tobacco control measures. Articles 6-14 of the Convention detail the price, tax, and non-price measures necessary to reduce the demand for tobacco. The core supply reduction provisions are contained in Articles 15-17.

¹ The text of the Convention is available at: http://www.who.int/fctc/text_download/en/

² WHO (2015) Report on the global tobacco epidemic: raising taxes on tobacco. WHO: Switzerland

³ UN resolution A/RES/69/313, paragraph 32

⁴ ESA/STAT/441/2/58A/14 available at: http://unstats.un.org/unsd/post-2015/activities/egm-on-indicator-framework/docs/Background%20note_Principles%20of%20using%20quantification%20to%20operationalize%20the%20SDGs%20and%20criteria%20for%20indicator%20selection_Feb2015.pdf

Measuring affordability will provide an interim measure of policy change necessary to assess efforts to strengthen implementation of the WHO FCTC, especially in developing countries.

Definition: The tobacco affordability indicator should be defined as the percentage of GDP per capita required to purchase 100 packs of 20 cigarettes of the most sold brand (or 2,000 sticks of the most smoked product, such as bidis or kreteks, in the small number of countries where cigarettes are not the most smoked product).

Methodologically sound: The methodology has been applied by WHO, most recently in its 2015 GTCR⁵. It is based on peer-reviewed literature examining options for measuring affordability⁶; the indicator being proposed is closely correlated with alternative but methodologically more complicated measures.

Accessible: There are readily available, transparent and credible data sources available, in the WHO's GTCR, statistical agencies' consumer price data, and biennial reports by all Parties to the FCTC via its mandatory reporting instrument. Data on GDP per capita is available from the World Bank's World Development Indicators database for per capita GDP.

Relevant: In countries where incomes and purchasing power are growing rapidly and/or tobacco taxes are not keeping up with inflation and/or income growth, tobacco is becoming increasingly more affordable, a trend that has the potential to more than counteract the positive health impact of non-tax measures to control tobacco use. This is particularly relevant for developing countries which are experiencing rapid rates of economic growth, many of which are seeing sharp increases in tobacco use prevalence and/or tobacco-caused mortality. Guidelines on implementation of Article 6 of the WHO FCTC highlight the need to consider the affordability of tobacco products as a key measure of effective tobacco tax policies.

Timely: An affordability indicator provides information on governments' efforts to increase prices of, and demand for, tobacco. An increase in the price of cigarettes has an immediate effect on cigarette consumption and initiation of its use by youth in particular.

Internationally comparable: An affordability measure is best suited to compare affordability across time within a country, or at a given time between similar countries. Data on affordability (% of GDP per capita required to purchase 100 packs of the most sold brand of cigarettes) for over 160 countries for 2014, is provided in the recent WHO GTCR. In addition, the WHO report compares the affordability data between 2014 and 2008.

Finally, as tobacco use is the one common risk factor for the four main types of non-communicable diseases (cardiovascular disease, cancer, respiratory disease and diabetes), data that measure progress on target 3.a are also highly relevant to target 3.4 – *By 2030, reduce by one-third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.*

⁵ The report and related materials are available at: http://www.who.int/tobacco/global_report/2015/en/

⁶ Blecher EH and van Walbeek CP (2004) An international analysis of cigarette affordability. *Tobacco Control* 2004;13:339–346