

# Index for Tobacco Control Sustainability

INDIA

INDICATORS		Present (P)/ Absent (A)	Weighted Score	Country Score
1	Prerequisite Indicator: >4 MPOWER policies in place	A	9	0
2	National tobacco control budget (annual)	P	7	7
3	National tobacco control law	P	6	6
4	National budget allocation for tobacco control capacity building	P	6	6
5	Tobacco taxation >75% of retail sales price	A	6	0
6	Tobacco taxation increases faster than inflation plus gross domestic product growth	A	6	0
7	National tobacco control unit	P	5	5
8	Civil society tobacco control network	P	5	5
9	Civil society representation in national tobacco control advisory committees	P	5	5
10	Health promotion fund for, or including, tobacco control	P	5	5
11	National policy against tobacco industry corporate social responsibility	A	5	0
12	Tobacco-related mortality and morbidity recording system	A	5	0
13	National evaluation framework in place	P	5	5
14	Evaluation built into all major policy implementation plans	A	5	0
15	National tobacco control strategy	P	4	4
16	Tobacco control and non-communicable diseases form part of national health policy	P	4	4
17	Tobacco control forms part of national development plan	P	4	4
18	Human resource for implementation (national)	P	4	4
19	Global Tobacco Surveillance System surveys	P	4	4
20	Intergovernmental coordination mechanism	P	3	3
21	Capacity building plan for tobacco control personnel	P	3	3
22	Developmental assistance funding includes tobacco control	P	3	3
23	Code of conduct for government officials and staff	P	3	3
24	Ministry of health WHO FCTC Article 5.3 policy	P	3	3
25	WHO FCTC Article 5.3 policy across all ministries	P	3	0
26	Economic and social tobacco costs data	P	3	3
27	National focal point post	P	3	3
28	National advisory committee	P	2	2
29	Capacity building plans on research and evaluation	P	2	2
30	Mass media campaigns funded	P	1	1
31	Capacity building plan for non tobacco control specific personnel	P	1	1
<b>Total Score</b>			<b>130</b>	<b>91</b>

## Explanation of the scores:

1. Prerequisite Indicator: >4 MPOWER policies in place: As per the 2021 WHO Report on the Global Tobacco Epidemic, India fulfills the two measures out of six of the MPOWER i.e., Offer and Warn (GHW) only.
2. National tobacco control budget (annual): An annual sustained budget for tobacco control exists under the National Tobacco Control Programme (NTCP).
3. National tobacco control law: The Cigarettes and Other Tobacco Products Act of 2003 (COTPA) and the rules notified thereunder are India's national tobacco control law.
4. National budget allocation for tobacco control capacity building: Under NTCP, a specific budget is allocated for capacity building efforts at the national and subnational levels.
5. Tobacco taxation >75% of retail sales price: Since the introduction and adoption of the Goods and Services Tax in India from 2017, tobacco tax rates have largely unchanged. The total tax share of the retail sale price is 54%, lower than the recommended level of 75%.
6. Tobacco taxation increases faster than inflation plus gross domestic product growth: No change in tax rates since the GST was adopted in 2017.
7. National tobacco control unit: The National Tobacco Control Cell is functional under MOH, and the state and districts have a similar setup for implementing the NTCP.
8. Civil society tobacco control network: Alliance for Tobacco Control (AFTC) has been working as the national civil society coalition. Several states, including Bihar, Goa, Karnataka, Rajasthan, Tamil Nadu, and Uttarakhand, also have state-level coalitions: Alliance for Tobacco-Free Bihar (AFTB), Karnataka Coalition for Tobacco Control (KCTC), Uttarakhand Tobacco-Free Coalition (UTFC), Children Against Tobacco (CAT) and Children's Federation For Tobacco-Free World (CFTFW).
9. Civil society representation in national tobacco control advisory committees: The Ministry of Health and Family Welfare, Government of India, has included CSOs as members of the national level experts/advisory committees and taskforces.
10. Health promotion fund for, or including, tobacco control: Although there is no health promotion fund in India, the government brought all the national health programmes, including NTCP, under the umbrella of the National Health Mission, which has dedicated funds available. This indicator is therefore upgraded from the previous scoring to "present."
11. National policy against tobacco industry corporate social responsibility: According to a High Court order, the Ministry of Corporate Affairs issued a directive in 2016 mandating all companies to adhere to the provisions of COTPA. Nevertheless, no explicit policy is currently in place that prohibits the tobacco industry from engaging in CSR activities.
12. Tobacco-related mortality and morbidity recording system: There is no centralized national system to ascertain tobacco related diseases and deaths in the country. Therefore, this indicator was downgrade from the previous scoring to "absent."
13. National evaluation framework in place: The MOH has developed a dedicated framework for monitoring and evaluation of NTCP. It has also developed an online monitoring and information system to record data from all states and districts. The system under the National Health Mission for monitoring and evaluation of all health programmes also forms part of the national evaluation framework for NTCP.

14. Evaluation built into all major policy implementation plans: Various tobacco control policies do not have specific evaluation indicators built into their implementation plans.
15. National tobacco control strategy: The NTCP and its operational guidelines serve as a comprehensive resource for all NTCP officials, outlining the specific goals and strategies for tobacco control. The NTCP is responsible for overseeing all national and sub-national tobacco control initiatives, ensuring that they align with the programme's objectives.
16. Tobacco control and non-communicable diseases form part of national health policy: The national health policy extensively covers tobacco control and NCD prevention and control as its key components.
17. Tobacco control forms part of national development plan: Tobacco control is part of the national strategic plan to implement the UN Sustainable Development Goals.
18. Human resource for implementation (national): The NTCP includes provisions for dedicated staff at the national, state, and district levels. Additionally, human resources employed under other programs, such as those focused on NCDs and mental health, are also engaged to promote HR rationalization and synergy between programs.
19. Global Tobacco Surveillance System surveys: With GATS India 2009, 2016; GSPS India 2006 and 2009, GYTS India 2003, 2006, 2009, 2021; India has implemented the GTSS survey periodically.
20. Inter-governmental co-ordination mechanism: The NTCP establishes three-tier coordination committees to review and implement tobacco control initiatives. The government discusses policy issues through inter-ministerial committees before adoption and implementation.
21. Capacity building plan for tobacco control personnel: The NTCP has dedicated funds for the capacity building of program officials and wider stakeholders at the national, state, and district levels.
22. Developmental assistance funding includes tobacco control: Tobacco control is part of India's SDG plan. International funding supports the overall plan.
23. Code of conduct for government officials and staff: All government officials and staff are required to adhere to the code of conduct according to their respective service rules. All government relationships, links, communications, contracts, and funding between government and external organizations, individuals and corporations are governed by this general code.
24. Ministry of health WHO FCTC Article 5.3 policy: In July 2020, the Ministry of Health and Family Welfare, Government of India, adopted a code of conduct for all employees, agents, organizations and instructions under the ministry.
25. WHO FCTC Article 5.3 policy across all ministries: While the government of India has adopted the Article 5.3 policy for the Ministry of Health and Family Welfare, it is yet to do the same for the whole of the government. The Karnataka High Court in 2010 directed the government to adopt an overall government code of conduct to prevent tobacco industry interference. However, its compliance is still pending.
26. Economic and social tobacco costs data: The MOH has released data pertaining to the economic and social costs of tobacco use on both society and the government. This information was initially published in 2014 and was subsequently revised in 2020 with the assistance of the WHO's India office.
27. National focal point post: Dedicated tobacco control focal points exist at the national, state, and district levels under the NTCP.
28. National advisory committee: The national task force on 'Nasha Mukta Bharat Abhiyan' (Drugs Free India Mission)

is also the national advisory committee on tobacco control. The MOH also constitutes expert committees on specific issues.

29. Capacity building plans on research and evaluation: Several government institutions, including the Indian Council of Medical Research, National Institute for Cancer Prevention and Research, Post Graduate Institute for Medical Education and Research, support research and evaluation of tobacco control programs.
30. Mass media campaigns funded: The MOH has been providing dedicated funds for supporting mass media campaigns under NTCP. Statutory disclaimers and health spots in a movie and TV programme with tobacco imagery is another form of mass media campaign on tobacco control with no cost to the government treasury.
31. Capacity building plan for personnel not specific to tobacco control: The capacity building programmes under NTCP also include non-tobacco-control-specific personnel. The operational guidelines for NTCP provide details of all stakeholders.

## Main findings:

### Progress in tobacco control sustainability since 2016

In 2016, India made significant strides in tobacco control by introducing larger and stronger graphic health warnings on all tobacco products. This achievement was further reinforced by subsequent rotations in 2018 and 2020, making it the most significant tobacco control win in terms of meeting the MPOWER policy goals. Additionally, the government enacted and implemented three taxation laws that placed tobacco products in the highest bracket of GST at 28%. However, the actual tax incidence on tobacco products remains low, falling short of the recommended >75% of the retail sales price.

The national government has prioritized addiction-free campaigns, leading to the creation and implementation of a national quit line, mCesation, and provision for nicotine replacement therapy through tobacco cessation centers across the country. The NTCP ensures that each district has at least one cessation center, while the National Oral Health Programme instructs all dental colleges to establish a tobacco cessation center. The political and administrative leadership at the national and state levels remained committed to tobacco control during this period.

Other notable achievements during this time include the enactment of a law banning electronic cigarettes, the adoption of a code of conduct on WHO FCTC Article 5.3 by the MOH, the notification of national tobacco testing laboratories, and the direction not to use tobacco and nicotine as a food ingredient. Even during the COVID-19 pandemic, the national government issued guidelines against manufacturing, sale, and use of tobacco products and prohibited spitting in public places using the powers under the National Disaster Management Act and the Epidemic Diseases Act.

Overall, India has made significant progress in tobacco control, with a strong commitment to addiction-free campaigns and the implementation of various policies and programs to support cessation efforts. However, there is still room for improvement, particularly in increasing the tax incidence on tobacco products to meet the recommended threshold and further reducing tobacco use in the country.

### Changes in scores from the 2016 survey:

The current score of India in the area of tobacco control is 91 out of 130, an improvement over the score of 80 out of 130 in 2016. The MOH has adopted a comprehensive code of conduct in 2020 to prevent tobacco industry interference, which applies to all employees, agents, organizations, and institutions under the ministry. This initiative

has added three points to the score.

The expansion of the NTCP to nearly 700 districts in the country with dedicated funds under the National Health Mission has contributed to an additional five points for the “Health promotion fund for/including TC.” The “Capacity building plan for TC-specific personnel” through NTCP added three points, and “Capacity building plans on research and evaluation” through national institutions of eminence – including the Indian Council of Medical Research, Post Graduate Institute of Medical Education and Research Chandigarh, Jawaharlal Lal Nehru Institute of Postgraduate Medical Education & Research Puducherry, National Institute of Cancer Prevention and Research Noida – which also hosts the WHO FCTC Global Knowledge Hub on Smokeless Tobacco, added two points.

However, the indicator on “TC-related mortality and morbidity recording system,” which was scored present in the 2016 ITCS, was scored absent in the current ITCS by the experts and stakeholders. This was revised to reflect the lack of a national data system that provides data on mortality and morbidity associated with tobacco use based on clinical patient records. On the other hand, the indicator on “Code of conduct for government officials and personnel” was revised to be present, as this is a general code prescribed under the general service conditions of all government officials and staff in India. This added another three points to the overall score.

### Remaining gaps in tobacco control sustainability

A strong need exists for the reinforcement of tobacco control legislation and its successful implementation throughout the nation. The attainment of exemplary ratings in all MPOWER policies, the prevention of tobacco industry corporate social responsibility, and the establishment of a national policy to counteract tobacco industry interference were identified as the foremost objectives.