Index for Tobacco Control Sustainability

GHANA

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)	A	7	0
3	National tobacco control law	P	6	6
4	National budget allocation for tobacco control capacity building	A	6	0
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	A	5	0
11	National policy against tobacco industry corporate social responsibility	P	5	5
12	Tobacco-related mortality and morbidity recording system	P	5	5
13	National evaluation framework in place	A	5	0
14	Evaluation built into all major policy implementation plans	A	5	0
15	National tobacco control strategy	A	4	0
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	A	3	0
22	Developmental assistance funding includes tobacco control	P	3	3
23	Code of conduct for government officials and staff	A	3	0
24	Ministry of health WHO FCTC Article 5.3 policy	A	3	0
25	WHO FCTC Article 5.3 policy across all ministries	A	3	0
26	Economic and social tobacco costs data	A	3	0
27	National focal point post	P	3	3
28	National advisory committee	A	2	0
29	Capacity building plans on research and evaluation	A	2	0
30	Mass media campaigns funded	P	1	1
31	Capacity building plan for non tobacco control specific personnel	A	1	0
Total Score			130	57

Explanation of the scores:

1. Pre- requisite Indicator (Score Card No. 1): › 4 MPOWER Policies in place: Three measures (health warnings, mass media, and TAPS ban) have met the highest level of accomplishments.

2. National TC Law (Score Card No. 3): The national tobacco control law, which can be found in the Public Health Act 2012, Acts 851 and the Tobacco Control Regulations (LI 2247), is currently being implemented. The MOH and the FDA are the primary agencies responsible for enforcing this law. Key provisions of the law include a ban on smoking in public places except in designated smoking areas, a ban on TAPS, regulations on labelling and warnings, and restrictions on the sale of tobacco products to minors.
    https://www.bcp.gov.gh/acc/registry/docs/TOB-TOBACCO%20CONTROL%20REGULATIONS,%202016%20(L.I.%202247).pdf

3. National TC Unit/Cell (Score card No. 7): The Tobacco and Substance Abuse Directorate was established in 2005 at the FDA, with Dr. Olivia Boateng as its head.

4. Civil society TC Network (Score Card No. 8): The Ghana Coalition of NGOs in Tobacco Control was founded in July 2004 and officially registered with the Attorney General's Department of the Ministry of Justice. The network is identified by its registration number G-24,477 and is governed by its constitution and bylaws, with a General Assembly and National Executive Committee in place.

5. Civil society representation in national TC advisory committees (Score Card No. 10): The Ministry of Health established the National Tobacco Control Inter-Agency Coordinating Committee in 2014, and it includes representation from CSOs through Mr. Issah Ali, the organizing secretary of the Ghana Coalition of NGOs in Tobacco Control and the executive director of Vision for Alternative Development.

6. National policy against TI CSR (Score Card No.11): The Tobacco Control Regulations 2016, (LI 2247) Section 17 is implemented by the MOH. It pertains to tobacco control and can be accessed through the provided link.
    https://www.tobaccocontrollaws.org/files/live/Ghana/Ghana%20-%20TC%20Regs%202016%20-%20national.pdf

7. TC-related mortality and morbidity recording system (Score Card No. 12): The Ghana Health Service is the designated entity tasked with maintaining the record-keeping system for morbidity associated with tobacco control in Ghana. The data pertaining to mortality and morbidity related to tobacco control are available to pertinent stakeholders upon official inquiry.

8. TC and NCDs form part of national health policy (Score Card No. 16): The National NCD Policy, also known as the Policy & Strategic Plan for the prevention and Control of NCDs, was revised and officially adopted in 2022. This policy specifically addresses NCD prevention and tobacco use.
    NCDs Policy Front cover (moh.gov.gh)

9. TC forms part of national Development Plan (Score Card No. 17): The Ghanaian government has adopted the National Medium Term Development Policy Framework 2022–2025, which includes provisions for tobacco control.
    http://extwprlegs1.fao.org/docs/pdf/gha212081.pdf   https://ndpc.gov.gh/media/MTNDPF_2022-2025_Dec-2021.pdf

10. GTSS Surveys (GATS / GYTS) (Score Card No. 19): The Health Research and Development Division of the Ghana Health Service conducted the Global Youth Tobacco Survey periodically in 2000, 2006, 2009, and 2017.
    https://www.who.int/publications/m/item/2000-gyts-fact-sheet-ghana
    https://www.who.int/publications/m/item/2006-gyts-fact-sheet-ghana
    https://www.who.int/publications/m/item/2009-gyts-fact-sheet-ghana

https://www.who.int/publications/m/item/2017-gyts-fact-sheet-ghana

11. National 'Focal Point' post (Score Card No. 27): The national focal point post for tobacco and substance abuse in Ghana is led by Dr. Olivia A. Boateng, who was appointed in 2021. This post is under the jurisdiction of the FDA.

12. Mass Media Campaigns Funded (Score Card No. 30): Various media campaigns were conducted through video outlets such as TV3 and YouTube, as well as radios and social media platforms like Facebook, from 2021 to 2022. Additional media campaigns are ongoing:
http://www.fdaghana.gov.gh/images/stories/pdfs/News%20&%20Events/2019/FDA%20ORGANIZES%20ANTI-TABACCO%20SENSITIZATION%20HEALTH%20WALK.pdf

Main Findings:

Ghana's progress in tobacco control sustainability is evident in several areas:

-   The passage into law of Ghana's Public Health Act 2012, Act 851 and Tobacco Control Regulations (LI 2247) has provided a framework for key MPOWER provisions and policies, including restrictions on smoking in public places, a ban on tobacco advertising, promotion and sponsorship, tobacco cessation, public education and other measures.

-   Ghana has established structures such as the Tobacco and Substances of Abuse Directorate and the National Tobacco Control Inter-Agency Coordinating Committee, which have been instrumental in ensuring effective implementation and enforcement of tobacco control measures. Additionally, the Ghana Coalition of NGOs in Tobacco Control and other active CSOs have successfully mobilized towards FCTC ratification and implementation.

-   The government and stakeholders have prioritized and included tobacco control in developmental agendas, as evidenced in the National Health Policy, the 2022 Policy & Strategic Plan for the Prevention and Control of NCDs, and the National Medium Term Development Policy Framework.

-   Ghana has made significant progress in tobacco control surveillance, with periodic surveys conducted and published on tobacco use and related morbidity and mortality.

Remaining gaps in tobacco control sustainability:

Detailed analysis of existing gaps and priorities identified for tobacco control sustainability

Despite the progress recorded in Ghana's tobacco control efforts, the country still needs to strive to claim the 73 outstanding points. It is worth noting that the National TC Strategy (Score 15) is nearing completion, and both INSLA and VALD participated in the national stakeholders review workshop on the Draft Ghana Tobacco Control Strategy a few weeks ago. The validation, adoption, and official launch of the strategy are expected to take place in 2023.

During the focus groups and one-on-one discussions on the ITCS assessment, stakeholders identified several notable gaps that need to be addressed. These include the absence of an annual national TC budget and national budget allocation for TC capacity building, tobacco taxation below 75% of Retail Sales Price (RSP), lack of health promotion fund, no code of conduct for government officials/staff, no Ministry of Health 5.3 Policy, no Article 5.3 policy across all ministries, no investment case which may include economic/social TC costs data in the public domain, and no national evaluation framework/plan in place on TC.

To address these gaps, stakeholders identified several priorities for follow-ups and advocacy campaigns. These include advocating for the development, implementation, monitoring, and reporting of the National Tobacco Control Strategic Plan, having an annual national TC budget with funds allocated for TC capacity building and TC-related programs, establishing a Health Promotion Fund with allocation for TC, developing and adopting a Code of Conduct and Article 5.3 policy for all government officials and staff, engaging the National Development Planning Commission (NDPC) to build and include TC evaluation in major policy implementation plans, and developing national capacity building plans, evaluation plans, and research plans targeting both TC-specific and non-TC-specific personnel.

To achieve higher TC sustainability in Ghana, sustained investment is needed from development partners and collaborations among international and national stakeholders to address these priority areas.