



Context

In 2007, Afghanistan introduced its first legislation aimed at protecting individuals from tobacco smoke. However, this initial legislation had certain limitations. Article 4 did not encompass all public spaces, including government facilities, indoor private offices and workplaces, restaurants and cafes, and public transportation. Furthermore, it did not establish penalties for non-compliance. Despite being in effect for five years since its implementation in 2009, the compliance rating was reported to be at a low level (2 out of 10) in the WHO Report on the Global Tobacco Epidemic of 2013. Additionally, a survey conducted in 2011 on smoking prevalence among men in Kabul city indicated that 78.3% of non-smokers were exposed to secondhand smoke in public places.

Initiative

Following Afghanistan's ratification of the WHO Framework Convention on Tobacco Control (FCTC) on 13 August 2010, significant efforts have been made to protect people from tobacco smoke through a national tobacco control coordination committee. This committee comprises 70 members from various ministries, sectors, UN agencies and civil society, convening regularly. Additionally, a tobacco control taskforce with 20 members meets monthly and collaborates with the private sector to support tobacco control events.

This robust multisectoral coordination has provided a boost to tobacco control in Afghanistan.

Furthermore, several initiatives have been undertaken to raise public awareness and strengthen the implementation of tobacco control legislation. Notably, three national parks in Kabul city, namely Bagh-e-Wahsh, Bagh-e-Babar and Park-e-Shaher have been designated as tobacco-free spaces. The Ministry of Public Health has developed standard operating procedures for the enforcement of tobacco control laws and has conducted training sessions for hundreds of police officers and teachers. Public campaigns through social media, television and radio interviews, and annual observance of World No Tobacco Day with press conferences have also been instrumental in promoting awareness.

In line with Article 11 of the WHO FCTC, Afghanistan enacted its first tobacco control law in 2015, which includes a comprehensive ban on smoking in all public places. To ensure effective implementation of the law, various measures have been initiated. The Ministry of Public Health has formulated guidelines and engaged different sectors, such as municipalities, the union for hotel workers, the environmental health department, the national environment protection administration, the police and the Ministry of transport and

tourism to monitor law enforcement. Monitoring plans and checklists for smoking in public places have been developed and implemented. Relevant organizations have been provided with official information about the law, tobacco hazards and health warning messages, along with a request to prominently display no tobacco signs and messages within public spaces. Training programmes have been conducted for hospital staff, teachers in 25 schools and police officials in 17 districts. Strict enforcement measures include requiring individuals to remove tobacco products before entering indoor public places and imposing fines for violators. Additionally, campaigns have been carried out to eliminate waterpipes from 17 districts in Kabul, Herat and Nangarhar. Continuous follow-up with authorities at the capital and provincial levels, as well as collaboration with nongovernmental organizations, ensures the implementation of the tobacco control law is monitored and maintained.

Challenges and lessons learnt

The compliance rate in newly covered public places, including public transportation is high. However, compliance in governmental facilities remains a challenge. The main obstacles to implementing and enforcing the tobacco control law are a shortage of technical personnel and limited budget for capacity building and community awareness campaigns. The significant lesson learnt is the power of multisectoral coordination and the value of partnerships with the private sector to enhance support for the tobacco control programme and encourage cooperation from key stakeholders in tobacco control efforts.

Impact

The effects of the smoking ban in public places in Afghanistan has not been measured. However, according to the most recent Global Youth Tobacco Survey conducted in 2017, 35.3% of youth reported exposure to secondhand smoke in enclosed public places, while 43.0% reported exposure in outdoor public areas. Additionally, Afghanistan conducted the WHO STEPS survey to monitor tobacco use in adults from 2019 to 2020, and the results, which will be shared soon, will provide insights into the impact of the implemented tobacco control measures.

Next steps

The aim is to secure increased financial and technical assistance in order to facilitate the successful implementation and enforcement of the tobacco control law. This support is particularly crucial for protecting individuals from tobacco exposure in public spaces.

References

[Global Youth Tobacco Survey](#)

[MPOWER measures to reduce demand for tobacco](#)

[WHO Framework Convention on Tobacco Control](#)

[WHO Report on the Global Epidemic Tobacco 2013](#)

[WHO STEPS survey](#)

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