2028496(18)/2021/TOBACCO CONTROL

Ministry of Health
& Family Welfare
Government of India

Choose LIFE, Not Tobacco.

CODE OF CONDUCT FOR PUBLIC OFFICIALS IN COMPLIANCE TO ARTICLE 5.3 OF WHO FCTC

1. Background

1.1 Tobacco use is the leading cause of preventable death and kills half of its users prematurely[1]. Tobacco use is also a key risk factor for major group of Non-communicable diseases[2] – cardiovascular disease, cancer, chronic respiratory disease, diabetes – and other diseases including tuberculosis and neurological disorders. About 14% of all NCDs deaths among adults aged 30 years and over are attributable to tobacco[3]. Globally it kills more than 80 lakh (8 million) people a year. More than 70 lakh (7 million) of those deaths are the result of direct tobacco use while around 12 lakh (1.2 million) are the result of non-smokers being exposed to second-hand smoke[1]. Tobacco users who die prematurely deprive their families of income, raise the cost of healthcare and hinder economic development.

1.2 In India, each year over 13 lakh (1.3 million) deaths can be attributed to tobacco use[4]. The actions needed to avert these preventable deaths are outlined in the World Health Organization Framework Convention on Tobacco Control (WHO FCTC), which is an evidence-based treaty and enlists key demand and supply reduction strategies for tobacco control. The Government of India has signed and ratified the WHO FCTC and is now a party to it along with 181 nations[5] and hence is obligated to take systematic steps towards implementation of the WHO FCTC.

1.3 The preamble to WHO FCTC[6] recognizes that countries "need to be alert to any efforts by the tobacco Industry to undermine or subvert tobacco control efforts and need to be informed of activities of tobacco industry that have negative impact on tobacco efforts".

1.4 Article 5.3 of the WHO FCTC provides the Parties to develop, implement, periodically update and review comprehensive multisectoral national tobacco control strategies, plans and programmes. In setting and implementing their public health policies with respect to tobacco control, Parties shall act to protect these policies from commercial and other vested interests of the tobacco industry in accordance with national law. Guidelines[7] of the Article 5.3 also recommend that Parties should establish measures to limit interactions with the tobacco industry and ensure the transparency of those interactions that occur.

2. Purpose

The purpose of these guidelines is to protect tobacco control policies and programmes from commercial and other vested interests of tobacco industry.

3. Scope

This Code of Conduct shall apply to all the Officials of Ministry of Health and Family Welfare, its Departments and all the autonomous institutions and Offices under its jurisdiction and to any person acting on their behalf.

4. Definition of Terms

a. "Tobacco Industry" (TI) shall mean organisations, entities, associations, individuals and others who work for or on behalf of tobacco manufacturers, wholesalers, distributors, importers of tobacco products, growers, and other individuals or organisations that work to further the interests of the tobacco, such as front groups and retailers.

For the purpose of these guidelines, it shall also include any organisations, entities, associations, individuals and others involved in e-cigarettes, as defined in the Prohibition of Electronic Cigarettes (Production, Manufacture, Import, Export, Transport, Sale, Distribution, Storage and Advertisement) Act, 2019.

b. "Tobacco Industry Interference" (TII) shall mean a broad array of tactics and strategies used directly or indirectly by the tobacco industry to interfere with the setting and implementation of public health policies with respect to tobacco control.

5. Interaction with Tobacco Industry

5.1 Officials and employees of Ministry of Health and Family Welfare, its Departments and all the autonomous institutions and Offices under its jurisdiction and to any person acting on their behalf shall interact with the tobacco industry only when and to the extent strictly necessary to enable them to effectively regulate, supervise or control the tobacco industry and their products.

5.2 When interactions with the tobacco industry are necessary, such shall be conducted transparently and in such a manner that precludes the creation of any perception or impression of a real or potential partnership or cooperation resulting from or on account of such interaction.

5.3 The guidelines to be observed when interacting with tobacco industry are set forth in details in Annexure.

6. Partnership and Contribution

6.1 Officials and employees of Ministry of Health and Family Welfare, its Departments and all the autonomous institutions and Offices under its jurisdiction and to any person acting on their behalf shall not directly or indirectly accept, support or endorse;

6.1.1 any potential or real partnerships and non-binding or non-enforceable agreements as well as any voluntary arrangement with the tobacco industry or any entity or front groups or person working to further its interests.

6.1.2 the tobacco industry organizing, promoting, participating in, or performing, youth, public education or any initiatives that are directly or indirectly related to tobacco control or their logo/brand name/trademark.

6.1.3 any position paper or policy instrument drafted by or in collaboration with tobacco industry or any organization acting as a front group of TI.

6.2 In case of any existing partnership, agreement or collaboration with the tobacco industry, should be discontinued within 30 days.

7. Conflict of Interest

7.1 Officials shall ensure that no person employed by the tobacco industry or any entity working to further its interests be a member of any government body, committee or advisory group that sets or implements tobacco control or public health policy.

7.2 The Department should not award contracts for carrying out any work related to setting and implementing public health policies with respect to tobacco control to candidates or tenderers who have conflict of interest with established tobacco control policies.

7.3 Officials and employees of Ministry of Health and Family Welfare, its Departments and all the autonomous institutions and Offices under its jurisdiction and to any person acting on their behalf shall not accept payments, gifts or services, monetary or in-kind, from the tobacco industry.

8. Reporting of Violation

If any violation is observed, the same may be brought to the notice through written communication addressed to Director (Tobacco Control), MoHFW.

ANNEXURE

Guidelines to be observed when interacting with tobacco industry

a. Any proposed interaction with the tobacco industry must be known to all officials concerned, and approved by competent authority not below the rank of Joint Secretary in case of Ministry of Health & Family Welfare, its Departments and Head of the autonomous institutions and Offices under its jurisdiction and to any person acting on their behalf.

b. The agenda of the proposed interaction shall be set in writing and at least a week in advance and should be approved by competent authority not below the rank of Joint Secretary in case of Ministry of Health & Family Welfare, its Departments and Head of the autonomous institutions and Offices under its jurisdiction and to any person acting on their behalf. Officials must strictly adhere to the agenda and structure of the interaction.

c. Before the meeting, it must be clarified that such interaction does not imply partnership, dialogue and collaboration and it must be indicated to the Tobacco Industry that they will not mischaracterise /misuse the nature of the meeting.

d. The participants in the interaction must be pre-determined, all the details including names and designation must be fully disclosed and recorded in the minutes of the interaction.

e. Officials must make the interaction brief, and shall at all times and strictly maintain their right to terminate the interaction at any point.

f. The interaction shall strictly be held at the premises of the Departments office. Any interaction outside the premises is strictly prohibited.

g. In all such meeting, the officials shall look out for the welfare of the public by prioritizing the importance of public health.

h. All interaction with the tobacco industry must be recorded / documented and official minutes must be prepared by the officials.

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[1] https://www.who.int/en/news-room/fact-sheets/detail/tobacco

[2] WHO Report on the Global Tobacco Epidemic, 2019. Geneva: World Health Organization; 2019.

[3] WHO Global Report: Mortality attributable to tobacco, 2012

[4] Ministry of Health and Family Welfare, Government of India. Global Adult Tobacco Survey GATS 2 India 2016-17

[5] https://www.who.int/.../en/

[6] https://apps.who.int/iris/bitstream/handle/10665/42811/9241591013.pdf?sequence=1

[7] https://apps.who.int/iris/bitstream/handle/10665/80510/9789241505185_eng.pdf;jsessionid=5BF8575B629266E42C08DB4DF7111FA?sequence=1