



GEORGIA Brief 2020

Tobacco Control in Georgia

Georgia is a party to the WHO Framework Convention on Tobacco Control since 2006 and, thus, is committed to implement comprehensive tobacco control measures, including some of the time-bound WHO FCTC articles, the implementation deadline of which has been already breached.

Tobacco control is an important aspect for Georgia's EU integration process. One of the obligations under the EU Association Agreement signed in 2014, is effective implementation of the international agreements in the field of health, that are recognized by the parties, namely, the International Health Regulations and the WHO FCTC. Georgia has one of the highest smoking prevalence among the countries of World Health Organization European Region. According to the STEPS 2010 and 2016 results smoking prevalence had increasing trend; 33% (57% men and 7% women) of Georgian adult population were current smokers in 2016; according to the urine cotinine test the real prevalence of female smoking in Georgia was 12.2%.

In 2013 in order to address the devastating health and economic burden of the growing tobacco epidemic in the country, the Government of Georgia created the State Tobacco Control Committee. The Committee is chaired by the Prime Minister of Georgia. The goal of the Committee was to develop and advocate new tobacco control policies, which is in line with the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) and with the standards of the European Union. As a result of the work of the Committee National Tobacco Control National Strategy Committee (Government Decree #196, 2013), a 5 year Action Plan (Government Decree #304, 2013) and amendments to 5 related laws in March 2013 were prepared and approved by the Government of Georgia. Recently, the National Tobacco Control Strategy and a 5 year Action Plan for 2021-2025 has been renewed.

Georgia has undergone the WHO FCTC Joint Needs Assessment Mission in 2013. As a result, the comprehensive set of recommendations was produced. The latter was followed with post-needs assessment assistance provided to the country based on the immediate needs.

In 2017 Georgia has been selected as a FCTC2030 project Partner Party among other 14 countries. Georgia was the only country being selected from the European region.



Although the Parliament of Georgia adopted The Law Concerning Tobacco Control in 2003 and amended in 2008, it was not properly and fully implemented due to the insufficient political will. In May 2017 the

Georgian Parliament adopted “New Generation” tobacco control legislation, introducing a series of advanced measures, including, among others, a complete ban of tobacco advertising, promotion and sponsorship including ban of display at points of sales and restriction of demonstration of smoking in movies, shows and public performances, making all public places smoke-free and banning tobacco vending machines, introducing advanced regulations on tobacco packaging and labeling, such as big size pictorial health warnings and standardized packaging (the last to be introduced from January 2023) and regulations similar to heated tobacco products and ENDS/ ENNDS.

The Law has novel provisions on standards of disclosure and transparency for public servants of any interaction with tobacco industry while elaborating or adopting public health legislation in accordance with Article 5.3 of FCTC. The Law also stipulates implementation of a long-term state strategy and an annual state tobacco control program.

After more than a year since the main provisions of the law entered into force the compliance rates to the smoke-free law in different facilities remain very high including the hospitality sector which was seen to be potentially the most problematic. This was achieved through convergence of factors which include first of all the whole of government approach to tobacco control as well as involvement of as many actors from civil society, academics, public etc. as possible.

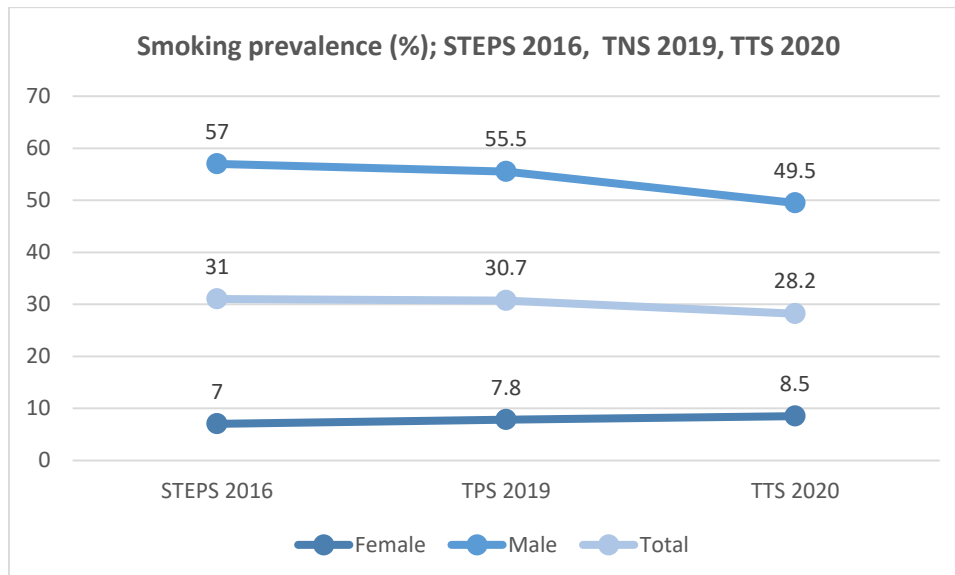
In line with the article 5.2 of the WHO FCTC Georgia has multi-sectoral coordination mechanism in forms of State Tobacco Control Committee chaired by the Prime Minister; In addition to this structure, a Health Promotion and Prevention Council was created under the supervision of the Committee on Healthcare and Social Issues of the Parliament of Georgia with the aim to conduct parliamentary oversight and to foster the implementation of the law through improved coordination and supervision.

After 2 years of the law entered into force number of hospitalized patients with acute Myocardial Infarction and subarachnoid and intracranial hemorrhages has been decreased; thus as a result of decline of prevalence of passive smoking saved several lives.

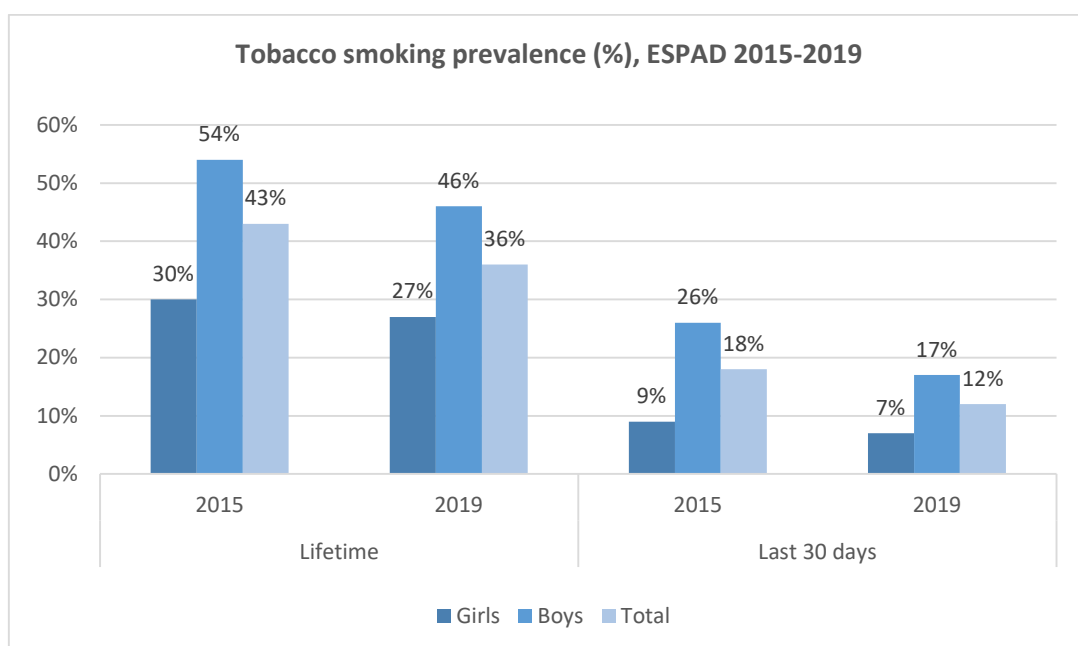
Important issues of tobacco control regulations

- **Ban of smoking** (including e-cigarettes and hookah) in all public transport and buildings, except of private homes, prisons, casinos and taxis. Ban of smoking on open areas of educational, health facilities and mass activities of youth. Violation is not only smoking but also presence of smoke, butt, ashes and hookah within building. **Ban of smoking in enclosed public places entered into force from May 2018**
- **Ban of all forms of advertisement, sponsorship and promotion** of tobacco, its accessories and devices for its use, including ban of display at points of sales and restriction of demonstration of smoking in movies and massive performances. **Part of regulations entered into force from May 2018**
- Increasing **size of health warnings to 65%** and obligatory pictorial warnings on front side of the packages of smoking tobacco
- Introducing **standardized cigarette packaging (plain packaging)**. Enters into force **from January 2023**
- **Ban of direct or indirect participation of industry** in decision making on health issues
- **Ban of "drive tobacco"**
- **Updated model of administration of the law** - burden of responsibility for smoking ban on organizations and its owners, increasing amount of fines for violations, no court decision needed

All mentioned activities influenced the smoking prevalence. According the recent nationwide surveys - Tobacco National Survey (TNS 2019) and Tobacco Taxi Survey (TTS 2020), smoking prevalence has decreasing trend. Number of daily smoked cigarettes has been reduced by 3 cigarettes.

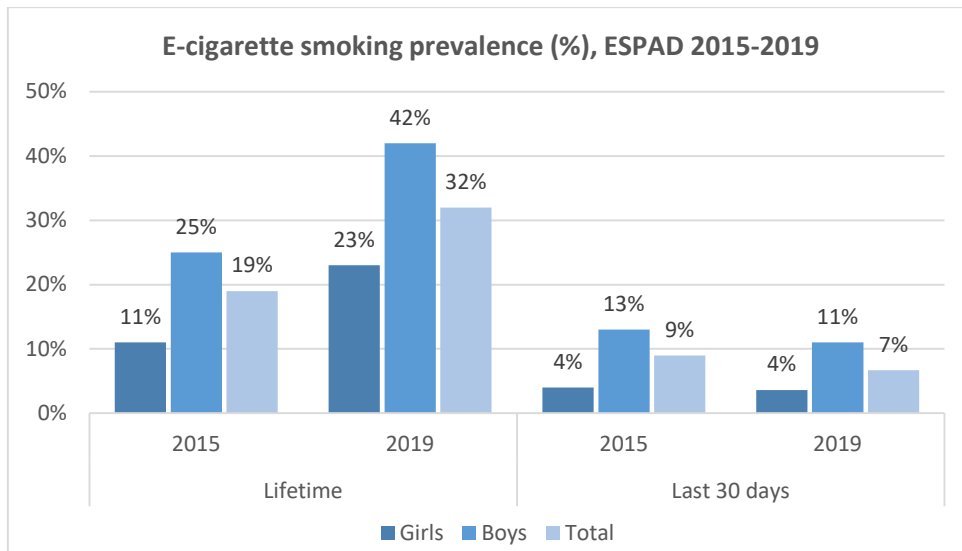


According to the European School Survey Project on Alcohol and Other Drugs (ESPAD) lifetime and current smoking prevalence is also decreasing among 16 year olds. Lifetime-prevalence rates of cigarette smoking is 36% (43% in 2015). Overall experience of smoking seems less prevalent among girls than boys. 12% (18% in 2015) have reported that they have used cigarettes during the last 30 days. Prevalence of last month smoking among boys is more than two times higher than among girls.



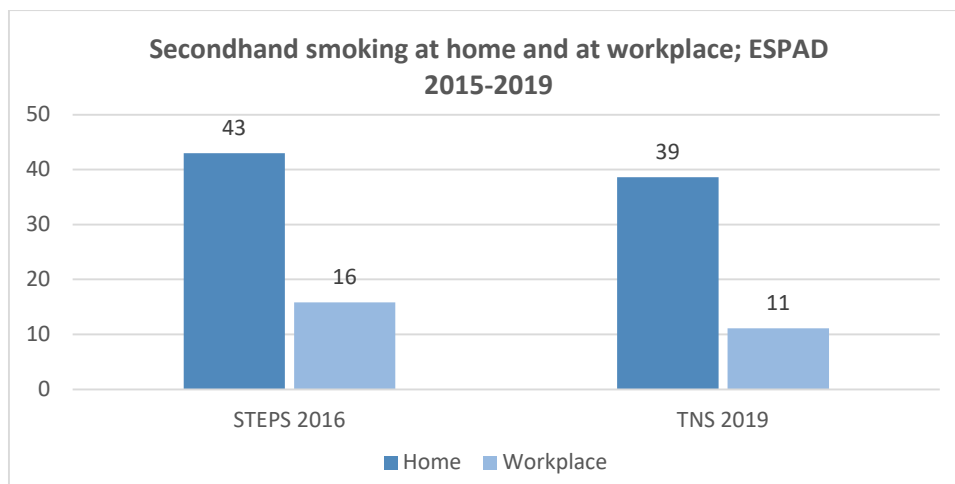
21% of students (28% of boys and 14% of girls) had tried cigarettes at the age of 13 or younger. 3% of students (4% of boys and 1% of girls) reported that they have started to smoking on daily bases at the age of 13 or earlier. 45% of students declared that it is fairly easy or very easy to get of cigarettes if they want to do so.

Lifetime use of e-cigarettes has increasing trend - 32% (19% in 2015) have ever used e-cigarettes, but last 30 days smoking prevalence has decreased from 9% (2015) to 7% (2019).

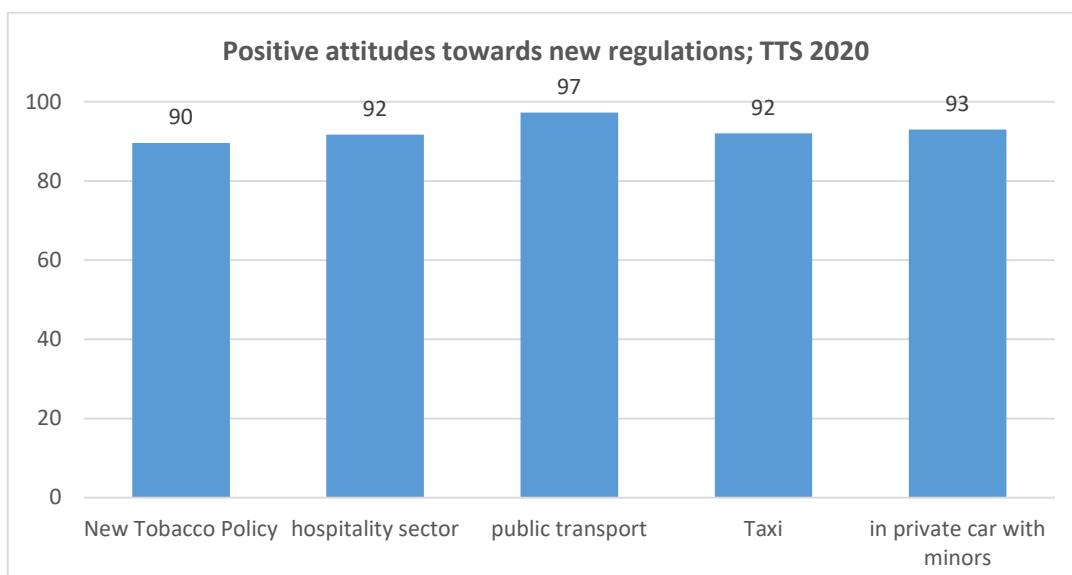


8% (10% boys and 6% girls) of adolescents have ever used heated tobacco and 3% (3% boys and 2% girls) have used last 30 days.

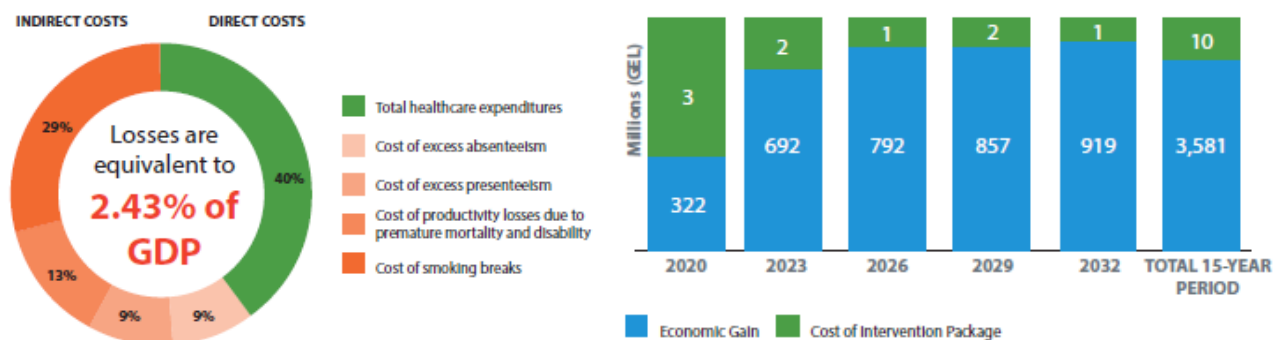
Tobacco National Survey showed significant reduction of passive smoking at home and at workplace.



After almost two year since the main provisions of the law entered into force compliance rates to the smoke-free law in different facilities remain very high including the hospitality sector which was seen to be potentially the most problematic. Population agree to be introduced smoking ban in taxis and private cars when there are minors.



Within the frames of the project „FCTC 2030 Georgia“, UNDP, WHO, NCDC and other governmental entities collaborated to evaluate “Investment Case”. Investment Case, which was the first in tobacco control policy direction in the world, evaluated economic loss associated with tobacco and savings which would be generated if the country fully implements FCTC responsibilities. Tobacco economic loss predictions were made according to local and international research data. According to the study results 11,400 Georgian citizens die annually because of tobacco-related diseases, out of which 9,300 annual deaths due to smoking and 2,100 annual deaths due to second hand smoke exposure. Direct and indirect health costs (premature death and costs associated with smoking at the work place) amount 824.9 million GEL (direct - GEL 327.3 million and indirect - GEL 497.6 million) that represents 2.43% of the country’s annual GDP.



Without implementing four priority FCTC interventions/measures (increasing taxes, complete ban on indoor smoking, banning advertising, sponsorship & promotion, labeling and packaging), over 15-year period 171,300 Georgian citizens will die prematurely from tobacco-attributable diseases, tobacco-attributable healthcare costs will reach a cumulative GEL 4.9 billion and total economic costs from tobacco will reach GEL 12.4 billion. Investments in these four interventions will save 53,100 lives and have positive impact for future well-being of Georgian citizens and will result in GEL 3.6 billion total economic gains over 15 years. For every GEL 1 invested in key FCTC interventions now Georgia receives total economic gain of GEL 161 over the first 5 years and GEL 357 after 15 years.

Key Achievements

The cornerstone of firstly passing one of the most comprehensive tobacco control laws and then facilitating its smooth implementation is a strong leadership from health sector including the Health Committee of the Parliament and through this strong leadership creating a constant dialogue with other sectors and building bridges for the common interests. Georgia did not have expertise in every field, but there were resources available through multiple channels such as WHO European regional office, WHO FCTC Secretariat and its Knowledge Hubs, UNDP, The Bloomberg Philanthropies Programme and so on. Georgia is one of the Parties and the only from Europe of the FCTC2030 project, an initiative of the WHO FCTC Secretariat and generously funded by the Government of the UK and Australia.

An important pillar throughout the process is a correct and regular communication to the public. It is very important to conduct a widespread public campaign with correct messaging in order to gain public support and voluntary involvement in law enforcement. The National Center for Disease Control and Public Health is implementing the State Program on Health Promotion, the largest component of which is tobacco control, including media campaign, training of Quitline staff and PHC providers, monitoring of enforcement of smoke-free legislation in public premises, developing a tobacco cessation mobile application and school



educational materials. In order to meet all the objectives of the tobacco control component, of the state program needs to be increased according to National Action Plan.

With the support of the WHO FCTC Secretariat and the International Union against Tuberculosis and Lung Diseases (The Union), Georgia initiated training of PHC staff in handling brief tobacco cessation interventions in-line with the WHO methodologies. The said effort was further supported by the WHO European Regional Office and these trainings are now expanded throughout the country. NCD is a main partner of Georgian Respiratory Association who is implementing a Pfizer Independent Grants Project to fully address implementation gap of the article 14 of the WHO FCTC.

With the support of the Union and within the scope of the Bloomberg Philanthropies Grant the NCD in close collaboration with the Ministry of Finance implemented a project targeting at development of a supportive environment for a tobacco tax increase in the country; and the comprehensive, country-specific and evidence based tobacco products taxation policy document was elaborated and shared with all interested stakeholders to reach consensus on adoption of policy document.

The project “Supporting endorsement and enforcement of strengthened legislation on tobacco demand reduction in Georgia in order to meet WHO FCTC requirements” aims to focus its efforts on continuing collaboration with decision makers to facilitate and enhance implementation of WHO FCTC articles.

With the support of the Union, North America ‘Tobacco Victims’ Media Campaign” was implemented including production and placement of Public Service Announcements (PSAs) and outdoor posters.

Contributing factors

This was achieved through convergence of factors which include first of all the whole of government approach to tobacco control as well as involvement of as many actors from civil society, academics, public etc. as possible.

In line with the article 5.2 of the WHO FCTC Georgia has multi-sectoral coordination mechanism in forms of State Tobacco Control Committee chaired by the Prime Minister; In addition to this structure, a Health Promotion and Prevention Council was created under the supervision of the Committee on Healthcare and Social Issues of the Parliament of Georgia with the aim to conduct parliamentary oversight and to foster the implementation of the law through improved coordination and supervision.

The cornerstone of firstly passing one of the most comprehensive tobacco control laws and then facilitating its smooth implementation is a strong leadership from health sector including the Health Committee of the Parliament and through this strong leadership creating a constant dialogue with other sectors and building bridges for the common interests.

We learned is that once the country is motivated and has real political will to change the situation related to tobacco control, there is a huge availability of international support. Global tobacco control stands on solidarity principle and we experienced this - we did not have expertise in every field, but there are resources available through multiple channels such as WHO European regional office, WHO FCTC Secretariat and its Knowledge Hubs, UNDP, The Bloomberg Philanthropies Programme and so on. Georgia is one of the Parties and the only from Europe of the FCTC2030 project, an initiative of the WHO FCTC



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Another key aspect is good preparatory work before the law enters into force. In this regards through abovementioned partners we received invaluable support in terms of different trainings, targeted workshops, evidence generating studies etc. e.g. Georgia was the first country to conduct the Tobacco Control Investment Case with the support of the UNDP and WHO FCTC, which showed in figures what are the losses of the country in terms of lives and money if tobacco control is not strengthened and how much lives and resources we can actually save if we focus on priority tobacco control measures.

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The National Tobacco Control Strategy and 2020-2025 Action Plan is elaborated.

Challenges

Despite of the success of the Georgian Government to combat the wide-spread tobacco epidemics in the country we are still facing numerous challenges. Tobacco control is a constant work as there are new challenges and obstacle emerging thanks to the tobacco industry changing faces and new tactics. Particularly challenging to implement article 5.3 even it's required by law. There were some exemptions to the smoke-free law which we think are contributing to the constant attempt of the tobacco industry to weaken the law (casinos, gambling houses, theatres during rehearsals, taxis). Even if tobacco taxes have substantially risen during last three years, the public health purposes are not yet fully considered, and when we talk about high tobacco prices we should not forget the moral obligation of the government to make smoking cessation available and affordable for the smokers, which is still not fully addressed. As in the whole WHO EURO region we are also facing increasing risk of introducing novel and emerging tobacco products to the market which are marketed as less harmful products by the tobacco industry. Protocol to Eliminate Illicit Trade in Tobacco Products has not signed yet.

Ways to overcome challenges



There is rising evidence that tobacco is no more only health concern but it is a concern for the development and environment also. It is the momentum when tobacco control people should use to integrate tobacco control policies in the environment, economic, gender, poverty and other agendas. We can only achieve better tobacco control, if agriculture sectors understand its benefits from alternative livelihoods to tobacco growing, if

environmental sectors understand what is the cost of tobacco growing and tobacco waste on the environment, if economic sectors understand that tobacco control is a very strong tool against fighting poverty, and etc. We should make tobacco control a priority not only for health sector but for governments as a whole and this should be achieved in the spirit of stronger international partnerships and solidarity.

Abovementioned tobacco control measures will contribute to full implementation of the WHO Framework Convention on Tobacco Control, thus also advancing the achievement of SDG targets related to tobacco control. There are opportunities for Georgia such as the High level political commitment, National focal point of tobacco control within the Ministry of Internally Displaced Persons from the Occupied Territories, Labour, Health and Social Affairs of Georgia, high level public support, active CSOs and strong legislative measures. However, the findings of the needs assessment for the implementation

of WHO FCTC in Georgia indicate that the tobacco control activities need to be further strengthened, existing Tobacco Control National Strategy and Action Plan 2020-2025 need to be approved by the Government of Georgia and properly implemented.



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