## **Factsheet**

## The Global Tobacco Control Funding Gap

Current global resources dedicated to tobacco control account for only 12.5% of funding needed for full implementation of the WHO FCTC.

Article 26 of the WHO Framework Convention on Tobacco Control (WHO FCTC) recognize the important role that financial resources play in achieving the objectives of the Convention. It also requests Parties to provide financial support to their national tobacco control initiatives and to promote the use and look for alternatives of funding to support developing country Parties and Parties with economies in transition.

Yet, insufficient funding is often reported by Parties as one of the major barriers of implementation of the Convention.

Quantifying the gap between existing levels of funding for tobacco control versus those needed to achieve full implementation of the WHO FCTC is necessary to:

 identify the type and quantity of resources that are needed;

- advocate for increased investment in tobacco control budgets at the national, regional, and global level; and
- craft solutions to close the funding gap.

This funding gap analysis found that the current amount of resources dedicated to tobacco control is around US\$ 1.2 billion, while the total amount of funding needed for full WHO FCTC implementation is US\$ 9.6 billion, meaning that only 12.5% of needed funding for tobacco control is currently being allocated leaving an annual funding gap of US\$ 8.4 billion. The total amount of funding needed for full WHO FCTC implementation at a *per capita* level is US\$ 1.20 globally, ranging from US\$ 0.68 in lower middle-income countries to US\$ 3.05 in high-income countries.

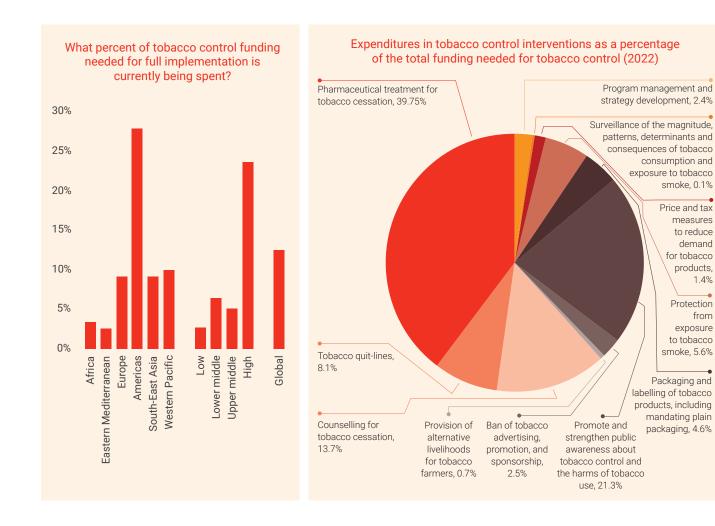


## **Tobacco Control Measures Included in the Funding Gap Analysis**

- Program management and strategy development (Article 5)
- Price and tax measures to reduce demand for tobacco products (Article 6)
- Protection from exposure to tobacco smoke (Article 8)
- Packaging and labelling of tobacco products, including mandating plain packaging (Article 11)
- Promote and strengthen public awareness about tobacco control and the harms of tobacco use (Article 12)

- Ban of tobacco advertising, promotion, and sponsorship (Article 13)
- Cessation interventions, including brief advice to quit, a national quit-line, and nicotine replacement therapy (Article 14)
- Provision of alternative livelihoods for tobacco farmers (Article 17)
- Surveillance of the magnitude, patterns, determinants and consequences of tobacco consumption and exposure to tobacco smoke (Article 20)





Cessation interventions, including brief advice to quit, a national quit-line, and pharmaceutical treatment, comprise the largest share of the total implementation cost globally (62%). This

is largely due to the individual nature of the intervention and the comparatively high cost of pharmaceutical treatment compared with population level interventions, such as taxation.

to reduce demand

products. 1.4%

exposure

## Current tobacco control funding as a percent of total needed funding

