



## MINISTRY OF HEALTH

### **INTERNATIONAL TOBACCO CONTROL STUDY(2018) IN KENYA** **REPORT**

#### **New report shows that picture-based cigarette pack warnings benefit Kenyan smokers and calls for larger warnings on all tobacco products to encourage quitting**

Kenya is making progress towards combatting smoking through strong tobacco control policies like picture-based health warnings, but there still remain significant challenges, according to a new report being released by the Kenya Ministry of Health today, commemorating the World Health Organization World No Tobacco Day, an annual event, whose theme in 2021 is “Commit to Quit.”

The report describes the findings of a national survey that was conducted twice—in 2012 and in 2018—by researchers from the University of Nairobi, the Kenya Medical Research Institute, and in collaboration with the International Tobacco Control Policy Evaluation Project (ITC Project), centered at the University of Waterloo in Canada.

Every year, more than 8,100 Kenyans die of tobacco related diseases, while more than 220,000 children and more than 2,737,000 adults continue to use tobacco each day. Thus, prevention and cessation services are important to save the lives of Kenyans.

The ITC Kenya Project team conducted their surveys among 1,500 tobacco users and 600 non-tobacco users. The survey is part of the 29-country ITC Project, which since 2002, has evaluated policies of the WHO Framework Convention on Tobacco Control (FCTC), a global health treaty which Kenya ratified in 2004. As a Party to the FCTC, Kenya is obligated to implement strong national policies to reduce tobacco use, including large pictorial health warnings, bans on smoking in public places, bans on tobacco advertising, promotion and sponsorship, and increases in tobacco taxes and prices.

Kenya introduced 3 picture-based health warnings on cigarette packages in 2016, following the unsuccessful challenge by British American Tobacco (BAT). The ITC Kenya Surveys found that introduction of picture warnings significantly increased the effectiveness of warnings. Awareness of the warnings increased from 64% to 72% of smokers; thinking about the health risks of smoking increased from 28% to 43% of smokers; and smokers who said that health warnings made them “a lot” more likely to quit increased from 24% to 38%. Knowledge of many of the health effects caused by smoking increased between 2012 and 2018.

However, the report also identified the need for the Government of Kenya to strengthen tobacco control efforts. Smokeless tobacco is the primary form of tobacco used by Kenyan women. The

survey found that only 12% of smokeless tobacco users reported noticing health warnings “often” on smokeless tobacco.

Although the 2014 tobacco control regulations approved 15 new pictorial warnings for both smoked and smokeless products, at the time of the 2018 survey only 3 warnings had been implemented, and the warnings on smokeless tobacco had not been uniformly introduced.

Because most smokeless tobacco is sold in loose form instead of packaged, most smokeless tobacco users are not exposed to health warnings at all. Thus, educating the public about the harms of tobacco products through health warnings on packaging is rarely effective for smokeless tobacco users, including young people who may be starting to use those products.

The report described a challenge to reducing tobacco use is the high rate of single cigarettes. The 2018 survey found that 82% of smokers reported last purchasing single cigarettes rather than a pack, about the same as in 2012. There is a need for Kenya’s existing ban on packs containing fewer than 12 cigarettes to be more strongly enforced.

There is also a need for Kenya to increase the size of their health warnings, from their current 30% to at least 50%, which is the required size of warnings under the FCTC.

Professor Geoffrey T. Fong of the University of Waterloo in Canada, Chief Principal Investigator of the ITC Project, said *“ITC evaluation studies in countries throughout the world show that increasing the size of pictorial health warnings significantly improves the effectiveness of the warnings. Large pictorial warnings that meet and exceed the minimum size guidelines of Article 11 of the FCTC are long overdue in Kenya”*, Dr. Fong said. *“If Kenya were to release the full set of 15 rotating warnings and enforce the ban on the sale of single cigarettes, there would be significant benefits in motivating smokers to quit and reducing the number of young people who start smoking.”*

The survey also found that even smokers support stronger health warnings and other tobacco control policies. 73% of smokers are in favor of more health information on cigarette health warnings and 84% are in favour of more health information on smokeless tobacco warnings.

Finally, the ITC survey highlighted the threat from menthol cigarettes, which are particularly popular in Kenya: about 1 in 5 smokers in Kenya who have a regular brand of cigarettes smoked menthols, higher than in most high-income countries. Over two-thirds of Kenyan smokers incorrectly believe that menthols are less harmful than cigarettes.

Canada and the European Union have banned menthol cigarettes because menthol reduces the harshness of tobacco smoke, which makes it easier for children and young adults to take up smoking. The report calls for Kenya to join more than 30 countries and jurisdictions that have banned menthol cigarettes, including Canada, Senegal, Nigeria, Uganda, Ethiopia, and the EU.

A recent [ITC study](#) found that Canada’s menthol cigarette bans led significantly more menthol smokers to quit, compared to non-menthol smokers. The results of the Canadian menthol ban suggest that if Kenya were to ban menthol cigarettes, this would lead 29,000 more Kenyan smokers to quit.

The ITC Kenya Wave 1-2 National Report can be downloaded at [www.itcproject.org](http://www.itcproject.org) or [www.health.go.ke](http://www.health.go.ke)

The ITC study on the impact of Canada's menthol ban is available at [bit.ly/3eyUr7S](https://bit.ly/3eyUr7S).

**The International Tobacco Control Policy Evaluation Project (ITC Project;**  
[www.itcproject.org](http://www.itcproject.org))

The evidence presented in the report is based on findings from the International Tobacco Control Policy Evaluation Project (ITC Project), the first-ever international cohort study to evaluate the psychosocial and behavioural effects of tobacco control policies and the only research project that focuses on measuring the impact of key policies of the WHO Framework Convention on Tobacco Control (FCTC), which has been ratified by 182 Parties, including Kenya. The ITC Project has conducted surveys of tobacco users and non-users in Kenya and 28 other countries beginning in 2002.

Two waves of the ITC Kenya Survey have been completed among a cohort of tobacco users and non-users. Wave 1 was conducted from October to December 2012 among 1370 tobacco users and 550 non-users. Wave 2 was conducted from April to June 2018 among 45% of the Wave 1 sample with new respondents added to maintain a cohort size of 1,078 tobacco users and 582 non-users. Findings from the ITC Kenya Survey and other ITC countries can provide policy-makers with evidence to guide the creation and implementation of stronger, evidence-based tobacco control policies to save the lives of 8,100 Kenyans that are lost each year from tobacco use.

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