Tobacco control in the Sustainable Development Goals: a precarious inclusion?

The *Lancet Public Health* editorial in April, 2017, called for tobacco control to be "firmly anchored in the Sustainable Development Goals (SDGs)".[1] As development practitioners, we are cognisant that governments face tough resourcing and implementation decisions to achieve this ambitious agenda (17 goals and 169 targets). Despite inclusion of a specific target for implementation of the WHO Framework Convention on Tobacco Control (FCTC; target 3.a), there is a risk that tobacco control will remain a focus for the health community only.

To gain insight about how tobacco control featured in the SDG design process, we looked at: 27 970 web-based submissions; 72 reports of national consultations; and nine reports of global thematic consultations organised around themes such as inequality, health, conflict, and fragility. We also looked at five high-level UN synthesis reports of discussions.[2–6] We did a keyword search for terms associated with tobacco, the WHO FCTC, and comparator health issues historically included in development discourse. Tobacco control was discussed far less frequently than many other health priorities, ranking third-to-last in composite score (table). National consultation reports from top cigarette-consuming and producing countries, such as China and Indonesia, did not mention tobacco. The WHO FCTC itself was mentioned very infrequently, (only in six web-based submissions and one health thematic consultation). It was not mentioned once in any of the high-level reports or the 72 national consultations, even though most national consultations were from Parties to the Convention. The Open Working Group tasked to design a proposal for the SDGs met regularly over 2 years, yet the WHO FCTC was only introduced during the 11th of 13 sessions.

Although inclusion of target 3.a is an important accomplishment, it does not itself guarantee strengthened tobacco control efforts. We are concerned that without advocacy the WHO FCTC might not be reflected in national sustainable development frameworks. Governments should be supported to improve understanding of the shared responsibility across sectors in meeting treaty obligations.[7] Emphasis should be placed on capacity building for coordination and policy coherence across SDG goals and targets and preventing industry interference. Learning from the global HIV response, strong civil society will be crucial for creating urgency for action. World No Tobacco Day offers an opportunity to advocate for improved integration of tobacco control in development planning, governance, and financing.

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4 UN Development Group. A million voices: the world we want. 2013. http://www.undp.org/content/undp/en/home/librarypage/mdg/a-million-voices--the-world-we-want.html (accessed April 17, 2017).
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6 Sustainable Development Solutions Network. An action agenda for sustainable development. 2013. http://unsdsn.org/news/2013/06/06/an-action-agenda-for-sustainable-development-networks-issues-report/ (accessed April 17, 2017).
7 WHO Framework Convention Secretariat and UNDP. Tobacco Control Governance in Sub-Saharan Africa. 2016. http://www.undp.org/content/undp/en/home/librarypage/hiv-aids/tobacco-control-governance-in-sub-saharan-africa.html (accessed April 17, 2017).

	Web-based submissions containing a search term	National consultations containing a search term	Mentions across the global thematic consultation final reports	Mentions across the high-level reports	Overall score
HIV/AIDS	2139	61	244	80	2524
Reproductive	768	41	211	49	1069
Maternal	809	49	71	26	955
Non-communicable diseases	457	24	82	30	593
Malaria	374	28	35	18	455
Tobacco-related terms	219	16	14*	6	255
Alcohol	177	22	19	7	225
Obesity	103	8	4*	16	131

*All in the health thematic consultation.

Table: Tobacco-related and comparator terms in Sustainable Development Goals design fora