



different stages of the policy process and the strategies used to involve different actors.

Data collection

Data was collected through three techniques: document review, in-depth interviews and direct observations.

Document review

The aim of the document review was to describe the Cameroon policy context and content, identify existing policies and gaps therein and understand the policy development processes and implementation status. We focused on policy documents on tobacco use prevention and control (including acts and laws, strategic plans, guidelines and government directives), relevant documents on to-

Data analysis

Using the Walt and Gilson framework [16], we developed a comprehensive codebook to guide coding of documents, interviews, and community observation reports. Codes identified the content, context, and process of tobacco prevention and control “best buy” interventions categories as well as the individual, group, and organization actors involved.

We conducted data collection and analyses concurrently. We prepare a data analyses plan and compiled all datasets including the spreadsheets of policies, transcripts and field notes from interviews, and notes from observations. We cleaned data by reading through the transcripts to identify incomplete sections, typographical errors, formatting errors and clarifying the use of idioms, metaphors and slang language. Notes were inserted where explanations were re-

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generated significant revenue for certain producers, approved a project called "PARTEC" [project supporting the revival of tobacco farming in eastern Cameroon]. Since 2010, this sector therefore has regular subsidies from the Public Investment Budget of the Ministry of Agriculture, in order to boost the national tobacco production [25]. This paradox of the State financially supporting tobacco farmers and at same time preventing and controlling tobacco use has been challenged by the civil society. During a Parliamentary session in 2014, the Prime Minister while answering a question said this paradox would be addressed within the context of the implementation of the WHO FCTC [26].

P c c e a d "be b " e e

The policy context, described above, led to the formulation of 12 tobacco control policies which incorporated the tobacco use prevention "best buy" interventions: tax increases on tobacco products, smoke-free indoor workplaces and public places, bans on tobacco advertising, promotion and sponsorship, and health information and warnings (Table 3).

The increase of tobacco taxes was identified as a powerful policy tool and historically the most cost-effective intervention to reduce smoking [27, 28]. In Cameroon, the increase of excise tax was one of the interventions. Excise tax refers to an indirect type of taxation imposed on the manufacture, sale or use of certain types of goods and products. The *Ad a e* excise tax, which is one type of the excise duty meaning that a fixed percentage is charged on a particular good or product, was introduced for tobacco products in 1999 as part of the Central African

Economic and Monetary Community (CEMAC) regulation [29]. CEMAC countries then implemented the *Ad a e* system excise duties applied at 25% on tobacco products., in Cameroon, the excise duty was applied at 25% with a minimum of not less than 2600 CFA francs (USD 4.37) for 1000 sticks of cigarette. In 2015, this policy was revised in the 2015 National Finance Act: the minimum of excise tax was increased from 2600 to 3500 CFA francs (USD 4.37 to 5.89) for 1000 sticks of cigarettes [30]. This resulted in an increase of 100 CFA francs per pack of 20 sticks of cigarettes in 2015.

Considering the "best buy" intervention on the creation of smoke-free indoor workplaces, we also found individual government ministries and departments policies integrated it [31–35] (Table 3). These included the Ministries of Basic Education, Secondary Education, Higher Education, Finance, and Social affairs, and also one territorial sub-division in the country'] .

to the provisions of articles 39, Art. 40 (1) and (2) of this law, shall cause a commercial message to be disseminated on cigarettes or other tobacco products.

P r o c e

The formulation of tobacco prevention policies started around 1988 and were propounded mainly by the health sector. In the 2000s, the international campaign against tobacco championed by WHO and the establishment of the FCTC in 2003, motivated local policy makers to review to-

decision between the health and trade sectors. Thereafter, "GROUPE" developed a national comprehensive law project on tobacco control based on the FCTC's recommendations. This law revised in 2012 is still at the Presidency of the Republic in Cameroon and has not been presented to parliament for enactment.

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The major actors involved in formulating and implementing tobacco use prevention policies were ministerial departments of Health, Trade, Education, Communication and Finance. We mapped the major actors involved in formulating of some tobacco control policies according to their level of involvement and their position (Table 4). Interaction of different actors in the policy development and implementation process depended on whether the intervention had a multisectoral scope or not. For example, four interventions were multisectoral, whereas eight inter-

Table 4 Actors involved on the formulation and implementation of some tobacco use prevention policies in Cameroon

Policy	Numbers of sectors involved	Types of sectors	Role in the policy process			Level/extent of involvement			Actor positions		
			Formulation	Implementation	Follow-up/ Evaluation	High/ leadership role	Middle	Low	Supportive	Mixed	Non-supportive
Law No. 2006/018 of December 29, 2006 governing advertising in Cameroon which prohibit advertising of tobacco products	7	Parliament	x			x			x		
		Presidency	x				x		x		
		Ministry of Communication	x		x	x			x		
		Town Hall		x				x		x	
		Tobacco industry representatives		x				x			x
		Advertising companies		x				x		x	
		Ministry of Justice		x				x		x	
Law N° 2014/026 of 23 December 2014 on the finance law of the Republic of Cameroon for the 2015 financial year	8	Parliament	x			x			x		
		Presidency	x				x		x		
		Prime Ministry	x				x		x		
		Ministry of Finance/ General Direction of Taxation	x	x	x	x			x		
		Ministry of Finance/ General Direction of Customs		x				x		x	
		Ministry of Trade	x	x				x		x	
		Ministry of Health	x						x	x	
		WHO	x				x			x	
		GICAM [Inter Patronal Groupings of Cameroon]	x						x		x
Tobacco companies		x					x		x		
Order N°967/ Ministry of Public Health and Ministry of Trade of 25 June 2007 Health Warnings on Tobacco Products	5	Expert Group for Tobacco Control	x								
		Ministry of Health	x		x	x			x		
		Ministry of Trade	x	x	x	x			x		
		General Direction of Customs		x						x	
		Tobacco industries		x					x		x

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actors in implementing public policy [52]. Decision makers'

anti-tobacco bill project, allowing it to be passed through the legislature. Secondly, the Government of Cameroon will have to put the necessary resources for an effective implementation of the bill. The experience of South Africa, which is a successful example of tobacco control, shows that tobacco control requires the permanent contributions of different actors. South Africa has seen a signifi-

47. WEF, WHO. From burden to "best buys"