

BRIEFING PAPER

Africa's Rulebook Is Being Written in Nairobi

How Nairobi's regulatory choices on nicotine pouches will shape a continent's path to a smoke-free future

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Executive Summary

Kenya stands at a regulatory inflection point that will echo across Africa. In 2025, it became one of the first African countries to adopt a fully integrated legal framework for nicotine pouches. In just over five years, the country moved from a generic pharmaceutical classification to graphic health warnings, excise stamps, child-resistant packaging, nicotine caps, and leaflet inserts. The Path to Smoke-Free platform ranks Kenya's Acceptability of nicotine pouches as the best in the world. Acceptability, in this context, measures the degree to which a country's regulatory environment allows a variety of flavours and nicotine levels to reach adult smokers as a compelling and realistic alternative to cigarettes. In that dimension, no country scores higher. Pouches also score 91.67 out of 100 on Accessibility, by far the most permissive category in the country's smoke-free profile. Accessibility captures whether innovative nicotine products are available through conventional and online retail channels, with comprehensive and relevant information for adults. Kenya, on both counts, has already done what many of its neighbours have not.

Yet, Kenya also carries a heavy burden of combustibles. Roughly 12,000 adults die each year from smoking-related disease. Smoking is responsible for 87% of male lung cancer deaths and 48% of oesophageal cancer cases. Adult smoking prevalence stands at 8.4%, and Kenya has set no official date for becoming a smoke-free country.

Nicotine pouches are the only smoke-free category where Kenya has moved faster than its peers. The regulatory architecture now in place could accelerate a smoker-to-pouch transition like Sweden's 3.7% smoking rate. The tension at the heart of this report is that Kenya's current regulations, while among Africa's most sophisticated, risk treating pouches as equally harmful as cigarettes. A proportionate framework would separate the two categories in tax, communication and access, accelerating Kenya's path to a smoke-free future.

Introduction

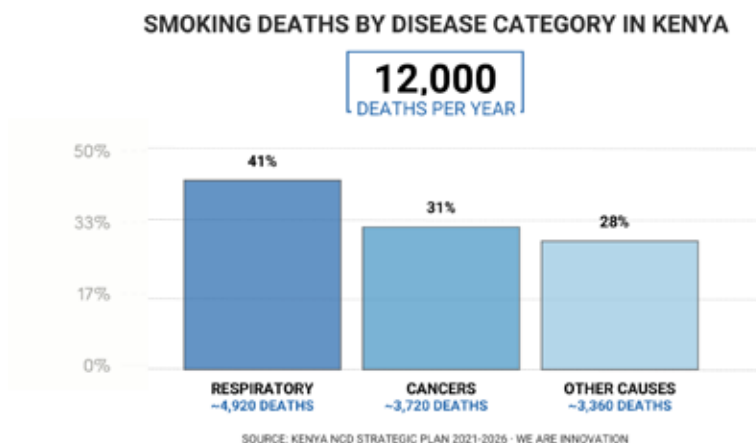
The story of nicotine pouches in Kenya can be told as a sequence of dates. In 2019, the first regulated product was introduced under Pharmacy laws as a borderline product. In 2020, it was withdrawn amid a dispute over classification between pharmaceutical and tobacco control frameworks. In 2021, pouches [were reclassified](#) under the Tobacco Control Act. Between 2022 and 2024, more products entered the market, and the regulatory conversation broadened. In 2024, the Tobacco Control [Amendment](#) Bill, Senate Bill No. 35, was introduced. In [2025](#), the Ministry of Health gazetted graphic health warnings, mandated excise stamps, required leaflet inserts, and imposed child-resistant packaging. The East African Standard EAS 1198:2025 [set](#) a nicotine cap of 20 milligrams per pouch, with graphic health warnings taking effect from March 2026.

Six years, from a general borderline pharmaceutical product to one of the most comprehensive legal frameworks on the continent, is remarkable. The question now is whether that framework will deliver the public health gains nicotine pouches are uniquely positioned to offer or treat pouches as indistinguishable from the combustible products that kill 12,000 Kenyans a year.

The Smoking Toll Kenya Still Carries

Kenya has made real progress in reducing combustible tobacco use. Adult smoking [prevalence](#) has fallen from 15% in 2000 to around 8% in 2025. Male prevalence dropped from 28% to an estimated 16%; female prevalence, which has always been low by global standards, is roughly 0.7%.

But the numbers beneath the prevalence rate describe a problem that remains substantial. The Ministry of Health's NCD Strategic Plan for 2021–2026 [attributes](#) approximately 12,000 annual deaths to smoking, representing 16.5% of adult deaths from major non-communicable diseases. Respiratory diseases account for 41% of that mortality, and cancers for 3%. Smoking is responsible for 87% of male lung cancer deaths and 48% of oesophageal cancer cases.



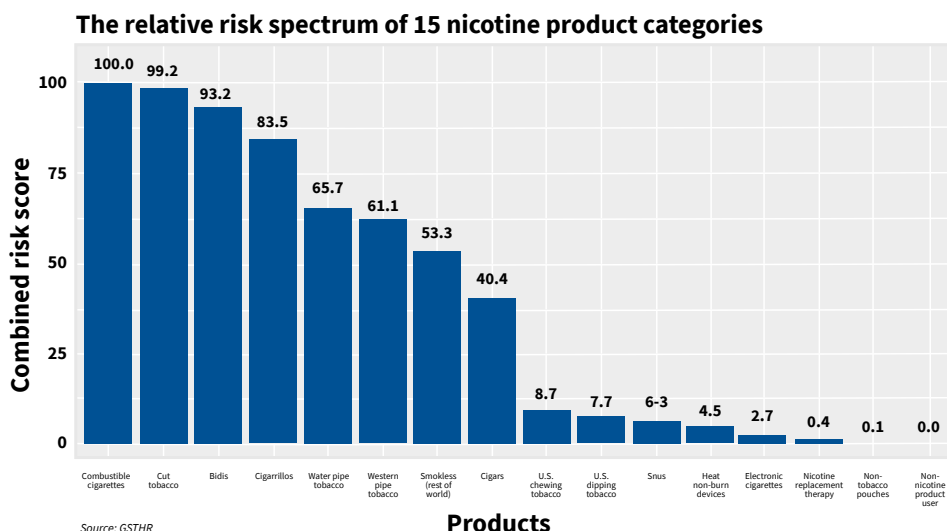
Thus, the current rate of decline is real but insufficient to resolve the problem within a generation. This is the context in which nicotine pouches enter the picture, not as a threat to smoking cessation but as a potential accelerant.

What Nicotine Pouches Are and What the Evidence Says

A nicotine pouch is a small, tobacco-free sachet placed under the lip that delivers nicotine through the oral mucosa. It contains no tobacco leaf, produces no smoke, and generates no combustion products [potential source [DEAS 1198: 2024, Nicotine pouches — Specification, First Edition](#)]. The Czech Government, responding to a European Commission notification in April 2025, [described](#) the category in its essentials:

“Nicotine pouches do not contain tobacco, do not burn, do not create smoke or ash.”

This matters because most smoking-related harm comes from thousands of toxicants produced when tobacco burns. Nicotine is addictive but not the main cause of smoking-related cancers, cardiovascular disease, or respiratory disease. Removing combustion changes the harm profile substantially.



The body of regulatory and scientific evidence on this point has been accumulating for years across advisory bodies with no commercial stake in the answer. The UK Committee on Toxicity of Chemicals in Food, Consumer Products and the Environment, reviewing the evidence in April 2023, [concluded](#) that

“the use of oral nicotine pouches, as recommended by the manufacturer, as a replacement for conventional cigarette smoking is likely to be associated with a reduction in overall risk of adverse health effects.”

The Committee added that pouches could reasonably be considered part of a harm-reduction strategy, given their lower risk than cigarette smoking.

The Netherlands National Institute for Public Health and the Environment reached a similar conclusion, [finding](#) that “for users of tobacco products, nicotine pouches are probably a less harmful alternative.”

Independent academic research has reinforced these findings. Professor David Levy of Georgetown University, whose modeling work on tobacco control is widely cited, [has observed](#) that “nicotine pouches have substantially lower levels of toxicity than cigarettes and even most other smokeless tobacco products.” While delivering nicotine at comparable levels, the combination makes them plausible substitutes for smokers seeking to switch away from combustion.

This is the scientific consensus against which Kenya’s framework will be measured. A policy that treats pouches as indistinguishable from cigarettes, taxing them equally, and restricting access similarly sends a message that contradicts the evidence and undercuts the category’s rationale.

Kenya’s Unusual Position on the Path to Smoke-Free

The [Path to Smoke-Free](#) platform ranks 101 countries on their readiness to transition away from combustible tobacco, with 1 representing the best-performing country and 101 the worst. Kenya’s overall score is 75 out of 101, placing it in the lower half of the index. Within that aggregate, the component scores reveal a striking pattern.

Kenya’s rank on Acceptability of smoke-free products — capturing regulatory openness and public discourse — is 1 out of 101. That is not a typographical error. Kenya has the most accepting regulatory and discursive environment for safer nicotine products of any country measured by the platform. On Affordability, Kenya ranks 60 out of 101; on Accessibility, 74. **The country’s challenge on the Path to Smoke-Free is not that it has shut the door on alternatives to smoking but that the products remain difficult to reach and, for many adult smokers, expensive.**

When the platform focuses on nicotine pouches specifically, the picture becomes clearer. Pouches score 91.67 out of 100 on Accessibility and a full 100 on Acceptability. That is the highest Acceptability score of any smoke-free category in Kenya. Affordability is 33.33, limited by the excise regime introduced under the 2024 Tax Laws Amendment Act. Vapes, snus, and heated tobacco products each score 0 on Affordability. Pouches remain the most cost-effective and least risky option for Kenyan smokers.

Kenya is not a laggard in recognizing the potential of nicotine pouches. It is a regional first mover.. What remains is to ensure the tax and access framework allows the scientific promise of the category to translate into measurable public health gains for the 2.3 million Kenyans still smoking.

What Sweden and Czechia Have Shown

Sweden is the primary global benchmark for a smoke-free transition. Its smoking [prevalence](#) is 3.7%, below the World Health Organization’s 5% threshold for a “smoke-free” society and roughly [a fifth](#) of the European Union average. Sweden reached that figure not through conventional tobacco control alone, but through the parallel availability, acceptability, and affordability of safer nicotine products — first traditional snus, and more recently tobacco-free nicotine pouches.

The [results](#) are measurable in causes of death. Sweden’s lung cancer mortality rate among men is 33.1 per 100,000 inhabitants, against a European Union average of 69.9. The gap is not explained by differences in lifestyle or healthcare systems; the critical variable is the prevalence of combustible tobacco use, which declined as Swedish smokers switched into smoke-free alternatives.

Sweden [is not alone](#). Czechia recorded the fastest smoking decline in the European Union between 2021 and 2023, following the adoption of a proportionate legal framework for nicotine pouches that established product standards, nicotine limits, and age verification without cutting off adult access. New Zealand halved its adult smoking rate within a decade by integrating safer products into a nationally licensed retail framework while maintaining strict youth protections.

These countries are not cosmetically similar, and their regulatory regimes differ substantially. What they share is a policy architecture in which the most harmful product — the combustible cigarette — is made relatively less accessible and more expensive than the less harmful alternatives. Prices, access, warning labels, and tax stamps all communicate the same underlying message.

Kenya's 2025 framework has been built on a different instinct. Excise stamps and health warnings were applicable on pouches from 2021 following the reclassification from pharma to tobacco products. The Graphic health warnings gazetted in 2025 contained specified warnings for pouches, albeit not entirely reflective of associated reduced risk. Senate Bill No. 35 proposes further restrictions on flavors and accessibility. Each measure is defensible on youth protection grounds. Taken together, they risk erasing the signal that pouches are the less risky choice on which a Swedish-style transition depends.

Proportionate Regulation and the Youth Protection Question

The strongest argument for treating nicotine pouches with a cigarette-equivalent framework is protecting minors. The 2024 DaYTA survey [source?] found that 0.1% of Kenyan adolescents use nicotine products overall, rising to 0.4% in urban areas. Those are low numbers by international standards and have not spiked despite rising pouch sales. But any increase among young people is a legitimate public concern.

Evidence from other jurisdictions suggests effective youth protection does not require suppressing adult access. Greece, which in 2025 [deployed](#) a digital-age verification system alongside a national retail register, has maintained [strict youth controls](#) while allowing adult smokers access to alternatives. New Zealand, through its licensed adult-only retail model, has seen [declining](#) youth use alongside a substantial adult smoking decline. Technology, enforcement, and retailer accountability have proved more effective than broad restrictions on product characteristics.

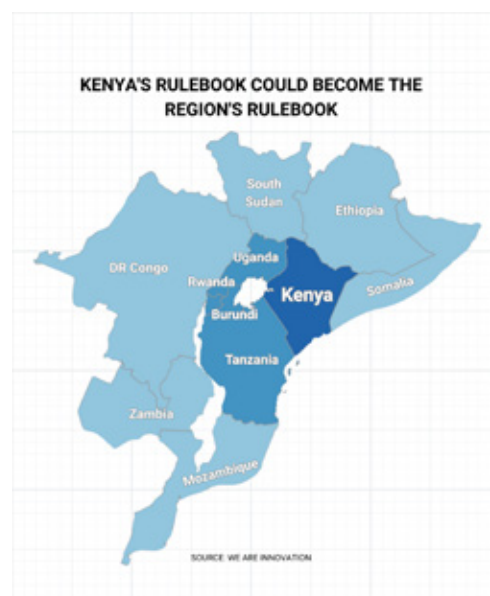
Kenya's architecture is well placed to replicate this. The leaflet insert requirement — with directions for use, storage guidelines, contraindications, adverse effects, and a clear statement that the product is not suitable for young people or non-smokers — is the kind of consumer-protection tool other jurisdictions have built late or not at all. The Senate Bill's provisions on dealer licensing provide a basis for retailer accountability. Child-resistant and tamper-evident packaging is in place. What remains is to distinguish, in the framework's signaling, between adult smokers — for whom pouches are the less risky alternative — and minors, for whom all nicotine products should be off limits.

The EAS 1198:2025 standard, with its 20-milligram cap, is an example of proportionate regulation done well. It prevents extreme-strength products that have generated moral panics in other markets while leaving room for products calibrated to adult smokers transitioning away from cigarettes. Applying a similar spirit across the tax regime, , and accessibility restrictions under consideration in the Tobacco Control Amendment Bill would make Kenya's framework not just one of Africa's first but one of the world's best.

The Regional Stakes

Kenya does not regulate in isolation. The East African Community's adoption of EAS 1198:2025 means that Kenyan regulatory choices will shape the nicotine pouch landscape across the region, and the African Organization for Standardization is considering the same template for broader continental adoption. The Kenyan framework will inform decisions in Uganda, Tanzania, Rwanda, and beyond. That is a significant responsibility that Kenya has, in many respects, already begun to discharge well.

Integrating pouches into formal legal and fiscal frameworks, rather than relegating them to a regulatory shadow, is a policy choice many African countries have not yet made. Many micro and small enterprises have introduced nicotine pouch products into the Kenyan market. Their presence points to a nascent legitimate industry that can absorb regulatory costs and deliver tax revenue. That potential depends on the framework not pricing the category out of reach.



Conclusion

Kenya's journey with nicotine pouches from 2019 to 2026 is a model of regulatory maturation. It took a product that entered the market under a generic classification and, in six years, brought it under a framework with nicotine caps, graphic health warnings, leaflet inserts, excise stamps, child-resistant packaging, and standard specifications. The Path to Smoke-Free platform's assessment reflects this: Kenya's Acceptability of smoke-free products ranks first in the world, and nicotine pouches score 91.67 out of 100 on Accessibility.

What the framework does not yet reflect is the distinction between pouches and combustible cigarettes that international scientific evidence requires. Cigarettes kill 12,000 Kenyans a year. Pouches, on available evidence, do not. Treating the two categories with equivalent taxes, and restrictions sends a signal to adult smokers that switching is neither encouraged nor rewarded. It also leaves the current rate of decline too slow to constitute a national smoke-free strategy.

The countries that have halved or more than halved their smoking rates in a single generation did so by making the alternative products the easier choice. Sweden did it with snus and tobacco-free pouches. Czechia did it with a proportionate legal framework. New Zealand did it with licensed retail and strict youth controls. Each required regulatory interventions aimed to separate cigarettes from their alternatives — and to communicate that separation clearly through taxes, access, and labeling.

Kenya has the institutional capacity to make that separation. The decisions being taken in Nairobi over the next regulatory cycle will determine what kind of country Kenya becomes. The Tobacco Control Amendment Bill, the tax differential, and the design of the graphic health warnings themselves are all live questions. Together, they will determine whether Kenya becomes the African country that showed how to deliver a Swedish-pace transition on a Nairobi budget, or the one that proved how easy it is to regulate a harm-reduction opportunity out of existence. Nairobi will write the African rulebook either way. What it says matters for Kenya, for the East African Community, and for every African smoker whose next twenty years will be shaped by whether the governments of the continent treat nicotine pouches as the solution they can be.

The logo for Path to Smoke-Free features a stylized white icon of a cigarette or smoke plume on the left, followed by the text "PATH TO SMOKE-FREE" in a bold, white, sans-serif font.

PATH TO SMOKE-FREE

Path to Smoke-Free is a comprehensive analytical platform developed by We Are Innovation that reveals how countries can harness innovation to defeat smoking and accelerate their journey toward smoke-free status. Drawing from Sweden's remarkable success in dramatically reducing smoking rates far below global averages—we identified three key elements: Accessibility, Acceptability, and Affordability of innovative nicotine products. Our platform combines comprehensive policy data with real insights from Swedish ex-smokers, offering interactive tools to compare how countries are harnessing innovation to defeat smoking. The platform features powerful forecasting charts that project smoking prevalence and when countries will reach smoke-free status under three scenarios: current policy trajectories, outcomes if countries matched Sweden's success rate, or results following the combined pace of leading nations. Policymakers, researchers, and health professionals can explore evidence-based strategies that could help their countries reach smoke-free targets faster, guided by proven success stories. Discover how your country could accelerate its journey to smoke-free status at <https://pathtosmokefree.global/>.

The logo for We Are Innovation consists of a white square outline with a small notch in the top-left corner, followed by the text "WE ARE INNOVATION" in a white, sans-serif font.

WE ARE INNOVATION

We Are Innovation is a dynamic network of individuals and institutions who deeply believe in innovation's power to drive progress and solve the world's most pressing problems. With 50 think tanks, foundations, and NGOs based worldwide, We Are Innovation represents the diverse voices of a global civil society committed to advancing human creativity, adopting new technologies, and promoting innovative solutions. Through our collaborative approach and cutting-edge expertise, we are driving global transformative change. To learn more about our work, visit us at <https://weareinnovation.global/>.

We Are Innovation
The Future Is Calling. And We Are Ready to Answer

