STEP-BY-STEP INSTRUCTIONS 
FOR THE COMPLETION OF CORE 
QUESTIONNAIRE OF THE REPORTING INSTRUMENT

WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL (WHO FCTC)¹

December 2019

¹These step-by-step instructions were drawn up in accordance with decisions FCTC/COP3(17) and FCTC/COP4(16) to assist Parties in completing the reporting instrument of the WHO FCTC.
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Introduction and general observations

The reporting instrument of the WHO FCTC consists of a core questionnaire mandatory for all Parties and the “additional questions on the use of implementation guidelines adopted by the Conference of the Parties”, which aims to facilitate voluntary submission of such information by the Parties.

The aim of these instructions is to assist Parties in completing the core questionnaire of the reporting instrument of the WHO FCTC, and they follow the structure of that questionnaire.

I. Access to basic documents

The core questionnaire reflects the content of the articles of the WHO FCTC. The text of the Convention can be accessed at: http://www.who.int/fctc/text_download.

II. General observations and recommendations

The core questionnaire was adopted by the Conference of the Parties at its third session and subsequently amended after each session of the Conference of the Parties. Reports must be submitted in the format provided on the WHO FCTC web site at: http://www.who.int/fctc/reporting/reporting_instrument. Starting from the 2016 reporting cycle Parties need to submit their reports in an online survey format.

The WHO FCTC technical focal point, as per the official records of the Secretariat, receives an email invitation to complete the survey, including a link to access the survey. During the designated reporting period regular reminders are being sent automatically by the reporting platform until the report is actually submitted. The survey is automatically saved each time a change is made. Reopening of the questionnaire can be done by clicking the invitation link again. Once the survey is completed and submitted, you will be given the option to print your completed report for your records. Reporting Parties have permanent access to their reports, including for the purposes of amending, downloading, etc.

In the online format, Parties also have the opportunity to upload additional documents to support their answers in the spaces provided for this purpose. Additional documents are to be uploaded, if possible, in one of the official languages of the Conference of the Parties: Arabic, Chinese, English, French, Russian or Spanish. If the document you wish to submit is available online, a link to it would suffice.

Collection of national data and completing the reporting instrument

Answers to all questions in this questionnaire are mandatory, except if stated otherwise (specifically, provision of information through the open-ended questions on the use of guidelines is voluntary). You are requested to provide data, if they are available. Please note that several questions will only become visible to respondents that provided affirmative response to a previous question. Such questions will appear automatically as you progress with the completion of the questionnaire.

If you do not have data available for a section, leave that part of the questionnaire blank. Please do not insert text such as ‘not available’ or ‘no data’ in the data entry fields of tables or individual
questions. On the other hand, if more datasets are available for a particular question, please ensure that you provide the latest available data.

In view of the volume and diversity of data and information that are to be reported, completion of this questionnaire and preparation of your report may be time-consuming.

Bearing in mind that regular reports need to be submitted every second year beginning from 2012, enough time should be left for data collection before the completion of the report. Therefore, those who are responsible for preparing and submitting the report are advised to identify the information needed and the sources they will have to use, and to establish a process for obtaining the information in a timely manner.

The process of data collection may involve contacting and requesting data from different government departments (ministries), units, agencies or organizations. As you should provide data that are already available in your jurisdiction, there is usually no need to launch new data collection initiatives or studies only for the preparation of this report.

The WHO FCTC Indicator Compendium can assist Parties in the collection of national data as per the indicators used in the reporting instrument and can be accessed at: http://www.who.int/fctc/reporting/Compendium/.

III. Observations concerning Section B: Tobacco consumption and related health, social and economic indicators

When data have been collected, either as part of a national surveillance programme or within the framework of another international data collection initiative, please use those data in completing the tables and data entry fields in this section. In addition to the figures and brief explanations given in the data entry fields, a copy (or copies) of the study (or studies) that served as the basis for the figures provided in this section should be submitted in a separate file. Alternatively, you could provide a link to the study in question, if it is available online.

IV. Observations concerning Section C: Legislation, regulation and policies, and Section D: International cooperation and assistance

For each affirmative response, please provide as much detail as possible about the measures implemented. Relevant documentation, including copies of legislation, regulations, executive, administrative and other instruments, should be attached to the completed report. Alternatively, you can provide links to such documentation, if available online.

When legal measures on any aspect of tobacco control are part of wider, more extensive laws, please submit either the whole text of the law or only the paragraphs concerning tobacco control; in either case, the full name and date of adoption of the full legislation must be provided, for example, when regulation of tobacco excises are part of a fiscal act or code.

If any aspect of tobacco control legislation is amended by a new act, please provide the text of both the original law and the legislation amending it.

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1In all questions, the term “law” includes any form of legislation or regulation approved by the legislative or executive branches of government, including all relevant ministerial orders, administrative orders, decrees, etc.
When legal measures have been taken in a form that is not amenable to reproduction and inclusion in your answers to this questionnaire, please provide as much detail as possible about the measure(s) taken in the spaces provided.

**Only completed policies should be reported.** A policy is completed if adopted by the national legislature, signed by the president, proclaimed in the national gazette, etc. Please do not tick ‘Yes’ to any question that refers to the content of a draft legislation or bill or any measure or policy that has not yet been adopted by the relevant authority.

It is crucial that you also provide a **brief description of progress made** in implementing the measures and refer to **arrangements for enforcement and monitoring of implementation** of the measures reported.

In the case of articles for which the Conference of the Parties adopted implementation guidelines, additional information may be provided by the Party on the use of those guidelines. When responding to such questions, please refer to the explanation provided in the respective section of these step-by-step instructions. Alternatively, Parties may wish to provide detailed information on the use of guidelines through the online form containing additional questions on the use of implementation guidelines by the Parties. The online form can be opened and completed at: [http://www.who.int/fctc/reporting/reporting_instrument/](http://www.who.int/fctc/reporting/reporting_instrument/).

Response to sections referring to implementation guidelines of the core questionnaire or completion of the additional questions is **voluntary**.

**V. Observations regarding the use of data from the tobacco industry**

Parties are respectfully required, in the spirit of Article 5.3 of the WHO FCTC and its guidelines, to ensure that the tobacco industry does not participate – directly or indirectly – in the preparation of implementation reports.

The tobacco industry may have and make available its own data or estimates in relation to some questions included in the WHO FCTC reporting instrument. It is of critical importance to note that such information should only be considered or referred to with caution, and only if strictly necessary. As stated in the Guidelines for implementation of Article 5.3 of the WHO FCTC, there is a fundamental and irreconcilable conflict between the tobacco industry’s interests and public health policy interests.

In its report, if a Party wishes to consider information from the tobacco industry, in relation to any indicator, including illicit tobacco trade, taxation, the price of tobacco products and other issues, it is required that the source of the data be clearly referenced in the report. For any indicator and question included in the reporting instrument, if government data are deemed insufficient, then alternative data should be obtained from other trustworthy national sources and utilized for this purpose.
### SECTION A: Origin of the report

<table>
<thead>
<tr>
<th>A1</th>
<th>NAME OF CONTRACTING PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Please give the name of your country here.</td>
</tr>
</tbody>
</table>

| A2 | Please give the name of the national contact or focal point representing the country who is responsible for completion of the questionnaire. |

| A3 | Please give the name and details of the government official responsible for submitting this report (if different from the above). You will not be able to apply a physical signature in the online survey. The government official responsible for submitting the report should, in exchange, prepare a brief cover letter informing the Convention Secretariat about the submission of the report. This cover letter can be signed by the relevant official; a scanned copy of the letter should be submitted to the Convention Secretariat (copreporting@who.int). |

| A4 | Please provide the start and end dates for the reporting period (Day/Month/Year to Day/Month/Year). |
**SECTION B: Tobacco consumption and related health, social and economic indicators**

*This section refers to Articles 6.2(a–b), 6.3, 8, 15.4, 15.5, 17, 19.2(a), 20.1(a), 20.2, 20.3(a), 20.4 and 20.4(c) as indicated in the subsections below.*

<table>
<thead>
<tr>
<th>B1</th>
<th><strong>PREVALENCE OF TOBACCO USE</strong>&lt;br&gt;<em>(This subsection refers to Articles 20.2 and 20.3(a).)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>B11</td>
<td><strong>Smoking prevalence in the adult population (all)</strong></td>
</tr>
</tbody>
</table>

This table is for reporting data on smoking prevalence in the *entire* adult population. The age range to which the data used to complete this table refer is to be determined by Parties. This age range (e.g. 15 years and over, 18–64 years) is to be given in the space under B112. (For groups of people aged 15 years or less, please provide data in Table B16.)

Please be sure that you provide the prevalence of smoking, *not* the number of smokers or users.

Data, if available, are to be reported for the following categories: ‘current smokers’, ‘daily smokers’, ‘occasional smokers’, ‘former smokers’ and ‘never smokers’. Separate smaller tables are available for these categories.

Definitions of *current smoker, daily smoker, occasional smoker, former smoker* and *never smoker* are to be provided by the Parties. As definitions vary internationally, please ensure that you give a definition relevant to your country/survey. These definitions are to be reproduced in the space under B114.

For current and daily smokers, the average number of the most widely consumed smoking tobacco product used per day can also be given in Tables B11A and B11B, if the data are available.

When possible, separate these data into numbers for males and females and also provide the total smoking prevalence.

**When data have been collected as part of a surveillance programme or within the framework of another international data collection initiative, copies of the report(s) should be uploaded under B165.**

If national data are not available, subnational data can be reported. In these cases, enter the data in the relevant sections of the table and provide information about the study (e.g. year, source, name of the region concerned and referred adult population group) in the space under B113.

| B11 | Please list the smoking tobacco products included in calculations of prevalence in this field. |

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1For details concerning the indicators used in this section, including their definitions, please refer to the WHO FCTC Indicator Compendium available at: [http://www.who.int/fctc/reporting/Compendium/](http://www.who.int/fctc/reporting/Compendium/).
| B112 | Please indicate here the age range to which your prevalence data for the entire adult population refer (e.g. 15 years and over, 18 years and over, 18–64 years). |
| B113 | Please provide the year (B113A) and source (B113B) of the data used to complete Table B11. |
| B114 | Please insert your definitions of ‘current smoker’, ‘daily smoker’, ‘occasional smoker’, ‘former smoker’ and ‘never smoker’ in these spaces. |
| B115 | Please provide here a description and, if possible, an explanation of the trend in smoking prevalence you have observed in the adult population in your country, preferably over the past three years or since submission of your last report. Alternatively, you may wish to highlight any changes that occurred between your last two prevalence surveys. Please provide, if possible, data from surveys based on the same (standard) methods, thus ensuring comparability of data. |
| B12 | **Smoking prevalence in the adult population (by age group)** |
| | If available, please provide data on smoking prevalence by age group (preferably by 10-year category, e.g. 25–34, 35–44) in this table. There are eight pre-set lines in this table for age groups. |
| | In this table, please provide data on either all current smokers or daily smokers only, whichever is available, and specify which data you used under B122B. |
| | When possible, separate the data into those for males and those for females and also give the total smoking prevalence. |
| | **When data have been collected as part of a surveillance programme or within the framework of another international data collection initiative, copies of the report(s) or other relevant publications should be uploaded under B165.** |
| | If national data are not available, subnational data can be reported. In these cases, enter data in the relevant sections of the table and provide information regarding the study (e.g. year, source, name of the region concerned and the referred adult population group) in the space under B122. |
| B121 | Please list the smoking tobacco products included in calculations of prevalence for question B12, in this field. |
| B122 | Please provide the year (B122A) and source (B122B) of the data used to complete Table B12. Please also specify here if you used data for all current smokers or for daily smokers only for completion of Table B12. |
| B123 | Please provide here a brief description and, if possible, an explanation of the trends you have observed in smoking prevalence in different adult age groups in your country, preferably in the past two years or since submission of your last report. Alternatively, you may describe the changes that occurred between your last two prevalence surveys. |
**Prevalence of smokeless tobacco use in the adult population (all)**

This table is provided for reporting data on the prevalence of use of smokeless tobacco, including snuff and chewing tobacco, in the **entire** adult population. The age range to which the data used to complete this table refer is to be determined by Parties. This age range (e.g. 15 years and over, 18–64 years) is to be given in the space under B132. (For age groups of people aged 15 years and under, please provide data in Table B16.)

Please be sure that you provide the prevalence of smokeless tobacco use, not the number of users.

To complete this table, follow the instructions for completion of Table B11.

**When data have been collected as part of a surveillance programme or within the framework of another international data collection initiative, copies of the report(s) or other relevant publications should be uploaded under B165.**

If national data are not available, subnational data can be reported. In these cases, enter data in the relevant sections of the table and provide information about the study (e.g. year, source, name of the region concerned and the referred adult population group) in the space under B133.

If the use of smokeless tobacco products is forbidden in your jurisdiction, please provide, if possible, the text of the relevant legislation.

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>B131</td>
<td>Please list the smokeless tobacco products included in calculations of prevalence in this field.</td>
</tr>
<tr>
<td>B132</td>
<td>Please indicate here the age range to which the prevalence data for the <strong>entire</strong> adult population refer (e.g. 15 years and over, 18 years and over, 18–64 years).</td>
</tr>
<tr>
<td>B133</td>
<td>Please provide the year (B133A) and source (B133B) of the data used to respond questions in the section B13.</td>
</tr>
<tr>
<td>B134</td>
<td>Please insert definitions of ‘current user’, ‘daily user’, ‘occasional user’, ‘former user’ and ‘never user’ of smokeless tobacco products in this space.</td>
</tr>
<tr>
<td>B135</td>
<td>Please provide here a brief description and, if possible, an explanation of the trends you observed in your country in the prevalence of smokeless tobacco use in the adult population, preferably in the past two years or since submission of your last report. Alternatively, you may also wish to describe any changes that occurred between your last two prevalence surveys.</td>
</tr>
<tr>
<td>B14</td>
<td><strong>Prevalence of smokeless tobacco use in the adult population (current users) by age group</strong></td>
</tr>
<tr>
<td>-----</td>
<td>--------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>If available, please provide prevalence data for smokeless tobacco use by age group (preferably by 10-year categories, e.g. 25–34, 35–44) in this table. There are eight pre-set lines in this table for age groups.</td>
</tr>
<tr>
<td></td>
<td>In this table, please provide data on either all current users or daily users only, whichever is available, and specify which data you used under B142B.</td>
</tr>
<tr>
<td></td>
<td>When possible, break down these data into those for males and those for females and also provide the total prevalence of smokeless tobacco use.</td>
</tr>
<tr>
<td></td>
<td><strong>When data have been collected as part of a surveillance programme or within the framework of another international data collection initiative, copies of the report(s) or other relevant publications should be uploaded under B165.</strong></td>
</tr>
<tr>
<td></td>
<td>If national data are not available, subnational data can be reported. In these cases, enter data in the relevant sections of the table and provide information regarding the study (e.g. year, source, name of the region concerned and the referred adult population group) in the space under B142.</td>
</tr>
</tbody>
</table>

| B141 | Please list the smokeless tobacco products included in calculations of the prevalence given in the answer to question B14. |
| B142 | Please provide the year (B142A) and source (B142B) of the data used to complete Table B14. Please also specify here if you used data for all current users or for daily users only for completion of Table B14. |
| B143 | Please provide here a brief description and, if possible, an explanation of the trends you observed in your country in the prevalence of smokeless tobacco use in different adult age groups, preferably in the past two years or since submission of your last report. Alternatively, you may describe any changes that occurred between your last two prevalence surveys. |

<table>
<thead>
<tr>
<th>B15</th>
<th><strong>Tobacco use by ethnic group(s)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>There are five pre-set lines for the provision of prevalence data for ethnic groups in this table. Provide the name of the ethnic group for which you are reporting current tobacco use in the second column of this table. Please provide data on either all current tobacco users or daily users only, whichever is available.</td>
</tr>
<tr>
<td></td>
<td><strong>Please be sure to report the prevalence of tobacco use by ethnic groups, not the number of smokers or users.</strong></td>
</tr>
</tbody>
</table>

| B151 | Please indicate the tobacco products included in calculations of the prevalence in Table B15. |
| B152 | Please indicate the age range to which your prevalence data for ethnic group(s) refer (e.g. 15 years and over, 18 years and over, 18–64 years). |
Please provide the year (B153A) and source (B153B) of the data used to complete Table B15.

**B16 Tobacco use by young persons**

Please report prevalence figures for tobacco use by young persons in this table. Please provide the definition and/or age range for ‘young persons’ used in your jurisdiction. (This can also be provided under B162B.)

Please provide data on either all current users or daily users only, whichever is available, and specify which data you used under B162B.

There are eight pre-set lines for the provision of prevalence data for different age groups.

**Please be sure to report the prevalence of tobacco use by youth groups, not the number of smokers or users.**

Prevalence data, if available, should be provided for the following categories of tobacco products: ‘smoking tobacco’, ‘smokeless tobacco’ and ‘water pipe’.

The following tobacco products¹ can be included in the three categories defined above:

**Smoking tobacco products** (of which tobacco is the main component): cigarettes, bidis, cigars, fine-cut smoking articles (roll-your-own), kreteks

**Smokeless tobacco products** (of which tobacco is the main and the only active component): chew, loose-leaf; chew, twist or roll; mishri (masher, misher); plug or chew tobacco; red tooth powder; snuff, creamy; snuff, dry; snuff, moist; snus (snuff)

**Water pipe products**: tobacco used in water pipes (sheesha, narghile, arghile, hookah, hubble-bubble, goza)

When possible, separate the prevalence data into those for boys and those for girls and also provide the combined (total) prevalence.

**When data have been collected as part of a surveillance programme or within the framework of another international data collection initiative, copies of the report(s) or other relevant publications should be submitted with the completed questionnaire.**

If national data are not available, subnational data can be reported. In these cases, enter data in the relevant sections of the table and provide information about the study (e.g. year, source, name of the region concerned and the referred youth group) in the space under B162.

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Please indicate the tobacco products included in calculations of the prevalence in Table B16.

Please provide the year (B162A) and source (B162B) of the data used to complete Table B16. Please also specify here if you used data for all current users or for daily users only in completing Table B16.

Please insert definitions of ‘current smoking’ and/or ‘current tobacco use’ in this space.

Please provide here a brief description and, if possible, an explanation of the trends you observed in your country in the prevalence of tobacco use by young persons, preferably in the past two years or since submission of your last report. Alternatively, you may describe the changes that occurred between your last two prevalence surveys.

Please upload any document(s) and other supporting information related to this subsection under B165, or you can provide the Internet address of these documents, if they are available online.

This table is for reporting data on the use of other tobacco products, particularly novel and emerging nicotine and tobacco products by adult population and youth persons. Please provide the definition and/or age range for ‘adult population’ and ‘young persons’ used in your jurisdiction.

Please provide data on either all current users or daily users only, whichever is available.

Please be sure to report the prevalence of novel tobacco product use by adult population and/or youth groups, not the number of smokers or users.

Prevalence data, if available, should be provided for the following categories of tobacco products: ‘heated tobacco products (HTPs)’, ‘electronic nicotine delivery systems (ENDS)’, ‘electronic non-nicotine delivery systems (ENNDS)’ and ‘other products’. Other products can be either smoking or smokeless. Examples of other products are: chimo; gul; guthka; iq’mik; khaini; mawa; nass (naswar, niswar); pan masala (betel quid); qiwam (kimam); toombak, zarda, etc.

Other products are defined as other tobacco products that contain tobacco and meet at least one of the following criteria:¹

(a) the product employs new or unconventional technology, such as vaporization of tobacco into the lungs or use of menthol pellets in cigarette filter;
(b) the product type has been on the market for less than 12 years, such as dissolvable tobacco products recently introduced into some national markets;
(c) the product type has been on the market for a longer time, but market share has increased in countries/regions that traditionally did not use this type, as in the example of smokeless tobacco products being introduced into countries where they were not previously available.
(d) the product is marketed or work has been published to allow it to be marketed with

the claim that these products have the potential to reduce exposure to harmful chemicals found in tobacco smoke. These potential reduced-exposure tobacco products (PREPs) include those employing modifications in tobacco processing (e.g. substituting burning for heating) and altered filter structure.”

When possible, break down these data into those for males and those for females and also provide the total prevalence.

**When data have been collected as part of a surveillance programme or within the framework of another international data collection initiative, copies of the report(s) should be submitted with the completed questionnaire.**

<table>
<thead>
<tr>
<th>B2</th>
<th>EXPOSURE TO TOBACCO SMOKE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><em>(This subsection refers to Articles 8, 20.1(a) and 20.2.)</em></td>
</tr>
<tr>
<td>B21</td>
<td>Data on exposure to tobacco smoke(^1) should be reported in this subsection, if available.</td>
</tr>
<tr>
<td></td>
<td>For example, if you implemented research programmes, in accordance with Articles 20.1(a) and 20.2 of the Convention, on determinants and consequences of exposure to tobacco smoke, you may wish to report the data obtained here.</td>
</tr>
<tr>
<td></td>
<td>Studies on implementation of Article 8 <em>(Protection from exposure to tobacco smoke)</em> concerning exposure to tobacco smoke and its health impact can also be referred to in this subsection.</td>
</tr>
<tr>
<td></td>
<td>Please answer ‘Yes’ to this question if you have any data on exposure to tobacco smoke. If you don’t, please answer ‘No’.</td>
</tr>
<tr>
<td>B22</td>
<td>If you responded ‘Yes’ to question B21, detailed data on exposure to tobacco smoke should be provided in this subsection. You may also wish to provide details of the methods used in the research from which the data on exposure were derived.</td>
</tr>
<tr>
<td>B23</td>
<td>Please provide the year (B23A) and source (B23B) of the data used to answer questions under subsection B2.</td>
</tr>
</tbody>
</table>

\(^1\)The guidelines for implementation of Article 8 of the Convention define "second-hand tobacco smoke" as "the smoke emitted from the burning end of a cigarette or from other tobacco products usually in combination with the smoke exhaled by the smoker".
### B3 TOBACCO-RELATED MORTALITY

(*This subsection refers to Articles 20.1(a) and 20.2.*)

| B31 | Data on tobacco-related mortality should be reported in this subsection, if available.  
For example, if you implemented research programmes, in accordance with Articles 20.1(a) and 20.2 of the Convention, on the consequences of tobacco consumption and exposure to tobacco smoke, you may wish to report the data obtained here.  
Please answer ‘Yes’ to this question if you have any data on tobacco-related mortality (due to active smoking or tobacco use and/or exposure to tobacco smoke (passive smoking)). If you don’t, please answer ‘No’. |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>B32</td>
<td>If you have data on tobacco-related mortality, please provide the estimated <strong>number</strong> of deaths attributable to tobacco use in your population in the data entry field. If you have data on mortality caused by both active smoking and exposure to tobacco smoke, please provide the <strong>combined</strong> mortality data here and provide further details under B33.</td>
</tr>
<tr>
<td>B33</td>
<td>Please insert any additional data on tobacco-related mortality in the space provided. If you have the necessary data, you may break down mortality by disease category attributable to tobacco use. You may wish to provide separate data for active smoking or tobacco use and exposure to tobacco smoke.</td>
</tr>
<tr>
<td>B34 and B35</td>
<td>Please provide the year (B34A) and source (B34B) of the data used to answer questions B31–B33 and upload a copy of the study referred to in this subsection under B35.</td>
</tr>
</tbody>
</table>

### B4 TOBACCO-RELATED COSTS

(*This subsection refers to Articles 20.1(a) and 20.2.*)

| B41 | Data on tobacco-related costs should be reported in this subsection, if available.  
If you have completed a report on the estimated burden of tobacco use on your society (e.g. the overall costs), answer ‘Yes’ to this question. If not, please answer ‘No’. |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>B42</td>
<td>If you answered ‘Yes’ to question B41, provide details here. You may wish to refer to cost items, such as direct costs (e.g. healthcare-related costs of tobacco use) and indirect costs (e.g. lost income due to early death related to tobacco use). Please also describe briefly the methods used in each study.</td>
</tr>
<tr>
<td>B43 and B44</td>
<td>Please provide the year (B43A) and source (B43B) of the data used to answer questions B41 and B42 and submit a copy of the study referred to in this subsection under B44.</td>
</tr>
</tbody>
</table>
### SUPPLY OF TOBACCO AND TOBACCO PRODUCTS

(This subsection refers to Articles 6.2(b), 15.4, 15.5, and 20.4(c).)

| B51 | In this table, data on licit (legal) supply can be provided for the following categories of tobacco products: ‘smoking tobacco products’, ‘smokeless tobacco products’ and ‘other tobacco products’ (see definitions of ‘smoking tobacco products’ and ‘smokeless tobacco products’ under B16; ‘other tobacco products’ can be either smoking or smokeless, which, in addition to tobacco, have other components or are smoked in a particular device). A fourth category is provided in the last row of this table: those Parties which, in addition to the above, also have data for tobacco leaves, should complete this line.

The name of the product is to be given in the first column (‘Product’) of the table. There are six pre-set lines for each of the above-mentioned categories.

In the second column of the table (‘Unit’), insert the unit in which the data on supply are given, e.g. pieces, millions of pieces, tonnes, thousands of packages.

In the third column, please provide data on ‘Retail sales’ for the respective product, and in the fourth, information on ‘Domestic production’ (manufacturing).

Licit supply will be calculated, as appropriate, by analysing the data provided by Parties, from the following formula: domestic production + (imports – exports). To allow calculation of this information, the table has different columns for domestic production, exports and imports.

Please provide additional documentation, if relevant. |
| B52 | Please provide information on the volumes of duty-free sales here, if available.

Please specify the product, the units in which the volumes of duty-free sales are provided and the quantity or volume of duty-free sales.

Please use the latest available data and provide additional documentation if relevant. |
| B53 and B54 | Please provide the year (B53A) and source (B54B) of the data used to complete Table B51. The source of these data could be a government department, agency or any other organization affiliated to the government, which is responsible for collecting data on licit supply of tobacco products. You may wish to upload any supporting document under B54. |
### SEIZURES OF ILLICIT TOBACCO PRODUCTS

(This subsection refers to Articles 15.4 and 15.5.)

| B61 | In this table, data on seizures of illicit tobacco products (which may include, for example, smuggled, illicitly manufactured or counterfeit products) can be provided for the following categories of tobacco products: ‘smoking tobacco products’, ‘smokeless tobacco products’ and ‘other tobacco products’ (see definitions of ‘smoking tobacco products’ and ‘smokeless tobacco products’ under B16; ‘other tobacco products’ can be either smoking or smokeless, which, in addition to tobacco, have other components or are smoked in a particular device).

In the first column, please give the year to which the information applies, ensuring that you use the latest available data.

The name of the product is to be given in the second column of the table.

There are eight pre-set lines for tobacco products in each of the above-mentioned categories.

The unit in which the seizures are reported should be given in the third column, e.g. millions of pieces, thousands of packages.

The quantity seized should be given in the fourth column. Please insert a number in this data entry field. |
<table>
<thead>
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<tbody>
<tr>
<td>B62</td>
<td>Please answer ‘Yes’ here if you have any information on the percentage of illicit tobacco products in the national tobacco market. If you don’t, please answer ‘No’.</td>
</tr>
<tr>
<td>B63</td>
<td>If you answered ‘Yes’ to question B62, please provide the corresponding number in the data entry field.</td>
</tr>
<tr>
<td>B64</td>
<td>This question refers to the trend over the past two years or since submission of your last report in the percentage of illicit tobacco products in relation to the national tobacco market. If you have at least two data sets on the percentage of illicit tobacco products (even if you did not provide these data in your previous report), please briefly describe and explain the trend in the space provided.</td>
</tr>
<tr>
<td>B65</td>
<td>Please provide any further information you may have on illicit tobacco products in this space.</td>
</tr>
<tr>
<td>B66 and B67</td>
<td>Please provide the source of the data, e.g. a government department, the customs, any public agency or other organization or the tobacco industry. Please ensure that you use the latest available data. You may wish to upload any supporting document under B67.</td>
</tr>
<tr>
<td>B7</td>
<td>TOBACCO-GROWING</td>
</tr>
<tr>
<td>------</td>
<td>----------------------------------------------------------------------------------------------------------</td>
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<tr>
<td></td>
<td><em>(This subsection relates to Article 17, 20.1(a) and 20.4.)</em></td>
</tr>
<tr>
<td>B71</td>
<td>If tobacco is grown in your country, please answer ‘Yes’. If not, please answer ‘No’.</td>
</tr>
<tr>
<td>B72</td>
<td>This space is for reporting the number of workers involved in tobacco-growing. If you answered ‘Yes’ to</td>
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<td>question B71 and have the number of workers, please insert it here. If possible, the data should be</td>
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<td>broken down into full-time, part-time and seasonal workers. Please provide the figure(s) broken down by</td>
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<td></td>
<td>gender, if available.</td>
</tr>
<tr>
<td>B73</td>
<td>This question refers to the proportion of the national gross domestic product represented by tobacco</td>
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<tr>
<td></td>
<td>leaf-growing or production. Please insert a number in this data entry field.</td>
</tr>
<tr>
<td>B74 and B75</td>
<td>Please provide the year (B74A) and source (B74B) of the data used to answer questions B71–B73. You may</td>
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<tr>
<td></td>
<td>wish to upload any supporting document under B75.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>B8</th>
<th>TAXATION OF TOBACCO PRODUCTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><em>(This subsection refers to Articles 6.2(a), 6.3 and 20.1(a).</em></td>
</tr>
<tr>
<td>B81</td>
<td>This question refers to the proportion (in percentage) of the retail price of a unit pack and/or</td>
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<td>package of tobacco product, of the most popular price category, that consists of taxes. Please</td>
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<td></td>
<td>consider the sum of all taxes levied on tobacco products, such as excise tax, sales and import taxes,</td>
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<td></td>
<td>value-added tax and goods and services taxes (VAT/GST), if applicable. Please insert a number in this</td>
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<td></td>
<td>data entry field.</td>
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<tr>
<td>B82</td>
<td>Please provide details of the types of excise taxes that are levied on tobacco products in your</td>
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<td></td>
<td>jurisdiction by answering this question. Please tick ‘Yes’ or ‘No’ accordingly.</td>
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<tr>
<td></td>
<td>The following pre-set answers are provided: ‘specific tax only’, ‘ad valorem tax only’, ‘combination</td>
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<td></td>
<td>of specific and ad valorem taxes’ and ‘more complex tax structure’.</td>
</tr>
<tr>
<td>B83</td>
<td>Data on taxation can be provided by category of tobacco product, e.g. smoking, smokeless or other</td>
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<tr>
<td></td>
<td>tobacco products (see definitions of ‘smoking tobacco products’ and ‘smokeless tobacco products’ under</td>
</tr>
<tr>
<td></td>
<td>B16; ‘other tobacco products’ can be either smoking or smokeless, which, in addition to tobacco, have</td>
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<tr>
<td></td>
<td>other components or are smoked in a particular device).</td>
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<td></td>
<td>There are eight pre-set lines for each category of product.</td>
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<td>It is important that you are as specific as possible. Please list each tax separately and, for each</td>
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<td>tax, specify the rate (e.g. in the case of excise tax and ad valorem tax) or amount (e.g. in the case of</td>
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<td></td>
<td>a specific tax) and the base (i.e. the rate or amount applied to).</td>
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<td></td>
<td>Please provide documentation on the rates of taxation, if relevant. You may upload such documents</td>
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<tr>
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<td>under B88.</td>
</tr>
</tbody>
</table>
## B84

This question refers to the trends in taxation of tobacco products over the past three years or since submission of your last report. Please describe trends in the overall proportion of taxes in the retail price of a unit pack or package of tobacco product and changes in the tax structure applied to tobacco products in your jurisdiction, if applicable. In addition, you may state whether excise taxes are regularly adjusted for inflation and, if applicable, the frequency of such adjustments.

You may also wish to refer to changes in the overall tax burden on tobacco products by category of tobacco product (e.g. whether all tobacco products are taxed similarly to prevent substitution in consumption, such as shift from a more expensive, more heavily taxed tobacco product to a cheaper tobacco product with a lower tax burden).

Please indicate whether, in your opinion, this trend can be linked to any specific tobacco control policy adopted in your jurisdiction during the period concerned.

## B85

This question refers to the earmarking of any percentage of taxation income derived from the sale of tobacco products for funding any national strategy, plan or programme in reference to Article 26 of the Convention (*Financial resources*). Tick the ‘Yes’ box in the case of an affirmative answer.

## B86

This space is for further details on earmarking. If you answered ‘Yes’ to question B85, insert the details here. You can also provide additional documentation (e.g. text of legislation requiring earmarking), if applicable, by uploading it under B88.

## B87 and B88

Please provide here the year (B87A) and source (B87B) of the data used to answer questions B81–B86. Please specify the source of the data, e.g. a government department, the customs, any public agency or other organization or the tobacco industry. Please ensure that you used the latest available data. You may wish to upload any supporting document under B88.
| **B9** | **PRICE OF TOBACCO PRODUCTS**  
(This subsection refers to Article 6.2(a) and 20.1(a).) |
|---|---|
| **B91** | Please provide the retail prices of the three most popular brands of domestic and imported smoking, smokeless and other tobacco products in your jurisdiction.  
Please specify the brand name you are referring to, not the type of tobacco product.  
Please use the three pre-set lines to insert the names of smoking, smokeless and other tobacco brands. Please insert the brand names in the respective columns (smoking or smokeless tobacco) of the table.  
Please provide the prices of these brands in the latest available year, preferably in the capital city, from a retail outlet widely used by the local population. If the price(s) has (have) changed in the year to which your data refer, please provide the latest price available.  
Please specify the number of units (e.g. pieces) or amount (e.g. weight in grams) per package. (Small packets, tins, sachets, metal or glass containers of various sizes, toothpaste-like tubes and candy-like wrapped cylinders are examples of packages in which smokeless tobacco products can be sold. In these cases, the unit can be the weight of the packaged product.)  
Please state the currency used to complete the ‘Rate or amount’ column in Table B83 and the ‘Retail price’ column of this table.  
Nominal values can be given in local currency or in US dollars. In the latter case, please provide the exchange rate to US dollars of this currency, preferably on the date for which the prices given in this table apply. (Online tools are available for calculating the value of the price expressed in local currency in US dollars, such as [http://www.x-rates.com/calculator.html](http://www.x-rates.com/calculator.html), [http://www.xe.com/](http://www.xe.com/) or [http://www.oanda.com/convert/classic](http://www.oanda.com/convert/classic).) |
| **B92** | Please provide the year (B92A) and source (B92B) of the data used to complete Table B91. Please specify the source of data, e.g. a government department, the customs, any public agency or other organization or the tobacco industry. Please ensure that you use the latest available data. |
| **B93 and B94** | This question refers to the trend in the prices of tobacco products over the past three years or since submission of your last report. Please describe briefly how the prices of tobacco products have changed in the reporting period and provide, if possible, an explanation of this trend (e.g. whether, in your opinion, the trend can be linked to any specific tobacco control policy adopted in your jurisdiction). You may wish to upload any supporting document under B94. |
### SECTION C: Legislation, regulation and policies

| C1 | GENERAL OBLIGATIONS  
(This subsection refers to Article 5.) |
|----|------------------------------------------------|
| C11 | General obligations  
(This subsection refers to Articles 5.1 and 5.2.) |

#### C111

Please answer ‘Yes’ to this question if you have developed, adopted and have already started implementation of comprehensive, multisectoral, national tobacco control strategies, plans and/or programmes in accordance with the requirements of the Convention.

If you answered ‘Yes’ to this question, please provide details in the space under question C117 and submit a copy of these strategies, plans and/or programmes under C128.

If you have not yet adopted and started implementation of such strategies, plans and/or programmes, please answer ‘No’ to this question. If the development of such strategies, plans and/or programmes is under consideration or under way, please provide details under question C117.

#### C112

Please answer ‘Yes’ to this question if some elements of a comprehensive, multisectoral, national tobacco control strategy, plan and/or programme are included in a more general national health, public health or health promotion strategy, plan or programme.

If you answered ‘Yes’ to this question, you can provide details in the space provided under question C117 and submit a copy of this strategy, plan or programme under C128.

If you have not included tobacco control in any national health, public health or health promotion strategy, plan and/or programme, please answer ‘No’ to this question. If the development of such a strategy or plan is under consideration or under way, please provide details under question C117.

#### C113

Please answer ‘Yes’ to this question if any aspect of tobacco control referred to in the Convention is included in any national strategy, plan or programme.

If you answered ‘Yes’ to this question, you can provide details in the space provided under question C117 and submit a copy of the strategy, plan or programme under C128.

#### C114

Please answer ‘Yes’ to these questions if you have established, reinforced or financed a focal point for tobacco control, a tobacco control unit and/or a national coordinating mechanism for tobacco control.

In this question, a focal point for tobacco control means a person who works part-time or full-time on tobacco control, e.g. the national counterpart on tobacco to WHO. A ‘tobacco control unit’ is a specialized agency or unit solely or predominantly responsible for tobacco control within the government (e.g. health ministry or another agency affiliated with the health ministry). A ‘national coordinating mechanism for tobacco control’ means a specific, sustainable structure that coordinates tobacco control efforts in a country (e.g. an intersectoral or interministerial board or committee for tobacco control).
| C115 | If you responded affirmatively to any of the questions under C114, please provide details to support your answers in the space provided here. Please take into account the definitions given under C114 for the focal point for tobacco control, the tobacco control unit and the national coordinating mechanism for tobacco control.

For example, you may wish to provide the following information: the government department that hosts the focal point for tobacco control and/or the tobacco control unit; how the tobacco control unit is financed; whether the sustainability of the unit is ensured; the number of staff working full-time in this unit or within the government; the nature of the national coordinating mechanism for tobacco control; whether it is intersectoral in its composition; the government departments represented in the coordinating mechanism. |
| C116 | This question refers to progress made in implementing Articles 5.1 and 5.2 (General obligations) in the past two years or since submission of your last report.

Please refer here to any newly developed comprehensive multisectoral national tobacco control strategies, plans and programmes, any new legislative, executive, administrative and/or other measures adopted and implemented for preventing and reducing tobacco consumption, nicotine addiction and exposure to tobacco smoke, and whether you have integrated implementation of the Convention in any national health, public health or health promotion strategies, plans and programmes or any broader national strategy, plan or programme during the period defined above. |
| C117 | Please provide any additional information pertaining to but not covered in this subsection, in relation to the requirements of Articles 5.1 and 5.2. You can upload any document(s) containing supporting information under C128; alternatively, you can provide the Internet address of the document, if it is available online. For example, please provide the text of the national tobacco control programme. |
| C12 | Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry

(This subsection refers to Article 5.3 and to the guidelines for implementation of Article 5.3 as adopted by the Conference of the Parties at its third session.) |
| C121 | This question refers to any legislative, executive, administrative or other measures adopted and implemented to protect public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry.

Such measures may include: raising awareness, among all branches of government, especially non-health sectors (e.g. diplomatic missions, trade, finance, labor, agriculture and customs), of tobacco industry tactics, including partnerships, agreements, corporate social responsibility activities and activities utilizing third parties, manipulating public relations/media and obfuscating science; limiting interactions with the tobacco industry, implementing measures or codes of conduct ensuring the transparency of interactions that occur and requiring divestment and disclosures of interests; rejecting partnerships and voluntary agreements with the tobacco industry; avoiding conflicts of interest for persons involved in setting and implementing public health policies with respect to tobacco control; ensuring the transparency of all tobacco industry operations and activities; preventing activities described as ‘socially responsible’ by the tobacco industry from being accepted as normal; requiring submission of information, including... |
but not limited to, marketing, public relations, research and legal expenses, political contributions, lobbying, philanthropy, and registration of allied entities, from tobacco industry; and not granting incentives, privileges, benefits or preferential tax exemptions to the tobacco industry.

For further details of such measures, please refer to the Guidelines for implementation of Article 5.3 ([https://www.who.int/fctc/treaty_instruments/adopted/article_5_3](https://www.who.int/fctc/treaty_instruments/adopted/article_5_3)) adopted by the Conference of the Parties at its third session.

| C122 | This question refers to a specific measure that may contribute to preventing the use of tobacco products and/or of the behaviour and practices of the tobacco industry from being accepted as normal. This measure is raising public awareness about the tobacco industry by providing public access to a wide range of information on its activities relevant to the objectives of this Convention.

In this question, the term ‘wide range’ refers to, *inter alia*, information on tobacco production, manufacture, market share, marketing expenditures (including expenditures on public relations, promotions, sponsorships, research contributions/grants, and legal expenses), revenues and any other activity, including but not limited to, lobbying, philanthropy, political contributions and all other activities not prohibited, or not yet prohibited, under Article 13 of the Convention (*Tobacco advertising, promotion and sponsorship*). Tobacco industry submissions (e.g. position papers and pleadings) and records of interactions of government with the tobacco industry might also be relevant. |

| C123 | If you responded affirmatively to any of the questions in C121 and C122, please provide details to support your answers.

Specifically, please describe here whether your government or any departments, branches or units within the government have adopted and implemented any measures or programmes, where appropriate, on any of the following:

- raising awareness on tobacco industry tactics and the need to prevent interference by the tobacco industry with decision making;
- avoiding entering into any partnerships or voluntary agreements with the tobacco industry;
- limiting interaction of public officials with the tobacco industry, including in the form of a code of conduct; and
- preventing granting of incentives, privileges, benefits or preferential tax exemptions to the tobacco industry to establish or run their business. |

| C124 | This question refers to progress made in implementing Article 5.3 (on the protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry) in the past two years or since submission of your last report.

Please describe here any new regulation, legislation or policy adopted in your jurisdiction with respect to this requirement of the treaty. Please report measures adopted during the period defined above and state whether you have begun implementing those measures. |
| C125 and C126 | Responses to these questions are **voluntary**. Please respond affirmatively to question C125 if you utilized the *Guidelines for implementation of Article 5.3 of the WHO FCTC* ([https://www.who.int/fctc/treaty_instruments/adopted/article_5_3](https://www.who.int/fctc/treaty_instruments/adopted/article_5_3)) when developing or implementing policies in this area. You may wish to provide more information regarding the use of *Guidelines for implementation of Article 5.3 of the WHO FCTC* in your jurisdiction in the space under C126. Please describe here if you have taken any steps to implement the recommendations of the guidelines including, but not limited to the following measures:  

- informing and educating **all** branches of government about the need to protect tobacco control policies;  
- establishing measures to limit interactions with the tobacco industry and providing examples of interaction which occurred;  
- entering into any partnerships or non-binding and non-enforceable agreements/voluntary arrangements with the tobacco industry;  
- adopting and implementing a code of conduct for public officials to comply with in their dealings with the tobacco industry;  
- prohibiting contributions from the tobacco industry to political parties;  
- granting of any incentives, privileges, benefits or preferential tax exemptions to the tobacco industry;  
- and if there is any State-owned tobacco industry operating in your jurisdictions and how the functions of overseeing State-owned tobacco industry are separated from the formulation of tobacco control policies at the level of the government, as appropriate. When appropriate, you may also want to include examples of tobacco industry activities or tactics. Alternatively, if you wish to provide more structured information on these and similar matters, please complete the **additional questions** on the use of guidelines presented in a separate questionnaire (you can access the additional questions at: [http://www.who.int/fctc/reporting/reporting_instrument](http://www.who.int/fctc/reporting/reporting_instrument)). |

| C127 and C128 | Please provide any additional information pertaining to but not covered in this subsection, in relation to the requirements of Article 5.3. You can follow the recommendations and structure of the *Guidelines for implementation of Article 5.3 of the WHO FCTC* ([https://www.who.int/fctc/treaty_instruments/adopted/article_5_3](https://www.who.int/fctc/treaty_instruments/adopted/article_5_3)) when reporting this information. For example, you may wish to report any research and/or study performed with a view to substantiating an intervention in this area or assessing the impact of implementation of these policies. You could also describe your experience in implementing such policies, with special regard to their enforcement, monitoring and evaluation. Please upload any document(s) or other supporting information under C128; or you can give the Internet address of the document, if it is available online. |
| C2 | MEASURES RELATING TO THE REDUCTION OF DEMAND FOR TOBACCO  
*(This subsection refers to Articles 6–14.)* |
| --- | --- |
| **C21** | Price and tax measures to reduce the demand for tobacco  
*(This subsection refers to Article 6 and to the Guidelines for implementation of Article 6 of the WHO FCTC, as adopted by the Conference of the Parties at its sixth session.)* |
| C211 to C213 | Please tick ‘Yes’ or ‘No’, as appropriate, when answering these questions; please refer to Articles 6.2(a) and 6.2(b).  
For questions C212 and C213 please tick ‘Yes’ if your policies provide for either *prohibition* or *restriction*. Please further describe the extent of these measures in the data entry field under C217. |
| **C214** | This question refers to progress made in implementing Article 6 (*Price and tax measures to reduce the demand for tobacco*) in the past two years or since submission of your last report. |
| **C215 and C216** | Responses to these questions are voluntary.  
Please respond affirmatively to question C215 if you utilized the *Guidelines for implementation of Article 6 of the WHO FCTC* ([https://www.who.int/fctc/treaty_instruments/adopted](https://www.who.int/fctc/treaty_instruments/adopted)) when developing or implementing policies in this area.  
You may wish to provide more information regarding the use of *Guidelines for implementation of Article 6 of the WHO FCTC* in your jurisdiction in the space under C216.  
Please describe here if you have taken any steps to implement the recommendations of the guidelines including, but not limited to the following measures:  
- implementing specific or mixed excise systems with a minimum specific tax floor;  
- monitoring, increasing or adjusting tax rates on a regular basis;  
- taxing all tobacco products in a comparable way, in particular where the risk of substitution exists;  
- implementing measures and systems of storage and production warehouses to facilitate excise controls on tobacco products;  
- imposing anti-forestalling measures;  
- applying fiscal markings to increase compliance with tax measures;  
- designating and granting appropriate powers to tax enforcement authorities; and  
- considering dedication of revenue – from the tobacco taxation income – to tobacco-control programmes, in accordance with national law.  
Alternatively, if you wish to provide more structured information on these and similar matters, please complete the *additional questions* on the use of guidelines. |
| C217 and C218 | Please provide any additional information pertaining to your affirmative answers to questions C211–C213 or to issues not covered in this subsection, in relation to requirements of Article 6.  

Please state, as appropriate, if your ‘Yes’ answers to questions C212 and C213 refer to a ‘prohibition’ or a ‘restriction’. You may provide further details on these measures here.  

Please upload any document(s) or other supporting information under C218; or you can give the Internet address of the document, if it is available online. Such documents may include, inter alia, the text of any legislation, regulation or policy regarding taxation of tobacco products; the report of any research or study on the health impact of tobacco taxation policies. |
|---|---|
| C22 | **Protection from exposure to tobacco smoke**  

(*This subsection refers to Article 8 and to the Guidelines on the protection from exposure to tobacco smoke as adopted by the Conference of the Parties at its second session.*) |
| C221 | Please tick ‘Yes’ if you have adopted and implemented legislative, executive, administrative or other measures or implemented programmes banning tobacco smoking in indoor workplaces, indoor public places and, as appropriate, other public places. |
| C222 | Parties are asked to specify the type/nature of the measure(s) (legislative, executive, administrative or other measures) banning tobacco smoking in indoor workplaces, public transport, indoor public places and, as appropriate, other public places. 

For example, if this measure is provided through national legislation, please tick ‘Yes’ for ‘national law’. If you do not have national legislation on the matter, but subnational law(s) exist, please tick that answer. In this question, a ‘subnational jurisdiction’ may be any jurisdictional area below the national level, which has the power to enact and implement law. |
| C223 | Please provide details concerning the type/nature and content of the measures providing for the ban. Parties with subnational jurisdictions that have the authority to regulate tobacco use in public places should provide information on the content and coverage of such legislation in this space. |
| C224 and C225 | This question refers to the enforcement of policies under Article 8 of the Convention (*Protection from exposure to tobacco smoke*). Please tick ‘Yes’ if the measures reported in question C223 provide for a mechanism/infrastructure for the enforcement of measures banning tobacco smoking. 

Please provide details of the enforcement mechanism/infrastructure in the space under C225. Please take into account paragraphs 31 to 45 of the implementation guidelines ([https://www.who.int/fctc/treaty_instruments/adopted/article_8](https://www.who.int/fctc/treaty_instruments/adopted/article_8)) and refer especially to the authority or authorities responsible for enforcement, the process for inspection and monitoring of the implementation of legislation, penalties for non-compliance and/or violations, enforcement strategies, etc. Please also report if you have implemented a complaint driven system enabling citizens to call or otherwise report to the enforcement agency violations that they encounter.¹ |

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¹Following a report of a violation, the government must follow up on the alleged violation.
<p>| C26 (a, b and c) | Please check either ‘Complete’, ‘Partial’ or ‘None’ with regard to the extent/comprehensiveness of measures banning tobacco smoking in the listed indoor workplaces, public transport, indoor public places and, as appropriate, other public places. Please note that workplaces include most public transport vehicles and public places, as well as some private places such as homes and dwellings. The types of workplace, public transport and public places included in these questions have been selected as examples. While some of the examples provided fall into more than one category, you should respond to the questions, as far as possible, using the structure provided. You may add additional places in the spaces marked ‘other’. If you choose ‘other’, please indicate the relevant environment or setting. For example, some Parties’ measures may also cover other indoor public places, such as cafes, shops, shopping centres, hotels, stadiums and sports facilities. Please provide further details on your policies applicable to various settings under C27 (a, b and c). |
| C27 (a, b and c) | Please provide details of any complete or partial bans, by setting, including the year in which a specific policy was adopted or entered into force, following the order of the settings used in question C26. |
| C28 | This question refers to progress made in implementing Article 8 in the past two years or since submission of your last report. Please also provide information about whether the guidelines were helpful in implementation of this Article. Please take into account that, in line with paragraph 24 of the Guidelines on the protection from exposure to tobacco smoke (<a href="https://www.who.int/fctc/treaty_instruments/adopted/article_8">https://www.who.int/fctc/treaty_instruments/adopted/article_8</a>), each Party should strive to provide universal protection within a period of five years after entry into force of the Convention for that Party. Please describe here any new regulation, legislation or policy adopted in your jurisdiction with respect to this requirement of the treaty. Please report measures adopted in the period defined above and state whether you have begun implementing those measures. |</p>
<table>
<thead>
<tr>
<th>C229 and C2210</th>
<th>Responses to these questions are <strong>voluntary</strong>.</th>
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<tr>
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<td>Please respond affirmatively to question C229 if you utilized the <em>Guidelines for implementation of Article 8 of the WHO FCTC</em> (<a href="https://www.who.int/fctc/treaty_instruments/adopted/article_8">https://www.who.int/fctc/treaty_instruments/adopted/article_8</a>) when developing or implementing policies in this area.</td>
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<td>You may wish to provide more information regarding the use of <em>Guidelines for implementation of Article 8 of the WHO FCTC</em> in the space under C2210.</td>
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<td></td>
<td>Please describe here if you have taken any steps to implement the recommendations of the guidelines including, but not limited to the following measures:</td>
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<td></td>
<td>• implementing awareness raising programmes in the course of developing smoke-free legislation and in the period leading up to implementation of the adopted law;</td>
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<td></td>
<td>• placing duties and responsibilities on business owners, managers or other persons in charge of affected premises in relation to implementation of the relevant legislation;</td>
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<tr>
<td></td>
<td>• specifying fines and penalties for violations, including administrative sanctions; and</td>
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<td></td>
<td>• if you have established a telephone compliant hotline or a similar system to encourage the public to report violations of the law.</td>
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<td>Alternatively, if you wish to provide more structured information on these and similar matters, please complete the <strong>additional questions</strong> on the use of guidelines.</td>
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<tr>
<th>C2211 and C2212</th>
<th>Please provide any additional information pertaining to but not covered in this subsection, in relation to the requirements of Article 8.</th>
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<tbody>
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<td></td>
<td>Please also describe, if appropriate, the monitoring and evaluation of your policies on protection from exposure to tobacco smoke.</td>
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<td></td>
<td>You can upload any document(s) and other supporting information under C2212, or you can provide the Internet address of these documents, if they are available online. For example, you should provide the text of national (or subnational, if appropriate) legislation for protection from exposure to tobacco smoke.</td>
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<tr>
<th>C23</th>
<th><strong>Regulation of the contents of tobacco products</strong></th>
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<tr>
<td></td>
<td><em>(This subsection refers to Article 9 and to the Partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC as adopted by the Conference of the Parties at its fourth and fifth sessions.)</em></td>
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| C231 to C234    | Please tick ‘Yes’ if you have adopted and implemented legislative, executive, administrative or other measures for testing and measuring and/or regulating the contents of and/or emissions from tobacco products. |
| C235 | This question refers to progress made in implementing Article 9 in the past two years or since submission of your last report. Please describe here any new regulation, legislation or policy adopted in your jurisdiction with respect to this requirement of the treaty. Please report measures adopted in the period defined above and state whether you have begun implementing those measures. |
| C236 and C237 | Responses to these questions are voluntary. Please respond affirmatively to question C236 if you utilized the *Partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC* ([https://www.who.int/fctc/treaty_instruments/adopted/article_9and10](https://www.who.int/fctc/treaty_instruments/adopted/article_9and10)) when developing or implementing policies in this area. You may wish to provide more information regarding the use of *Partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC* in the space under C237. Please describe here if you have taken any steps to implement the recommendations of the guidelines including, but not limited to the following measures:  

- prohibiting or restricting ingredients in tobacco products as listed in Section 3.1.2 of the partial guidelines;  
- conducting visits at manufacturers’ facilities to verify whether any prohibited or restricted ingredient is being used; and  
- requiring that cigarettes commercialized in your market comply with reduced ignition propensity (RIP) standards.  

Please also inform whether there is any laboratory in your jurisdiction able to perform measurements concerning the contents and emissions of tobacco products, whether it is a governmental or an independent laboratory that is not owned and controlled by the tobacco industry. Additionally, please provide details on how you monitor compliance with and enforce provisions on testing and measuring the contents and emissions of tobacco products in your jurisdiction. Alternatively, if you wish to provide more structured information on these and similar matters, please complete the additional questions on the use of guidelines. |
| C238 and C239 | Please provide any additional information pertaining to but not covered in this subsection, in relation to requirements of Article 9. For example, you can describe here whether your country has incorporated any tobacco product regulation in the national (or subnational, if appropriate) tobacco control legislation. Please provide details on whether your country has introduced any measure to regulate product ingredients and characteristics. Examples of ingredients include flavouring substances (e.g. benzaldehyde, maltol, menthol, vanillin, etc.), colouring agents (e.g. inks, pigments, etc.), ingredients used to create the impression that products have health benefits (e.g. vitamins, fruit and vegetables, amino acids, essential fatty acids, etc.) and ingredients associated with energy and vitality (e.g. caffeine, taurine, etc.) Examples of characteristics include product design features used to increase the attractiveness of tobacco product (e.g. ever-smaller circumference, etc.) and/or to affect the testing and measuring of product contents and emissions (e.g. cigarette ventilation holes, etc.). Additionally, you can describe whether your country has access to any governmental or
independent laboratory that is not owned or controlled by the tobacco industry for testing and measuring contents and/or emissions of tobacco products.

You can upload any document(s) and other supporting information on these matters under C239, or you can provide the Internet address of these documents, if they are available online. For example, you should provide the text of your legislation regulating the contents of tobacco products.

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<tr>
<th>C24</th>
<th>Regulation of tobacco product disclosures</th>
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<tr>
<td></td>
<td><em>(This subsection refers to Article 10 and to the Partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC as adopted by the Conference of the Parties at its fourth and fifth sessions.)</em></td>
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</table>

**C241**

In this subsection, please state whether your country requires manufacturers and/or importers of tobacco to disclose information about the contents of or emissions from tobacco products. Please check ‘Yes’ or ‘No’, as appropriate.

According to the *Partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC* ([https://www.who.int/fctc/treaty_instruments/adopted/article_9and10](https://www.who.int/fctc/treaty_instruments/adopted/article_9and10)), ‘the primary objective of requiring disclosure to governmental authorities is to obtain from manufacturers and importers relevant information on the contents and emissions of tobacco products, as well as on their toxicity and addictiveness. This information is required for the development and implementation of relevant policies, activities and regulations, such as further analysis of tobacco product contents and emissions, monitoring of market trends, and assessment of tobacco industry claims’.

**C242**

In this subsection please state whether your country requires public disclosure of information about the contents of or emissions from tobacco products. Please check ‘Yes’ or ‘No’, as appropriate.

**C243**

This question refers to progress made in implementing Article 10 in the past two years or since submission of your last report.

Please describe here any new regulation, legislation or policy adopted in your jurisdiction with respect to this requirement of the treaty. Please report measures adopted in the period defined above and state whether you have begun implementing those measures. In the absence of any new legislation, regulation or policy adopted in this period, please state whether you have strengthened enforcement of previously adopted policies.
| C244 and C245 | Responses to these questions are **voluntary**.  

Please respond affirmatively to question C244 if you utilized the *Partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC* ([https://www.who.int/fctc/treaty_instruments/adopted/article_9and10](https://www.who.int/fctc/treaty_instruments/adopted/article_9and10)) when developing policies in the area of tobacco product disclosures.  

You may wish to provide more information regarding the use of *Partial guidelines for implementation of Articles 9 and 10 of the WHO FCTC* in the space under C245.  

Please describe here if you have taken any steps to implement the recommendations of the guidelines including, but not limited to the following measures:  

- requiring that manufacturers and importers of tobacco products disclose to governmental authorities and to the public information on the ingredients used in the manufacture of their products; and  
- requiring the disclosure by manufacturers or importers of tobacco products information listed in Section 3.4 of the partial guidelines.  

Alternatively, if you wish to provide more structured information on these and similar matters, please complete the **additional questions** on the use of guidelines. |
|---|---|
| C246 and C247 | Please provide any additional information pertaining to but not covered in this subsection, in relation to the requirements of Article 10. For example, you can describe here whether your country has incorporated tobacco product disclosures in national (or subnational, if appropriate) tobacco control legislation. Additionally, you can provide information on any measures your country has adopted to regulate public disclosure of information about the toxic constituents of tobacco products and their emissions, with the aim to raise public awareness and advance tobacco control policy.  

You can upload any document(s) and other supporting information in this matter under C247, or you can provide the Internet address of these documents, if they are available online. For example, you should provide the text of your legislation regulating tobacco product disclosures. |
### Packaging and labelling of tobacco products

(This subsection refers to Article 11 and to the Guidelines for implementation of Article 11 as adopted by the Conference of the Parties at its third session.)

Paragraph 37 of the Guidelines for implementation of Article 11 of the WHO FCTC (Packaging and labelling of tobacco products) ([https://www.who.int/fctc/treaty_instruments/adopted/article_11](https://www.who.int/fctc/treaty_instruments/adopted/article_11)) states that measures relating to packaging and labelling of tobacco products should apply to ‘each type and shape of packaging such as tins, boxes, pouches, flip-tops, slide and shell packages, cartons, transparent wrappers, clear packaging or packages containing one product unit’.

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<table>
<thead>
<tr>
<th>C25</th>
<th><strong>Packaging and labelling of tobacco products</strong></th>
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<tr>
<td></td>
<td>(This subsection refers to Article 11 and to the Guidelines for implementation of Article 11 as adopted by the Conference of the Parties at its third session.)</td>
</tr>
</tbody>
</table>
|       | Paragraph 37 of the Guidelines for implementation of Article 11 of the WHO FCTC (Packaging and labelling of tobacco products) ([https://www.who.int/fctc/treaty_instruments/adopted/article_11](https://www.who.int/fctc/treaty_instruments/adopted/article_11)) states that measures relating to packaging and labelling of tobacco products should apply to ‘each type and shape of packaging such as tins, boxes, pouches, flip-tops, slide and shell packages, cartons, transparent wrappers, clear packaging or packages containing one product unit’.

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| C251  | Please tick ‘Yes’ if you have adopted and implemented legislative, executive, administrative or other measures to restrict or prohibit the use of logos, colours, brand images or promotional information on packaging other than brand names and product names displayed in a standard colour and font style (plain packaging). Please refer to paragraph 46 of the Guidelines for implementation of Article 11 of the WHO FCTC ([https://www.who.int/fctc/treaty_instruments/adopted/article_11](https://www.who.int/fctc/treaty_instruments/adopted/article_11)).
|       | Please provide details of these measures in the space under C2518.

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| C252  | Please tick ‘Yes’ if you have adopted and implemented legislative, executive, administrative or other measures requiring that packaging and labelling not promote a product by any means that are false, misleading, deceptive or likely to create an erroneous impression about its characteristics, health effects, hazards or emissions. These means include, but are not limited to:
|       | - any term, descriptor, trademark, figurative or any other sign that directly or indirectly creates the false impression that a particular tobacco product is less harmful than other products, including, for example, terms such as ‘low tar’, ‘light’, ‘ultra-light’, ‘mild’, ‘extra’, ‘ultra’ and similar terms in any language;
|       | - the display of figures for emission yields (such as tar, nicotine and carbon monoxide), including when used as part of a brand name or trademark; and
|       | - industry package design techniques that may suggest that some products are less harmful than others, including, for example, use of logos, colours, brand images or promotional information.
|       | Please refer to paragraphs 43–46 of the Guidelines for implementation of Article 11 ([https://www.who.int/fctc/treaty_instruments/adopted/article_11](https://www.who.int/fctc/treaty_instruments/adopted/article_11)).
|       | Please provide details of these measures in the space under C2518.

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| C253  | Please tick ‘Yes’ if the health warnings are required to describe, in words or images, the health effects, side effects or other consequences related to the use and consumption of the product.
|       | You can provide the text of the warning(s) in the space under C2518.
**C255** Please tick ‘Yes’ if the health warnings are rotated. According to paragraph 19 of the *Guidelines for implementation of Article 11* ([https://www.who.int/fctc/treaty_instruments/adopted/article_11](https://www.who.int/fctc/treaty_instruments/adopted/article_11)) “rotation can be implemented by having multiple health warnings and messages appearing concurrently or by setting a date after which the health warning and message content will change”.

**C256** This question refers to the type and visibility of the text, not the substance of the warning.

Please refer to paragraph 8 of the *Guidelines for implementation of Article 11* ([https://www.who.int/fctc/treaty_instruments/adopted/article_11](https://www.who.int/fctc/treaty_instruments/adopted/article_11)) for further guidance on measures aimed at ensuring maximum visibility for the warning(s).

**C257** Please only answer ‘Yes’ to this question if your country adopted legislation which mandates, as a minimum, a style, size and colour of font to render the warning clear, visible and legible.

Please refer to paragraphs 12–13 and 18 of the *Guidelines for implementation of Article 11* for further guidance, including information on the style, size and colour of warnings.

**C258 and C259** For these questions, the ‘principal display area’ can be defined as the front and the back of the cigarette package. Writing or images on the sides, top or bottom of a pack would not be a part of the principal display area. Also, the figures refer to the warnings covering the respective percentage of each of these sides.

For example, if you require that health warnings cover 30% of each principal display area, you tick ‘Yes’ in question C258, but ‘No’ in question C259. If your health warnings cover 60% of each principal display area of the cigarette pack, you tick ‘Yes’ in both questions.

Please refer to paragraphs 12–13 of the *Guidelines for implementation of Article 11* ([https://www.who.int/fctc/treaty_instruments/adopted/article_11](https://www.who.int/fctc/treaty_instruments/adopted/article_11)) for further guidance concerning the size of warnings.

Please provide details of these measures in the space under C2518.

**C2510** Please tick ‘Yes’ if you have adopted and implemented legislative, executive, administrative or other measures requiring that each unit packet and package of tobacco products and any outside packaging and labelling of such products contains health warnings in the form of a photographic or other graphic image (other than text).

Please provide a link to such images in the space under C2518.¹

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¹Following a decision by the Conference of the Parties to the WHO FCTC at its third session WHO’s Tobacco Free Initiative developed a web site designed to facilitate the sharing of such pictorial health warnings and messages among countries and Parties. The web site is updated on a regular basis as countries and Parties provide these images. Parties which mandate warnings containing images should contact the Convention Secretariat for the inclusion of their warnings in this database.
<table>
<thead>
<tr>
<th>C2511 and C2512</th>
<th>Only Parties that indicated that they require health warnings in form of or including, pictograms (answered ‘Yes’ to question C2510) are required to answer these questions.</th>
</tr>
</thead>
</table>
| C2513            | Please tick ‘Yes’ if you have adopted and implemented legislative, executive, administrative or other measures requiring that each unit packet and package of tobacco products and any outside packaging and labelling of such products contain information on the relevant constituents and emissions of tobacco products.  

Please refer to paragraphs 32–35 of the *Guidelines for implementation of Article 11* ([https://www.who.int/fctc/treaty_instruments/adopted/article_11](https://www.who.int/fctc/treaty_instruments/adopted/article_11)) for further guidance, including with respect to the form and location of such information.  

Please provide details of these measures in the space under C2518. |
| C2514            | This question refers to whether the government requires that the health warnings be written in the principal language or languages of the country. If the law does not refer to the language and the tobacco industry is free to select the language, please tick ‘No’. This question applies to all Parties that require a specific warning or a set of specific warnings.  

Please provide details of these measures in the space under C2518. |
| C2515            | This question refers to progress made in implementing Article 11 in the past two years or since submission of your last report.  

Please note that paragraph 1 of Article 11 requires Parties to implement particular policies **within a period of three years** after entry into force of the Convention for that Party.  

Please describe here any new regulation, legislation or policy adopted in your jurisdiction with respect to packaging and labelling. You may wish to highlight important developments in this area, such as the introduction of pictorial warnings if your earlier legislation required only textual warnings. |
| C2516 and C2517  | Responses to these questions are **voluntary**.  

Please respond affirmatively to question C244 if you utilized the *Guidelines for implementation of Article 11 of the WHO FCTC* ([https://www.who.int/fctc/treaty_instruments/adopted/article_11](https://www.who.int/fctc/treaty_instruments/adopted/article_11)) when developing policies in this area.  

You may wish to provide more information regarding the use of the *Guidelines for implementation of Article 11 of the WHO FCTC* in the space under C2517.  

Please describe here:  

- the percentage of the principal display areas required to be occupied by health warnings;  
- whether your legislation requires health warnings to be positioned on both front and back of each package and on the top of the principal display areas rather than at the bottom; |
• whether the border that frames warnings is included in calculating the display area;
• how rotation of warnings is performed;
• what the content of health warning messages is;
• whether you conduct pre-market testing of health warnings;
• details concerning the enforcement of packaging and labelling measures (e.g., fines, enforcement infrastructure and strategies); and
• whether you conducted an assessment of the impact of packaging and labelling measures.

Alternatively, if you wish to provide more structured information on these and similar matters, please complete the additional questions on the use of guidelines.

C2518 and C2519
Please provide any additional information pertaining to but not covered in this subsection, in relation to requirements of Article 11.

You can upload any document(s) and other supporting information related to this subsection under C2519, or you can provide the Internet address of these documents, if they are available online. For example, you should provide the text of your legislation on packaging and labelling of tobacco products.

C26
Education, communication, training and public awareness
(This subsection refers to Article 12 and to the Guidelines for implementation of Article 12 as adopted by the Conference of the Parties at its fourth session.)

C261
Please tick ‘Yes’ if you have adopted and implemented legislative, executive, administrative or other measures or implemented educational and public awareness programmes since submission of your last report. You should also check ‘Yes’ if programmes that commenced before submission of your last report were continued in the period covered by this report.

Please provide further details of these programmes by answering questions C262–C267.

C262 to C267
For these questions, please check those answers that apply to your jurisdiction for each item related to education, communication, training and public awareness or respond ‘Yes’ or ‘No’ (to question C266).

If the answer is ‘Yes’, please provide a brief description in C2611.

C268
This question refers to progress made in implementing Article 12 (Education, communication, training and public awareness) in the past two years or since submission of your last report.

Please describe here any new programme that you have begun implementing. You may also state whether the programme is being implemented as part of your national tobacco control strategy, plan or programme.

Please note that the guidelines on implementation of Article 5.3 of the Convention (https://www.who.int/fctc/treaty_instruments/adopted/article_5_3) recommend that ‘Parties should not accept, support or endorse the tobacco industry organizing, promoting, participating in, or performing, youth, public education or any initiatives that are directly or indirectly related to tobacco control.’
C269 and C2610

Responses to these questions are **voluntary**.

Please respond affirmatively to question C269 if you utilized the *Guidelines for implementation of Article 12 of the WHO FCTC* ([https://www.who.int/fctc/treaty_instruments/adopted/article_12](https://www.who.int/fctc/treaty_instruments/adopted/article_12)) when developing policies and programmes in this area.

You may wish to provide more information regarding the use of the *Guidelines for implementation of Article 12 of the WHO FCTC* in the space under C2610.

Please describe here if you have taken any of the following steps to implement the recommendations of the guidelines:

- establishing an infrastructure to support education, communication and training and/or an action plan for such activities within your comprehensive tobacco control programme;
- maintaining any web site on education, communication and training, for example to communicate success stories;
- having implemented, in the past two years, an anti-tobacco media campaign in your country; and
- regularly monitoring and evaluating education, communication and training programmes.

Alternatively, if you wish to provide more structured information on these and similar matters, please complete the **additional questions** on the use of guidelines.

C2611 and C2612

Please provide any additional information pertaining to but not covered in this subsection, in relation to requirements of Article 12.

Please upload any document(s) and other supporting information related to this subsection under C2612, or you can provide the Internet address of these documents, if they are available online. Please also report on programmes implemented in your jurisdiction but not financed or supported by a government agency.

C27

**Tobacco advertising, promotion and sponsorship**

(*This subsection refers to Article 13 of the Convention and to the Guidelines for implementation of Article 13, as adopted by the Conference of the Parties at its third session.*)

C271

Please check ‘Yes’ in answer to this question if you have instituted a comprehensive ban on all tobacco advertising, promotion and sponsorship, in accordance with the definition provided in the Appendix to the *Guidelines for implementation of Article 13 of the WHO FCTC* ([https://www.who.int/fctc/treaty_instruments/adopted/article_13](https://www.who.int/fctc/treaty_instruments/adopted/article_13)) and the **Annex** of this document.

Depending on the answer to this question, you may proceed in one of two ways:

- **If you answered ‘Yes’ to this question**, please proceed to question C272. (Questions under C272 are intended to facilitate better understanding of the scope of your ‘comprehensive ban’.)
- If your ban is not comprehensive, please answer ‘No’ to this question. **If you answered ‘No’ to this question,** you do not have to answer question C272 and may proceed to question C273 and answer questions C273–C2711.

| C272 | **If you answered ‘Yes’ to question C271, you should answer this question. If you answered ‘No’ to question C271, please skip this question and proceed to question C273.**

This question refers to elements falling within the scope of a comprehensive ban but which could pose challenges for regulators in introducing a comprehensive ban.

Please refer to paragraphs 12–34 of the *Guidelines for implementation of Article 13* ([https://www.who.int/fctc/treaty_instruments/adopted/article_13](https://www.who.int/fctc/treaty_instruments/adopted/article_13)), which address aspects that could pose challenges for regulators in introducing a comprehensive ban.

Please provide any other relevant information pertaining to this subsection in the space under C2717. Please attach additional documentation on aspects related to tobacco advertising, promotion and sponsorship and submit it with your report.

After you have answered this question, please proceed to question C2712. |
|---|---|
| C273 to C2711 | **If you answered ‘No’ to question C271, you should answer questions C273–C2711.**

Questions C273–C2711 refer to restrictions on tobacco advertising, promotion and sponsorship.

Please provide any other relevant information pertaining to these questions in the space under C2717. |
| C2712 and C2713 | **These questions are to be answered, irrespective of your answer to question C271.**

Please provide any other relevant information pertaining to these questions in the space under C2717. |
| C2714 | Please provide a brief description of progress made in implementing Article 13 in the past two years or since submission of your last report.

Please note that paragraph 2 of Article 13 requires Parties to implement particular policies regarding tobacco advertising, promotion and sponsorship **within a period of five years** after entry into force of the Convention for that Party.

Please describe here any **new** regulation, legislation or policy adopted in your jurisdiction with respect to tobacco advertising, promotion and sponsorship or any new measure under consideration, if appropriate. |
| C2715 and C2716 | Responses to these questions are voluntary.

Please respond affirmatively to question C2715 if you utilized the *Guidelines for implementation of Article 13 of the WHO FCTC* ([https://www.who.int/fctc/treaty_instruments/adopted/article_13](https://www.who.int/fctc/treaty_instruments/adopted/article_13)) when developing policies in this area.

You may wish to provide more information regarding the use of the *Guidelines for implementation of Article 13 of the WHO FCTC* in the space under C2716.

Please describe here:

- whether you provide any exception to a comprehensive ban to actors within the tobacco trade;
- the information required to be disclosed to government authorities of expenditures by the tobacco industry on advertising, promotion and sponsorship not yet prohibited;
- details on the ban on cross-border advertising, promotion and sponsorship originating from or entering your territory, including the media covered;
- details concerning the enforcement of tobacco advertising, promotion and sponsorship provisions (e.g. sanctions, enforcement infrastructure and strategies); and
- whether your legislation foresees the involvement of civil society in monitoring and enforcement of measures under Article 13.

Alternatively, if you wish to provide more structured information on these and similar matters, please complete the additional questions on the use of guidelines.

| C2717 and C2718 | Please provide any additional information pertaining to but not covered in this subsection, in relation to requirements of Article 13.

You may also wish to describe the forms of advertising that correspond only to restriction or to which a comprehensive ban applies.

Please upload any document(s) and other supporting information under C2718, or you can provide the Internet address of these documents, if they are available online. For example, please provide the text of any legislation, regulation or policy concerning tobacco advertising, promotion and sponsorship of tobacco products.

| C28 | **Demand reduction measures concerning tobacco dependence and cessation**

(*This subsection refers to Article 14 and to the Guidelines for implementation of Article 14, as adopted by the Conference of the Parties at its fourth session.*)

| C281 | Please check ‘Yes’ if you have developed and disseminated comprehensive and integrated guidelines for demand reduction based on scientific evidence and best practices.

The *WHO handbook for guideline development* (2011) ([https://apps.who.int/iris/bitstream/handle/10665/75146/9789241548441_eng.pdf](https://apps.who.int/iris/bitstream/handle/10665/75146/9789241548441_eng.pdf)) defines a WHO guideline as ‘any document containing recommendations about health interventions, whether they are clinical, public health or policy’. It adds that the name of
the document is not relevant. This definition can be applied to any guideline, not only those developed under the auspices of WHO.

Other definitions of the term ‘guideline’ can be found, for example, at https://www.ahrq.gov/gam/summaries/inclusion-criteria/index.html or https://www.clinicalguidelines.gov.au/portal).

If you answered ‘Yes’ to this question, please provide details of such guidelines in the space under C2817 and upload a copy of the document under C2818.

| C282 to C2813 | Please check ‘Yes’ or ‘No’ with regard to each item related to policies concerning tobacco dependence and cessation. If the answer is ‘Yes’, please give details in the space under C2817. Only Parties that answered ‘Yes’ to question C285 indicating that they have included programmes on the diagnosis and treatment of tobacco dependence in their health-care system are required to answer questions C286–C288. Only Parties that answered ‘Yes’ to question C2810 indicating that they have implemented programmes facilitating accessibility and/or affordability of pharmaceutical products for the treatment of tobacco dependence are required to answer questions C2811–C2813. If you answered ‘Yes’ to question C2810, you should indicate in the space under C2811 where and how such products can be legally purchased in your country. You can indicate, for example, if such products are available over the counter or prescription only. You can also refer to the type/nature of retail units where such products can be purchased. |
| C2814 | Please provide a brief description of progress made in implementing Article 14 in the past two years or since submission of your last report. Please describe here any new regulation, legislation, policy or programme adopted in your jurisdiction with respect to tobacco dependence and cessation. Please describe any new measure that is under consideration, if appropriate. |
Responses to these questions are voluntary.

Please respond affirmatively to question C2815 if you utilized the *Guidelines for implementation of Article 14 of the WHO FCTC* ([https://www.who.int/fctc/treaty_instruments/adopted/article_14](https://www.who.int/fctc/treaty_instruments/adopted/article_14)) when developing policies and programmes in this area.

You may wish to provide more information regarding the use of the *Guidelines for implementation of Article 14 of the WHO FCTC* in the space under C2816.

Please describe here whether you have taken the following steps in accordance with the recommendations of the guidelines:

- conducted a national situation analysis on tobacco cessation and dependence treatment;
- maintain an up-to-date, easily accessible information system on available tobacco cessation services;
- developed and implemented a national cessation strategy;
- require that recording of the tobacco use status is mandatory in medical notes;
- integrated brief advice in the structures of your health-care system listed in question C286;
- used any innovative approaches to promote tobacco cessation (e.g. cell phone text messaging, Internet-based behavioural support, use of electronic media); and
- monitoring and evaluating tobacco cessation and dependence treatment strategies and programmes.

Alternatively, if you wish to provide more structured information on these and similar matters, please complete the additional questions on the use of guidelines.

Please provide any additional information pertaining to but not covered in this subsection, in relation to requirements of Article 14.

Please upload any document(s) and other supporting information related to this subsection under C2818, or you can provide the Internet address of these documents, if they are available online. Please provide the text of your national guidelines on tobacco dependence and cessation, if appropriate.
| **C3** | **MEASURES RELATING TO THE REDUCTION OF THE SUPPLY OF TOBACCO**  
(This subsection refers to Articles 15–17.) |
|---|---|
| **C31** | **Illicit trade in tobacco products**  
(This subsection refers to Article 15.) |
| **C311 to C3113** | Please check ‘Yes’ if you have developed and implemented measures addressing illicit trade in tobacco products.  
In the case of an affirmative answer, further details should be given in the space provided under C3115. |
| **C3114** | Please give a brief description of progress made in implementing Article 15 (*Illicit trade in tobacco products*) in the past two years or since submission of your last report, taking into account the answers to questions B61–B65.  
Please describe here any new regulation, legislation, policy or programme adopted in your jurisdiction with respect to combating illicit trade in tobacco products. Please describe any new measure that is under consideration, if appropriate.  
There are examples of both binding and non-binding agreements between tobacco companies and government agencies on the matter of combatting illicit trade in tobacco products. Please note that the guidelines for implementation of Article 5.3 of the Convention ([https://www.who.int/fctc/treaty_instruments/adopted/article_5_3](https://www.who.int/fctc/treaty_instruments/adopted/article_5_3)) recommend that Parties “reject partnerships and non-binding or non-enforceable agreements with the tobacco industry” (recommendation (3)). Parties are kindly requested to report on such agreements here. |
| **C3115 and C3116** | Please provide any additional information pertaining to but not covered in this subsection, in relation to requirements of Article 15.  
Please upload any document(s) and other supporting information related to this subsection under C3116, or you can provide the Internet address of these documents, if they are available online. For example, please provide the text of your regulation, legislation or policy on illicit trade in tobacco products, if appropriate. |
| **C32** | **Sales to and by minors**  
(This subsection refers to Article 16.) |
| **C321** | Please answer ‘Yes’ to this question if you have adopted and implemented measures prohibiting the sale of tobacco products to minors. In the case of an affirmative answer, please specify the legal age by inserting a number in the data entry field under C321a. |
| C322 to C3211 | Please check ‘Yes’ to these questions if you have developed and implemented measures to prohibit sales of tobacco products to minors.  

In the case of an affirmative answer, further details should be given in the space under C3213.  

Paragraph 3 of Article 16 (*Sales to and by minors*) refers to ‘small packets’ of cigarettes, which increase the affordability of such products to minors. So-called ‘kiddie packs’ usually contain fewer than 20 or 19 cigarettes (depending on the jurisdiction) and are cheaper than ‘regular’ packs. If you prohibit the sale of such packs, please answer ‘Yes’ to question C329 and provide further details under C3213. |
|---|---|
| C3212 | Please provide a brief description of progress made in implementing Article 16 in the past two years or since submission of your last report.  

Please describe here any new legislation, regulation or policy adopted in your jurisdiction with respect to sales of tobacco products to and by minors. Please describe any new measure that is under consideration, if appropriate. |
| C3213 and C3214 | Please provide any additional information pertaining to but not covered in this subsection, in relation to requirements of Article 16.  

Please upload any document(s) and other supporting information related to this subsection under C3214, or you can provide the Internet address of these documents, if they are available online. For example, please provide the text of your regulation, legislation or policy on sales to and by minors, if appropriate, including the specification of the minimum legal age for sale to and/or purchase of tobacco products. |
| C33 | **Provision of support for economically viable alternative activities**  

(*This subsection refers to Article 17 of the Convention and to the Policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC), as adopted by the Conference of the Parties at its sixth session.*)  

Please answer ‘Yes’ to this question if you have adopted and implemented measures or programmes promoting economically viable and sustainable alternatives for tobacco growers, tobacco workers or individual sellers, as appropriate.  

If there is no tobacco growing or tobacco production in your jurisdiction, please tick ‘Not applicable’ in these questions.  

If you answered ‘Yes’ to this question, please provide details of the policies in the space under C335. |
| C331 | Please provide a brief description of progress made in implementing Article 17 (*Provision of support for economically viable alternative activities*) in the past two years or since submission of your last report, if applicable.  

Please describe here any new measure adopted in your jurisdiction and any measure that is under consideration, if appropriate. |
### C333 and C334

Responses to these questions are **voluntary**.

Please respond affirmatively to question C333 if you utilized the *Policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)* ([http://www.who.int/fctc/treaty_instruments/Recommendations_Articles_17_18_English.pdf](http://www.who.int/fctc/treaty_instruments/Recommendations_Articles_17_18_English.pdf)) when developing policies and programmes in this area.

You may wish to provide more information regarding the use of the *Policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)* in the space under C334.

Please describe here whether you have taken the following steps, *inter alia*, in accordance with the recommendations of the guidelines:

- developed diversification strategies that include both agricultural and non-agricultural opportunities for tobacco growers;
- promoted research on all elements linked with tobacco growing, including profitability, but also the health, environmental and socioeconomic costs;
- developed educational and training programmes for workers and growers;
- identified and regulated tobacco industry strategies that promote tobacco farming and the manufacture of tobacco products;
- mainstreamed alternative crops/livelihood options into government rural development programmes;
- set up information and support centres for alternative livelihoods; and
- ensured social, health and environmental protection in tobacco-growing regions, as well as other policies and programmes, as appropriate.

Alternatively, if you wish to provide more structured information on these and similar matters, please complete the **additional questions** on the use of these policy options and recommendations.

### C335 and C336

Please provide any additional information pertaining to but not covered in this subsection, in relation to requirements of Article 17.

Please upload any document(s) and other supporting information related to this subsection under C336, or you can provide the Internet address of these documents, if they are available online.
<table>
<thead>
<tr>
<th>C4</th>
<th>OTHER MEASURES AND POLICIES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>C41.</strong> Protection of the environment and the health of persons.</td>
<td></td>
</tr>
<tr>
<td>(This subsection refers to Article 18 of the Convention and to the Policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC), as adopted by the Conference of the Parties at its sixth session.)</td>
<td></td>
</tr>
</tbody>
</table>
| C411 and C412 | Please check ‘Yes’ if you have developed and implemented measures concerning protection of the environment and the health of persons.  
In the case of an affirmative answer, further details should be given in the space under C416.  
If this item is not applicable in your jurisdiction, please tick ‘Not applicable’. |
| C413 | Please give a brief description of progress made in implementing Article 18 (Protection of the environment and the health of persons) in the past two years or since submission of your last report.  
Please describe here any new measure adopted in your jurisdiction and any measure that is under consideration, if appropriate. |
| C414 and C415 | Responses to these questions are voluntary.  
Please respond affirmatively to question C414 if you utilized the Policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC) ([http://www.who.int/fctc/treaty_instruments/Recommendations_Articles_17_18_English.pdf](http://www.who.int/fctc/treaty_instruments/Recommendations_Articles_17_18_English.pdf)) when developing policies and programmes in this area.  
You may wish to provide more information regarding the use of the Policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC) in the space under C415.  
See further instructions under C333 and C334. |
| C416 and C417 | Please provide any additional information pertaining to but not covered in this subsection, in relation to requirements of Article 18.  
Please upload any document(s) and other supporting information related to this subsection under C417, or you can provide the Internet address of these documents, if they are available online. |
| C42 | Liability |
| (This subsection refers to Article 19.) |
| C421 to C425 | Please check the ‘Yes’ answer to this question if, for the purpose of tobacco control, you have taken legislative action or adopted measures to promote laws to deal with criminal and civil liability, including compensation. |
For further examples of taking legislative actions to deal with criminal and civil liability please review paragraphs 19-20 of the report by the Convention Secretariat on “Implementation of Article 19 of the WHO FCTC: “Liability” (http://apps.who.int/gb/fctc/PDF/cop5/FCTC_COP5_11-en.pdf), submitted for consideration by the fifth session of the Conference of the Parties.

In the case of an affirmative answer, further details should be given in the space under C429.

<table>
<thead>
<tr>
<th>C426 and C427</th>
<th>Please check either ‘Yes’ or ‘No’ in answer to these questions.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In the case of an affirmative answer, further details should be given in the space under C429.</td>
</tr>
</tbody>
</table>

| C428 | Please provide a brief description of progress made in implementing Article 19 (Liability) in the past two years or since submission of your last report. |
|      | Please describe here any new action that you have taken in relation to the provisions of this Article and any measure that is under consideration, if appropriate. |

| C429 and C4210 | Please provide any additional information pertaining to but not covered in this subsection, in relation to requirements of Article 19. |
|               | For example, please report any assistance you afforded to any other Party in legal proceedings relating to civil and criminal liability consistent with the Convention, if appropriate. |
|               | Please upload any document(s) and other supporting information related to this subsection under C4210, or you can provide the Internet address of these documents, if they are available online. |

| C43 | **Research, surveillance and exchange of information**  
*(This subsection refers to Article 20.)* |
| C431 to C432 | Please check all that apply to your jurisdiction or respond ‘Yes’, as appropriate, to these questions if you have implemented measures related to research, surveillance and exchange of information. |
|      | In the case of affirmative answers, further details should be given in the space under C439. |
|      | If any programmes of research, surveillance and exchange of information were coordinated at subnational, national, regional or international level, check ‘Yes’ in answer to the question and give details in the space under C439. |
| C433 | Please check ‘Yes’ in answer to these questions if you have established a national system for epidemiological surveillance of the listed matters.  
WHO recommends that specific surveys on the listed matters are conducted regularly so that their repetition contributes to the creation of tobacco-related national surveillance systems as envisaged in paragraph 3(a) of Article 20 of the Convention (Research, surveillance and exchange of information). Please pay attention to the fact that apart from the repeatability and frequency of the survey there are other criteria that characterize a good national surveillance system, including: comparability; validity and reliability; mechanisms to translate findings into action; and sustainability (of financial and human resources). |
| C434 | If you answered ‘Yes’ to question C433, you should answer this question. Please refer to all surveys, including the year of the survey that you have undertaken in the past or in the past 10 years as a minimum.  
Please indicate whether the survey is nationally representative, or whether the sample is representative only subnationally (e.g. a subnational jurisdiction or some other subnational area such as urban or rural area.)  
For the year of survey please give the year when data were collected, as opposed to the year of publication of the survey results/report. Please submit the report(s) of the survey(s) as annexes to your implementation report or you can provide the Internet address of these documents, if they are available online. |
| C435 | Based on experience of established international data collection systems, repetition of the same survey is recommended as often as practical, but at least every three to five years.¹  
If you answered ‘Yes’ to any of the questions under C433, please indicate here if your country has any plans to repeat any of the surveys or to undertake a new tobacco survey within three to five years of your last survey. Please provide details of such plans. |
| C438 | Please provide a brief description of progress made in implementing Article 20 in the past two years or since submission of your last report.  
Please describe here any new programme developed and implemented in your jurisdiction, providing details, if appropriate, on the areas of research concerned, the implementing agencies, sources of funding, outputs and possible impact on tobacco control policy. If these programmes were implemented as part of an international collaboration, please give the details here. |

| C439 and C4310 | Please provide any additional information pertaining to but not covered in this subsection, in relation to requirements of Article 20.

Please indicate whether information on the implementation of the WHO FCTC is included in the Voluntary National Review (VNR) of your country on the corresponding target (target 3.a) of the Sustainable Development Goals (SDGs).

Please indicate whether any of the research and surveillance programmes you reported were implemented only at subnational level. Please also indicate, if applicable, any regional and/or global tobacco or health surveillance programmes in which your country took part.

Please upload any document(s) and other supporting information related to this subsection under C4310, or you can provide the Internet address of these documents, if they are available online. |
**SECTION D: International cooperation and assistance**

(This section refers to Article 22 (Cooperation in the scientific, technical, and legal fields and provision of related expertise) and Article 26 (Financial resources).)

<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>D1 to D6</td>
<td>These questions refer to assistance provided or received for development and strengthening of multisectoral, comprehensive tobacco control programmes (or their components) in developing country Parties or Parties with economies in transition. Please state whether you either provided or received assistance, pursuant to Article 21.1(c). If you answered ‘Yes’ to any of these questions, please provide the additional details listed below.</td>
</tr>
<tr>
<td>D7</td>
<td>Please provide the name of the Party or Parties from or to which assistance was received or provided.</td>
</tr>
<tr>
<td>D8</td>
<td>Please provide further information about any assistance provided or received, e.g. full details of the nature and level of assistance. This may also include support received from nongovernmental organizations. Please provide further information about the support, e.g. name of the nongovernmental organization and details of support received.</td>
</tr>
<tr>
<td>D9</td>
<td>If you answered ‘No’ to questions D1–D6 with regard to either the provision or the receipt of assistance, but financial or technical assistance is under consideration, please provide the details here. This may include assistance that you have requested but not received or assistance that you have considered providing but not yet provided. This information will assist the Convention Secretariat in matching available skills and resources with identified needs.</td>
</tr>
<tr>
<td>D10</td>
<td>If your country is a member of any relevant regional or international intergovernmental organization or financial and development institution and you have suggested or recommended that that organization or institution provide financial assistance to a developing country Party or a Party with an economy in transition in meeting its obligations under the Convention, please answer ‘Yes’ to this question.</td>
</tr>
<tr>
<td>D11</td>
<td>If you answered ‘Yes’ to question D10, please provide details in this space. In order to promote international cooperation in tobacco control, it is recommended that you review the list of relevant regional and international intergovernmental organizations, including observers to the Conference of the Parties (<a href="http://www.who.int/fctc/cop/observers_cop">http://www.who.int/fctc/cop/observers_cop</a>), of which your country is a member and the objectives of which are relevant to tobacco control. Another source for reviewing your country’s possible contribution through relevant organizations to progress in international tobacco control is the database on international resources for implementation of the Convention, developed at the request of the Conference of the Parties (<a href="https://extranet.who.int/fctcresources).1">https://extranet.who.int/fctcresources).1</a> Furthermore, Parties are required to implement the requirements of Article 26.4, with</td>
</tr>
</tbody>
</table>

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1The database is a tool for Parties to the WHO FCTC to assist in implementation of the Convention. Access will be provided upon request to the tobacco control or WHO FCTC focal point or other relevant government authority. To request access please contact the Secretariat at fctcresources@who.int
SECTION E: Priorities and comments

<table>
<thead>
<tr>
<th>E1</th>
<th>Please list the priority areas for implementation of the WHO FCTC in your country.</th>
</tr>
</thead>
<tbody>
<tr>
<td>E2</td>
<td>This question refers to any gaps you may have identified between the resources available and the needs assessed. If you answered ‘Yes’ with regard to the identification of specific gaps, please provide details in the space under E3.</td>
</tr>
<tr>
<td>E3</td>
<td>If you answered ‘Yes’ to question E2, please provide details in this space.</td>
</tr>
<tr>
<td>E4</td>
<td>Please identify and report on the constraints or barriers you have encountered in implementing the Convention.</td>
</tr>
<tr>
<td>E5 and E6</td>
<td>These questions refer to tobacco products that are new on your market or their consumption is on the rise. Under E5 please indicate which of these products are available on your national tobacco market. Information should be provided for the following categories of tobacco products: ‘smokeless tobacco products’, ‘water pipe tobacco’, ‘Electronic Nicotine Delivery Systems (ENDS)’, ‘Electronic Non-Nicotine Delivery Systems (ENNDS)’ and ‘heated tobacco products (HTPs)’. Please check all those products that are available. Use the “other” option to list any other products. Under E6 please indicate whether you implemented any policy or regulation that is specific to products that you mentioned under E5.</td>
</tr>
<tr>
<td>E7</td>
<td>Please provide any other relevant information in the support of your responses to questions E5 and E6. For example, you can provide details of any research that is available on the magnitude (use) of such products in your jurisdiction or on any policies or regulations on these matters. Alternatively, if you wish to provide more structured information on these and similar matters, please complete the relevant section of the additional questions. Please note that the completion of the additional questions is voluntary.</td>
</tr>
<tr>
<td>E8</td>
<td>Please provide any additional comments or relevant information not covered elsewhere in this questionnaire.</td>
</tr>
<tr>
<td>E9</td>
<td>Please make any suggestions for future development and revision of the reporting instrument.</td>
</tr>
</tbody>
</table>
ANNEX

GLOSSARY OF TERMS USED IN THE WHO FCTC AND ITS INSTRUMENTS¹

**Attractiveness**
refers to factors such as taste, smell and other sensory attributes, ease of use, flexibility of the dosing system, cost, reputation or image, assumed risks and benefits, and other characteristics of a product designed to stimulate use. *(Guidelines for implementation of Articles 9 and 10 of the WHO FCTC)*

**Ad valorem excise tax**
means a tax levied on selected products based on value, such as retail selling price, the manufacturer’s (or ex-factory) price, or the cost insurance freight price (CIF). *(Guidelines for implementation of Article 6 of the WHO FCTC)*

**Affordability**
means price relative to per capita income. *(Guidelines for implementation of Article 6 of the WHO FCTC)*

**Behavioural support**
support, other than medications, aimed at helping people stop their tobacco use. It can include all cessation assistance that imparts knowledge about tobacco use and quitting, provides support and teaches skills and strategies for changing behaviour. *(Guidelines for implementation of Article 14 of the WHO FCTC)*

**Bootlegging**
means purchase of tax-paid tobacco products in a lower tax or price jurisdiction for resale in a higher tax or price jurisdiction. *(Guidelines for implementation of Article 6 of the WHO FCTC)*

**Brand sharing**
occurs when a brand name, emblem, trademark, logo or trade insignia or any other distinctive feature (including distinctive colour combinations) on a non-tobacco product or service is connected with a tobacco product or tobacco company in such a way that the tobacco product or company and the non-tobacco product or service are likely to be associated. *(Guidelines for implementation of Article 13 of the WHO FCTC)*

**Brand stretching**
occurs when a tobacco brand name, emblem, trademark, logo or trade insignia or any other distinctive feature (including distinctive colour combinations) is connected with a non-tobacco product or service in such a way that the tobacco product and the non-tobacco product or service are likely to be associated. *(Guidelines for implementation of Article 13 of the WHO FCTC)*

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¹The instruments of the WHO FCTC include the Protocol to Eliminate Illicit Trade in Tobacco Products and the guidelines (and policy options and recommendations) on specific articles of the WHO FCTC adopted by the Conference of the Parties. The Glossary of terms presented in this Annex was last updated in 2015.
Brief advice  
advice to stop using tobacco, usually taking only a few minutes, given to all tobacco users, usually during the course of a routine consultation or interaction. *(Guidelines for implementation of Article 14 of the WHO FCTC)*

Brokering  
means acting as an agent for others, as in negotiating contracts, purchases, or sales in return for a fee or commission. *(Protocol on Illicit Trade, Article 1)*

Cigarette  
means a roll of cut tobacco for smoking, enclosed in cigarette paper. This excludes specific regional products such as bidis, ang hoon, or other similar products which can be wrapped in paper or leaves. For the purpose of Article 8 [of the Protocol], “cigarette” also includes fine cut “roll your own” tobacco for the purposes of making a cigarette. *(Protocol on Illicit Trade, Article 1)*

Comprehensive ban on tobacco advertising, promotion and sponsorship  
all advertising and promotion, as well as sponsorship, without exemption; direct and indirect advertising, promotion and sponsorship; acts that aim at promotion and acts that have or are likely to have a promotional effect; promotion of tobacco products and the use of tobacco; commercial communications and commercial recommendations and actions; contribution of any kind to any event, activity or individual; advertising and promotion of tobacco brand names and all corporate promotion; and traditional media (print, television and radio) and all media platforms, including Internet, mobile telephones and other new technologies as well as films. *(The guidelines on Article 13 of the Convention also provide an indicative (non-exhaustive) list of forms of tobacco advertising, promotion and sponsorship within the terms of the Convention.)* *(Guidelines for implementation of Article 13 of the WHO FCTC)*

Confiscation  
which includes forfeiture where applicable, means the permanent deprivation of property by order of a court or other competent authority. *(Protocol on Illicit Trade, Article 1)*

Consumption  
means the absolute quantity of tobacco products used in the aggregate; “Cross-border shopping” means purchase of tax paid tobacco products in a lower tax or price jurisdiction for use in a higher tax or price jurisdiction. *(Guidelines for implementation of Article 6 of the WHO FCTC)*

Contents  
means “constituents” with respect to processed tobacco, and “ingredients” with respect to tobacco products. In addition “ingredients” include tobacco, components (e.g. paper, filter), including materials used to manufacture those components, additives, processing aids, residual substances found in tobacco (following storage and processing), and substances that migrate from the packaging material into the product (contaminants are not part of the ingredients). *(Guidelines for implementation of*
Controlled delivery means the technique of allowing illicit or suspect consignments to pass out of, through or into the territory of one or more States, with the knowledge and under the supervision of their competent authorities, with a view to the investigation of an offence and the identification of persons involved in the commission of the offence. *(Protocol on Illicit Trade, Article 1)*

Cropping system describes how a producer grows crops. Cropping systems include: crop rotation, multiple cropping, mixed-cropping, strip-intercropping and related agronomic practices. *(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)*

Crop rotation is the practice of growing a series of dissimilar/different types of crops in the same area in sequential seasons. Crop rotation gives various benefits to the soil. A traditional element of crop rotation is the replenishment of nitrogen through the use of green manure in sequence with cereals and other crops. Crop rotation also mitigates the build-up of pathogens and pests that often occurs when one species is continuously cropped, and can also improve soil structure and fertility by alternating deep-rooted and shallow-rooted plants. *(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)*

Design feature means a characteristic of the design of a tobacco product that has an immediate causal link with the testing and measuring of its contents and emissions. For example, ventilation holes around cigarette filters decrease machine-measured yields of nicotine by diluting mainstream smoke. *(Guidelines for implementation of Articles 9 and 10 of the WHO FCTC)*

Diversification means the creation of a strategy portfolio that allows the reduction of dependence on a single crop and instability in the process of reproduction caused by faults in production activities, such as losses of harvest due to droughts or floods, and the variability of seasonal income throughout the year. *(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)*

Economically sustainable alternatives aim to meet human needs while preserving the environment so that these needs are met not only in the present, but also for generations to come. *(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)*

Emissions are substances that are released when the tobacco product is used as intended. For example, in the case of cigarettes and other combusted products, emissions are the substances found in the smoke. In the case of smokeless tobacco products for oral use, emissions are the substances released during the process.
of chewing or sucking, and in the case of nasal use, refer to substances released by particles during the process of snuffing. (Guidelines for implementation of Articles 9 and 10 of the WHO FCTC)

**Environmental audit**
is a process to verify the effectiveness of the environmental management programme, ensure that environmental objectives and targets are being met, and evaluate how the environmental management system should be modified and expanded in the context of future business expansion, new environmental legislation, and emerging environmental issues. (Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)

**Environmental impact assessment**
is a procedure for evaluating the likely impact of a proposed activity on the environment. (Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)

**Environmental monitoring**
means site-specific continuous assessments of changes to environmental quality. (Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)

**Environmental restoration**
is a deliberate attempt to speed recovery of damaged ecological areas. (Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)

**Excise tax or excise duty**
means a tax or duty imposed on the sale or production of selected products, such as tobacco products. (Guidelines for implementation of Article 6 of the WHO FCTC)

**Expanded tobacco**
is tobacco that has been expanded in volume by quick volatilization of a medium such as dry ice. (Guidelines for implementation of Articles 9 and 10 of the WHO FCTC)

**First processor or leaf company**
is the buyer of the raw tobacco from farmers for a first transformation of the tobacco leaves, grading the raw tobacco into different qualities. (Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)

**Food security**
means the availability of food and people's access to it. (Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)

**Forestalling**
means increases in production or stock of product in anticipation of a tax increase. (Guidelines for implementation of Article 6 of the WHO FCTC)

**Free zone**
means a part of the territory of a Party where any goods introduced are generally regarded, in so far as import duties and taxes are concerned, as being outside the Customs territory. (Protocol on Illicit Trade, Article 1)
General sales tax
(GST) means a tax imposed on a wide variety of products, typically based on retail price. *(Guidelines for implementation of Article 6 of the WHO FCTC)*

Good Agricultural Practices are practices that ensure that agricultural products are of high quality, safe and produced in an environmentally and socially responsible way. *(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)*

Green tobacco sickness is a nicotine poisoning that results from the absorption of nicotine through the skin from contact with tobacco plants during cultivation and harvesting. Nicotine is a water and lipid-soluble alkaloid that dissolves in any water on the leaves of the green tobacco plant. *(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)*

Human capital means the stock of competencies, knowledge and personality attributes embodied in the ability to perform labour so as to produce economic value; the attributes gained by a person through education and experience. *(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)*

Illicit trade means any practice or conduct prohibited by law and which relates to production, shipment, receipt, possession, distribution, sale or purchase, including any practice or conduct intended to facilitate such activity. *(WHO FCTC, Article 1)*

Impact on the environment any effect caused by a proposed activity on the environment including on human health and safety, flora, fauna, soil, air, water, climate, landscape and historical monuments or other physical structures, or the interaction among these factors; it also includes effects on cultural heritage or socioeconomic conditions resulting from alterations to those factors. *(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)*

Import tax or Import duty means a tax imposed on selected imported products, such as tobacco products. *(Guidelines for implementation of Article 6 of the WHO FCTC)*

Income elasticity of demand means the percentage change in consumption resulting from a one per cent increase in real income. *(Guidelines for implementation of Article 6 of the WHO FCTC)*

Individual capacities/capabilities a process through which individuals strengthen and maintain their capabilities to set and achieve their own development objectives over time. *(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)*
<table>
<thead>
<tr>
<th><strong>Indoor or enclosed areas (workplaces or public places)</strong></th>
<th>any space covered by a roof or enclosed by one or more walls or sides, regardless of the type of material used for the roof, wall or sides, and regardless of whether the structure is permanent or temporary. <em>(Guidelines for implementation of Article 8 of the WHO FCTC)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Insert</strong></td>
<td>for the purposes of the guidelines for implementation of Article 11, &quot;insert&quot; means any communication inside an individual package and/or carton purchased at retail by consumers, such as a miniature leaflet or brochure. <em>(Guidelines for implementation of Article 11 of the WHO FCTC)</em></td>
</tr>
<tr>
<td><strong>Intensity</strong></td>
<td>means the quantity of tobacco products used by the average tobacco user. <em>(Guidelines for implementation of Article 6 of the WHO FCTC)</em></td>
</tr>
<tr>
<td><strong>Intercropping</strong></td>
<td>is the practice of growing two or more crops in proximity. The most common goal of intercropping is to produce a greater yield on a given piece of land by making use of resources that would otherwise not be utilized by a single crop. <em>(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)</em></td>
</tr>
<tr>
<td><strong>Intersectoral approach</strong></td>
<td>works across different sectors – social, economic and institutional. <em>(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)</em></td>
</tr>
<tr>
<td><strong>Legal measures</strong></td>
<td>means any legal instrument that contains or establishes obligations, requirements or prohibitions, according to the law of the relevant jurisdiction. Examples of such instruments include, but are not limited to acts, laws, regulations and administrative or executive orders. <em>(Guidelines for implementation of Article 11 of the WHO FCTC)</em></td>
</tr>
<tr>
<td><strong>Licence</strong></td>
<td>means permission from a competent authority following submission of the requisite application or other documentation to the competent authority. <em>(Protocol on Illicit Trade, Article 1)</em></td>
</tr>
<tr>
<td><strong>Livelihoods</strong></td>
<td>refers to the process in which rural families build a diversified portfolio of activities and abilities of social support in order to survive and improve living conditions. <em>(Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)</em></td>
</tr>
<tr>
<td><strong>Manufacturing equipment</strong></td>
<td>means machinery which is designed, or adapted, to be used solely for the manufacture of tobacco products and is integral to the manufacturing process. [Parties may include reference to the Harmonized Commodity Description and Coding System of the World Customs Organization for this purpose, wherever applicable.] “Any part thereof” in the context of manufacturing equipment means any identifiable part which is unique to manufacturing equipment used in the manufacture of tobacco products. <em>(Protocol on Illicit Trade, Article 1)</em></td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
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<tr>
<td><strong>Mixed tax or hybrid tax</strong></td>
<td>means a tax that includes both a specific tax component and an ad valorem tax component. <em>(Guidelines for implementation of Article 6 of the WHO FCTC)</em></td>
</tr>
</tbody>
</table>
Quitline

a quitline is a telephone counselling service that can provide both reactive and proactive counselling. A reactive quitline provides an immediate response to a call initiated by the tobacco user, but only responds to incoming calls. A proactive quitline involves setting up a schedule of planned calls to tobacco users. (Guidelines for implementation of Article 14 of the WHO FCTC)

Real

means inflation-adjusted. (Guidelines for implementation of Article 6 of the WHO FCTC)

Reconstituted tobacco

is a paper-like sheet material comprised mainly of tobacco. (Guidelines for implementation of Articles 9 and 10 of the WHO FCTC)

Regional economic integration organization

means an organization that is composed of several sovereign states, and to which its Member States have transferred competence over a range of matters, including the authority to make decisions binding on its Member States in respect of those matters. [Where appropriate, national or domestic will refer equally to regional economic integration organizations.] (WHO FCTC, Article 1 and Protocol on Illicit Trade, Article 1)

Research-based (evidence)

the term “research-based” refers to the use of rigorous, systematic, and objective methodologies to obtain reliable and valid knowledge relevant to education, communication and training activities and programmes. Specifically, such research in this case requires: (a) development of a logical, evidence-based chain of reasoning; (b) methods appropriate to the questions posed; (c) observational or experimental designs and instruments that provide reliable and generalizable findings; (d) data and analysis adequate to support findings; (e) explication of procedures and results clearly and in detail, including specification of the population to which the findings can be generalized; (f) adherence to professional norms of peer review; (g) dissemination of findings to contribute to scientific knowledge; (h) access to data for reanalysis, replication, and the opportunity to build on findings; (i) adherence to research ethics, including an unbiased approach and equipoise; and (j) independence from the commercial and other vested interests of the tobacco industry. (Guidelines for implementation of Article 12 of the WHO FCTC)

Row cropping

involves arranging the associated crops in rows whereby one crop is alternated with one or multiple rows of another crop. (Policy options and recommendations, Articles 17 and 18 of the WHO FCTC)

Second-hand tobacco smoke

can be defined as the smoke emitted from the burning end of a cigarette or from other tobacco products usually in combination with the smoke exhaled by the smoker. (Guidelines for
Share of excise tax in retail price means the percentage of the retail price of a tobacco product, inclusive of all relevant taxes, accounted for by excise taxes on that product. (Guidelines for implementation of Article 6 of the WHO FCTC)

Share of taxes in retail price means the percentage of the retail price of a tobacco product, inclusive of all relevant taxes, accounted for by all taxes on that product. (Guidelines for implementation of Article 6 of the WHO FCTC)

Smoke free air is air that is 100% smoke free. This definition includes, but is not limited to, air in which tobacco smoke cannot be seen, smelled, sensed or measured. (Guidelines for implementation of Article 8 of the WHO FCTC)

Smoking this term should be defined to include being in possession or control of a lit tobacco product regardless of whether the smoke is being actively inhaled or exhaled. (Guidelines for implementation of Article 8 of the WHO FCTC)

Specific excise tax means a tax levied on selected products based on quantity, such as number of cigarettes or weight of tobacco. (Guidelines for implementation of Article 6 of the WHO FCTC)

Supply chain the “supply chain” covers the manufacture of tobacco products and manufacturing equipment; and import or export of tobacco products and manufacturing equipment; and may be extended, where relevant, to one or more of the following activities when so decided by a Party:

(a) retailing of tobacco products;
(b) growing of tobacco, except for traditional small-scale growers, farmers and producers;
(c) transporting commercial quantities of tobacco products or manufacturing equipment; and
(d) wholesaling, brokering, warehousing or distribution of tobacco and tobacco products or manufacturing equipment. (Protocol on Illicit Trade, Article 1)

Tiered tax means a tax applied at different rates to different variants of a given product, based on various factors such as price, product characteristics, or production characteristics. (Guidelines for implementation of Article 6 of the WHO FCTC)

Tobacco advertising and promotion means any form of commercial communication, recommendation or action with the aim, effect or likely effect of promoting a tobacco product or tobacco use either directly or indirectly. (WHO FCTC, Article 1)
| **Tobacco control** | means a range of supply, demand and harm reduction strategies that aim to improve the health of a population by eliminating or reducing their consumption of tobacco products and exposure to tobacco smoke. (*WHO FCTC, Article 1*) |
| **Tobacco crop** | cultivation of Nicotiana tabacum and Nicotiana rustica for sale either under a contractual arrangement, non-contractual arrangement/open-market or a quota system. (*Policy options and recommendations, Articles 17 and 18 of the WHO FCTC*) |
| **Tobacco dependence treatment** | the provision of behavioural support or medications, or both, to tobacco users, to help them stop their tobacco use. (*Guidelines for implementation of Article 14 of the WHO FCTC*) |
| **Tobacco industry** | means tobacco manufacturers, wholesale distributors and importers of tobacco products. (*WHO FCTC, Article 1*) |
| **Tobacco products** | means products entirely or partly made of the leaf tobacco as raw material which are manufactured to be used for smoking, sucking, chewing or snuffing. (*WHO FCTC, Article 1*) |
| **Tobacco sponsorship** | means any form of contribution to any event, activity or individual with the aim, effect or likely effect of promoting a tobacco product or tobacco use either directly or indirectly. (*WHO FCTC, Article 1*) |
| **Tobacco user** | a person who uses any tobacco product. (*Guidelines for implementation of Article 14 of the WHO FCTC*) |
| **Tobacco worker** | a person working on a tobacco farm, in tobacco processing, or tobacco or bidi manufacturing, with or without a contractual arrangement based on the labour laws of the country in which s/he is employed. (*Policy options and recommendations, Articles 17 and 18 of the WHO FCTC*) |
| **Tracking and tracing** | means systematic monitoring and re-creation by competent authorities or any other person acting on their behalf of the route or movement taken by items through the supply chain, as outlined in Article 8 [of the Protocol]. (*Protocol on Illicit Trade, Article 1*) |
| **Treatment guidelines** | systematically developed statements to help service managers, practitioners and patients to make decisions about appropriate treatment for tobacco dependence and cessation. (*Guidelines for implementation of Article 14 of the WHO FCTC*) |
| **Uniform tax** | means a tax applied at the same rate to all variants of a given product, such as all cigarette brands and brand variants. (*Guidelines for implementation of Article 6 of the WHO FCTC*) |
| **Value added tax (VAT)** | means a tax imposed on a wide variety of products (domestic
and imported), based on the value added at each stage of production or distribution. *(Guidelines for implementation of Article 6 of the WHO FCTC)*

**Weighted average price (WAP)**

means the average consumer price of a tobacco product based on the prices of individual brands and weighted by sales of each brand. *(Guidelines for implementation of Article 6 of the WHO FCTC)*

**Workplace**

any place used by people during their employment or work. This should include not only work done for compensation, but also voluntary work, if it is of the type for which compensation is normally paid. In addition, “workplaces” include not only those places at which work is performed, but also all attached or associated places commonly used by the workers in the course of their employment, including, for example, corridors, lifts, stairwells, lobbies, joint facilities, cafeterias, toilets, lounges, lunchrooms and also outbuildings such as sheds and huts. Vehicles used in the course of work are workplaces and should be specifically identified as such. Careful consideration should be given to workplaces that are also individuals’ homes or dwelling places, for example, prisons, mental health institutions or nursing homes. These places also constitute workplaces for others, who should be protected from exposure to tobacco smoke. *(Guidelines for implementation of Article 8 of the WHO FCTC)*