

2020 - CORE QUESTIONNAIRE OF THE REPORTING INSTRUMENT OF WHO FCTC

A. ORIGIN OF THE REPORT

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Guyana

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Period of reporting:

	Month	Year
Start date	January (1)	2014 (15)
End date	March (3)	2020 (21)

B1. TOBACCO CONSUMPTION

Prevalence of tobacco use

Smoking prevalence in the adult population (all)

(Please provide prevalence data for total adult population, and identify the age considered, e.g. 15 years old and over, 18-64 years; see B112)

Current smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)	Average number of the most-consumed smoking tobacco product used per day
MALE	26.6	9.5
FEMALE	3.3	9.6
TOTAL (males and females)	15.4	9.6

Daily smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)	Average number of the most-consumed smoking tobacco product used per day
MALE	18.8	9.5
FEMALE	2.2	9.6
TOTAL (males and females)	10.8	9.5

Occasional smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALE	0
FEMALE	0
TOTAL (males and females)	0

Former smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALE	22.2
FEMALE	8.3
TOTAL (males and females)	15.5

Never smokers

Prevalence (%)
(please include all smoking tobacco products in prevalence data)

MALE	0
FEMALE	0
TOTAL (males and females)	0

Please indicate the smoking tobacco products included in calculating prevalence for question B11:

cigarettes, cigars, roll your own

Please indicate the age range to which the data used to answer question B11 refer:

	From	To
Age range	18	69

Please indicate the year of the data used to answer question B11:

2016

Please indicate the source of the data used to answer question B11:

Stepwise Approach to Chronic Disease Risk Factor Surveillance (STEPS Survey) 2016

Please provide the definitions of “current smoker”, “daily smoker”, “occasional smoker”, “former smoker” and “never smoker” used in this report.

Current smoker	Do you currently smoke any tobacco products such as cigars, cigarettes or pipes?
Daily smoker	Do you currently smoke tobacco products on a daily basis?
Occasional smoker	This was not identified nor defined in the survey.
Former smoker	In the past did you ever smoke any tobacco products?
Never smoker	This was not identified nor defined in the survey.

Please provide a brief explanation of the trend in smoking prevalence in the adult population in the past two years or since submission of your last report.

Guyana would have completed the Stepwise Approach to Chronic Disease Risk Factor Surveillance (STEPS Survey) in 2016. When comparing the results from this survey with that from the 2009 Demographic Health Survey there has been a slight decrease in smoking prevalence in males. Female figures have not noticed any significant changes. Please note that the results for the STEPS Survey are still preliminary and are subjected to change.

Smoking prevalence in the adult population (by age groups)

(If data are available, please provide prevalence data by age group, and identify the age group considered, preferably by 10-year categories, e.g. 25-34, 35-44 years)

	Range - start age	Range - end age	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALES - current smokers ¹	18	44	16
MALES - current smokers ¹	45	69	25
FEMALES - current smokers ¹	18	44	9
FEMALES - current smokers ¹	45	69	3
TOTAL (males and females) - current smokers ¹	18	44	15
TOTAL (males and females) - current smokers ¹	45	69	14

Please indicate the smoking tobacco products included in calculating prevalence for question B12:

Cigarettes, cigars and pipes.

Please indicate the year of the data used to answer question B12:

2016

Please indicate the source of the data used to answer question B12:

Stepwise Approach to Chronic Disease Risk Factor Surveillance (STEPS Survey 2016)

Please provide a brief explanation of the trend in current smoking prevalence by age group in the past two years or since submission of your last report, if data are available.

Guyana would have completed the Stepwise Approach to Chronic Disease Risk Factor Surveillance (STEPS Survey) in 2016. When comparing the results from this survey with that from the 2009 Demographic Health Survey there has been a slight decrease in smoking prevalence in males. Female figures have not noticed any significant changes. Please note that the results for the STEPS Survey are still preliminary and are subjected to change.

Prevalence of smokeless tobacco use in the adult population (all)

(Please provide prevalence data for total adult population, and identify the age considered in B132, e.g. 15 years old and over, 18–64 years; see B132)

Males

Prevalence (%)
(please include all smokeless tobacco products in prevalence data)

Current users	3.00
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Females

Prevalence (%)
(please include all smokeless tobacco products in prevalence data)

Current users	2.00
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TOTAL (males and females)

Prevalence (%)
(please include all smokeless tobacco products in prevalence data)

Current users	5.00
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Please indicate the smokeless tobacco products included in calculating prevalence for question B13:

Was not specified in the report.

Please indicate the age range to which the data used to answer question B13 refer:

	From	To
Age range	15	49

Please indicate the year of the data used to answer question B13:

2009

Please indicate the source of the data used to answer question B13:

Demographic Health Survey

Please provide the definitions of “current user”, “daily user”, “occasional user”, “former user” and “never user” (of smokeless tobacco products) used in this report in the space below.

Current user	This information was not specified in the survey report
Daily user	
Occasional user	
Former user	
Never user	

Please provide a brief explanation of the trend in smokeless tobacco use in the adult population in the past two years or since submission of your last report.

To date there has only been one other survey completed since the demographic health survey, but the report is still unavailable. That survey is the Multi Indicator Cluster Survey 2014, hence there is actually no other data available to perform a comparison.

Prevalence of smokeless tobacco use in the adult population (current users) by age group (by age groups)

(If data are available, please provide prevalence data by age group, and identify the age group considered, preferably by 10-year categories, e.g. 25-34, 35-44 years)

Range - start age	Range - end age	Prevalence (%) (please include all smoking tobacco products in prevalence data)
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Please indicate the smokeless tobacco products included in the answer to question B14:

This information is not available

Please indicate the year of the data used to answer question B14:

2009

Please indicate the source of the data used to answer question B14:

Guyana Demographic Health Survey

Please provide a brief explanation of the trend in current use of smokeless tobacco by adult age groups in the past two years or since submission of your last report.

To date there has only been one other survey completed since the demographic health survey but the report is still unavailable. That survey is the Multi Indicator Cluster Survey 2014, hence there is actually no other data available to perform a comparison.

Tobacco use by ethnic group(s)

(please include all smoking or smokeless tobacco products in prevalence data)

Ethnic group(s)	MALES - Prevalence (%)	FEMALES - Prevalence (%)	TOTAL (males and females) - Prevalence (%)
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Please indicate the tobacco products included in the answer to question B15:

There is no data available for this category

Please indicate the age range to which the data used to answer question B15 refer:

From To

Please indicate the year of the data used to answer question B15:

Please indicate the source of the data used to answer question B15:

Tobacco use by young persons

(please include all smoking or smokeless tobacco products in prevalence data)

	Age range	SMOKING TOBACCO - Prevalence (%)	SMOKELESS TOBACCO - Prevalence (%)	WATER PIPE - Prevalence (%)
BOYS - Current users ⁴	13-15	16.1	4.6	
GIRLS - Current users ⁴	13-15	7.5	3.0	
TOTAL (boys and girls) - Current users ⁴	13-15	11.7	4.1	

Please indicate the tobacco products included in calculating prevalence for question B16:

Bidis, cigars, pipes, water pipes, cigarillos, little cigars .

Please indicate the year of the data used to answer question B16:

2015

Please indicate the source of the data used to answer question B16:

Global Youth Tobacco Survey

Please provide the definition of "current smoking/tobacco use" used to answer question B16 in the space below.

"current tobacco use" was defined by how many days during the past thirty days the user smoked tobacco products

Please provide a brief explanation of the trend in tobacco use by young persons in the past two years or since submission of your last report.

There has been an increase in tobacco use amongst youth when the results of the GYTS 2010 and 2015 were compared.

Please attach the relevant documentation.

Use of novel and emerging tobacco and nicotine products

Age range	Heated tobacco products (HTPs) - Prevalence (%)	Electronic Nicotine Delivery Systems (ENDS) - Prevalence (%)	Electronic Non-Nicotine Delivery Systems (ENNDS) - Prevalence (%)	Other products - Prevalence (%)

B2-B9. HEALTH, SOCIAL AND ECONOMIC INDICATORS

Exposure to tobacco smoke

Do you have any data on exposure to tobacco smoke in your population?

No ✘

Please indicate the year of the data used to answer question B21:

2009

Please indicate the source of the data used to answer question B21:

Global Tobacco Surveillance System - GYTS 2010 and GSHS 2010, Demographic Health Survey 2009

Please attach the relevant documentation.

Tobacco-related mortality

Do you have information on tobacco-related mortality in your population?

No

If available, please provide any additional information on mortality attributable to tobacco use (e.g. lung cancer, cardiovascular diseases) in your jurisdiction.

Please indicate the year of the data used to answer question B32 and 33:

Please indicate the source of the data used to answer questions B32 and B33:

Please submit a copy of the study you refer to:

Tobacco-related costs

Do you have information on the economic burden of tobacco use in your population, e.g. the overall cost of tobacco use imposed on your society?

No

Please submit a copy of the study you refer to:

Supply of tobacco and tobacco products

(with reference to Articles 6.2(b), 20.4(c), and 15.5)

Licit supply of tobacco products

	Product	Unit (e.g. pieces, tonnes)	Domestic production	Retail sales	Exports	Imports
Smoking tobacco products	Cigarettes	pieces	No			Yes
Tobacco leaves	Leaves					

Please provide information on the volumes of duty-free sales (e.g. product, unit, quantity), if available.

Please indicate the year of the data used to answer question B51 and 52:

Please indicate the source of the data used to answer questions B51 and B52:

Steps Survey 2016

Please attach the relevant documentation.

Seizures of illicit tobacco products

(with reference to Article 15.5)

Seizures of illicit tobacco

Year	Product	Unit (e.g. pieces, tonnes)	Quantity seized
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Do you have any information on the percentage of illicit tobacco products on the national tobacco market?

No ✘

Please provide any further information on illicit tobacco products.

Please indicate the source of the data used to answer questions in section B6:

Please attach the relevant documentation.

Tobacco-growing

Is there any tobacco-growing in your jurisdiction?

No ✘

Please indicate the year of the data used to answer questions in section B7:

Please indicate the source of the data used to answer questions in section B7:

Please attach the relevant documentation.

Taxation of tobacco products

(with reference to Articles 6.2(a) and 6.3)

What proportion of the retail price of the most popular price category of tobacco product consists of taxes (e.g. sum of excise, sales and import duties (if applicable) and value added tax/goods and services tax (VAT/GST))?

14

How are the excise taxes levied (what types of taxes are levied)?

Specific tax only	No
Ad valorem tax only	No
Combination of specific and ad valorem taxes	Yes
More complex structure (please explain below)	

If available, please provide details on the rates of taxation for tobacco products at all levels of Government and be as specific as possible (specify the type of tax, e.g. VAT, sales, import duties)

	Product	Type of tax	Rate or amount	Base of tax ⁵
Smoking tobacco products	Cigarette	Specific, Excise, Ad valorem, Import Duties	.14	Retail price in a pack of 20 cigarettes of the most popular brand consumed locally

Please briefly describe the trends in taxation for tobacco products in the past two years or since submission of your last report in your jurisdiction.

There is an increase in price of approximately USD 30 cents annually. In 2017, the tobacco specific tax was levied at GYD 2500 per 1000 sticks of cigarettes and cigars

Do you earmark any percentage of your taxation income for funding any national plan or strategy on tobacco control in your jurisdiction?

No ✘

Please indicate the year of the data used to answer questions B81 to B86:

2017

Please indicate the source of the data used to answer questions B81 to B86:
Tobacco Control Report for the Region of the Americas

Please attach the relevant documentation.

Price of tobacco products

(with reference to Articles 6.2(a))

Domestic

Please provide the retail prices of the three most widely sold brands of domestic tobacco products at the most widely used point of sale in your capital city.

	Name of the most widely sold brands	Number of units or amount per package	Retail price	Currency
Smoking tobacco products	Bristol	20	460	Guyana Dollars (GYD)
Smoking tobacco products	Pal Mall	20	340	GYD
Smoking tobacco products	Dunhill	20	540	GYD

Imported

Please provide the retail prices of the three most widely sold brands of imported tobacco products at the most widely used point of sale in your capital city.

	Name of the most widely sold brands	Number of units or amount per package	Retail price	Currency
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Please indicate the year of the data used to answer question B91:
2017

Please indicate the source of the data used to answer question B91:

Global Tobacco Epidemic Report 2017

Please briefly describe the trend in the prices of tobacco products in the past two years or since submission of your last report in your jurisdiction.

There have been minimal changes in the last two years.

Please attach the relevant documentation.

C1. GENERAL OBLIGATIONS

With reference to Article 5

Have you developed and implemented comprehensive multisectoral national tobacco control strategies, plans and programmes in accordance with the Convention?

Yes ✓

Have you established or reinforced and financed:

a focal point for tobacco control?	Yes
a tobacco control unit?	Yes
a national coordinating mechanism for tobacco control?	Yes

Please provide details (e.g. the nature of the national coordinating mechanism, the institution to which the focal point for tobacco control or the tobacco control unit belongs).

The coordinator, chronic non communicable disease is the focal point for tobacco control. The Tobacco Control Unit has the secretariat within the Ministry of Public Health and is comprised of members from the Guyana Revenue Authority, The Ministry of Public Security, The Guyana National Bureau of Standards, The Ministry of Education, Ministry of Youth, Sports and Culture and 2 NGOs working to promote tobacco control.

Please provide a brief description of the progress made in implementing Article 5.1 and 5.2 (*General obligations*) in the past two years or since submission of your last report.

The tobacco control focal point is the employed at the Ministry of Public Health. The strategies and policies are guided by those outlined in the Integrated Prevention and Control of Non Communicable Diseases: Strategic Plan 2013- 2020.

The focal point works in collaboration with the Health Promotions Advisors of the Pan American Health Organization and the Health Promotions officer at the Ministry of Education, and all other parties that are involved in Tobacco Control in Guyana.

The Tobacco Control Unit is working to implement and enforce the articles of The Tobacco Control Act 2017.

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

protecting public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry?

Yes ✓

ensuring that the public has access, in accordance with Article 12(c), to a wide range of information on tobacco industry activities relevant to the objectives of the Convention, such as in a public repository?

Yes ✓

If you answered "Yes" to any of the questions under C121 or C122, please provide details in the space below (specifically, please refer, if relevant, to whether your government or any of its departments 1) have raised awareness on tobacco industry tactics and the need to prevent interference by the tobacco industry with decision making; 2) have avoided entering into any partnerships or voluntary agreements with the tobacco industry; 3) have established any measures to limit interaction of public officials with the tobacco industry, including in the form of a code of conduct; 4) have not granted any incentives, privileges, benefits or preferential tax exemptions to the tobacco industry to establish or run their business; etc.).

The Integrated Prevention and Control of Non Communicable Diseases: Strategic Plan 2013- 2020 guides Tobacco Control activity and schedules.

Through the Health Communication and Health Promotion Department, there is a some Communication Strategy that addresses Tobacco Education in all target groups and utilizes a medium that is suitable for each target group and the regions in which they live. The materials and information can be uplifted from the Ministry of Public Health.

As mandated by the Health Facilities Licensing Act and the Ministerial Decree from the Ministry of Education, all Health Facilities and Education Facilities must be 100% smoke free.

There is a Tobacco Control Act 2017 which was passed in July 2017 and came into force in August 2017 which covers the Article 5.3

The Ministry of Public Health is in the process of reviewing the terms of reference for a Cessation Strategy to assist current smokers who are interested in quitting. This activity is being facilitated by the Chronic Diseases Unit, Pan American Health Organization and Guyana Chest Society (This is an NGO that works with the Ministry of Health in Tobacco Control activities through collaboration with the National Tuberculosis Clinic).

Please provide a brief description of the progress made in implementing Article 5.3 in the past two years or since submission of your last report.

The National Tobacco Control Act has been passed in the National Assembly on 27th July 2017.

Have you utilized the "Guidelines for implementation of Article 5.3 of the WHO FCTC" when developing or implementing policies in this area?

Yes ✓

Please provide details in the space below or refer to section I of the additional questionnaire.
Response to this question or to the additional questionnaire
is **voluntary**. <https://extranet.who.int/dataform/655321?token=vr7j7ysegng77i&lang=en>
(<https://extranet.who.int/dataform/655321?token=vr7j7ysegng77i&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

C2. MEASURES RELATING TO THE REDUCTION OF DEMAND FOR TOBACCO

With reference to Articles 6–14

Price and tax measures to reduce the demand for tobacco

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

tax policies and, where appropriate, price policies on tobacco products so as to contribute to the health objectives aimed at reducing tobacco consumption?

No ✘

prohibiting or restricting, as appropriate, sales to international travellers of tax- and duty-free tobacco products?

Yes ✔

prohibiting or restricting, as appropriate, imports by international travellers of tax- and duty-free tobacco products?

Yes ✔

Please provide a brief description of the 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.

Guyana has managed to pass the Tobacco Control Act which is FCTC compliant in July 2017

Have you utilized the “Guidelines for implementation of Article 6 of the WHO FCTC” when developing or implementing policies in this area?

Yes ✓

If you answered “Yes” to question C215 please provide details in the space below or refer to section H of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is **voluntary**. <https://extranet.who.int/dataform/655321?token=vr7j7ysegng77i&lang=en> (<https://extranet.who.int/dataform/655321?token=vr7j7ysegng77i&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Protection from exposure to tobacco smoke

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

banning tobacco smoking in indoor workplaces, public transport, indoor public places and, as appropriate, other public places ?

Yes ✓

What is the type/nature of the measure providing for the ban?

national law Yes

subnational law(s)

administrative and executive orders

voluntary agreements

other measures (please specify in C223 below)

Please provide a brief explanation of the type/nature and content of the measures providing for the ban.

PART V

PROTECTION FROM EXPOSURE TO SECOND-HAND SMOKE

1. (1) No person shall smoke in the following places –

- (a) in any part of any indoor workplace;
- (b) in any part of any indoor public place, including by way of illustration but in no way limited to those places listed in the First Schedule;
- (c) in or on any means of public transport, whether or not it is carrying a member of the public; or
- (d) in or on any means of transport at the time transporting a minor.

2. (1) A person responsible for any vehicle, workplace or public place where smoking is prohibited shall –

- (a) not permit any person to smoke there;
- (b) prominently post and maintain signs in the manner and form prescribed by regulations;
- (c) remove all ashtrays from any area where smoking is prohibited;
- (d) supervise observance of the smoking ban;
- (e) take reasonable steps to discourage or stop any person from smoking where it is prohibited, including denying service or transport to any person who refuses to discontinue smoking, or contacting law enforcement where necessary; and
- (f) investigate complaints and take reasonable action.

- (e) take reasonable steps to discourage or stop any person from smoking where it is prohibited, including denying service or transport to any person who refuses to discontinue smoking, or contacting law enforcement where necessary; and
- (f) investigate complaints and take reasonable action.

(2) All prohibitions and duties under this section shall apply with respect to the use of electronic delivery systems and any other product that produces an aerosol that could be confused with tobacco smoke or that simulates smoking.

(3) Any person who contravenes the provisions of this section commits an offence and is liable on summary conviction to a fine of four hundred thousand dollars and imprisonment for six months.

3. The Minister may make regulations prescribing the design, content, format, placement and any other matter related to 'no smoking' signs.

Do any of these measures provide for a mechanism/ infrastructure for enforcement?

Yes ✓

Please provide details of this system.

Smoke free laws must be implemented and enforced by all agencies responsible for public spaces.
Failure to do so is covered with penalties as stipulated in the law

Please specify the settings and extent/comprehensiveness of measures applied in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.

Indoor workplaces:

government buildings	Complete
health-care facilities	Complete
educational facilities ⁶	Complete
universities	Complete
private workplaces	Complete
other (please specify below)	Complete

Please provide a brief explanation of any "other" policies in the space below

Parks, entertainment spaces, national stadiums, places of worship

Please specify the settings and extent/comprehensiveness of measures applied in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.

Public transport:

airplanes	Complete
trains	
ferries	None
ground public transport (buses, trolleybuses, trams)	Complete
motor vehicles used as places of work (taxis, ambulances, delivery vehicles)	Complete
private vehicles	None
other (please specify below)	

Please specify the settings and extent/comprehensiveness of measures applied in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.

Indoor public places:

cultural facilities	Complete
shopping malls	Complete
pubs and bars	Complete
nightclubs	Complete
restaurants	Complete
other (please specify below)	Complete

Please provide a brief explanation of any "other" policies in the space below

Banning tobacco smoking in indoor workplaces
 Banning tobacco smoking in public transport
 Banning tobacco smoking in indoor public places

Please provide a brief summary of complete and partial measures, with specific details of the partial measures that have been implemented:

Banning tobacco smoking in indoor workplaces

As mandated by the Health Facilities Licensing Act and the Ministerial Decree from the Ministry of Education, All Health Facilities and Education Facilities must be 100% smoke free.

The Ministry of Health also has a Smoke Free Environments Program. At the moment it is a voluntary program and participants enter into it by choice. A declaration that is certified by the Minister of Health is presented to them along with Smoke Free Environments Signs. Assistance is also given in developing enforcement strategies and penalties strategies that are suitable.

When they are declared smoke free, the media is present and it is reported nationally. This serves to support the awareness program for prevention.

- 1) No person shall smoke in the following places –
- (a) in any part of any indoor workplace;
 - (b) in any part of any indoor public place, including by way of illustration but in no way limited to those places listed in the First Schedule; (Tobacco Control Act, Guyana)

Banning tobacco smoking in public transport

1) No person shall smoke in the following places –

(c) in or on any means of public transport, whether or not it is carrying a member of the public; or

(d) in or on any means of transport at the time transporting a minor.

(Tobacco Control Act, Guyana)

Banning tobacco smoking in indoor public places

1) No person shall smoke in the following places –

(b) in any part of any indoor public place, including by way of illustration but in no way limited to those places listed in the First Schedule;

(Tobacco Control Act, Guyana)

Please provide a brief description of the progress made in implementing Article 8 (*Protection from exposure to tobacco smoke*) in the past two years or since submission of your last report.

Whilst the legislation has been passed, steps are now being taken to achieve implementation.

Have you utilized the “Guidelines for implementation of Article 8 of the WHO FCTC” when developing or implementing policies in this area?

Yes ✓

If you answered “Yes” to question C229 please provide details in the space below or refer to section B of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is **voluntary**. <https://extranet.who.int/dataform/655321?token=vr7j7ysegng77i&lang=en> (<https://extranet.who.int/dataform/655321?token=vr7j7ysegng77i&lang=en>)

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If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Regulation of the contents of tobacco products

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

testing and measuring the contents of tobacco products?

Yes ✓

testing and measuring the emissions of tobacco products?

Yes ✓

regulating the contents of tobacco products?

Yes ✓

regulating the emissions of tobacco products?

Yes ✓

Please provide a brief description of the progress made in implementing Article 9 (*Regulation of the contents of tobacco products*) in the past two years or since submission of your last report.

The Tobacco Control Act provides measures for disclosure of content and emissions.

Have you utilized the “Guidelines for implementation of Articles 9 and 10 of the WHO FCTC” when developing or implementing policies in this area?

Yes ✓

If you answered “Yes” to question C236 please provide details in the space below or refer to section C of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is **voluntary**. <https://extranet.who.int/dataform/655321?token=vrv7j7ysegng77i&lang=en> (<https://extranet.who.int/dataform/655321?token=vrv7j7ysegng77i&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below (e.g., whether your country 1) has incorporated product regulation in the national tobacco control legislation; 2) has access to either governmental or independent – not owned or controlled by the tobacco industry – laboratories for testing contents and/or emissions of tobacco products; 3) has regulated ingredients, such as flavours (e.g. menthol); 4) has regulated product characteristics, such as design features (e.g., cigarette ventilation); etc.).

Please attach the relevant documentation.

Regulation of tobacco product disclosures

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

requiring manufacturers or importers of tobacco products to disclose to Government authorities information about the:

contents of tobacco products?	Yes
emissions of tobacco products?	Yes

requiring public disclosure of information about the:

contents of tobacco products?	Yes
emissions of tobacco products?	Yes

Please provide a brief description of the progress made in implementing Article 10 (*Regulation of tobacco product disclosures*) in the past two years or since submission of your last report.

The Tobacco Control Act was successful passed in July 2017

Have you utilized the “Guidelines for implementation of Articles 9 and 10 of the WHO FCTC” when developing or implementing policies in this area?

Yes ✓

If you answered “Yes” to question C244 please provide details in the space below or refer to section C of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is voluntary. <https://extranet.who.int/dataform/655321?token=vrv7j7ysegng77i&lang=en> (<https://extranet.who.int/dataform/655321?token=vrv7j7ysegng77i&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below (e.g. whether your country has incorporated tobacco product disclosures in the national tobacco control legislation; has regulated the public disclosure of toxic constituents and emissions of tobacco products, aiming to raise public awareness and advance tobacco control policy; etc.).

Please attach the relevant documentation.

Packaging and labelling of tobacco products

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

requiring that packaging, individual cigarettes or other tobacco products do not carry advertising or promotion?

Yes ✓

requiring that packaging and labelling do 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?

Yes ✓

requiring that each unit packet and package of tobacco products and any outside packaging and labelling of such products carry health warnings describing the harmful effects of tobacco use?

Yes ✓

ensuring that the health warnings are approved by the competent national authority?

Yes ✓

ensuring that the health warnings are rotated?

Yes ✓

ensuring that the health warnings are clear, visible and legible?

Yes ✓

Does your law mandate, as a minimum, a style, size and colour of font to render the warning clear, visible and legible?

Yes ✓

ensuring that the health warnings occupy no less than 30% of the principal display areas?

Yes ✓

ensuring that the health warnings occupy 50% or more of the principal display areas?

Yes ✓

ensuring that health warnings are in the form of, or include, pictures or pictograms?

Yes ✓

Does the Government own the copyright to these pictures and pictograms?

No ✗

Would you grant a non-exclusive and royalty-free licence for the use of health warnings developed in your jurisdiction with other Parties?

Yes ✓

requiring that each unit packet and package of tobacco products and any outside packaging and labelling of such products contain information on relevant:

constituents of tobacco products?	Yes
emissions of tobacco products?	Yes

requiring that the warnings and other textual information appear on each unit packet and package and on any outside packaging and labelling in the principal language or languages of the country?

Yes ✓

Please provide a brief description of the progress made in implementing Article 11 (*Packaging and labelling of tobacco products*) in the past two years or since submission of your last report.

The Standards for Packaging and Labeling of Tobacco Products was approved by the Standards Council of the Bureau of Standards. This document is currently awaiting submission to Cabinet for enactment. Upon passage in Cabinet and Parliament, the standards will be made mandatory.

Have you utilized the "Guidelines for implementation of Article 11 of the WHO FCTC" when developing or implementing policies in this area?

Yes ✓

If you answered "Yes" to question C2516 please provide details in the space below or refer to section D of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is voluntary. <https://extranet.who.int/dataform/655321?token=vr7j7ysegng77i&lang=en>
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If you have any other relevant information pertaining to or not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Education, communication, training and public awareness

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

educational and public awareness programmes? (*Please refer to programmes implemented since submission of your two-year report.*)

Yes ✓

To whom are these programmes targeted?

- adults or the general public
- children and young people
- men
- women
- pregnant women
- ethnic groups
- other (please specify)
- Other

Do you reflect the following key differences among targeted population groups in educational and public awareness programmes?

- age
- gender
- educational background
- cultural background
- socioeconomic status
- other (please specify)
- Other

Do these educational and public awareness programmes cover:

- health risks of tobacco consumption?
- health risks of exposure to tobacco smoke?
- benefits of the cessation of tobacco use and tobacco-free lifestyles?
- adverse economic consequences of tobacco production?
- adverse economic consequences of tobacco consumption?
- adverse environmental consequences of tobacco production?
- adverse environmental consequences of tobacco consumption?

awareness and participation of the following agencies and organizations in development and implementation of intersectoral programmes and strategies for tobacco control:

- public agencies?
 - nongovernmental organizations not affiliated with the tobacco industry?
 - private organizations?
 - other (please specify)?
- General Public Other

Are the elaboration, management and implementation of communication, education, training and public awareness programmes guided by research and do they undergo pre-testing, monitoring and evaluation?

Yes ✓

Are appropriate and special training or sensitization and awareness programmes on tobacco control addressed to:

- health workers?
- community workers?
- social workers?
- media professionals?
- educators?
- decision-makers?
- administrators?
- other (please specify)
- Other

Please provide a brief description of the progress made in implementing Article 12 (*Education, communication, training and public awareness*) in the past two years or since submission of your last report.

Results from the GYTS studies show that over three quarters of students saw anti smoking messages in the past 30 days, 50.4 % had been taught in class during the past year about the dangers of smoking and 47% had been taught on the effects of smoking during the past year. Also, from the GSPS three out of five schools include tobacco use prevention in the school curriculum and two out of five schools have access to teaching materials.

The Education, Promotion and Training component falls under the responsibility of the Health Promotion and Communications Unit. The methods used are outlined in an established communication strategy which identifies risk populations and appropriate communication medium, whether it be from media methods , print methods or person to person to person communication. This component is a permanent service offered by the Ministry of Public Health and is funded by the Government of Guyana.

All materials produced are free of cost and are available at the Ministry of Public Health.

Have you utilized the “Guidelines for implementation of Article 12 of the WHO FCTC” when developing and implementing policies in this area?

Yes ✓

If you answered “Yes” to question C269 please provide details in the space below or refer to section E of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is voluntary. <https://extranet.who.int/dataform/655321?token=vrv7j7ysegng77i&lang=en> (<https://extranet.who.int/dataform/655321?token=vrv7j7ysegng77i&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Tobacco advertising, promotion and sponsorship

Have you adopted and implemented, where appropriate, any legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes:

instituting a comprehensive ban on all tobacco advertising, promotion and sponsorship?

Yes ✓

Does your ban cover:

- display and visibility of tobacco products at points of sales?
- the domestic Internet?
- the global Internet?
- brand stretching and/or brand sharing?
- product placement as a means of advertising or promotion?
- the depiction of tobacco or tobacco use in entertainment media products?
- tobacco sponsorship of international events or activities and/or participants therein?
- contributions from tobacco companies to any other entity for “socially responsible causes” and/or any other activities implemented under the umbrella of “corporate social responsibility” by the tobacco industry?
- cross-border advertising, promotion and sponsorship originating from your territory?
- the same forms of cross-border advertising, promotion and sponsorship entering your territory for which domestic regulation apply?

cooperating with other Parties in the development of technologies and other means necessary to facilitate the elimination of cross-border advertising?

No ✘

imposing penalties for cross-border advertising equal to those applicable to domestic advertising, promotion and sponsorship originating from your territory in accordance with national law?

No ✘

Please provide a brief description of the progress made in implementing Article 13 (*Tobacco advertising, promotion and sponsorship*) in the past two years or since submission of your last report.

The current Standard for Tobacco Advertisement and Sponsorship was updated, reviewed and the first draft has been submitted for review.

Have you utilized the “Guidelines for implementation of Article 13 of the WHO FCTC” when developing and implementing policies in this area?

Yes ✔

If you answered “Yes” to question C2715 please provide details in the space below or refer to section F of the additional questionnaire available at this link. Response to this question or to the additional questionnaire is voluntary. <https://extranet.who.int/dataform/655321?token=vr7j7ysegng77i&lang=en> (<https://extranet.who.int/dataform/655321?token=vr7j7ysegng77i&lang=en>)

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Demand reduction measures concerning tobacco dependence and cessation

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

developing and disseminating appropriate, comprehensive and integrated guidelines based on scientific evidence and best practices?

Yes ✓

programmes to promote cessation of tobacco use, including:

- media campaigns emphasizing the importance of quitting?
programmes specially designed for underage girls and young women?
programmes specially designed for women?
programmes specially designed for pregnant women?
telephone quitlines?
 - local events, such as activities related to World No Tobacco Day or National No Smoking Day, if appropriate?
 - other (please specify)?
Other
- Television program geared at Drug Demand Reduction, which a focus on Tobacco use

design and implementation of programmes aimed at promoting the cessation of tobacco use, in such locations as:

- educational institutions?
- health-care facilities?
- workplaces?
sporting environments?
other (please specify)?
Other

inclusion of diagnosis and treatment of tobacco dependence and counselling services for cessation of tobacco use in national programmes, plans and strategies for:

- tobacco control?
health?
education?

inclusion of programmes on the diagnosis and treatment of tobacco dependence in your health-care system?

Yes ✓

Which structures in your health-care system provide programmes for the diagnosis and treatment of tobacco dependence?

- primary health care
- secondary and tertiary health care
specialist health-care systems (please specify below)
- specialized centres for cessation counselling and treatment
of tobacco dependence
rehabilitation centres
Other

Are the services provided in these settings covered by public funding or reimbursement schemes?

primary health care	Fully
secondary and tertiary health care	Fully
specialist health-care systems (please specify below)	
specialized centres for cessation counselling and treatment of tobacco dependence	Fully
rehabilitation centres	None
other (please specify below)	

Which health and other professionals are involved in programmes offering treatment for tobacco dependence and counselling services?

Health professionals including:

- physicians
- dentists
family doctors
practitioners of traditional medicine
other medical professionals (please specify below)
- nurses
midwives
pharmacists
Community workers
- Social workers
other (please specify)
Other

training on tobacco dependence treatment incorporated into the curricula of health professional training at pre- and post-qualification levels at the following schools:

- medical?
- dental?
- nursing?
- pharmacy?
- Other

facilitating accessibility and/or affordability of pharmaceutical products for the treatment of tobacco dependence?

Yes ✓

Where and how can these products be legally purchased in your country?

In pharmacies by means of prescriptions. over the counter aids such as patches and gums are available for purchase without any form of hurdle

Which pharmaceutical products are legally available for the treatment of tobacco dependence in your jurisdiction?

- nicotine replacement therapy
- bupropion
- varenicline
- other (please specify)
- Other

Are the costs of these products covered by public funding or reimbursement?

nicotine replacement therapy	None
bupropion	Fully
varenicline	None
other (please specify below)	

Please provide a brief description of the progress made in implementing Article 14 (*Demand reduction measures concerning tobacco dependence and cessation*) in the past two years or since submission of your last report.

The Tobacco Cessation programme is currently under review.

Have you utilized the "Guidelines for implementation of Article 14 of the WHO FCTC" when developing and implementing policies in this area?

Yes ✓

Please provide details in the space below or refer to section G of the additional questionnaire.

Response to this question or to the additional questionnaire is **voluntary**.

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If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

C3. MEASURES RELATING TO THE REDUCTION OF THE SUPPLY OF TOBACCO

With reference to Articles 15–17

Illicit trade in tobacco products

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

requiring marking of all unit packets and packages of tobacco products and any outside packaging of such products to assist in determining the origin of the product?

Yes ✓

requiring marking of all unit packets and packages of tobacco products and any outside packaging of such products to assist in determining whether the product is legally sold on the domestic market?

Yes ✓

requiring that unit packets and packages of tobacco products for retail and wholesale use that are sold on the domestic market carry the statement: "Sales only allowed in ..." or carry any other effective marking indicating the final destination of the product?

Yes ✓

developing a practical tracking and tracing regime that would further secure the distribution system and assist in the investigation of illicit trade?

Yes ✓

requiring that marking is presented in legible form and/or appears in the principal language or languages of the country?

Yes ✓

requiring the monitoring and collection of data on cross-border trade in tobacco products, including illicit trade?

No ✗

facilitating the exchange of this information among customs, tax and other authorities, as appropriate, and in accordance with national law and applicable bilateral and multilateral agreements?

Yes ✓

enacting or strengthening legislation, with appropriate penalties and remedies, against illicit trade in tobacco products, including counterfeit and contraband cigarettes?

Yes ✓

requiring that confiscated manufacturing equipment, counterfeit and contraband cigarettes and other tobacco products derived from illicit trade are destroyed, using environment-friendly methods where possible, or disposed of in accordance with national law?

Yes ✓

adopting and implementing measures to monitor, document and control the storage and distribution of tobacco products held or moving under suspension of taxes or duties?

No ✗

enabling the confiscation of proceeds derived from illicit trade in tobacco products?

No ✗

promoting cooperation between national agencies and relevant regional and international intergovernmental organizations in investigations, prosecutions and proceedings, with a view to eliminating illicit trade in tobacco products, with special emphasis on cooperation at regional and subregional levels?

Yes ✓

licensing or other actions to control or regulate production and distribution in order to prevent illicit trade?

Yes ✓

Please provide a brief description of the progress made in implementing Article 15 (*Illicit trade in tobacco products*) in the past two years or since submission of your last report.

The Tobacco Control Act provides measures for implementation of Article 15 however the Guyana Revenue Authority has taken the full lead in the implementation of this Article by instituting markings and beefing up personnel to be able to detect cross border illicit trading. There are penalties involved for breach.

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Sales to and by minors

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

prohibiting the sales of tobacco products to minors?

Yes ✓

Please specify the legal age:

18

requiring that all sellers of tobacco products place a clear and prominent indicator inside their point of sale about the prohibition of tobacco sales to minors?

No ✗

requiring that, in case of doubt, each seller of tobacco products requests that the purchaser provides appropriate evidence of having reached full legal age?

Yes ✓

banning the sale of tobacco products in any manner by which they are directly accessible, such as open store shelves?

Yes ✓

prohibiting the manufacture and sale of sweets, snacks, toys or any other objects in the form of tobacco products which appeal to minors?

Yes ✓

prohibiting the sale of tobacco products from vending machines?

Yes ✓

prohibiting and/or promoting the prohibition of the distribution of free tobacco products:

- to the public?
 - to minors?
-

prohibiting the sale of cigarettes individually or in small packets?

Yes ✓

providing for penalties against sellers and distributors in order to ensure compliance?

Yes ✓

prohibiting the sales of tobacco products by minors?

Yes ✓

Please provide a brief description of the progress made in implementing Article 16 (*Sales to and by minors*) in the past two years or since submission of your last report.

Part 8 of the Tobacco Control Act provides for all of the measures listed above and this is now law.

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Provision of support for economically viable alternative activities

Have you adopted and implemented, where appropriate, measures or programmes on any of the following:

promoting economically viable and sustainable alternatives for:

- | | |
|-----------------------------|----------------|
| tobacco growers? | Not applicable |
| tobacco workers? | No |
| tobacco individual sellers? | No |
-

Please provide a brief description of the 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.

No progress made in this area

Have 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)” when developing and implementing policies in this area?

No

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

C4. OTHER MEASURES AND POLICIES

With reference to Articles 18–21

Protection of the environment and the health of persons

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

implementing measures in respect of tobacco cultivation within your territory, which take into consideration:

the protection of the environment?	Not applicable
the health of persons in relation to the environment?	Not applicable

implementing measures in respect of tobacco manufacturing within your territory, which take into consideration:

the protection of the environment?	Not applicable
the health of persons in relation to the environment?	Not applicable

Please provide a brief description of the 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.

Have 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)” when developing and implementing policies in this area?

No

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Liability

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

Does your tobacco control legislation contain measures regarding criminal liability for any violations of that tobacco control legislation?

Yes

Do you have separate criminal liability provisions in relation to tobacco control (outside of the tobacco control legislation)?

Not applicable

Do you have any civil liability measures that are specific to tobacco control?

Yes

Do you have any general civil liability provisions that could apply to tobacco control?

Yes

Do you have civil or criminal liability provisions that provide for compensation for adverse health effects and/or for reimbursement of medical, social or other relevant costs?

No

Has any person in your jurisdiction launched any criminal and/or civil liability action, including compensation where appropriate, against any tobacco company in relation to any adverse health effect caused by tobacco use?

No

Have you taken, as appropriate, any legislative, executive, administrative and/or other action against the tobacco industry for full or partial reimbursement of medical, social and other relevant costs related to tobacco use in your jurisdiction?

No

Please provide a brief description of any progress made, as appropriate, in implementing Article 19 (*Liability*) in the past two years or since submission of your last report.

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

Please attach the relevant documentation.

Research, surveillance and exchange of information

Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:

developing and/or promoting research that addresses:

- determinants of tobacco consumption?
 - consequences of tobacco consumption?
 - social and economic indicators related to tobacco consumption?
 - tobacco use among women, with special regard to pregnant women?
 - the determinants and consequences of exposure to tobacco smoke?
 - identification of effective programmes for the treatment of tobacco dependence?
 - identification of alternative livelihoods?
 - Other
-

training and support for all persons engaged in tobacco control activities, including research, implementation and evaluation?

Yes ✓

a national system for epidemiological surveillance of:

- patterns of tobacco consumption?
- determinants of tobacco consumption?
- consequences of tobacco consumption?
- social, economic and health indicators related to tobacco consumption?
- exposure to tobacco smoke?
- Other

Please list all surveys, including the year of the survey, that you have undertaken in the past.

Global Youth Tobacco Survey (2000, 2004, 2010, 2015)

Global School Health Survey (2010)

MICS (2014)

Stepwise Approach to Chronic Disease Risk Factor Surveillance (2016)

Demographic Health Survey 2009

Does your country have any plans to repeat any of the above or to undertake a new tobacco survey within three to five years of your last survey? Please provide details in the space below.

Yes. The country plans to repeat Global School Health survey in 2020, GYTS in 2020 and STEPS in 2021

regional and global exchange of publicly available national:

- scientific, technical, socioeconomic, commercial and legal information?
- information on the practices of the tobacco industry?
- information on the cultivation of tobacco?

an updated database of:

- laws and regulations on tobacco control?
- information about the enforcement of laws on tobacco control?
- pertinent jurisprudence?

Please provide a brief description of the progress made in implementing Article 20 (*Research, surveillance and exchange of information*) in the past two years or since submission of your last report.

During the past five years the Ministry of Public Health has conducted the Global Youth Tobacco Survey and the STEPS Survey. This information is shared with both local and international partners to help in tobacco control efforts. Health records or patient records now includes tobacco use.

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below (e.g. whether you included information on WHO FCTC implementation in your Voluntary National Review (VNR) on the Sustainable Development Goals (SDGs), related to target 3.a).

Please attach the relevant documentation.

D. INTERNATIONAL COOPERATION AND ASSISTANCE

Pursuant to Article 21.1(c) and in accordance with Article 26, have you either provided or received financial or technical assistance (be it through unilateral, bilateral, regional, subregional or other multilateral channels, including relevant regional and international intergovernmental or nongovernmental organizations and financial and development institutions) for the development and strengthening of multisectoral, comprehensive tobacco control programmes of developing country Parties and Parties with economies in transition in any of the following areas:

development, transfer and acquisition of technology, knowledge, skills, capacity and expertise related to tobacco control?

Assistance provided Yes

Assistance received Yes

provision of technical, scientific, legal and other expertise to establish and strengthen national tobacco control strategies, plans and programmes?

Assistance provided Yes

Assistance received Yes

appropriate training or sensitization programmes for appropriate personnel in accordance with Article 12?

Assistance provided Yes

Assistance received Yes

provision of the necessary material, equipment and supplies, as well as logistic support, for tobacco control strategies, plans and programmes?

Assistance provided No

Assistance received Yes

identification of methods for tobacco control, including comprehensive treatment of nicotine addiction?

Assistance provided No

Assistance received Yes

promotion of research to increase the affordability of comprehensive treatment of nicotine addiction?

Assistance provided No

Assistance received No

Please identify the Party or Parties from which assistance was received or to which assistance was provided.

Assistance was received from the Pan American Health Organization (International Organization) and the Guyana Chest Society (NGO). The Guyana Chest Society received funding from the Jamaican Heart Foundation, who receives funding from the Bloomberg Initiative. Funding is also provided by the International Union Against Tuberculosis and lung Diseases

Please provide information about any assistance provided or received in the space below, including any support received from nongovernmental organizations (please, specify).

The Pan American Health Organization and Guyana Chest Society are key partners in Tobacco Control and served on the Tobacco Control Council, also. The Chest Society is no longer functional but PAHO assists with providing technical support to the country in this area.

The Ministry of Public Health as the pioneer for Tobacco Control provide assistance to all organizations or groups that require training, equipment or materials in Tobacco Control, for example, the Ministry of Education, Culture Youth and Sports, local NGOs, and general public.

If you have not received or provided assistance in any of the aforementioned areas, please identify any financial or technical assistance that may be under consideration, if appropriate.

Tobacco Cessation, Tax Advocacy

Have you encouraged relevant regional and international intergovernmental organizations and financial and development institutions in which you are represented to provide financial assistance for developing country Parties and for Parties with economies in transition to assist them in meeting their obligations under the Convention?

Yes ✓

Please provide details in the space below.

The National Budget for 2020 has earmarked monies to assist with training personnel on Tobacco Control measures and to develop a National Tobacco Cessation Program and for the establishment of a Tobacco Control Unit

E. PRIORITIES AND COMMENTS

What are the priorities for implementation of the WHO Framework Convention on Tobacco Control in your jurisdiction?

Tobacco Control is one of top priorities in Guyana. It is directy and indirectly related to the chronic disease burden that has been set upon the country and, as such, there is much interest in its part to play in reducing these diseases. Some of the main areas are tobacco education, smoke free zones, the tobacco control legislation and tobacco cessation.

Have you identified any specific gaps between the resources available and the needs assessed for implementing the WHO Framework Convention on Tobacco Control?

Yes ✓

Please provide details in the space below.

The GTSS proves to be an important tool for expressing to Governments on the need for Tobacco Control. However, there is need for an economic evaluation on the burden of tobacco use in country. This data is very much needed to plead the case for Tobacco Control.

Other gaps identified include funding to provide consistent education and awareness programs, funding for the NRT, other necessary strategies and other cessation sites in the cessation program

What, if any, are the constraints or barriers, other than lack of resources, you have encountered in implementing the Convention?

The Tobacco Company is still aggressive in its efforts to delay the Tobacco Control process for example, indirect sponsorship and advertising.

Do you have any of the following products available on your national tobacco market?

- smokeless tobacco products
- water pipe tobacco
- Electronic Nicotine Delivery Systems (ENDS)
- Electronic Non-Nicotine Delivery Systems (ENNDS)
- heated tobacco products (HTPs)
- Other

Have you adopted and implemented any policy or regulation that is specific to the following tobacco products?

- smokeless tobacco products
- water pipe tobacco
- Electronic Nicotine Delivery Systems (ENDS)
- Electronic Non-Nicotine Delivery Systems (ENNDS)
- heated tobacco products (HTPs)
- Other

If you have any relevant information related to questions E5 and E6, please provide details in the space below.

Please provide any other relevant information not covered elsewhere that you consider important.

Your suggestions for further development and revision of the reporting instrument:

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