

# 2020 - CORE QUESTIONNAIRE OF THE REPORTING INSTRUMENT OF WHO FCTC

## A. ORIGIN OF THE REPORT

### Name of contracting Party:

Malaysia

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### Information on national contact responsible for preparation of the report:

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## Period of reporting:

	Month	Year
Start date	January (1)	2018 (19)
End date	2011 (12)	2019 (20)

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## B1. TOBACCO CONSUMPTION

### Prevalence of tobacco use

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#### 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)*

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#### 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	40.5	
FEMALE	1.2	
TOTAL (males and females)	21.3	

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## Daily smokers

	<b>Prevalence (%)</b> <b>(please include all smoking tobacco products in prevalence data)</b>	<b>Average number of the most-consumed smoking tobacco product used per day</b>
MALE	36.3	12.0
FEMALE	0.9	7.9
TOTAL (males and females)	19.0	11.8

## Occasional smokers

	<b>Prevalence (%)</b> <b>(please include all smoking tobacco products in prevalence data)</b>
MALE	4.2
FEMALE	0.3
TOTAL (males and females)	2.3

## Former smokers

	<b>Prevalence (%)</b> <b>(please include all smoking tobacco products in prevalence data)</b>
MALE	8.3
FEMALE	1.2
TOTAL (males and females)	4.8

## Never smokers

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

MALE	50.9
FEMALE	97.5
TOTAL (males and females)	73.7

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

Smoked Tobacco Product include manufactured cigarettes, hand rolled cigarettes, kretek, cigars, bidis or tobacco pipes.

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

	<b>From</b>	<b>To</b>
Age range	15	75

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

2019

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

NATIONAL HEALTH MORBIDITY SURVEY 2019

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

Current smoker	used any smoked tobacco products in the past 30 days (manufactured cigarette, roll your own cigarette, traditional hand rolled cigarette, shisha, cigar or pipe)
Daily smoker	Smoker who currently smokes any tobacco product daily
Occasional smoker	Smoker who currently smokes any tobacco product occasionally
Former smoker	A person who is not currently smoking but used at least one smoked tobacco product either daily or occasionally in the past
Never smoker	A person who has never smoked any tobacco product in their lifetime

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.

NHMS 2019 WAS CONDUCTED AMONG PERSONS AGED 15 YEARS ABOVE. OVERALL, THE PREVALENCE OF CURRENT SMOKERS WAS 21.3%. THERE WAS A SLIGHT REDUCTION FROM 22.8% REPORTED IN 2015.

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## 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 <sup>1</sup>	15	19	24
MALES - current smokers <sup>1</sup>	20	24	48
MALES - current smokers <sup>1</sup>	25	29	46
MALES - current smokers <sup>1</sup>	30	34	49
MALES - current smokers <sup>1</sup>	35	39	45
MALES - current smokers <sup>1</sup>	40	44	48
MALES - current smokers <sup>1</sup>	45	49	45
MALES - current smokers <sup>1</sup>	50	54	46
FEMALES - current smokers <sup>1</sup>	15	19	
FEMALES - current smokers <sup>1</sup>	20	24	
FEMALES - current smokers <sup>1</sup>	25	29	
FEMALES - current smokers <sup>1</sup>	30	34	
FEMALES - current smokers <sup>1</sup>	35	39	
FEMALES - current smokers <sup>1</sup>	40	44	
FEMALES - current smokers <sup>1</sup>	45	49	
FEMALES - current smokers <sup>1</sup>	50	54	
TOTAL (males and females) - current smokers <sup>1</sup>	15	19	12
TOTAL (males and females) - current smokers <sup>1</sup>	20	24	26
TOTAL (males and females) - current smokers <sup>1</sup>	25	29	25
TOTAL (males and females) - current smokers <sup>1</sup>	30	34	27

TOTAL (males and females) - current smokers <sup>1</sup>	35	39	24
TOTAL (males and females) - current smokers <sup>1</sup>	40	44	26
TOTAL (males and females) - current smokers <sup>1</sup>	45	49	23
TOTAL (males and females) - current smokers <sup>1</sup>	50	54	23

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

Smoker who currently smokes any tobacco products in the past 30 days (manufactured cigarette, hand rolled cigarettes, kretek, cigars, bidis or tobacco pipes)

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

2019

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

NHMS 2019

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.

In NHMS 2019, the prevalence of current tobacco smokers among Malaysian is 21.3% with 19.0% being daily smokers. The highest prevalence of current smokers among adult are aged 30-34 years was 49.0% and followed with 40-44 years old at 47.6%. This is comparatively lower than the prevalence NHMS in 2015, which was 22.8%.

## 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	12.1
Daily users	6.8
Occasional users	5.3
Former users	2.4
Never users	85.2

## Females

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

Current users	0.7
Daily users	0.4
Occasional users	0.2
Former users	0.4
Never users	98.1

## TOTAL (males and females)

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

Current users	6.5
Daily users	3.7
Occasional users	2.9
Former users	1.4
Never users	91.5

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

Smokeless tobacco includes e-cigarettes/ vape, snuff and chewed tobacco.

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

	<b>From</b>	<b>To</b>
Age range	15	75

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

2019

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

NHMS 2019

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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	Respondent who answered Daily or Less than daily for the question “Do you currently use smokeless tobacco on a daily basis, less than daily or not at all?”
Daily user	Respondent who answered Daily for the question “Do you currently use smokeless tobacco on a daily basis, less than daily or not at all?”
Occasional user	Respondent who answered Less than Daily for the question “Do you currently use smokeless tobacco on a daily basis, less than daily or not at all?”
Former user	Respondent who answered Not at all for the question “Do you currently use smokeless tobacco on a daily basis, less than daily or not at all?” & answered Daily or Less than daily for the question “In the past, have you use smokeless tobacco on a daily basis, less than daily or not at all?”
Never user	Respondent who answered Not at all for the question on “Do you currently use smokeless tobacco on a daily basis, less than daily or not at all?” & answered Not at al for the question “In the past, have you use smokeless tobacco on a daily basis, less than daily or not at all”

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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.

In NHMS 2019, the prevalence of current smokeless tobacco smokers among Malaysian is 6.5% with 3.7% being daily users. The highest prevalence of current smokers among adolescents are aged 20-24 years was 30.0% and followed with 25-29 years old at 15.4%. This is comparatively lower than the prevalence NHMS in 2015, which was 10.9%.

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## 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)
MALES - current smokers <sup>2</sup>	15	19	15
MALES - current smokers <sup>2</sup>	20	24	30
MALES - current smokers <sup>2</sup>	25	29	15
MALES - current smokers <sup>2</sup>	30	34	14
MALES - current smokers <sup>2</sup>	35	39	7
MALES - current smokers <sup>2</sup>	40	44	10
MALES - current smokers <sup>2</sup>	45	49	6
MALES - current smokers <sup>2</sup>	50	54	5
FEMALES - current smokers <sup>2</sup>	15	19	
FEMALES - current smokers <sup>2</sup>	20	24	
FEMALES - current smokers <sup>2</sup>	25	29	
FEMALES - current smokers <sup>2</sup>	30	34	
FEMALES - current smokers <sup>2</sup>	35	39	
FEMALES - current smokers <sup>2</sup>	40	44	
FEMALES - current smokers <sup>2</sup>	45	49	
FEMALES - current smokers <sup>2</sup>	50	54	
TOTAL (males and females) - current smokers <sup>2</sup>	15	19	8
TOTAL (males and females) - current smokers <sup>2</sup>	20	24	16
TOTAL (males and females) - current smokers <sup>2</sup>	25	29	9

TOTAL (males and females) - current smokers <sup>2</sup>	30	34	8
TOTAL (males and females) - current smokers <sup>2</sup>	35	39	4
TOTAL (males and females) - current smokers <sup>2</sup>	40	44	6
TOTAL (males and females) - current smokers <sup>2</sup>	45	49	3
TOTAL (males and females) - current smokers <sup>2</sup>	50	54	3

Please indicate the smokeless tobacco products included in the answer to question B14:

Smokeless tobacco includes e-cigarettes/ vape, snuff and chewed tobacco.

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

2019

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

NHMS 2019

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.

The highest prevalence of current smokers among adolescents are aged 20-24 years was 30.0% and followed with 25-29 years old at 15.4%.

## Tobacco use by ethnic group(s)

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

	<b>Ethnic group(s)</b>	<b>MALES - Prevalence (%)</b>	<b>FEMALES - Prevalence (%)</b>	<b>TOTAL (males and females) - Prevalence (%)</b>
Current users <sup>3</sup>	MALAY			24.9
Current users <sup>3</sup>	CHINESE			15.3
Current users <sup>3</sup>	INDIAN			11.9
Current users <sup>3</sup>	OTHER BUMIS			26.5
Current users <sup>3</sup>	OTHERS			34.5

Please indicate the tobacco products included in the answer to question B15:

All Smoke and Smokeless Product consists of manufactured cigarettes, hand rolled cigarettes, kretek, cigars, shishas, bidis, tobacco pipes, e-cigarette/ vape, snuff and chew.

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

	<b>From</b>	<b>To</b>
Age range	15	75

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

2019

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

NHMS 2019

## Tobacco use by young persons

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

	<b>Age range</b>	<b>SMOKING TOBACCO - Prevalence (%)</b>	<b>SMOKELESS TOBACCO - Prevalence (%)</b>	<b>WATER PIPE - Prevalence (%)</b>
BOYS - Current users <sup>4</sup>	10-19	24.3	17.1	1.3
GIRLS - Current users <sup>4</sup>	10-19	3.7	4.5	0.3
TOTAL (boys and girls) - Current users <sup>4</sup>	10-19	14.2	11.0	0.8
TOTAL (boys and girls) - Current users <sup>4</sup>	12 and younger	9.2		
TOTAL (boys and girls) - Current users <sup>4</sup>	13 -15	17.4		
TOTAL (boys and girls) - Current users <sup>4</sup>	16-19	16.9		
TOTAL (boys and girls) - Current users <sup>4</sup>	13-19	17.2		

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

Tobacco products consist of smoke tobacco which include manufactured cigarette, hand rolled cigarette, Shisha/hookah, 'Roll-your-own' with cigarette paper, Cigar, Pipe, E-cigarette or vape, Chewing tobacco and Snuff

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

2016

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

TECMA 2016

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

Current user: Respondent who answered Yes for the question "Have you smoked tobacco product any time during the past 30 days?"

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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.

The prevalence of current tobacco smokers among Malaysian adolescents is quite high at 14.2% with more than one in ten 11.7% being current cigarette smokers. The prevalence of current cigarette smokers among adolescents aged 13-15 years was 14.8%. This is comparatively lower than the prevalence found by the Global Youth Tobacco Survey in 2009, which was 18.2%.

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Please attach the relevant documentation.

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## 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 (%)
ADULT POPULATION - Males	18 and above				6.1
ADULT POPULATION - Females	18 and above				0.3
ADULT POPULATION - Total (males and females)	10 and above				3.2
YOUNG PERSONS - Boys	10 -19				16.0
YOUNG PERSONS - Girls	10-19				2.8
YOUNG PERSONS - Total (boys and girls)	10-19				9.1

## B2-B9. HEALTH, SOCIAL AND ECONOMIC INDICATORS

### Exposure to tobacco smoke

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

Yes ✓

Please provide details in the space below (e.g. exposure by gender, at home, in the workplace, on public transport).

#### HOME

In Malaysia, 31%, (95%CI: 29.2, 32.8) of non-smokers reported exposure to secondhand smoke at home. The prevalence was much higher in rural areas (40.3%, 95%CI: 37.2, 43.4) and among males at 37.3% (95%CI: 34.8, 39.9) compared to respondents in urban areas (28.3%, 95%CI: 26.2, 30.5) and among females (24.3%, 95%CI: 22.4, 26.2). For non-smokers, there was much higher exposure to secondhand smoke among others (47.2%, 95%CI: 40.6, 53.9) and other Bumiputras (39.7%, 95%CI: 34.9, 44.9) Compared to Malays (33.8%, 95%CI: 31.9, 35.6), Chinese (15.5%, 95%CI: 20.1, 13.9) and Indians (15.0%, 95%CI: 15.0, 19.6).

#### AT WORK

In Malaysia, 27.2%, (95%CI: 24.3, 30.3) of non-smokers reported exposure to secondhand smoke at WORK. The prevalence was much higher in rural areas 31.6%, (95%CI: 35.7, 28.1) and among males at 36.3% (95%CI: 31.8, 41.1) compared to respondents in urban areas (26.6%, 95%CI: 23.4, 30.0) and among females (17.5%, 95%CI: 14.6, 20.8).

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

2019

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

NHMS 2019

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Please attach the relevant documentation.

## Tobacco-related mortality

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

No ✘

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

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

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

Please submit a copy of the study you refer to:

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## Tobacco-related costs

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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?

Yes ✓

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Please provide details (e.g. direct (health care-related) and indirect costs and, if possible, the method used to estimate these costs).

A cost analysis study was undertaken to estimate the direct and indirect cost of medical care of three smoking related diseases: Chronic obstructive pulmonary disease (COPD), ischaemic heart disease and lung cancer.

Methodology: A total of 200 patients admitted in five government hospitals in peninsular Malaysia were enrolled between June 2004 and 2005. Smokers above 18 years old and who had smoked at least 100 sticks of cigarettes in their lifetime and diagnosed with three above diseases were included.

Result: The total smoking attributable cost of three selected diseases was 2.92 billion. The burden of these three diseases fall mainly on the health care providers (68%) and patients was 32%.

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Please indicate the year of the data used to answer question B42:

2007

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Please indicate the source of the data used to answer question B42:

Health care cost of smoking in Malaysia, Syed al Junid 2007

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Please submit a copy of the study you refer to:

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## Supply of tobacco and tobacco products

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

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Licit supply of tobacco products

	<b>Product</b>	<b>Unit (e.g. pieces, tonnes)</b>	<b>Domestic production</b>	<b>Retail sales</b>	<b>Exports</b>	<b>Imports</b>
	Smoking tobacco products	cigarette pieces	214,664,341			

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

NA

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

2019

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

Royal Malaysia Customs Department

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
Smoking tobacco products	2018	cigarette	sticks	843,895,041

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.

Based on the data given by MOF for the year 2018 the total number of illicit cigarette seized was 843,895,041 sticks. Comparing with the data in the previous report the number of seizures was 1,266,171,250 sticks. Various enforcement actions have been continuously carried out by Royal Malaysian Customs Department to reduce and curb illicit activities which includes special operations conducted at various locations together with other enforcement agency.

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

Royal Malaysia Customs Department

Please attach the relevant documentation.

## Tobacco-growing

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Is there any tobacco-growing in your jurisdiction?

Yes ✓

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Please provide information on the number of workers involved in tobacco-growing. If available, please provide this figure broken down by gender.

115 workers (growers)

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Please provide, if available, the share of the value of tobacco leaf production in the national gross domestic product.

101,750.00 kg (Kilograms) sun-cured tobacco

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

2019

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

National Kenaf and Tobacco Board Fact Sheet 2019

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Please attach the relevant documentation.

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## Taxation of tobacco products

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

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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))?

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

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

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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)

	<b>Product</b>	<b>Type of tax</b>	<b>Rate or amount</b>	<b>Base of tax<sup>5</sup></b>
Smoking tobacco products	Cigarette	Import Duty	RM 0.20	Per stick
Smoking tobacco products	Cigarette	Excise Duty	RM 0.40	Per stick
Smoking tobacco products	Cigarette	Sales tax	10%	kg
Smoking tobacco products	Cigars, cheroots and cigarillos, containing tobacco	Excise Duty	RM 400.00	kg
Smoking tobacco products	Beedies	Excise Duty	RM 7.50 and 5%	kg
Smoking tobacco products	Clove cigarettes	Excise Duty	RM 0.40	Per stick
Other tobacco products	Ang Hoon	Excise Duty	RM 27.00 and 5%	kg
Other tobacco products	Snuff, whether or not dry	Excise Duty	RM 27.00 and 5%	kg

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.

No change at the tax rate for tobacco products for the past 2 years.

GST Act 2018 was deleted in June and Sales Tax Act was then enforced on the 1 September 2018.

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:

Excise Duty Order 2017

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
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### 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
Smoking tobacco products	MALBORO	20	17.50	MYR
Smoking tobacco products	Dunhill	20	17.50	MYR
Smoking tobacco products	Mevius	20	17.50	MYR

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

2019

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

Ministry of Finance

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.

No significant change in the price of tobacco products for the past two years.  
We have no domestic production since 2019.

Please attach the relevant documentation.

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## C1. GENERAL OBLIGATIONS

*With reference to Article 5*

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

No ✘

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Have you partially developed and implemented tobacco control strategies by including tobacco control in national health, public health or health promotion strategies, plans and programmes?

Yes ✔

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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

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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).

In Malaysia, in the year 2014, WHO FCTC steering committee was formed comprising of 12 ministries and related agencies. The birth of this committee enabled a comprehensive multisectoral national tobacco control strategies, plans and programmes in accordance with this Convention to be materialized. In the year 2015, (2) two board meetings were conducted whereby the first meeting was chaired by the Director General and the subsequent meeting was spearheaded by the Minister himself. This provided a higher platform for effective legislative, executive, administrative measures and policies in preventing and reducing tobacco consumption, nicotine addiction and exposure to tobacco smoke.

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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.

Malaysian government had given a mandate to Ministry of Health to develop our own Tobacco and Smoking Act to replace Control of Tobacco Products (CTPR) 2004. The draft is yet to be presented.

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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.

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## **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:

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

Yes ✓

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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?

No ✗

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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.).

Information about industry tactics disseminated to all Ministries. Examples of the tactics were presented during the FCTC Steering Committee Meeting chaired by Minister of Health.

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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.

Malaysia in the process of developing and implementing 5.3 (Code of Conduct) among Ministry of Health's staff.

---

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=hmimpqrszbdw5sr&lang=en> (<https://extranet.who.int/dataform/655321?token=hmimpqrszbdw5sr&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.

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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?

Yes ✓

---

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?

No ✘

---

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.

A study “The Relationship between tobacco taxation and demand determinants to reduce cigarette consumption and smoking prevalence in Malaysia” was conducted and the report was published in 2016. The report simulate that to achieve the end-game target of 5% prevalence rate in 2045, the tax rate should increase to 85.5% with combination other three substantial non-price measures tobacco control policies.

---

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=hmimpqrszbdw5sr&lang=en> (<https://extranet.who.int/dataform/655321?token=hmimpqrszbdw5sr&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)	Yes
administrative and executive orders	Yes
voluntary agreements	Yes
other measures (please specify in C223 below)	Yes

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

Currently, under Control of Tobacco Product Regulation 2004, there was about 23 areas gazetted as non-smoking area under Regulation 11. Under Regulation 22, there are five (5) states have smoke-free cities projects.

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

Yes ✓

Please provide details of this system.

Enforcement for the smoking ban in gazetted areas were conducted by enforcement officers from Ministry of Health.

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 <sup>6</sup>	Complete
universities	Complete
private workplaces	Partial
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.

## Public transport:

airplanes	Complete
trains	Complete
ferries	Complete
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)	None

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	None
nightclubs	None
restaurants	Complete
other (please specify below)	

## **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

Under Regulation 11, Control of Tobacco Product Regulation, 2004, complete ban of smoking activities in

- Regulation 11(h) any area of government premise
- Regulation 11(u) in air conditioned place of work with a centralized air conditioned system

Banning tobacco smoking in public transport

Under Regulation 11, Control of Tobacco Product Regulation, 2004, complete ban of smoking activities in public transport (Regulation 11 e)

## Banning tobacco smoking in indoor public places

Under Regulation 11, Control of Tobacco Product Regulation, 2004, complete ban of smoking activities in 23 areas including indoor public places such as restaurants, shopping mall, public toilets, service counter, library, internet café, stadium and sport centers.

---

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.

In implementing Article 8, Malaysia has translated into two regulations in Control of Tobacco Product Regulation, 2004:

Regulation 11: 23 gazetted areas all over Malaysia

Regulation 22: 5 cities have areas gazetted under the smoke free cities projects (Melaka, Penang, Johor, Kelantan and Terengganu).

Malaysia has expanded the no smoking places from air-conditioned restaurant to all types of eateries. The law has been enforced since January 2019.

---

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=hmimpqrszbdw5sr&lang=en> (<https://extranet.who.int/dataform/655321?token=hmimpqrszbdw5sr&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.

## 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?

No ✘

---

testing and measuring the emissions of tobacco products?

Yes ✔

---

regulating the contents of tobacco products?

No ✘

---

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.

Since 2015, standard emission level on tobacco products as follows;

1. Nicotine 1.0mg/perstick
  2. Tar 10mg/perstick
  3. Carbon monoxide 10mg/per stick
- 

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=hmimpqrszbdw5sr&lang=en> (<https://extranet.who.int/dataform/655321?token=hmimpqrszbdw5sr&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?	No
emissions of tobacco products?	No

---

requiring public disclosure of information about the:

contents of tobacco products?	No
emissions of tobacco products?	No

---

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.

---

Have you utilized the “Guidelines for implementation of Articles 9 and 10 of the WHO FCTC” when developing or 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 (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?	No
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.

since 2014, no changes implemented.

---

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=hmimpqrszbdw5sr&lang=en> (<https://extranet.who.int/dataform/655321?token=hmimpqrszbdw5sr&lang=en>)

---

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)?
  - SCHOOL 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)

TEACHER and Religion  
leaders  
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.

We have started education on quit smoking program through website of <http://jomquit.moh.gov.my>. The number of smokers who registered to Malaysia Quit Smoking Services (mQuit) through this website also increased drastically in 2019 since the introduction of new "No Smoking" signage together with the mQuit promotion. This is made together with the implementation of prohibition of smoking in all eateries in 2019.

No. of registered patient to quit smoking clinics through <http://jomquit.moh.gov.my>: 2018 = 485; 2019 = 1678.

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=hmimpqrszbdw5sr&lang=en> (<https://extranet.who.int/dataform/655321?token=hmimpqrszbdw5sr&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?

No ✘

---

are you precluded by your constitution or constitutional principles from undertaking a comprehensive ban on tobacco advertising, promotion and sponsorship?

No ✘

---

applying restrictions on all tobacco advertising, promotion and sponsorship?

Yes ✔

---

applying restrictions on cross-border advertising, promotion and sponsorship originating from your territory with cross-border effects?

No ✘

---

prohibiting those forms of tobacco advertising, promotion and sponsorship that promote a tobacco 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 health or other appropriate warnings or messages accompany all tobacco advertising, promotion and sponsorship?

Yes ✔

---

restricting the use of direct or indirect incentives that encourage the purchase of tobacco products by the public?

Yes ✔

---

requiring the disclosure to relevant Government authorities of expenditures by the tobacco industry on advertising, promotion and sponsorship not yet prohibited?

No ✘

---

restricting tobacco advertising, promotion and sponsorship on:

- radio?
- television?
- print media?
- the domestic Internet?
- the global Internet?
- other media (please specify below )?

Online selling      Other

restricting tobacco sponsorship of:

- international events and activities?
- participants therein?

---

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?

Yes ✔

---

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.

No progress since 2018.

---

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=hmimpqrszbdw5sr&lang=en> (<https://extranet.who.int/dataform/655321?token=hmimpqrszbdw5sr&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)?
- school      Other

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)?
- school      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)	Fully
specialized centres for cessation counselling and treatment of tobacco dependence	None
rehabilitation centres	None
other (please specify below)	None

---

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?

Public clinics, public hospitals, private clinics, public hospitals and retails pharmacy. The medication must be prescribed by doctors, dentists or pharmacists.

---



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	Fully
bupropion	None
varenicline	Fully
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.

Quit Smoking Services in Malaysia or mQuit has been strengthening since 2015 and involves public private partnership where currently about 88 private healthcare facilities has been accredited to conduct mQuit services according to the latest Clinical Practice Guidelines 2016.

The number of smokers who registered to Malaysia Quit Smoking Services (mQuit) both in government and private facilities increased since 2018. From the registered patients we focused to all patients with the Quit date. The Quit smoking rate among those who have quit date was above 40 percent for each year. However more effort needed in order to increase the number of registered patient to patient with Quit Date.

No. of registered patient to quit smoking clinics: 2018 = 20,032; 2019 = 22,601.

No of patient who are successfully quit smoking after 6 months: 2018 = 4,486; 2019 = 4,471.

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.

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### 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?

No ✘

---

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

No ✘

---

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

No ✘

---

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?

Yes ✓

---

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

Yes ✓

---

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.

Interministerial Consultation for ratification of the Protocol.

---

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?

Yes ✓

---

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?

No ✗

---

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.

NO CHANGES SINCE 2014 IMPLEMENTATION

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?	Yes
tobacco workers?	Yes
tobacco individual sellers?	Yes

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.

The kenaf cultivation area and number of kenaf growers have been increasing steadily since 2004 and as of 2017, total cultivation area for kenaf was 2,213 hectares.

Decrease in the number of tobacco growers from 134 in 2017 to 115 in 2019.

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?

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**.

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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.

---

## 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?	No
the health of persons in relation to the environment?	No

---

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

the protection of the environment?	No
the health of persons in relation to the environment?	No

---

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?

---

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?

No

---

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

No

---

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

No

---

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

No

---

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

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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

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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.

1. National Health and Morbidity Survey (NHMS) 1986, 1996, 2006, 2015, 2019
2. Global Adults Tobacco Survey (GATS) 2011
3. National E-Cigarette Survey (NECS) 2016
4. Global Youth Tobacco Survey (GYTS) 2003, 2009
5. Global School Health Survey (GSHS) 2012
6. Tobacco and E-Cigarette Survey among Malaysian Adolescent (TECMA) 2016

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.

Global Adult Tobacco Survey 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.

Since 2016, two surveys was conducted which are NECS and TECMA and latest in 2019 a National Health Morbidity Survey was conducted.

There are decreased in prevalence of smoker age 15 years and above in Malaysia. The National Health Morbidity Survey (NHMS) in 2015 reported 22.8% (male: 43%; female: 1.4%) decreased to 21.3% (male: 40.5%; female: 1.2%) in NHMS 2019 for current tobacco smoker. There are also decreased in prevalence of smokeless tobacco products from 10.9% (male: 20.4%; female: 0.8%) in NHMS 2015 to 6.5% (male: 12.1%; female: 0.7%) in NHMS 2019.

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).

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Please attach the relevant documentation.

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## 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:

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

Assistance provided	No
Assistance received	Yes

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

Assistance provided	No
Assistance received	Yes

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

Assistance provided	No
Assistance received	No

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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	No

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

Assistance provided No

Assistance received No

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

Assistance provided No

Assistance received Yes

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

- Mc Cabe Center, Melbourne, Australia.
  - Knowledge Hub on Taxation, University of Cape Town, South Africa.
  - SEATCA - South East Asia Tobacco Control Alliance.
- 

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

- Mc Cabe Center, Melbourne, Australia: provision of technical, scientific, legal and other expertise to establish and strengthen national tobacco control strategies, plans and programmes.  
We attended the training hosted by MC Cabe center on the legal aspect of tobacco control and Mc Cabe Center continue to assist us on the drafting of our new tobacco bill.

- Knowledge Hub on Taxation, University of Cape Town, South Africa: development, transfer and acquisition of technology, knowledge, skills, capacity and expertise related to tobacco control.  
The Knowledge Hub on Taxation, University of Cape Town, South Africa collaborate with the local University (University of Putra Malaysia) in conducting study on the impact of tobacco taxation and issues relating to illicit trade and the Protocol.

- SEATCA - South East Asia Tobacco Control Alliance: development, transfer and acquisition of technology, knowledge, skills, capacity and expertise related to tobacco control.  
SEATCA assist us in capacity building on smoke free City and the important of Article 5.3 WHO FCTC.

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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.

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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?

No ✘

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## E. PRIORITIES AND COMMENTS

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

Strong political will, commitment from other agencies and resources.

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

Yes ✔

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Please provide details in the space below.

Lack of resources and manpower, gaps in tobacco regulation

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

Working with other Ministry and working with local Universities through various task force.

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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.

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

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

Parties would be able to compare previous answer on the same page . Probably in a table but in a different column by years.

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