

2020 - CORE QUESTIONNAIRE OF THE REPORTING INSTRUMENT OF WHO FCTC

A. ORIGIN OF THE REPORT

Name of contracting Party:

Qatar

Information on national contact responsible for preparation of the report:

Title

Dr

Family name

almutawaa

First name

kholoud

Full name of institution

MINISTRY OF PUBLIC HEALTH

Mailing address

Mailing address 1 42

Mailing address 2

Post code

Post box

City Doha

Country

Qatar

E-mail

kalahmed@moph.gov.qa

Alternative email address
alwaysqalia@yahoo.com

Telephone number
00974-55050059

Fax number

Signature of government official submitting the report:

Title

Dr

Family name
Almutawa

First name
Kholoud

Full name of institution
Ministry of Public Health

Mailing address

Mailing address 1 42
Mailing address 2
Post code
Post box
City Doha

Country

Qatar

E-mail
kalahmed@moph.gov.qa

Alternative email address
alwaysqalia@yahoo.com

Telephone number
00974-44070163

Fax number

Web page

Period of reporting:

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

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	20.2	17.9
FEMALE	3.1	1.8
TOTAL (males and females)	12.1	10.2

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	16.5	17.6
FEMALE	1.7	10.9
TOTAL (males and females)	12.0	17.2

Occasional smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALE	3.7
FEMALE	1.4
TOTAL (males and females)	2.6

Former smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALE	6.8
FEMALE	0.7
TOTAL (males and females)	3.9

Never smokers

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

MALE	70.2
FEMALE	95.6
TOTAL (males and females)	82.3

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

Cigarettes smokers, shisha, midwakh(pipes) and e- cigarette

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

	From	To
Age range	15	65

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

2013

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

Global Adult Tobacco Surevy

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

Current smoker	“Current cigarette smoking” includes both daily and non-daily or occasional cigarette smoking.
Daily smoker	current smoking of any tobacco product at least once a day.
Occasional smoker	Occasional smokers (defined as usually smoking less than one cigarette per week); or Non-smokers.
Former smoker	former smokers, who might have succeeded in their attempts to give up.
Never smoker	none of the above

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.

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	15	24	11
MALES - current smokers ¹	25	34	25
MALES - current smokers ¹	35	44	24
MALES - current smokers ¹	45	54	21
MALES - current smokers ¹	55	64	22
MALES - current smokers ¹	65	100	16
FEMALES - current smokers ¹	15	24	2
FEMALES - current smokers ¹	25	34	2
FEMALES - current smokers ¹	35	44	4
FEMALES - current smokers ¹	45	54	6
FEMALES - current smokers ¹	55	64	3
FEMALES - current smokers ¹	65	100	0
TOTAL (males and females) - current smokers ¹	15	24	6
TOTAL (males and females) - current smokers ¹	25	34	13
TOTAL (males and females) - current smokers ¹	35	44	15
TOTAL (males and females) - current smokers ¹	45	54	14
TOTAL (males and females) - current smokers ¹	55	64	16
TOTAL (males and females) - current smokers ¹	65	100	8

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

cigarettes smokers, shisha, midwakh(pipes) and e- cigarette

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

2013

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

GATS

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.

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	1.3
Daily users	0.9
Occasional users	0.4
Former users	0.3
Never users	97.7

Females

	Prevalence (%) (please include all smokeless tobacco products in prevalence data)
Never users	100

TOTAL (males and females)

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

Current users	0.7
Daily users	0.5
Occasional users	0.2
Former users	0.2
Never users	98.8

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

Snuff, chewing tobacco, betel quid, etc.

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

	From	To
Age range	15	100

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

2013

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

GATS

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	current use include both daily and occasionally and less than daily use
Daily user	the use of any smokeless tobacco product at least once a day
Occasional user	less than daily use
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.

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 ²	15	24	2
MALES - current smokers ²	25	34	1
MALES - current smokers ²	35	44	1
MALES - current smokers ²	45	54	1
MALES - current smokers ²	55	64	0
MALES - current smokers ²	65	100	0
FEMALES - current smokers ²	15	24	0
FEMALES - current smokers ²	25	34	0
FEMALES - current smokers ²	35	44	0
FEMALES - current smokers ²	45	54	0
FEMALES - current smokers ²	55	64	0
FEMALES - current smokers ²	65	100	0
TOTAL (males and females) - current smokers ²	15	24	1
TOTAL (males and females) - current smokers ²	25	34	1
TOTAL (males and females) - current smokers ²	35	44	1
TOTAL (males and females) - current smokers ²	45	54	1
TOTAL (males and females) - current smokers ²	55	64	0
TOTAL (males and females) - current smokers ²	65	100	0

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

Snuff, chewing tobacco, betel quid, etc.

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

2013

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

GATS

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.

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:

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	18.4	9.4	-
GIRLS - Current users ⁴	13-15	6.2	3.2	-
TOTAL (boys and girls) - Current users ⁴	13-15	12.3	6.1	-

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

Cigarettes smokers, shisha, midwakh(pipes) and e- cigarette

Snuff, chewing tobacco, betel quid, etc.

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

2018

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

Global Youth Tobacco Surevy

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

Current cigarette smoking" includes both daily and non-daily or occasional cigarette smoking.

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.

Please attach the relevant documentation.

No comment

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No comment

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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	15-65		1.6		
ADULT POPULATION - Females	15-65		0.2		
ADULT POPULATION - Total (males and females)	15-65		0.9		
YOUNG PERSONS - Boys	13-15		15.0		
YOUNG PERSONS - Girls	13.-15		7.8		
YOUNG PERSONS - Total (boys and girls)	13-15		11.3		

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).

Overall, 12.0% of adults (8.3% of Qatari, 13.8% and of non-Qatari) who worked indoors were exposed to tobacco smoke, 16.8% (16.7% of Qatari and 16.9% of non-Qatari) were exposed at their homes, and 25.9% (29.2% of Qatari and 24.1% of non-Qatari) were exposed in restaurants.

GATS 2013 results showed:

- showed that 8.3% of Qatari and 13.8% of Non-Qatari who worked indoors were exposed to tobacco smoke at the workplace. 16.7% of Qatari nationals and 16.9% of Non-Qatari nationals were exposed to tobacco smoke at home. It is clearly seen that there is a gender difference in the place of exposure, as women tend to be exposed at home more than men especially if they are not smokers (17.3% vs. 9.3% among Qatari & 14.2% vs. 8.3% among Non Qatari).

-Despite the presence of a tobacco law that bans smoking in public places in Qatar, 29.2% of Qatari and 24.1% of non-Qatari were exposed to tobacco smoke in restaurants. There is no difference based on nationality or gender. Exposure in government building is lower than other public places, since this law is more strictly enforced.

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

2013

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

GATS

Please attach the relevant documentation.

No comment

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No comment

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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				4014439015
Smoking tobacco products	Cigar	kg				5024
Smoking tobacco products	Mussel	kg				698884

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:

2017

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

Customs authority

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))?

100

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

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

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	Cigarettes	sales	100%	actual value of the good
Smoking tobacco products	cigar	sales	100%	actual value of the good
Smoking tobacco products	Mussel	sales	100%	actual value of the good

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.

the taxation system for Tobacco products before 2019 was based on customs duty but after january 2019 it becomes selective taxation sytem on all kind of Tobacco products

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

Yes ✓

Please provide details in the space below.

5% OF THE TOBACCO TAXATION

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

2018

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

THE TOBACCO LAW NO 10 OF YEAR 2016

Please attach the relevant documentation.

No comment

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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		20	22	QR
Smoking tobacco products		20	20	QR
Smoking tobacco products		20	20	QR

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	Marlboro	20	22	QR
Smoking tobacco products	Benson & Hedges	20	20	QR
Smoking tobacco products	L&M	20	20	QR
Other tobacco products	MAZAYA (Mussel	50mg	25	qr

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

2020

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

Market opinion

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.

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 tobacco control unit belonged to the public health department in the ministry of public health comprise of a consultant a supervisor and 26 health inspectors.
 - A national focal point for tobacco in the ministry of public health
 - There is a task force that includes all the national Stakeholders involved in tobacco control interventions
-

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.

Under the National Health Strategy 2018-2022 plus the national Public Health Strategy 2018-2022 a project was established to reduce tobacco use. A fundamental part of the project was to align the national interventions with the FCTC and MPOWER.

It sets out a range of actions for the health sector and its partners to take to tackle tobacco use. In doing so it provides a direction for tobacco cessation activity and policy in Qatar that allows partners to identify and prioritize work both now and in the future.

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?

No ✘

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.).

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.

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=ra53b7hqm896tdn&lang=en> (<https://extranet.who.int/dataform/655321?token=ra53b7hqm896tdn&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?

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?

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.

- Enforce stricter regulation on licensing and importation processes of tobacco industry in MoPH.
 - Qatar is revising the taxation system to introduce excise tax system which should at least 70% of retail price. That can be implemented in addition to other types of taxes including the custom fees/tariff.
-

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=ra53b7hqm896tdn&lang=en> (<https://extranet.who.int/dataform/655321?token=ra53b7hqm896tdn&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)	

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

LAW NO. 10 OF 2016 ON THE CONTROL OF TOBACCO AND ITS DERIVATIVES

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

Yes ✓

Please provide details of this system.

- 53 Tobacco Control inspectors implementing the law and enforce regulation and ensure compliance with the law and give fines to person who violate the law and smoke in places where the smoking is prohibited by conducting regular routine visits to these places.
- Hotline for complains working 24\7 to receive public calls and the inspection team responds immediately
- No smoking signs and warnings
- Media campaigns to raise public awareness about 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)	

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	Complete
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	Partial
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

LAW NO. 10 OF 2016 ON THE CONTROL OF TOBACCO AND ITS DERIVATIVES defines Public place: a place prepared or designated for receiving the public or any special category of people for any purpose. and closed public place: any public place that has fixed or movable space, walls and a partial or complete ceiling.

It states: Article 12: Smoking shall be prohibited in the closed public places set forth by a decision of the Minister. it covers all the 8 places defined by WHO including workplaces, government bodies, public corporations and organization

Banning tobacco smoking in public transport

LAW NO. 10 OF 2016 ON THE CONTROL OF TOBACCO AND ITS DERIVATIVES defines Means of public transport: methods of public transport, such as taxis, buses, planes, ships, boats, intended for use by and transporting of the public. Means of public transport for ministries and other government entities, authorities, public and private institutions, also fall under the same public transport category. and smoking is prohibited in all.

it also covers Article 18

Without prejudice to any more severe penalty stipulated in any other law, a penalty not exceeding three thousand (3000) Riyals shall be imposed on anyone who smokes cigarettes while driving a vehicle in the presence of any person under the age of 18.

Banning tobacco smoking in indoor public places

LAW NO. 10 OF 2016 ON THE CONTROL OF TOBACCO AND ITS DERIVATIVES defines Public place: a place prepared or designated for receiving the public or any special category of people for any purpose. and closed public place: any public place that has fixed or movable space, walls and a partial or complete ceiling.

It states: Article 12: Smoking shall be prohibited in the closed public places set forth by a decision of the Minister.

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.

Prohibition of designation smoking areas

Prohibiting smoking while driving with a child less than 18 years of age

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=ra53b7hqm896tdn&lang=en> (<https://extranet.who.int/dataform/655321?token=ra53b7hqm896tdn&lang=en>)

MOPH Leads an inter-ministerial committee\ discussion with very high representation to strategically fulfill Qatar commitment for the FCTC and related protocols

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.

LAW NO. 10 OF 2016 ON THE CONTROL OF TOBACCO AND ITS DERIVATIVES defines all forms of tobacco and it states that Article 5 Subject to the provisions of the aforementioned Law No. 4 of 1990, the amount of tar and nicotine allowed in one cigarette shall be determined by a decision from the Minister.

MOPH is requesting a specialized technical lab for testing the tobacco contents.

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=ra53b7hqm896tdn&lang=en> (<https://extranet.who.int/dataform/655321?token=ra53b7hqm896tdn&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.

No comment

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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.

department of specifications in the ministry of environment they lead in this area implementing the regulations of tobacco products disclosure ,yet LAW NO. 10 OF 2016 ON THE CONTROL OF TOBACCO AND ITS DERIVATIVES states Article 6 : Subject to the provisions of the approved standard specifications, the date of expiry and the cautionary statements and images, as determined by the designated department in the Ministry, must be conspicuously affixed on each unit of tobacco or derivatives or cigarette package, in accordance with the regulations of the decision promulgated by the Minister.

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=ra53b7hqm896tdn&lang=en> (<https://extranet.who.int/dataform/655321?token=ra53b7hqm896tdn&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?

Yes ✓

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

No ✘

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.

Qatar is a member of the GCC standardizations committee that discuss and agree on all the specifications and standardizations as well as labelling of all tobacco products and then the MOPH will implement these specifications regarding labelling and the contents of tobacco .
Qatar also part of the GCC tobacco cessation committee that one of it assignments is reviewing all the propose pectoral warnings and then submitted to the GCC standardization committee to approve on them.

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=ra53b7hqm896tdn&lang=en> (<https://extranet.who.int/dataform/655321?token=ra53b7hqm896tdn&lang=en>)

Article 14 of the WHO Framework Convention on Tobacco Control (WHO FCTC) mandates all its Parties to take effective measures to promote the cessation of tobacco use and adequate treatment for tobacco dependence. Qatar encouraged to implement the key effective measures recommended by the guide lines for the implementation of Article 14 of the WHO FCTC. Therefore, Qatar being a signatory to the FCTC since 2007, was mandated to provide international standards of quality of tobacco cessation services at all level of care which we did in corporation with the mayo clinic.

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

LAW NO. 10 OF 2016 ON THE CONTROL OF TOBACCO AND ITS DERIVATIVES states that Article 6 Subject to the provisions of the approved standard specifications, the date of expiry and the cautionary statements and images, as determined by the designated department in the Ministry, must be conspicuously affixed on each unit of tobacco or derivatives or cigarette package, in accordance with the regulations of the decision promulgated by the Minister.

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)?
 - 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.

MOPH is implementing four phases media campaign for different issues: tobacco hazards, tobacco control law, delay initiation and cessation promotion.

MOPH also have tobacco cessation as part of the routine healthy life style campaigns

- also MOPH is doing one to one counselling in workplaces and community events for motivating quitting based on CO testing

as well as celebrating the WNTD in community events.

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=ra53b7hqm896tdn&lang=en> (<https://extranet.who.int/dataform/655321?token=ra53b7hqm896tdn&lang=en>)

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

Article 14 of the WHO Framework Convention on Tobacco Control (WHO FCTC) mandates all its Parties to take effective measures to promote the cessation of tobacco use and adequate treatment for tobacco dependence. Qatar encouraged to implement the key effective measures recommended by the guide lines for the implementation of Article 14 of the WHO FCTC. Therefore, Qatar being a signatory to the FCTC since 2007, was mandated to provide international standards of quality of tobacco cessation services at all level of care which we did in corporation with the mayo clinic.

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?

Yes ✓

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.

LAW NO. 10 OF 2016 ON THE CONTROL OF TOBACCO AND ITS DERIVATIVES defines Publicity, promotion and advertising: presentation of tobacco and its different derivatives, and encouraging its trading and the increase in the number of its users, through printed matter and broadcasting in the visual and audio media, or through any other promotional methods, whether directly or indirectly. and it states Article 9 : The advertising, promoting, or sponsoring of cigarettes or tobacco or its derivatives with a view to promoting and encouraging smoking shall be prohibited in all places and by any advertising media in Qatar. Use of tobacco or its derivatives as means to advertising another product shall also be prohibited.

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=ra53b7hqm896tdn&lang=en> (<https://extranet.who.int/dataform/655321?token=ra53b7hqm896tdn&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.

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

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
- addiction & rehabilitation center

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)	Partially
specialized centres for cessation counselling and treatment of tobacco dependence	Fully
rehabilitation centres	Partially
other (please specify below)	Partially

Please provide other details in the space below.

MOPH developed TDT guidelines to be used in all TC service points as well as it made it available online for free download.

Training programs are based on it, and includes staff from health facilities and education facilities as well

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?

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	Fully
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.

More than 80 health care providers have been trained in Tobacco dependence treatment and 40 nurses at educational facilities we well to support tobacco cessation . the NRTs are found in public health care facilities through reimbursement system and in private pharmacies as well. referral ssystem has been established to support referral to health care facilities that provide quitting services

Have you utilized the “Guidelines for implementation of Article 14 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.

LAW NO. 10 OF 2016 ON THE CONTROL OF TOBACCO AND ITS DERIVATIVES states Article 10
The allocation of stores for sales of cigarettes, tobacco, or its derivatives without obtaining a license shall be prohibited.

Stores that offer cigarettes or tobacco or its derivatives for sale shall designate a selling place inside the store, and shall prominently and legibly display the cautionary statements and images described in Article 6 herein inside the store or on other conspicuous banners, in accordance with the regulations of the decision promulgated by the Minister.

Article 13: The sale of cigarettes or tobacco or its derivatives at a distance of less than 1000 meters from schools and other educational and training institutions shall be prohibited.

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?

Yes ✓

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?

No ✗

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.

there are an inter-sectoral cooperation with many sections in the public health in the MOPH such as the Borders Ports Health & Food Monitoring Section in which they are responsible to implement the tobacco law and the specifications from the specification and standardizations section in the ministry of environment and determining whether the product will enter the country and are legally sold on the domestic market . and any illegal products will be sent to the place of origin immediately and prohibited from entering the country.

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?

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.

In implementing article 16 from the FCTC and article 7 in LAW NO. 10 OF 2016 ON THE CONTROL OF TOBACCO

AND ITS DERIVATIVES states in Article 13: The sale of cigarettes or tobacco or its derivatives at a distance of less than 1000 meters from schools and other educational and training institutions shall be prohibited. stated that Article 18

Without prejudice to any more severe penalty stipulated in any other law, a penalty not exceeding three thousand (3000) Riyals shall be imposed on anyone who smokes cigarettes while driving a vehicle in the presence of any person under the age of 18.. And health inspectors in the MOPH if they caught any sellers who sells to minors will be violated and sent to the public persecution

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

according to the article 2 in our national tobacco control law no 20 it is stated that it is prohibited to import or to use any automatic machines for vending of cigarette

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?	Not applicable
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.

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?	Yes
the health of persons in relation to the environment?	Yes

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.

cultivation or processing or assembling of tobacco or its derivatives is prohibited in Qatar according to article 2 in our national tobacco control law no 20 for the year 2002. in addition electronic cigarettes and its equipment are not allowed to be procured to Qatar that reduce the environment effects of dealing with waste dued to Tobacco related products.

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 ✓

If you answered “Yes” to question C414 please provide details in the space below or refer to section I 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=ra53b7hqm896tdn&lang=en> (<https://extranet.who.int/dataform/655321?token=ra53b7hqm896tdn&lang=en>)

In the recommendation of article 17 and 18 from the FCTC Qatar include this subject in its articles of the law no 20 and the new bylaws recently approved from the cabinet about prohibiting cultivation

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)?

No

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?

Not applicable

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?

Yes

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.

The economics impact of Tobacco in GCC Countries, 2019

Global Tobacco Youth survey 2018

Research on economic burden of Tobacco on Qatar 2014

Undertake the Global Adult Tobacco Survey (GATS), 2013

]the Global Youth Tobacco Survey (GYTS) 2013

the Global School-based Student Health Survey (GSHS)

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.

GATS will not be repeated and will be integrated with Stepwise survey that planned to be conducted in June 2020 and annulay every 5 years

GYTS will be repeated in 2022

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.

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	Yes
Assistance received	Yes

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

Assistance provided	Yes
Assistance received	Yes

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

Assistance provided	Yes
Assistance received	Yes

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

Qatar is part of GCCs forum where Countries exchange assistance and support including information related to policies, and studies

MOPH responsible for development, transfer and acquisition and delivering of technology, knowledge, skills, capacity and expertise related to tobacco control

- The addiction and rehabilitation center responsible for identification of methods for tobacco control, including comprehensive treatment of nicotine addiction.

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

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.

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 ✘

E. PRIORITIES AND COMMENTS

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

- 1- Ratification of the WHO FCTC protocol on illicit tobacco trade
- 2- measure effect of exercise tax that applied last year and decide for more taxation per Tobacco products
- 3- Issue conflict of interest for all MoPH staff and associate for tobacco industry as well as for CSR
4. build the national capacity in Tobacco products quality control and quality assurance

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.

- • establish National Quit line which offers support and guidance to smokers willing to quit
- * establishment of quality control laboratory for Tobacco products

*Resources & Law: new implementation system needed to be proposed now in order to implement the new bylaws after the cabinet approval,

Support the implementation of plain / standardize package for all Tobacco

- Human resources: The tobacco control team reform is the cornerstone for the success-
- Keeping the networking and partnership active as keeping the communication open with partners outside health sector needed influence from top managers.

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

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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