

**PHASE 2 (GROUP 2 QUESTIONS) OF THE REPORTING INSTRUMENT
UNDER THE WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL**

1. ORIGIN OF THE REPORT

1.1	NAME OF CONTRACTING PARTY	FINLAND
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1.4	Period of reporting	1/1/2007-1/1/2010
1.5	Date the report was submitted	23.4.2010

2. TOBACCO CONSUMPTION AND RELATED HEALTH, SOCIAL AND ECONOMIC INDICATORS

(with reference to Articles 19.2(a), 20.2, 20.3(a), 20.4(c) as well as Articles 6.2(a), 6.2(b), 6.3, 15.4, 15.5 and 17 as referred to in the respective subsections)

2.1	PREVALENCE OF TOBACCO USE		
2.1.1	Smoking prevalence in the adult population (all) <i>(Please provide prevalence data for total adult population, and identify the age considered, e.g. 15 years old and over, 18-64 years; see 2.1.1.2)</i>		
		Prevalence (%) <i>(please include all smoking tobacco products in prevalence data)</i>	Average number of the most-consumed smoking tobacco product used per day
MALES			
	Current smokers	30.60 %	
	Daily smokers	24.00 %	17.00
	Occasional smokers	6.60 %	
	Former smokers	24.50 %	
	Never smokers	43.40 %	
FEMALES			
	Current smokers	23.30 %	
	Daily smokers	17.60 %	13.00
	Occasional smokers	5.70 %	
	Former smokers	19.30 %	
	Never smokers	56.40 %	
TOTAL (males and females)			
	Current smokers	26.50 %	
	Daily smokers	20.40 %	15.00
	Occasional smokers	6.10 %	
	Former smokers	21.60 %	
	Never smokers	50.80 %	

2.1.1.1	Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.1:
	Smoking tobacco products includes use of cigarettes (factory-made or self-rolled cigarettes).
2.1.1.2	Please indicate the age range to which the data used to answer question 2.1.1 refer:
	The age range to which our prevalence data for the entire adult population refers is 15-64 years.
2.1.1.3	Please indicate the year and source of the data used to answer question 2.1.1:
	<p>Data for table 2.1.1 were derived from “Health Behaviour and Health among the Finnish Adult Population” (AVTK)- report which presents the results of the spring 2008 survey.</p> <p>For the 2008 survey, a random sample (n=5000) of Finnish adults aged between 15 and 64 was derived from the Population Register. A questionnaire was mailed in April 2008 with three reminders. The number of respondents was 3216 (response rate 64%).</p> <p>http://www.thl.fi/thl-client/pdfs/dcb684e6-d94f-4724-96d1-9f382492ac54</p>
2.1.1.4	Please provide the definitions of “current smoker”, “daily smoker”, “occasional smoker”, “former smoker” and “never smoker” used in this report.
	Smoking status was acquired by smoking index variable. Derivation of smoking index is described in appendix: “Health behavior and health among Finnish adult population, Spring 2008, page 20”. “Current smokers” includes both daily and occasional smokers. “Former smokers” includes quitters given up smoking 1-12 months ago and over a year ago.
2.1.1.5	Please provide a brief explanation of the trend in smoking prevalence in the adult population in the past three years or since submission of your last report.

Trend in smoking prevalence in 2005-2008.

Males

The prevalence of current smokers decreased from 33% to 31%. Amount of daily smokers decreased from 26% to 24%. Prevalence of occasional smokers did not change from 7%. Percentage of former smokers rose slightly from 24% to 25%. Prevalence of never smokers increased from 41% to 43%.

Females

The prevalence of current smokers decreased from 25% to 23%. Amount of daily smokers stayed in 18%. Prevalence of occasional smokers decreased from 7% to 6%. Percentage of former smokers increased from 17% to 19%. Prevalence of never smokers decreased slightly from 57% to 56%.

Total

The prevalence of current smokers decreased from 29% to 27%. Amount of daily smokers decreased from 22% to 20%. Percentage of occasional smokers decreased slightly from 7% to 6%. Prevalence of former smokers increased from 20% to 22%. The amount of never smokers increased from 49% to 51%.

2.1.2	Smoking prevalence in the adult population (by age groups) <i>(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)</i>	
	Age group (adults)	Prevalence (%) <i>(please include all smoking tobacco products in prevalence data)</i>
MALES		
Current smokers ¹ Add age group	15-24	25.60 %
	25-34	37.70 %
	35-44	36.30 %
	45-54	30.20 %
	55-64	25.60 %
FEMALES		
Current smokers ¹ Add age group	15-24	24.30 %
	25-34	26.10 %
	35-44	21.20 %
	45-54	26.30 %
	55-64	19.5 %
TOTAL (males and females)		
Current smokers ¹ Add age group	15-24	25.00 %
	25-34	31.90 %
	35-44	28.80 %
	45-54	28.30 %
	55-64	22.60 %

¹ Please provide here data on either all current smokers or daily smokers only, whichever is available.

2.1.2.1	<p>Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.2:</p> <p>Smoking tobacco products includes use of cigarettes (factory-made or self-rolled cigarettes).</p>
2.1.2.2	<p>Please indicate the year and source of the data used to answer question 2.1.2:</p> <p>Data for table 2.1.2 were derived from “Health Behaviour and Health among the Finnish Adult Population” (AVTK)- report which presents the results of the spring 2008 survey.</p> <p>For the 2008 survey, a random sample (n=5000) of Finnish adults aged between 15 and 64 was derived from the Population Register. A questionnaire was mailed in April 2008 with three reminders. The number of respondents was 3216 (response rate 64%).</p> <p>http://www.thl.fi/thl-client/pdfs/dcb684e6-d94f-4724-96d1-9f382492ac54</p>
2.1.2.3	<p>Please provide a brief explanation of the trend in current smoking prevalence by age group in the past three years or since submission of your last report, if data are available.</p> <p>Trend in smoking prevalence in 2005-2008 (by age group)</p> <p>Males</p> <p>Among 15-24 old the smoking prevalence decreased from 29% to 26%. Prevalence among 25-34 old increased from 36% to 38% Among 35-44 old percentage of current smokers decreased from 39% to 36%. Prevalence in 45-54 old decreased considerably from 37% to 30%. Among 55-64 old there was a slight trend upwards from 25% to 26%.</p> <p>Females</p> <p>Among 15-24 old the smoking prevalence decreased considerably from 32% to 24%. Prevalence among 25-34 old decreased from 32% to 26%. Among 35-44 old the percentage of current smokers did not change from 21%. Prevalence in group 45-54 old stayed in 26%. Among 55-64 old the percentage rose from 17% to 20%.</p> <p>Total</p> <p>Among 15-24 old the smoking prevalence decreased from 31% to 25%. Prevalence among 25-34 old decreased from 34% to 32%. Among 35-44 old the percentage of current smokers decreased slightly from 30% to 29%. Prevalence in group 45-54 old decreased from 31% to 28%. Among 55-64 old the percentage rose slightly from 21% to 23%.</p>

2.1.3	Prevalence of smokeless tobacco use in the adult population (all) <i>(Please provide prevalence data for total adult population, and identify the age considered in 2.1.3.2, e.g. 15 years old and over, 18–64 years; see 2.1.3.2)</i>	
		Prevalence (%) <i>(please include all smokeless tobacco products in prevalence data)</i>
	MALES	
	Current users	5.30 %
	Daily users	1.70 %
	Occasional users	3.60 %
	Former users	10.00 %
	Never users	84.7 %
	FEMALES	
	Current users	0.50 %
	Daily users	0.20 %
	Occasional users	0.30 %
	Former users	1.60 %
	Never users	97.9 %
	TOTAL (males and females)	
	Current users	2.60 %
	Daily users	0.90 %
	Occasional users	1.70 %
	Former users	5.30 %
	Never users	92.1 %

2.1.3.1	<p>Please indicate the smokeless tobacco products included in calculating prevalence for question 2.1.3:</p> <p>mostly swedish type moist snuff</p>
2.1.3.2	<p>Please indicate the age range to which the data used to answer question 2.1.3 refer:</p> <p>15-64 years.</p>
2.1.3.3	<p>Please indicate the year and source of the data used to answer question 2.1.3:</p> <p>“Health Behaviour and Health among the Finnish Adult Population” (AVTK)- report, National Institute for Health and Welfare, spring 2008 survey. For the 2008 survey, a random sample (n=5000) of Finnish adults aged between 15 and 64 was derived from the Population Register. A questionnaire was mailed in April 2008 with three reminders. The number of respondents was 3216 (response rate 64%).</p> <p>http://www.thl.fi/thl-client/pdfs/dcb684e6-d94f-4724-96d1-9f382492ac54</p> <p>As part of preparatory work for amending the Tobacco Act (Government Bill 180/2009) the National Supervisory Authority for Welfare and Health (Valvira) prepared in 2008 a summary report of smokeless tobacco use in Finland:</p> <p>http://www.stm.fi/c/document_library/get_file?folderId=39503&name=DLE-8780.pdf (ANNEX, in Finnish)</p>
2.1.3.4	<p>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.</p> <p>In the question the respondents were asked whether they currently use snuff. “Current users” includes both daily and occasional users of snuff. “Former users” includes respondents choosing the answer “Not at all nowadays”.</p>
2.1.3.5	<p>Please provide a brief explanation of the trend in smokeless tobacco use in the adult population in the past three years or since submission of your last report.</p> <p>The prevalence of smokeless tobacco (snuff) use in the adult population has remained at the approximately the same level since 2005.</p>

2.1.4	Prevalence of smokeless tobacco use in the adult population (current users) by age group	
	<i>(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)</i>	
	Age group (adults)	Prevalence (%) <i>(please include all smokeless tobacco products in prevalence data)</i>
MALES		
Current users ²	15-24	1.60 %
Add age group	25-34	3.30 %
	35-44	3.70 %
	45-54	0.30 %
	55-64	0.60 %
FEMALES		
Current users ²	15-24	0.00 %
Add age group	25-34	0.30 %
	35-44	0.30 %
	45-54	0.00 %
	55-64	0.20 %
TOTAL (males and females)		
Current users ²	15-24	0.60 %
Add age group	25-34	1.50 %
	35-44	1.90 %
	45-54	0.10 %
	55-64	0.40 %

² Please provide data on either all current users or daily users only, whichever is available.

2.1.4.1	Please indicate the smokeless tobacco products included in the answer to question 2.1.4: Mostly Swedish-type moist snuff.
2.1.4.2	Please indicate the year and source of the data used to answer question 2.1.4: “Health Behaviour and Health among the Finnish Adult Population” (AVTK)- report, National Institute for Health and Welfare, spring 2008 survey. For the 2008 survey, a random sample (n=5000) of Finnish adults aged between 15 and 64 was derived from the Population Register. A questionnaire was mailed in April 2008 with three reminders. The number of respondents was 3216 (response rate 64%). Daily snuff users. http://www.thl.fi/thl-client/pdfs/dcb684e6-d94f-4724-96d1-9f382492ac54
2.1.4.3	Please provide a brief explanation of the trend in current use of smokeless tobacco by adult age groups in the past three years or since submission of your last report. The prevalence of smokeless tobacco (snuff) use in the adult population by age group has remained at the approximately the same level since 2005.

2.1.5		Tobacco use by ethnic group(s)			
	Ethnic group(s)	Prevalence (%) (please include all smoking or smokeless tobacco products in prevalence data)			
		Males	Females	Total (males and females)	
Current users ³		%	%	%	
Add ethnic group		%	%	%	
		%	%	%	
		%	%	%	
		%	%	%	
2.1.5.1	Please indicate the tobacco products included in the answer to question 2.1.5:				
2.1.5.2	Please indicate the age range to which the data used to answer question 2.1.5 refer:				
2.1.5.3	Please indicate the year and source of the data used to answer question 2.1.5: Not available.				

³ Please provide data on either all current users or daily users only, whichever is available.

2.1.6	Tobacco use by young persons				
		Age range	Prevalence (%) <i>(please include all smoking or smokeless tobacco products in prevalence data)</i>		
			Smoking tobacco	Smokeless tobacco	Other tobacco (e.g. water pipe)
Boys					
	Current users ⁴	12	0.00 %	%	%
	Add youth group	14	8.00 %	4.70 %	%
		16	21.00 %	11.90 %	%
		18	28.00 %	11.70 %	%
		18-24	36.60 %	4.00 %	%
Girls					
	Current users ⁴	12	0.00 %	%	%
	Add youth group	14	8.00 %	%	%
		16	22.00 %	2.10 %	%
		18	26.00 %	1.30 %	%
		18-24	24.90 %	0.00 %	%
TOTAL (boys and girls)					
	Current users ⁴	12	0.00 %	%	%
	Add youth group	14	8.00 %	2.40 %	%
		16	21.50 %	7.00 %	%
		18	27.00 %	6.50 %	%
		18-24	30.80 %	2.00 %	%
2.1.6.1	Please indicate the tobacco products included in calculating prevalence for question 2.1.6:				

⁴ Please provide data on either all current users or daily users only, whichever is available.

Smoking tobacco includes use of cigarettes (factory-made or self-rolled cigarettes). Smokeless tobacco includes use of snus (usually Swedish-type moist snuff).

NOTE: Because the 'add youth group' -button did not work in our Word 2000 -programme here are the information for the age group 25-29 (smoking/smoleless tobacco):

Boys: 31.7%/2.5%

Girls: 21.5%/0%

Total: 26.6%/1.3%

2.1.6.2	<p data-bbox="488 216 1338 243">Please indicate the year and source of the data used to answer question 2.1.6:</p> <p data-bbox="488 264 1395 401">In the Finnish jurisdiction a 'young person' is defined being under 29 years old. There is no single national survey instrument that would report the prevalences of tobacco use among adolescents and young adults. Therefore two different surveys are used in reporting here.</p> <p data-bbox="488 422 1406 695">Tobacco use in the adolescent population (12 to 18 years) has been monitored via the nationwide 'Adolescent Health and Lifestyle Survey', a mail survey conducted biennially since 1977 with comparable methods. The latest survey was conducted in the spring of 2009, to which a total of 5,516 adolescents responded (56 %). Data presented here originates from this 2009 survey. The survey report "The Adolescent Health and Lifestyle Survey 2009. Adolescent smoking, alcohol and substance use in 1977–2009" is attached to this reporting instrument.</p> <p data-bbox="488 716 1411 779">http://www.stm.fi/c/document_library/get_file?folderId=39503&name=DLE-10634.pdf</p> <p data-bbox="488 800 1411 1041">In 2001 a survey on the health of young adults (18-29 years) and the factors determining their health was conducted as a part of the 'Health 2000 Study'. The sample of 1,894 subjects represented Finland's population in the age group 18 to 29 years. Of these, 79% were interviewed and 68% returned the basic questionnaire. The survey report "The health of young adults. Baseline results of the Health 2000 Study on the health of 18 to 29-year-olds and the factors associated with it" is attached to this reporting instrument.</p> <p data-bbox="488 1062 1065 1089">http://www.terveys2000.fi/julkaisut/2005b7.pdf</p>
2.1.6.3	<p data-bbox="488 1108 1349 1171">Please provide the definition of "current smoking/tobacco use" used to answer question 2.1.6 in the space below.</p>

	<p>Data of 12-18-year-olds (Adolescent Health and Lifestyle Survey):</p> <p>Current smoking tobacco equals here daily use of cigarettes, either factory-made or self-rolled. To be labeled as daily smoker in above mentioned survey equals having smoked over 50 cigarettes in lifetime, having smoked during last seven days and smoking at least once a day. Also those who reported smoking "at least once a week, but not daily" but still smoked at least one cigarette per day were labeled into daily cigarette smokers.</p> <p>Current smokeless tobacco equals here daily or occasional use of snus (usually Swedish-type moist snuff). To be labeled as current user of snus in above mentioned survey equals using snus occasionally or at least once a day. In the data there were no cases of current snus users in 12-year-old boys and 12- and 14-year-old girls, so those parts are blank instead of some percentage.</p> <p>Data of 18-29-year-olds (Health 2000 Study young adult sample):</p> <p>Current smoking tobacco equals here daily use of cigarettes. How to be labeled as a daily smoker in above mentioned study has not been explained in the survey report.</p> <p>Current smokeless tobacco equals here daily or occasional use of snus (usually Swedish-type moist snuff). The survey separated daily and occasional use but these numbers are combined here to present current use. How to be labeled as a current snus user in above mentioned study has not been explained in the survey report.</p> <p>Total numbers were not presented in the original reports by age groups. Those are calculated to this reporting instrument from the percentages of boys and girls in each age group.</p> <p>Data of use of other tobacco products than cigarettes and snus among young people in Finland has not been collected on national level. Therefore those parts are left blank.</p>
2.1.6.4	<p>Please provide a brief explanation of the trend in tobacco use by young persons in the past three years or since submission of your last report.</p> <p>In Finnish adolescents the decreasing trend in tobacco experiments continued over the past two years, that is since last Adolescent Health and Lifestyle Survey, apart from 14-year-old boys whose tobacco experiments increased. The long-term decrease seen in daily smoking stopped, and turned to increase among 14–16-year-old boys over the past two years. Snus use and smoking self-rolled cigarettes increased over the past two years. Experimenting with snus increased during the 2007–2009 among 14-, 16-, and 18-year-old boys.</p> <p>In Finnish 18-29-year-olds the 'Health 2000 Study' was the first to address particularly this age group. The follow-up-study has not yet been conducted. Therefore trend reporting is not possible for this age group. Overall, the percentage of daily smoking is high especially among male young adults.</p>

2.2	EXPOSURE TO TOBACCO SMOKE
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2.2.1	Do you have any data on exposure to tobacco smoke in your population? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																																
2.2.2	<p>If you answered “Yes” to question 2.2.1, please provide details in the space below (e.g. exposure by gender, at home, in the workplace, on public transport).</p> <p>1)</p> <p>Proportion of respondents exposed to tobacco smoke at home (Health Behaviour and Health among the Finnish Adult Population, 2008)</p> <table border="0" data-bbox="483 457 1356 779"> <thead> <tr> <th></th> <th>Males</th> <th>Females</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>The respondent his/herself smokes at home</td> <td>20,4</td> <td>14,6</td> <td>17,1</td> </tr> <tr> <td>Spouse smokes at home</td> <td>6,3</td> <td>10,1</td> <td>8,5</td> </tr> <tr> <td>Other adults smoking at home</td> <td>4,3</td> <td>3,8</td> <td>4,0</td> </tr> <tr> <td>Someone else (younger than 18 – years smoking at home</td> <td>1,0</td> <td>0,9</td> <td>1,0</td> </tr> <tr> <td>Nobody smokes at home</td> <td>74,2</td> <td>76,9</td> <td>75,7</td> </tr> </tbody> </table> <p>Persons exposed to tobacco smoke daily at work (Health Behaviour and Health among the Finnish Adult Population, 2008)</p> <table border="0" data-bbox="483 877 1101 1163"> <thead> <tr> <th></th> <th>Males</th> <th>Females</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>More than 5 hours</td> <td>3,6</td> <td>0,8</td> <td>2,0</td> </tr> <tr> <td>1-5 hours</td> <td>2,5</td> <td>1,0</td> <td>1,6</td> </tr> <tr> <td>Less than one hour a day</td> <td>8,3</td> <td>4,0</td> <td>5,9</td> </tr> <tr> <td>Almost never</td> <td>70,4</td> <td>72,5</td> <td>71,6</td> </tr> <tr> <td>Not working outside the home</td> <td>15,2</td> <td>21,7</td> <td>18,9</td> </tr> </tbody> </table> <p>2)</p> <p>The follow-up data from the Finnish Institute of Occupational Health (FIOH) which has been collected from Finnish restaurants between 1999 and 2009 shows that smoking has been more common among restaurant workers than in general population. In 1999, overall 32% of the women and 45% of the men in restaurant workers smoked daily, while in 2009 the figures were 31% and 30%, respectively. The number of daily smoked cigarettes has remained the same among restaurant workers during the follow-up period. Between 1999 and 2009, exposure to tobacco smoke for over four hours per work shift decreased from 73% to 4% among waiters and from 93% to 9% among bartenders. At the same time, the proportion of non-exposed waiters increased from 15% to 83% and bartenders from 5% to 70%.</p> <p>In another national survey from the FIOH among Finnish workforce (n=3000) in general, altogether 7-12% of workers reported exposure to tobacco smoke depending on the size of the workplace. Exposure was more common in small sized workplaces.</p>		Males	Females	Total	The respondent his/herself smokes at home	20,4	14,6	17,1	Spouse smokes at home	6,3	10,1	8,5	Other adults smoking at home	4,3	3,8	4,0	Someone else (younger than 18 – years smoking at home	1,0	0,9	1,0	Nobody smokes at home	74,2	76,9	75,7		Males	Females	Total	More than 5 hours	3,6	0,8	2,0	1-5 hours	2,5	1,0	1,6	Less than one hour a day	8,3	4,0	5,9	Almost never	70,4	72,5	71,6	Not working outside the home	15,2	21,7	18,9
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	<p>1)</p> <p>“Health Behaviour and Health among the Finnish Adult Population” (AVTK)- report, National Institute for Health and Welfare, spring 2008 survey. For the 2008 survey, a random sample (n=5000) of Finnish adults aged between 15 and 64 was derived from the Population Register. A questionnaire was mailed in April 2008 with three reminders. The number of respondents was 3216 (response rate 64%).</p> <p>http://www.thl.fi/thl-client/pdfs/dcb684e6-d94f-4724-96d1-9f382492ac54</p> <p>2)</p> <p>The Finnish Institute of Occupational Health (FIOH)</p> <p>http://www.ttl.fi/internet/english</p>
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2.3	TOBACCO-RELATED MORTALITY
2.3.1	Do you have information on tobacco-related mortality in your population? <input type="checkbox"/> Yes <input type="checkbox"/> No
2.3.2	If you answered “Yes” to question 2.3.1, what is the estimated total number of deaths attributable to tobacco use in your population?
2.3.3	<p>If available, please provide any additional information on mortality attributable to tobacco use (e.g. lung cancer, cardiovascular diseases) in your jurisdiction.</p> <p>Approximately 300,000 people died from smoking during 1950-2000 in Finland. Of these people, 62% were in middle-age (age group 35-69 years). Every fifth of all deaths in middle-age was caused by smoking. Smoking still kills about 5,100 people in Finland every year. 21 years of life are lost by those killed in middle-age by smoking.</p> <p>Of those killed by smoking, 2000 die of cancer, 1500 of vascular diseases, 1000 of respiratory diseases (chronic obstructive pulmonary disease), and 500 of other causes.</p> <p>More than half of these deaths caused by tobacco would be avoided if people stopped smoking.</p>
2.3.4	<p>Please indicate the year and source of the data used to answer questions 2.3.2 and 2.3.3, and please submit a copy of the study you refer to:</p> <p>Source: http://www.ctsu.ox.ac.uk/deathsfromsmoking/</p>

2.4	TOBACCO-RELATED COSTS
2.4.1	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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.4.2	If you answered “Yes” to question 2.4.1, please provide details (e.g. direct (health care-related) and indirect costs and, if possible, the method used to estimate these costs).

	<p>The total costs (including direct and indirect costs) of smoking in Finland have been estimated to rise to 2 billion Euro (€) per year. Lifetime health care costs per smoker were estimated in 2006 to be 1341€ for men (maximum) and 638€ for women (max.) Total health care costs due to smoking were 246M€. Up to 85% of these costs could be saved if all smokers would stop smoking.</p>
2.4.3	<p>Please indicate the year and source of the data used to answer question 2.4.2, and please submit a copy of the study you refer to:</p> <p>Pekurinen M. (1991) Economic aspects of smoking. Is there a case for government intervention in Finland? Research Reports 16/1991. Helsinki: National Agency for Welfare and Health</p> <p>Pekurinen M. (1999) Economic consequences of smoking in Finland. In: Jeanrenaud C and Soguel N (Eds.). Valuing the cost of smoking. Assessment methods, risk perception and policy options. Boston: Kluwer Academic Publishers 111-126</p> <p>Vitikainen K, Pekurinen K, Kiiskinen U, Mikkola H. Kannattaako tupakoinnin lopettaminen? Tupakoinnista aiheutuvien elinikäisten hoitokustannusten ja tupakoinnin lopettamisesta syntyvien säästöjen arviointia. Stakesin raportteja 1/2006. Helsinki: Stakes.</p>

2.5	SUPPLY OF TOBACCO AND TOBACCO PRODUCTS <i>(with reference to Articles 6.2(b), 20.4(c), and 15.5)</i>				
2.5.1	Licit supply of tobacco products				
	Product	Unit (<i>e.g.</i> <i>pieces, tonnes</i>)	Domestic production	Exports	Imports
	Smoking tobacco products Add product	Cigarettes	tonnes	61.39	4784.85
		Cigars, cheroots and cigarillos (0-3 g)	tonnes	1.24	157.33
		Smoking tobacco	tonnes	16.43	974.35
	Smokeless tobacco products Add product				
	Other tobacco products Add product				
	Tobacco	Leaves			
2.5.2	Please provide information on the volumes of duty-free sales (e.g. product, unit, quantity), if available.				
	In 2009, the amount of duty-free cigarettes imported to Finland by travellers was approximately 763 million pieces and the amount of duty-free snuff was approximately 5,7 million containers.				
2.5.3	Please indicate the year and source of the data used to answer questions 2.5.1 and 2.5.2:				
	<p>Finnish Customs 2009: Uljas - Foreign Trade Statistics http://uljas.tulli.fi/ (Question 2.5.1).</p> <p>Tobacco statistics 2008 http://www.stat.fi/til/tup/2008/tup_2008_2009-12-04_fi.pdf</p> <p>Interview study by TNS Gallup from year 2009 (Question 2.5.2).</p> <p>Due to data protection the local production data are not public from 1999 onwards. (Tobacco statistics 2008)</p>				

2.6	SEIZURES OF ILLICIT TOBACCO PRODUCTS <i>(with reference to Article 15.5)</i>				
2.6.1		Year	Product	Unit (e.g. millions of pieces)	Quantity seized
	Smoking tobacco products	2009	cigarettes	millions of pieces	16.04
	Add row	2008	cigarettes	millions of pieces	18.29
	Add row	2007	cigarettes	millions of pieces	22.81
	Smoking tobacco products				
	Add row				
	Add row				
	Smoking tobacco products				
	Add row				
	Add row				
	Add row				
	2.6.2	Do you have any information on the percentage of smuggled tobacco products on the national tobacco market? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2.6.3	If you answered “Yes” to question 2.6.2, what percentage of the national tobacco market do smuggled tobacco products constitute? %				
2.6.4	If you answered “Yes” to question 2.6.3 and you have information available, what is the trend over the past three years or since submission of your last report in the percentage of smuggled tobacco products in relation to the national tobacco market?				
2.6.5	Please provide any further information on illicit or smuggled tobacco products.				
	Our cigarettes seizures are under one per cent of legal cigarettes market.				
2.6.6	Please indicate the source of the data used to answer questions in section 2.6:				
	Customs statistic of cigarettes seizures.				

2.7	TOBACCO-GROWING
2.7.1	Is there any tobacco-growing in your jurisdiction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.7.2	If you answered “Yes” to question 2.7.1, please provide information on the number of workers involved in tobacco-growing. If available, please provide this figure broken down by gender.
2.7.3	Please provide, if available, the share of the value of tobacco leaf production in the national gross domestic product.

2.7.4	Please indicate the year and source of the data used to answer questions in section 2.7:

2.8	TAXATION OF TOBACCO PRODUCTS <i>(with reference to Articles 6.2(a) and 6.3)</i>				
2.8.1	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))? 77%				
2.8.2	How are the excise taxes levied (what types of taxes are levied)?				
	• Specific tax only	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
	• Ad valorem tax only	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
	• Combination of specific and ad valorem taxes	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
	• More complex structure (<i>please explain:</i>)				
2.8.3	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	excise	17.50	€/1000 units
	Add product	Cigarettes and Fine cut smoking tobacco	excise	52.00	% retail price
		Cigars and Cigarillos	excise	25.00	% retail price
		Fine cut smoking tobacco	excise	10.00	kilogram
		all tobacco products	VAT	22.00	% retail price
	Smokless tobacco products				
	Add product				

⁵ The “base of the tax” should clearly indicate the tax rate or amount the tax is based on. If the tax is expressed as a percentage (e.g. ad valorem tax), the base of the tax is the actual value of the good that is taxed; for example, 45% of the manufacturer’s price, 30% of the retail price. In this case the “base” is the manufacturer’s price or retail price. If the tax is expressed as an amount (e.g. specific tax), the base of the tax is the volume (number of pieces or by weight) of goods that is taxed. For example, if a tax is US\$ 5 per 100 cigarettes, the amount of tax is US\$ 5 and the base of the tax is 100 cigarettes.

	Other tobacco products Add product	Other tobacco products	excise	60.00	% retail price
		Other Smoking tobacco	excise	8.50	kilograms
		Other Smoking tobacco	excise	48.00	% retail price
2.8.4	Please briefly describe the trends in taxation for tobacco products in the past three years or since submission of your last report in your jurisdiction. Taxes were increased two times (2009 and 2010) for 5-25% depending on a product.				
2.8.5	Do you earmark any percentage of your taxation income for funding any national plan or strategy on tobacco control in your jurisdiction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(In reference to Article 26)</i>				
2.8.6	If you answered “Yes” to question 2.8.5, please provide details in the space below.				
2.8.7	Please indicate the year and source of the data used to answer questions 2.8.1 to 2.8.6: 2009				

2.9	PRICE OF TOBACCO PRODUCTS <i>(with reference to Article 6.2(a))</i>				
2.9.1	Please provide the retail prices of the three most widely sold brands of domestic and imported tobacco products at the most widely used point of sale in your capital city.				
	Most widely sold brand			Number of units or amount per package	Retail price
	Smoking tobacco products	Smokeless tobacco products	Other tobacco products		
Domestic					
Imported	Marlboro			20 units	5.00
	L&M			20 units	4.40
	Chesterfield			20 units	3.80

2.9.2	Please indicate the year and source of the data used to answer question 2.9.1.
	No official data. Sale volumes in one of the retail stores 2010.
2.9.3	Please provide the currency used to complete the “Rate or amount” section of question 2.8.3 and the “Retail price” section of question 2.9.1. If known, please provide the exchange rate of this currency to US dollars as well as the date of this exchange rate.
	Euro
2.9.4	Please briefly describe the trend in the prices of tobacco products in the past three years or since submission of your last report in your jurisdiction.
	Raising the taxes has recently increased the prices of tobacco products (see also 2.8.4).

3. LEGISLATION, REGULATION AND POLICIES

3.1	<i>Article</i>	GENERAL OBLIGATIONS <i>(with reference to Article 5)</i>		
3.1.1	5	General obligations		
3.1.1.1	5.1	Have you developed and implemented comprehensive multisectoral national tobacco control strategies, plans and programmes in accordance with the Convention?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.1.1.2	5.1	If you answered “No” to question 3.1.1.1, 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.1.1.3	5.1	If you answered “No” to question 3.1.1.2, is any aspect of tobacco control that is referred to in the Convention included in any national strategy, plan or programme?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.1.1.4	5.2(a)	Have you established or reinforced and financed		
		• a focal point for tobacco control	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• a tobacco control unit	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		• a national coordinating mechanism for tobacco control	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.1.1.5	If you answered “Yes” to any of the questions under 3.1.1.4, 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).			

	<p>The Ministry of Social Affairs and Health has a leading role in tobacco control in Finland. Tobacco control is located under the Department for Promotion of Welfare and Health in the Unit that coordinates substance abuse and harm prevention policies. The Ministry is responsible for law-drafting, general strategic guidance as well as international cooperation in this field. The Advisory Committee on Intoxicant and Temperance Affairs that operates under the Ministry has also dealt with issues related to tobacco use and control.</p> <p>http://www.stm.fi/en/welfare/substance_abuse</p> <p>The regulations of the Act on Measures to Reduce Tobacco Smoking (Tobacco Act) are overseen by the National Supervisory Authority for Welfare and Health.</p> <p>http://www.valvira.fi/en/supervision_guidance/tobacco</p> <p>The National Institute for Health and Welfare and the Finnish Institute of Occupational Health are the main specialist bodies in activities to reduce smoking. The former, in cooperation with Regional State Administrative Agencies, is responsible for the nation-wide and regional action to reduce smoking. It is also responsible for providing other State authorities and local authorities with material on the dangers and harms to health originating from smoking and issuing instructions and providing methods for reducing smoking.</p> <p>http://www.thl.fi/en_US/web/en/home</p> <p>http://www.ttl.fi/internet/english</p> <p>There is active coordination between these State authorities but no specific or sustainable coordinating structure (board/committee etc.).</p>
3.1.1.6	<p>Please provide a brief description of the progress made in implementing Article 5.1 and 5.2 (<i>General obligations</i>) in the past three years or since submission of your last report.</p>

	<p>The National tobacco control strategy is currently being discussed and reformulated. The guiding process for the reformulation is the amendment to the Tobacco Act (Government Bill 180/2009) which is currently debated in the national Parliament. The Government proposes changing the aim of the Act so that it will be to stop the use of tobacco products. The current formulation of the aim is to reduce tobacco smoking and to prevent its dangers and harms to health. This formulation of the object would provide a starting point for a more comprehensive tobacco control strategy.</p> <p>At the moment there is no comprehensive multisectoral strategy document exclusively for tobacco control. However there are goals and measures inscribed in other national health promotion programmes such as: Government Resolution on the Health 2015 Programme, Government Policy Programme on Health Promotion, National Development Programme for Social Welfare and Health Care (Kaste) 2008–2011 and Action Plan to Reduce Health Inequalities 2008-2011.</p> <p>Health promotion programmes:</p> <p>The Government Resolution on the Health 2015 http://www.terveys2015.fi/english.html http://www.terveys2015.fi/images/health2015.pdf</p> <p>POLICY PROGRAMME FOR HEALTH PROMOTION http://www.vn.fi/toiminta/politiikkaohjelmat/terveys/ohjelmasisaeltoe/en.pdf</p> <p>National Development Programme for Social Welfare and Health Care (Kaste) http://www.stm.fi/en/strategies_and_programmes/kaste</p> <p>National action plan to reduce health inequalities 2008–2011 http://www.stm.fi/c/document_library/get_file?folderId=39503&name=DLE-6406.pdf</p>
3.1.1.7	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>
	<p>Press release 321/2009 (01.10.2009) The aim of the Tobacco Act should be to stop the use of tobacco products http://www.stm.fi/tiedotteet/tiedote/view/1429085#en</p>

3.1.2	5.3	<p>Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry</p> <p><i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i></p> <p>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:</p>		
3.1.2.1		– protecting public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.1.2.2		– 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.1.2.3	<p>If you answered “Yes” to any of the questions under 3.1.2.1 or 3.1.2.2, please provide details in the space below.</p> <p>Finnish public health policies are well protected from the tobacco industry. The interaction with the industry is limited mainly to open requests for comment. However there is no extensive public repository on industry's activities.</p> <p>Many non-governmental organizations report that they actively disseminate information and raise discussion on the industry's activities, interests and methods.</p> <p>For example Finland's Ash disseminates information on tactics of the tobacco industry and encourages public discussion on the tobacco industry's methods to ensure their profits.</p> <p>Finnish Centre for Health Promotion is maintaining a website www.tupakkaverkko.fi for introducing information about tobacco issues. Activities of tobacco industry are also reported on the website.</p> <p>Finnish Lung Health Association (Filha) has adopted the principle of no interaction with tobacco industry in any circumstances. Information on the issue is an integral part of all training of health care professionals provided by Filha by which the professionals are made aware of the interests of the tobacco industry.</p>			
3.1.2.4	Please provide a brief description of the progress made in implementing Article 5.3 in the past three years or since submission of your last report.			
3.1.2.5	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.			

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3.2	<i>Article</i>	MEASURES RELATING TO THE REDUCTION OF DEMAND FOR TOBACCO (with reference to Articles 6–14)		
3.2.1	6	Price and tax measures to reduce the demand for tobacco (Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)		
		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:		
3.2.1.1	6.2(a)	– tax policies and, where appropriate, price policies on tobacco products so as to contribute to the health objectives aimed at reducing tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.1.2	6.2(b)	– prohibiting or restricting, as appropriate, sales to international travellers of tax- and duty-free tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.1.3		– prohibiting or restricting, as appropriate, imports by international travellers of tax- and duty-free tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.1.4	Please provide a brief description of the progress made in implementing Article 6 (<i>Price and tax measures to reduce the demand for tobacco</i>) in the past three years or since submission of your last report.			
	Taxes were increased two times (2009 and 2010) for 5-25% depending on a product. 3.2.1.3: According to the Section 7 b of the Finnish Tobacco Act a passenger arriving in Finland cannot import for personal use more than 200 cigarettes, 50 cigars, 100 cigarillos and 250 grams of pipe or cigarette tobacco if the unit packets have not been furnished with the following texts, written in Finnish and Swedish, 1) a warning of the harms to health caused by tobacco; 2) information on the tar, nicotine and carbon monoxide yields that arise when smoking a cigarette; and 3) information necessary for the identification and tracing of the product. This amendment entered into force on 1 July 2010.			
3.2.1.5	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.			

3.2.2	8.2	Protection from exposure to tobacco smoke <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>			
		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:			
3.2.2.1		– protection from exposure to tobacco smoke in indoor workplaces?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.2.2		If you answered “Yes” to question 3.2.2.1, how comprehensive is the protection from exposure to tobacco smoke in the following indoor workplaces:	Complete	Partial	None
		• government buildings	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		• health-care facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		• educational facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		• private workplaces	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		• motor vehicles used as places of work (e.g., ambulances, delivery vehicles)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		• other (<i>please specify:</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2.2.3		– protection from exposure to tobacco smoke in public transport?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.2.4		If you answered “Yes” to question 3.2.2.3, how comprehensive is the protection from exposure to tobacco smoke in the following types of public transport:	Complete	Partial	None
		• airplanes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		• trains	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		• ground public transport (buses, trolleybuses, trams)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		• taxis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		• other (<i>please specify:</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3.2.2.5		– protection from exposure to tobacco smoke in indoor public places?	<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No
3.2.2.6		If you answered “Yes” to question 3.2.2.5, how comprehensive is the protection from exposure to tobacco smoke in the following indoor public places:	Complete	Partial	None
		• cultural facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		• bars	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		• nightclubs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		• restaurants	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		• other (<i>please specify:</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2.2.7		Please provide a brief summary of complete and partial measures, with specific details of the partial measures that have been implemented.			
		• Protection from exposure to tobacco smoke in indoor workplaces			

According to the Section 13 of the Finnish Tobacco Act the proprietors of indoor premises or public means of transport referred to in section 12 and the organisers of public events may, however, allow smoking in a room intended for this purpose or in part of the facilities or space as long as no tobacco smoke can enter those indoor premises where smoking is prohibited. A separate room or other space for smoking shall not, however, be located in conjunction with indoor premises primarily used by persons under the age of eighteen.

Contrary to what is provided in section 12, paragraph 1 (2), (4) and (5) smoking may be allowed in rooms for accommodation of customers in hotels and corresponding establishments as well as in restaurants on board a vessel in international maritime traffic whose serving area is not larger than 50 m². On premises with a larger serving area, an area of maximum 50 per cent may be reserved for smokers. In that case it has to be seen to it, however, that tobacco smoke does not spread to the area where smoking is prohibited.

The restaurant facilities in a hotel and restaurant complex that are open at the same time are regarded as one and the same restaurant. By serving area is meant an area reserved for eating the food or drinking the drinks served there.

Following negotiation with employees or their representative, employers are required to prohibit or restrict smoking so that employees are not involuntarily exposed to tobacco smoke on any work premises at the workplace where smoking is not prohibited under section 12, subparagraph 5.

What is provided in section 12, subparagraph 5, and in paragraph 3 of this section on the prohibition and restriction of smoking on common and work premises at workplaces shall not apply to any work premises which are located in the home of the worker or the business entrepreneur or other professional, or to other work premises in the exclusive use of persons belonging to the same family and others living in the same household.

The proprietors of indoor premises and organisers of public events referred to in section 12 above, or the proprietors of space intended for smoking referred to in paragraph 1 of this section shall put up signs indicating where smoking is prohibited and where smoking is allowed. Further provisions concerning such signs and their placement may be laid down by decree.

ACT ON MEASURES TO REDUCE TOBACCO SMOKING
<http://www.finlex.fi/fi/laki/ajantasa/1976/19760693#a12.6.2009-412>

Unofficial translation (2006):
<http://www.finlex.fi/en/laki/kaannokset/1976/en19760693.pdf>

	<ul style="list-style-type: none"> • Protection from exposure to tobacco smoke in public transport
	Please see above
	<ul style="list-style-type: none"> • Protection from exposure to tobacco smoke in indoor public places
	Please see above. As an exception to this, according to the Tobacco Act Section 13 b, smoking can be allowed on the indoor premises of restaurants only in a separate smoking area approved for smoking. In that case it must, however, be seen to it that tobacco smoke does not spread to the area where smoking is prohibited. It is prohibited to serve food or drink, or to eat or drink in the smoking area.
3.2.2.8	Please provide a brief description of the progress made in implementing Article 8 (<i>Protection from exposure to tobacco smoke</i>) in the past three years or since submission of your last report.
	There is a Government proposal (Government Bill 180/2009) that the prohibitions against smoking would be extended to apply e.g. to facilities used by children and young people and to private vehicles, joint facilities of housing real estates, events organised outdoors, and hotel rooms.
3.2.2.9	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.
	<p>Tobacco legislation launched in 1995 concerning other workplaces than restaurants has reduced significantly occupational exposure to tobacco smoke in Finland. However, in average 10% of the Finnish workforce still report smell of tobacco smoke in workplaces, especially in small scale companies. Tobacco Act concerning restaurants has reduced the exposure to tobacco smoke in the hospitality industry. However, only after the total ban since June 2009, a significant reduction of exposure to tobacco smoke was detected among workers and clients in Finnish restaurants. The latest Tobacco Act concerning restaurants still allows the restaurant owners to build a tobacco cabin for smokers. However, due to strict regulations and according to the preliminary findings from the FIOH, smoke seems not to spread from smoking cabins to other areas of restaurants.</p> <p>Finnish Institute of Occupational Health (FIOH) http://www.ttl.fi/internet/english</p>

3.2.3	9	<p>Regulation of the contents of tobacco products</p> <p><i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i></p>		
		<p>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:</p>		
3.2.3.1		– testing and measuring the contents of tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.3.2		– testing and measuring the emissions of tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.3.3		– regulating the contents of tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.3.4		– regulating the emissions of tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.3.5	<p>Please provide a brief description of the progress made in implementing Article 9 (<i>Regulation of the contents of tobacco products</i>) in the past three years or since submission of your last report.</p> <p>According to the recent amendment to the Tobacco Act section 5 paragraph 2 now states that the burning qualities of cigarettes must comply with the sufficient fire safety requirements (19.12.2008/984). Further provisions of the fire safety requirements are laid down by decree of the Ministry of Social Affairs and Health. The new amendments entered into force on 1 April 2010.</p> <p>According to the tobacco legislation the burning behaviour of cigarettes must be tested in accordance with the US ASTM Standard Test Method for Measuring the Ignition Strength of Cigarettes or the Australian AS Standard. It is required that at most 25 per cent of a batch of 40 cigarettes being tested will burn to the end. The manufacturer or importer of cigarettes must be able to prove that the cigarettes meet the defined fire safety requirements.</p> <p>The manufacturer or importer of tobacco products shall once a year (by the end of November) submit to the National Supervisory Authority for Welfare and Health research documents and statements of the compliance with reduced ignition propensity requirements on a brand-name-by-brand-name basis (Tobacco Act 6 c §). The first time to submit documents concerning the compliment of reduced ignition propensity is in November 2010.</p>			
3.2.3.6	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>			

The manufacturer or importer of tobacco products shall once a year submit to National Supervisory Authority for Welfare and Health (Valvira) :

- a list with information on the tar, nicotine and carbon monoxide yields produced when smoking cigarettes offered for commercial sale, as well as information about the testing laboratory that has carried out the tests and the verification; and

- a list of ingredients on a brand-name-by-brand-name basis and type-by-type-basis of all the ingredients used in the manufacture of each tobacco product, and of their amounts.

- research documents and statements by an accredited testing laboratory that indicate the compliance of fire safety requirements and information on the laboratory or research institute on a brand-name-by-brand-name basis.

3.2.4	10	<p>Regulation of tobacco product disclosures</p> <p><i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i></p>		
		<p>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:</p>		
3.2.4.1		<p>– requiring manufacturers or importers of tobacco products to disclose to Government authorities information about the:</p>		
		<p>• contents of tobacco products?</p>	<p><input checked="" type="checkbox"/> Yes</p>	<p><input type="checkbox"/> No</p>
		<p>• emissions of tobacco products?</p>	<p><input checked="" type="checkbox"/> Yes</p>	<p><input type="checkbox"/> No</p>
3.2.4.2		<p>– requiring public disclosure of information about the:</p>		
		<p>• contents of tobacco products?</p>	<p><input checked="" type="checkbox"/> Yes</p>	<p><input type="checkbox"/> No</p>
		<p>• emissions of tobacco products?</p>	<p><input checked="" type="checkbox"/> Yes</p>	<p><input type="checkbox"/> No</p>
3.2.4.3	<p>Please provide a brief description of the progress made in implementing Article 10 (<i>Regulation of tobacco product disclosures</i>) in the past three years or since submission of your last report.</p>			

	<p>The regulation is based on the Tobacco Act and the Decree of the Ministry of Social Affairs and Health on Labelling the Unit Packets of Tobacco Products, on Maximum Yields of and Methods for Measuring Harmful Substances, and on Testing Laboratories (No. 641/2002) issued on 31 July 2002, implementing the EU directive 2001/37/EC.</p> <p>The manufacturer or importer of tobacco products shall once a year submit to the National Supervisory Authority for Welfare and Health (Valvira) a list with information on the tar, nicotine and carbon monoxide yields produced when smoking cigarettes and a list of ingredients on a brand-name-by-brand-name basis and type-by-type-basis of all the ingredients used in the manufacture of each tobacco product, and of their amounts.</p> <p>The list of ingredients shall also include the grounds for why the ingredients have been included in the tobacco products, the purpose and class of the ingredients and the toxicological data the manufacturer or importer has access to which concern these ingredients in burnt or unburnt form and which are particularly linked to the health effects of the ingredients when taking into account, among others, their effects causing addiction.</p> <p>The list shall be established in descending order of the weight of each ingredient included in the product.</p> <p>When submitting the lists and information the manufacturer or importer shall separately mention which items of the information included in them the manufacturer or importer regards as business secrets and demands to be kept confidential.</p> <p>http://www.finlex.fi/fi/laki/alkup/2002/20020641</p> <p>http://www.valvira.fi/files/eng/Letterproducersimporters180308.pdf</p>
3.2.4.4	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>

3.2.5	11	Packaging and labelling of tobacco products		
		<i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>		
		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:		
3.2.5.1	11	– requiring that packaging, individual cigarettes or other tobacco products do not carry advertising or promotion?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.2	11.1(a)	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.3	11.1(b)	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.4	11.1(b)(i)	– ensuring that the health warnings are approved by the competent national authority?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.5	11.1(b)(ii)	– ensuring that the health warnings are rotated?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.6	11.1(b)(iii)	– ensuring that the health warnings are clear, visible and legible?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.7	11.1(b)(iv)	– ensuring that the health warnings occupy no less than 30% of the principal display areas?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.8		– ensuring that the health warnings occupy 50% or more of the principal display areas?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.2.5.9	11.1(b)(v)	– ensuring that health warnings are in the form of, or include, pictures or pictograms?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

3.2.5.10		If you answered “Yes” to question 3.2.5.9, does the Government own the copyright to these pictures and pictograms?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.11		If you answered “Yes” to question 3.2.5.10, would you grant a non-exclusive and royalty-free licence for the use of health warnings developed in your jurisdiction with other Parties?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.12	11.2	– requiring that each unit packet and package of tobacco products and any outside packaging and labelling of such products contain information on relevant constituents and emissions of tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.13	11.3	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.14	<p>Please provide a brief description of the progress made in implementing Article 11 (<i>Packaging and labelling of tobacco products</i>) in the past three years or since submission of your last report.</p> <p>According to the latest amendment to the Tobacco Act minimum size of retail packages is 20 cigarettes, 10 cigarillos or 30g of fine-cut smoking tobacco. Cigars may however still be sold individually, but they must be furnished with appropriate markings.</p> <p>At the retail packaging of a tobacco product may not be claimed that the product is fire safe or otherwise create an image of product’s innocence or that it’s safer than other similar products.</p> <p>These amendments entered into force in 1 April 2009.</p>			
3.2.5.15	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p> <p>In regards to question 3.2.5.1 the general ban on advertising and sales promotion covers also the package itself. However, plain packaging has not been introduced.</p>			

3.2.6	12	Education, communication, training and public awareness <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>		
		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:		
3.2.6.1	12(a)	– educational and public awareness programmes? <i>(Please refer to programmes implemented since submission of your two-year report.)</i>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.6.2	If you answered “Yes” to question 3.2.6.1, to whom are these programmes targeted?			
		• adults or the general public	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• children and young people	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• men	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• women	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• pregnant women	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• ethnic groups	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• other <i>(please specify:)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.6.3	If you answered “Yes” to question 3.2.6.1, do you reflect the following key differences among targeted population groups in educational and public awareness programmes?			
		• age	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• gender	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• educational background	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• cultural background	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• socioeconomic status	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• other <i>(please specify:)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.6.4	12(b)	If you answered “Yes” to question 3.2.6.1, do these educational and public awareness programmes cover:		
		• health risks of tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• health risks of exposure to tobacco smoke?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• benefits of the cessation of tobacco use and tobacco-free lifestyles?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

	12(f)	<ul style="list-style-type: none"> adverse economic consequences of 		
		- tobacco production?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		- tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> adverse environmental consequences of 		
		- tobacco production?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		- tobacco consumption?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.2.6.5	12(e)	<p>– awareness and participation of the following agencies and organizations in development and implementation of intersectoral programmes and strategies for tobacco control:</p> <ul style="list-style-type: none"> public agencies? nongovernmental organizations not affiliated with the tobacco industry? private organizations? other (<i>please specify:</i>)? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
			<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
			<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.6.6	12	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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.6.7	12(d)	Are appropriate and special training or sensitization and awareness programmes on tobacco control addressed to:		
		<ul style="list-style-type: none"> health workers? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> community workers? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> social workers? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> media professionals? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> educators? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> decision-makers? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> administrators? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> other (<i>please specify:</i>)? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No

3.2.6.8	Please provide a brief description of the progress made in implementing Article 12 (<i>Education, communication, training and public awareness</i>) in the past three years or since submission of your last report.
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There has been several education, communication, training and public awareness projects during the reporting period. Many of these projects have also promoted and provided support for tobacco cessation. Here is a brief overview of the projects performed mainly by the NGOs.

The Cancer Society of Finland has had a three-year collaboration project to reduce smoking among young people (2007–2009). The project has consisted of six operative elements: communication, cessation, schools, free time, interaction between the youth and adults and research. The awareness raising campaigns have covered several media (tv, radio and Internet) as well as many youth events and facilities. (See also: www.fressis.fi, www.tyokalupakki.net, www.smokefree.fi)

The Pulmonary Association Heli maintains a tobacco cessation phone line and an Internet portal called Stumppi (www.stumppi.fi). The Internet page has been recently renewed and contains a lot of information on tobacco consumption and cessation. The Pulmonary Association Heli also coordinates a project to reduce the consumption of tobacco products especially among adult population. Several other NGOs take part in this project.

The Finnish Heart Association has had three different programmes on tobacco dependence: one for adults who want to lose weight (www.pienipaatospaivassa.fi), one for of women's heart health (www.naisensydan.fi) and one for artery patients to help them stop smoking.

The National Institute for Health and Welfare has performed a two-year project to promote health and smokeless lifestyle in vocational schools (2008–2009). The Association for Healthy Lifestyles is performing a three-year health promotion project for students in vocational schools (2009–2011). Also the Finnish Health Association has instructed vocational schools (pilot schools all over the country) as well as provided support material for tobacco cessation (individual) and for smokefree schools (organisational).

North Savo Health District and University Hospital of Kuopio have launched Smoke Free Savo 2015 -program in 2007. The goal is to promote smoke free culture. At the population level the goal is to reduce cardiovascular disease patients' smoking by half and to reduce young peoples smoking habits so that less than 15 percent of them and less than 20 percent of adults smoke. Sub goals are that provincial hospitals and health centres, municipalities and cities as well as major employers follow the Smoke Free Savo criteria. As a result of two years action 31 municipalities have declared themselves as smoke free workplaces. Additionally there are 30 private, public and association employers, 8 voluntary societies, 3 sports societies and 6 educational institutions who have acted accordingly. (Web page: www.savutonsavo.fi)

The Finnish Lung Health Association (Filha) has organized several trainings mainly to health professionals to build up the capacity of the health care system to support cessation of tobacco use in all categories of clients. In 2007–2009 some 1000 professionals have been trained.

3.2.6.9	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.
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3.2.7	13	Tobacco advertising, promotion and sponsorship <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>		
		Have you adopted and implemented, where appropriate, any legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes:		
3.2.7.1	13.2	– instituting a comprehensive ban on all tobacco advertising, promotion and sponsorship?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If you answered “No” to question 3.2.7.1, please proceed to question 3.2.7.3.				
3.2.7.2	If you answered “Yes” to question 3.2.7.1, does your ban cover:			
		• display and visibility of tobacco products at points of sales?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• the domestic Internet?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• the global Internet?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• brand stretching and/or brand sharing?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• product placement as a means of advertising or promotion?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• the depiction of tobacco or tobacco use in entertainment media products?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• tobacco sponsorship of international events or activities and/or participants therein?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• cross-border advertising, promotion and sponsorship originating from your territory?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

	13.7	<ul style="list-style-type: none"> the same forms of cross-border advertising, promotion and sponsorship entering your territory for which domestic regulation apply? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Please proceed to question 3.2.7.12.				
3.2.7.3	13.2	If you answered "No" to question 3.2.7.1. are you precluded by your constitution or constitutional principles from undertaking a comprehensive ban on tobacco advertising, promotion and sponsorship?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.2.7.4	13.3	– applying restrictions on all tobacco advertising, promotion and sponsorship?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.7.5	13.3	– applying restrictions on cross-border advertising, promotion and sponsorship originating from your territory with cross-border effects?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.7.6	13.4(a)	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.7.7	13.4(b)	– requiring that health or other appropriate warnings or messages accompany all tobacco advertising, promotion and sponsorship?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.7.8	13.4(c)	– restricting the use of direct or indirect incentives that encourage the purchase of tobacco products by the public?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.7.9	13.4(d)	– requiring the disclosure to relevant Government authorities of expenditures by the tobacco industry on advertising, promotion and sponsorship not yet prohibited?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

3.2.7.10	13.4(e)	– restricting tobacco advertising, promotion and sponsorship on:		
		• radio?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• television?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• print media?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• the domestic Internet?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• the global Internet?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		• other media (<i>please specify: any media, if the tobacco advertising or promotion is directed to Finland or to Finnish citizen</i>)?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.7.11	13.4(f)	– restricting tobacco sponsorship of:		
		• international events and activities?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• participants therein?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Whether you answered “Yes” or “No” to question 3.2.7.1, are you:				
3.2.7.12	13.6	– cooperating with other Parties in the development of technologies and other means necessary to facilitate the elimination of cross-border advertising?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.7.13	13.7	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.7.14	Please provide a brief description of the progress made in implementing Article 13 (<i>Tobacco advertising, promotion and sponsorship</i>) in the past three years or since submission of your last report.			

	<p>According to the Tobacco Act (693/1976) Section 8, advertising, whether direct or indirect, of tobacco products is prohibited. The sales promotion of tobacco products through the advertising of other commodities by exploiting the established symbol of a tobacco product or an altered but identifiable version thereof, or which otherwise creates an impression of a particular tobacco product, is specifically considered to constitute indirect advertising of tobacco products. What is provided above concerning tobacco products shall also apply to tobacco, tobacco imitations and smoking accessories. What is provided above concerning advertising shall also apply to other sales promotion activity.</p> <p>http://www.finlex.fi/fi/laki/alkup/2002/20020641</p> <p>(Unofficial and partial translation:) http://www.finlex.fi/en/laki/kaannokset/1976/en19760693.pdf</p> <p>Consequently, the provision in force strictly prohibits tobacco sponsoring and the depiction of sponsorship identifiers for example on television and radio. However, there is a proposal for a Government Bill (180/2009) that tobacco sponsorship would be expressly prohibited in the Finnish Tobacco Act in accordance with the EU Tobacco Advertising Directive (2003/33/EC). This prohibition would apply to both cross-border sponsorship and to a sponsorship in our own territory. According to the Government Bill sponsorship would mean any form of public or private contribution to any event, activity or individual with the aim or direct or indirect effect of promoting a tobacco product.</p> <p>Moreover, according to the proposal, the display of tobacco products and their trademarks in retail sale facilities would be prohibited.</p>
3.2.7.15	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p> <p>Questions 3.2.7.3-3.2.7.11</p> <p>- Please notice that according to the Tobacco Act (693/1976), the depiction of tobacco in entertainment media products is prohibited whereas the depiction of tobacco use is prohibited only if it would be considered as tobacco advertising as referred in the Tobacco Act Section 8.</p> <p>Question 3.2.7.13</p> <p>- Please notice that the Finnish Criminal Code (39/1889) Chapter 1, Section 11 provides that if the offence has been committed in the territory of a foreign State, the application of Finnish law may be based on sections 5 (offence directed to a Finn), 6 (offence committed by a Finn) and 8 (other offence committed outside of Finland) only if the offence is punishable also under the law of the place of commission and a sentence could have been passed for it also by a court of that foreign State (requirement of dual criminality) . In this event, no sanction that is more severe than what is provided by the law of the place of commission shall be imposed in Finland.</p>

3.2.8	14	Demand reduction measures concerning tobacco dependence and cessation		
		<p><i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i></p> <p>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:</p>		
3.2.8.1	14.1	– developing and disseminating appropriate, comprehensive and integrated guidelines based on scientific evidence and best practices?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.8.2	14.1	– programmes to promote cessation of tobacco use, including:		
		• media campaigns emphasizing the importance of quitting?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• programmes specially designed for women and/or pregnant women?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• local events, such as activities related to World No Tobacco Day or National No Smoking Day, if appropriate?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• other (<i>please specify:</i>)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.8.3	14.2(a)	– design and implementation of programmes aimed at promoting the cessation of tobacco use, in such locations as:		
		• educational institutions?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• health-care facilities?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• workplaces?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• sporting environments?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• other (<i>please specify:</i>)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

3.2.8.4	14.2(b)	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• health?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• education?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.8.5		– inclusion of programmes on the diagnosis and treatment of tobacco dependence in your health-care system?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.8.6	14.2(b)	If you answered “Yes” to question 3.2.8.5, which structures in your health-care system provide programmes for the diagnosis and treatment of tobacco dependence?			
		• primary health care	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• secondary and tertiary health care	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• specialist health-care systems (<i>please specify:</i> e.g occupational health)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• specialized centres for cessation counselling and treatment of tobacco dependence	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
		• rehabilitation centres	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
		• other (<i>please specify:</i>)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.8.7	14.2(b)	If you answered “Yes” to question 3.2.8.5, are the services provided in these settings covered by public funding or reimbursement schemes?			
		• primary health care	<input type="checkbox"/> Fully	<input checked="" type="checkbox"/> Partially	<input type="checkbox"/> None
		• secondary and tertiary health care	<input type="checkbox"/> Fully	<input checked="" type="checkbox"/> Partially	<input type="checkbox"/> None
		• specialist health-care systems (<i>please specify:</i>)	<input type="checkbox"/> Fully	<input checked="" type="checkbox"/> Partially	<input type="checkbox"/> None

		<ul style="list-style-type: none"> specialized centres for cessation counselling and treatment of tobacco dependence 	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input checked="" type="checkbox"/> None
		<ul style="list-style-type: none"> rehabilitation centres 	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input checked="" type="checkbox"/> None
		<ul style="list-style-type: none"> other (<i>please specify:</i>) 	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input type="checkbox"/> None
3.2.8.8	14.2(b)	If you answered “Yes” to question 3.2.8.5, which health and other professionals are involved in programmes offering treatment for tobacco dependence and counselling services?			
		Health professionals including:			
		<ul style="list-style-type: none"> physicians 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> dentists 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> family doctors 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> practitioners of traditional medicine 	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
		<ul style="list-style-type: none"> other medical professionals (<i>please specify:</i>) 	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
		<ul style="list-style-type: none"> nurses 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> midwives 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> pharmacists 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		Community workers	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		Social workers	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		Others (<i>please specify:</i>)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.8.9	14.2(c)	– training on tobacco dependence treatment incorporated into the curricula of health professional training at pre- and post-qualification levels at the following schools:			
		<ul style="list-style-type: none"> medical? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> dental? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> nursing? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> pharmacy? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> other (<i>please specify:</i>)? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

3.2.8.10	14.2(d)	– facilitating accessibility and/or affordability of pharmaceutical products for the treatment of tobacco dependence?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.8.11	14.2(d)	If you answered “Yes” to question 3.2.8.10, which pharmaceutical products are available for the treatment of tobacco dependence in your jurisdiction?			
		• nicotine replacement therapy	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• bupropion	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• varenicline	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• other (<i>please specify:</i>)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.8.12	14.2(d)	If you answered “Yes” to question 3.2.8.10, are the costs of treatment with these products covered by public funding or reimbursement?			
		• nicotine replacement therapy	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input checked="" type="checkbox"/> None
		• bupropion	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input checked="" type="checkbox"/> None
		• varenicline	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input checked="" type="checkbox"/> None
		• other (<i>please specify:</i>)?	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input type="checkbox"/> None

3.2.8.13	<p>Please provide a brief description of the progress made in implementing Article 14 (<i>Demand reduction measures concerning tobacco dependence and cessation</i>) in the past three years or since submission of your last report.</p> <p>The Government has decided on a Health Promotion Policy Programme. In the implementation of the programme there is a specific part concerning cessation of tobacco use. The National Institute for Health and Welfare has been responsible for the development and execution of the training of health professionals.</p> <p>http://www.vn.fi/toiminta/politiikkaohjelmat/terveys/ohjelman-sisaeltoe/en.pdf</p> <p>http://www.stm.fi/c/document_library/get_file?folderId=28707&name=DLFE-4170.pdf</p> <p>Current Care -cessation guidelines:</p> <p>http://www.terveyskirjasto.fi/xmedia/hoi/hoi40020.pdf</p> <p>English summary:</p> <p>http://www.kaypahoito.fi/web/kh/suosituksset/naytaartikkeli/tunnus/ccs00026</p> <p>Current Care is a Finnish unit producing evidence-based treatment guidelines for the Finnish Medical Society Duodecim. These guidelines are drawn up in support of health care professionals and for the benefit of patients.</p> <p>Online course for medics:</p> <p>http://www.terveysportti.fi/kotisivut/sivut.nayta?p_navi=70045&p_sivu=67269</p>
3.2.8.14	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>

3.3	<i>Article</i>	MEASURES RELATING TO THE REDUCTION OF THE SUPPLY OF TOBACCO <i>(with reference to Articles 15–17)</i>		
3.3.1	15	Illicit trade in tobacco products <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>		
		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:		
3.3.1.1	15.2	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.1.2	15.2(a)	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.1.3	15.2(a)	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.1.4	15.2(b)	– developing a practical tracking and tracing regime that would further secure the distribution system and assist in the investigation of illicit trade?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.3.1.5	15.3	– requiring that marking is presented in legible form or appears in the principal language and/or languages of the country?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.1.6	15.4(a)	– requiring the monitoring and collection of data on cross-border trade in tobacco products, including illicit trade?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

3.3.1.7	15.4(a)	If you answered “Yes” to question 3.3.1.6, do you facilitate 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.1.8	15.4(b)	– enacting or strengthening legislation, with appropriate penalties and remedies, against illicit trade in tobacco products, including counterfeit and contraband cigarettes?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.1.9	15.4(c)	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.1.10	15.4(d)	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.1.11	15.4(e)	– enabling the confiscation of proceeds derived from illicit trade in tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.1.12	15.6	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.1.13	15.7	– licensing or other actions to control or regulate production and distribution in order to prevent illicit trade?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

3.3.1.14	<p>Please provide a brief description of the progress made in implementing Article 15 (<i>Illicit trade in tobacco products</i>) in the past three years or since submission of your last report.</p> <p>Open register for sales permits: http://tupakkarekisteri.valvira.fi/</p> <p>In order to effectively implement the provisions of Article 15 of the FCTC Finland, together with other EU countries, is participating actively in the negotiations concerning FCTC Protocol on Illicit Trade in Tobacco products. Depending on the outcome of the negotiations, Finland is prepared to change its legislation to comply with the provisions of the new protocol. In the meantime we have amended our legislation. Since April 2010 the retail sale of tobacco products requires a licence in Finland. So in this regard, our legislation goes further and is stricter than the provisions drafted in the coming protocol. As mentioned above, the need for changes in legislation and other measures (i.e. tracking and tracing system) will be considered after the the outcome of the negotiations is revealed.</p> <p>The tobacco products may be sold or otherwise assigned only on the basis of a license admitted by the municipality. In addition the wholesalers may sell tobacco products to other wholesalers or to retail outlets that have a licence. The licence can be cancelled permanently or for a limited period if the offences are repeated or intentional. The licence that has been permanently cancelled can be admitted again from the application at the earliest after a year from the cancelling of the licence.</p> <p>Licensing in tobacco legislation (Sections 10 b - 10 d and 33 a): http://www.finlex.fi/fi/laki/ajantasa/1976/19760693 (in Finnish)</p>
3.3.1.15	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>

3.3.2	16	Sales to and by minors <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>		
		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:		
3.3.2.1	16.1	– prohibiting the sales of tobacco products to minors? If “Yes”, please specify the legal age: 18 ?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.2	16.1(a)	– 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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.3	16.1(a)	– requiring that, in case of doubt, each seller of tobacco products requests that the purchaser provides appropriate evidence of having reached full legal age?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.4	16.1(b)	– banning the sale of tobacco products in any manner by which they are directly accessible, such as open store shelves?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.3.2.5	16.1(c)	– prohibiting the manufacture and sale of sweets, snacks, toys or any other objects in the form of tobacco products which appeal to minors?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.6	16.1(d)	– prohibiting the sale of tobacco products from vending machines?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If you answered “Yes” to question 3.3.2.6, please proceed to question 3.3.2.8.				
3.3.2.7	16.1(d)	If you answered “No” to question 3.3.2.6, do you ensure that tobacco vending machines are not accessible to minors and/or do not promote the sale of tobacco products to minors?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.8	16.2	– prohibiting and/or promoting the prohibition of the distribution of free tobacco products:		
		• to the public?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

		<ul style="list-style-type: none"> • to minors? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.9	16.3	– prohibiting the sale of cigarettes individually or in small packets?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.10	16.6	– providing for penalties against sellers and distributors in order to ensure compliance?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.11	16.7	– prohibiting the sales of tobacco products by minors?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.3.2.12	<p>Please provide a brief description of the progress made in implementing Article 16 (<i>Sales to and by minors</i>) in the past three years or since submission of your last report.</p> <p>Question 3.3.2.6</p> <p>- Please notice that it is proposed in a Government bill (180/2009) that the sell of tobacco products from vending machines would be prohibited.</p> <p>Question 3.3.2.11</p> <p>- Please notice that it is proposed in a Government bill (180/2009) that the sales of tobacco products by minors would only be allowed if the sales act is continuously supervised by an adult.</p>			
3.3.2.13	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p> <p>Question 3.3.2.5</p> <p>- Please notice that the prohibition concerning e.g. sweets and snacks in the form of tobacco which appeals to minors applies to the sale but not to the manufacture of these products.</p>			

3.3.3	17	Provision of support for economically viable alternative activities <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>			
		Have you adopted and implemented, where appropriate, measures or programmes on any of the following:			
3.3.3.1	17	– promoting economically viable and sustainable alternatives for:			
		• tobacco growers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Not applicable
		• tobacco workers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Not applicable
		• tobacco individual sellers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Not applicable
3.3.3.2	Please provide a brief description of the progress made in implementing Article 17 (<i>Provision of support for economically viable alternative activities</i>) in the past three years or since submission of your last report.				
3.3.3.3	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.				

3.4	<i>Article</i>	OTHER MEASURES AND POLICIES <i>(with reference to Articles 18–21)</i>			
3.4.1	18	Protection of the environment and the health of persons <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>			
		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:			
3.4.1.1	18	– implementing measures in respect of tobacco cultivation within your territory, which take into consideration:			
		• the protection of the environment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Not applicable
		• the health of persons in relation to the environment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Not applicable
3.4.1.2	18	– implementing measures in respect of tobacco manufacturing within your territory, which take into consideration:			
		• the protection of the environment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Not applicable
		• the health of persons in relation to the environment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Not applicable
3.4.1.3	Please provide a brief description of the progress made in implementing Article 18 (<i>Protection of the environment and the health of persons</i>) in the past three years or since submission of your last report.				
3.4.1.4	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.				

3.4.2	19	<p>Liability</p> <p><i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i></p>		
		<p>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:</p>		
3.4.2.1	19.1	– dealing with criminal and civil liability, including compensation where appropriate?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.4.2.2	19.1	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?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.4.2.3	19.1	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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.4.2.4	<p>Please provide a brief description of any progress made, as appropriate, in implementing Article 19 (<i>Liability</i>) in the past three years or since submission of your last report.</p>			
3.4.2.5	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>			
	<p>There is an ongoing civil court case in Finland, where private persons have sued tobacco companies on the basis that they marketed "light cigarettes" as non-hazardous to health. The district court rejected the claim in 2008, and the appeals court considers the appeal in 2010. Another civil court case was ruled against the plaintiff in the supreme court in 2001.</p>			

3.4.3	20	Research, surveillance and exchange of information		
		<p>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</p> <p>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:</p>		
3.4.3.1	20.1(a)	– developing and/or promoting research that addresses:		
		• determinants of tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• consequences of tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• social and economic indicators related to tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• tobacco use among women, with special regard to pregnant women?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• the determinants and consequences of exposure to tobacco smoke?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• identification of effective programmes for the treatment of tobacco dependence?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• identification of alternative livelihoods?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		• other (<i>please specify:</i>)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.4.3.2	20.1(b)	– training and support for all persons engaged in tobacco control activities, including research, implementation and evaluation?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.4.3.3	20.3(a)	– a national system for epidemiological surveillance of:		
		• patterns of tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• determinants of tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• consequences of tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• social, economic and health indicators related to tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• exposure to tobacco smoke?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• other relevant information (<i>please specify:</i>)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

3.4.3.4	20.4	– regional and global exchange of publicly available national:		
		• scientific, technical, socioeconomic, commercial and legal information?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• information on the practices of the tobacco industry?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• information on the cultivation of tobacco?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.4.3.5	20.4(a)	– an updated database of:		
		• laws and regulations on tobacco control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• information about the enforcement of laws on tobacco control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• pertinent jurisprudence?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.4.3.6	<p>Please provide a brief description of the progress made in implementing Article 20 (<i>Research, surveillance and exchange of information</i>) in the past three years or since submission of your last report.</p> <p>The FIOH has carried out follow-up surveys concerning occupational exposure to tobacco smoke since 1994. First surveys were focused on workplaces in general and since 1999 on the hospitality industry. The follow-up has consisted of both national questionnaire surveys and measurements of exposure in workplaces.</p> <p>The FIOH has participated in the dissemination of information concerning tobacco legislation among national trade union parties representing both employers and workers as well as among inspectors in occupational safety and health. Additionally, the FIOH has carried out training among occupational health care professionals concerning good practices in how to quit smoking.</p> <p>The National Institute for Health and Welfare has been carrying out three national surveys (Health behaviour and health among Finnish adult population survey, FINRISK-survey and School Health survey) that include several questions on tobacco use, passive smoking and cessation. The surveys have constantly been developed, and now they include also information on e.g. tobacco dependence.</p>			
3.4.3.7	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>			

4. INTERNATIONAL COOPERATION AND ASSISTANCE

Note: The goal of this section is to assist the Convention Secretariat in matching available skills and resources with identified needs at national, subregional, regional and international levels.

	<i>Article</i>	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:	Assistance provided	Assistance received
4.1	22.1(a)	– development, transfer and acquisition of technology, knowledge, skills, capacity and expertise related to tobacco control?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.2	22.1(b)	– provision of technical, scientific, legal and other expertise to establish and strengthen national tobacco control strategies, plans and programmes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.3	22.1(c)	– appropriate training or sensitization programmes for appropriate personnel in accordance with Article 12?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.4	22.1(d)	– provision of the necessary material, equipment and supplies, as well as logistic support, for tobacco control strategies, plans and programmes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.5	22.1(e)	– identification of methods for tobacco control, including comprehensive treatment of nicotine addiction?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.6	22.1(f)	– promotion of research to increase the affordability of comprehensive treatment of nicotine addiction?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.7		If you answered “Yes” to any of questions 4.1–4.6, please identify the Party or Parties from which assistance was received or to which assistance was provided.		
		<p>The National Institute for Health and Welfare has implemented a Health behaviour survey in Northwest Russia including questions on e.g. tobacco use and cessation.</p> <p>There has been at least one NGO project. Filha has been implementing a</p>		

	<p>project to promote lung health in Kyrgyzstan 2007-2010 funded by the Ministry for Foreign Affairs of Finland in which all above mentioned aspects have been addressed.</p>
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Answer to all the questions 4.1-4.6 / assistance received is no. (The questionnaire did not allow to choose this option).

4.8	Please provide information about any assistance provided or received in the space below.
4.9	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.
4.10	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? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Please refer to Article 26.4.)</i>
4.11	If you answered “Yes” to question 4.10, please provide details in the space below.

5. PRIORITIES AND COMMENTS

5.1	What are the priorities for implementation of the WHO Framework Convention on Tobacco Control in your jurisdiction? Legislative measures and measures related to tobacco cessation.
5.2	Have you identified any specific gaps between the resources available and the needs assessed for implementing the WHO Framework Convention on Tobacco Control? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.3	If you answered “Yes” to question 5.2, please provide details in the space below. The control and follow up mechanisms are beginning to be in place but tobacco cessation would still need additional resourcing.
5.4	What, if any, are the constraints or barriers, other than lack of resources, you have encountered in implementing the Convention? <i>(Please refer to Article 21.1(b).)</i>
5.5	Please provide any relevant information not covered elsewhere that you consider important.
5.6	Your suggestions for further development and revision of the reporting instrument:

	<p>For the purpose of flexible and practical reporting, shortening the questionnaire should be considered. The questionnaire in this format is rather long and detailed and it contains perhaps too detailed open questions such as brief description of the progress made /additional information. It might be considered that the questionnaire would follow mainly the pattern of multiple-choice questions and then there would be extra space for additional information that the reporting Party sees necessary, such as description of progress, links, sources of data etc.</p>
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End of reporting instrument