

REPORTING INSTRUMENT

1. Origin of the report

(a) Name of Contracting Party <input type="checkbox"/> Help	Australia
(b) Information on National Contact/Focal Point <input type="checkbox"/> Help	
Name and title of contact officer	Ms Penny Marshall
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(c) Information on contact officer submitting the national report if different from the above <input type="checkbox"/> Help	
Name and title of contact officer	
Mailing address	
Telephone number	
Fax number	
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(d) Signature of the officer responsible for submitting report <input type="checkbox"/> Help	
Name and title of officer	Penny Marshall, Director, Tobacco and Drug Prevention Section
Full name of the institution	Department of Health and Ageing
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(e) Period reported <input type="checkbox"/> Help	

(f) Date the report was submitted <input type="checkbox"/> Help	28/2/2007
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2. Demographics [Help](#)

(a) Age and sex: [Help](#)

Year (latest available)	Age groups	Percentage of <i>male</i> population	Percentage of <i>female</i> population	Percentage of <i>total</i> population
2004	14-19	5.2	4.9	10.1
2004	20-29	8.5	8.3	16.8
2004	30-39	9.0	9.1	18.2
2004	40-49	9.0	9.1	18.1
2004	50-59	7.7	7.7	15.4
2004	60+	9.9	11.5	21.4

(b) Ethnicity (optional): [Help](#)

Name of ethnic group	Percentage of total population
Aboriginal and/or Torres Strait Islander	2.4

3. Tobacco use

i. Prevalence (ref. Article 19.2(a), Article 20.2 and Article 20.3(a)) [Help](#)

(a) Smoking tobacco: [Help](#)

	Age group 20-29	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				

Daily smokers ¹		Cigarettes or equivalent tobacco	2004	24
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	3.8
Females				
Daily smokers ²		Cigarettes or equivalent tobacco	2004	22.9
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	2.5
Total (males and females)				
Daily smokers ²		Cigarettes or equivalent tobacco	2004	23.5
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	3.2

	Age group 30-39	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				
Daily smokers ²		Cigarettes or equivalent tobacco	2004	23.8
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	2.5
Females				
Daily smokers ²		Cigarettes or equivalent tobacco	2004	21.8
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	1.9
Total (males and females)				
Daily smokers ²		Cigarettes or equivalent tobacco	2004	22.8
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	2.2

¹ Definitions to be provided by the Parties.

² Definitions to be provided by the Parties.

	Age group 40-49	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				
Daily smokers ³		Cigarettes or equivalent tobacco	2004	22.6
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	1.8
Females				
Daily smokers ²		Cigarettes or equivalent tobacco	2004	20.1
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	1
Total (males and females)				
Daily smokers ²		Cigarettes or equivalent tobacco	2004	21.3
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	1.4

	Age group 50-59	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				
Daily smokers ⁴		Cigarettes or equivalent tobacco	2004	18.1
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	1.9
Females				
Daily smokers ²		Cigarettes or equivalent tobacco	2004	14.4
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	0.6
Total (males and females)				
Daily smokers ²		Cigarettes or equivalent tobacco	2004	16.3

³ Definitions to be provided by the Parties.

⁴ Definitions to be provided by the Parties.

Occasional smokers ²		Cigarettes or equivalent tobacco	2004	1.2
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	Age group 60+	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				
Daily smokers ⁵		Cigarettes or equivalent tobacco	2004	11
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	0.5
Females				
Daily smokers ²		Cigarettes or equivalent tobacco	2004	7.1
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	0.4
Total (males and females)				
Daily smokers ²		Cigarettes or equivalent tobacco	2004	8.9
Occasional smokers ²		Cigarettes or equivalent tobacco	2004	0.4

If available, please provide the average number of cigarettes smoked per day by the smoking population:

	Age group 20-29	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day
Male smokers⁶		Cigarettes	2004	83.1 *
Female smokers²		Cigarettes	2004	77.5 *
Total smokers²		Cigarettes	2004	80.5 *

	Age group 30-39	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day
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⁵ Definitions to be provided by the Parties.

⁶ Definitions to be provided by the Parties.

Male smokers ⁷		Cigarettes	2004	101.6 *
Female smokers ²		Cigarettes	2004	94.2 *
Total smokers ²		Cigarettes	2004	98.1 *

	Age group 40-49	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day
Male smokers ⁸		Cigarettes	2004	114.7 *
Female smokers ²		Cigarettes	2004	108.1 *
Total smokers ²		Cigarettes	2004	111.6 *

	Age group 50-59	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day
Male smokers ⁹		Cigarettes	2004	129.2 *
Female smokers ²		Cigarettes	2004	106.3 *
Total smokers ²		Cigarettes	2004	119.5 *

	Age group 60+	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day
Male smokers ¹⁰		Cigarettes	2004	109.4 *
Female smokers ²		Cigarettes	2004	99.7 *
Total smokers ²		Cigarettes	2004	105.3 *

(b) Smokeless tobacco, including snuff and chewing tobacco (optional): [Help](#)

	Age group 20-29	Tobacco products	Year of data	Prevalence
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⁷ Definitions to be provided by the Parties.

⁸ Definitions to be provided by the Parties.

⁹ Definitions to be provided by the Parties.

¹⁰ Definitions to be provided by the Parties.

		included	(latest available)	(%)
Male				
Daily users		See Attachment A for Smokeless Tobacco Prevalence Rates		
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				
Daily users				
Occasional users ²				

	Age group 30-39	Tobacco products included	Year of data (latest available)	Prevalence (%)
Male				
Daily users				
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				
Daily users				
Occasional users ²				

	Age group 40-49	Tobacco products included	Year of data (latest available)	Prevalence (%)
Male				
Daily users				
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				
Daily users				
Occasional users ²				

	Age group 50-59	Tobacco products included	Year of data (latest available)	Prevalence (%)
Male				
Daily users				
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				
Daily users				
Occasional users ²				

	Age group 60+	Tobacco products included	Year of data (latest available)	Prevalence (%)
Male				
Daily users				
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				
Daily users				
Occasional users ²				

(c) If prevalence data is appropriate and available for ethnic groups, please provide. [Help](#)

	Ethnic group Aboriginal and/or Torres Strait Islander	Tobacco products included	Year of data (latest available)	Prevalence (%)
Daily users		Cigarettes	2005	50
Occasional users ²		Cigarettes	2005	2

(d) If prevalence data is appropriate and available for youth groups, please provide. [Help](#)

Create Youth Group

	Youth group 12-15	Tobacco products included	Year of data (latest available)	Prevalence ¹¹ (%)
Males		Cigarettes or equivalent tobacco	2004	2.0
Females		Cigarettes or equivalent tobacco	2004	2.6

	Youth group 16-17	Tobacco products included	Year of data (latest available)	Prevalence ¹² (%)
Males		Cigarettes or equivalent tobacco	2004	7.5
Females		Cigarettes or equivalent tobacco	2004	14.5

i

	Youth group 18-19	Tobacco products included	Year of data (latest available)	Prevalence ¹³ (%)
Males		Cigarettes or equivalent tobacco	2004	17.5
Females		Cigarettes or equivalent tobacco	2004	16.3

i. Supply [Help](#)

(a) Licit supply of tobacco (ref. **Article 20.4(c)** and **Article 15.4(a)**) in accordance with **Article 15.5)** [Help](#)

¹¹ Parties should provide definition for youth smoking; e.g. at least one cigarette in the past 30 days.

¹² Parties should provide definition for youth smoking; e.g. at least one cigarette in the past 30 days.

¹³ Parties should provide definition for youth smoking; e.g. at least one cigarette in the past 30 days.

	Domestic production	Exports	Imports
Year (latest available)	See Table 1 in Attachment A	See Table 2 in Attachment A	See Table 3 in Attachment A
Quantity (specify product and unit; e.g. millions of cigarettes)	Tonnes or number	Tonnes or number	Tonnes or number

Note: licit supply = domestic production + (imports - exports)

(b) Please provide information regarding duty-free sales volumes, if available.

[Help](#)

Not Available

(c) Seizures of illicit tobacco (ref. **Article 15.4(a)** in accordance with **Article 15.5**)

[Help](#)

	Year (latest available)	Quantity seized (specify unit, e.g., millions of pieces)
Cigarettes	1/1/2005 to 31/12/2006	218 million sticks
Other tobacco products (optional; please specify product) : raw, chewing, smoking, other	1/1/2005 to 31/12/2006	121,613.5 kg tobacco

(d) Please provide information regarding illicit or smuggled tobacco (optional) (ref. **Article 15.4(a)** in accordance with **Article 15.5**). [Help](#)

Not Available

4. Taxation [Help](#)

(a) Please provide your rates of taxation for tobacco products for all levels of government, and be as specific as possible (specify the type of tax: excise, VAT or sales, import duties) (ref. **Article 6.3**). [Help](#)

See Table 4 in Attachment A

- (b) Please attach the relevant documentation (ref. **Article 6.3**). (Please provide documentation in one of the six official languages, if available.) [Help](#)
- (c) Please provide retail prices for the three most popular brands of domestic and imported tobacco products in your jurisdiction, and the relevant year (ref. **Article 6.2(a)**). [Help](#)

Winfield 25's cigarette rrp AUD\$10.95
 Longbeach 40's cigarette rrp AUD\$15.55
 Peter Jackson 30's cigarette rrp AUD\$12.25

5. Legislative, executive, administrative and other measures [Help](#)

i. Core questions [Help](#)

It should be noted that the measures identified below are not exhaustive, but reflect the spirit and intent of the Convention.

Please check yes or no. For affirmative answers, you are asked to attach a brief summary and the relevant documentation. (Please provide documentation in one of the six official languages, if available.)

Article	Pursuant to Article 21.1(a) , have you adopted and implemented legislative, executive, administrative and/or other measures on:	Yes (please attach a brief summary and relevant documentation)	No	
Price and tax measures to reduce the demand for tobacco				
6.2(b)	Prohibiting or restricting sales to and/or importations by international travellers of tax- and duty-free tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Protection from exposure to tobacco smoke		Full/Partial/None		
8.2 <input type="checkbox"/> Help	in indoor workplaces?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	- government buildings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	- health care facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	- educational facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	- private workplaces	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	- other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	in public transport?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	in indoor public places?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	- cultural facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	- bars and night clubs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	- restaurants	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	- other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If you responded "Partial" to the measures outlined in Article 8.2, please provide specific details of the partial ban here: See Table 5 in Attachment A				
Regulation of tobacco product disclosures				
10 <input type="checkbox"/> Help	Requiring manufacturers and/or importers of tobacco products to disclose to governmental authorities information about contents?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Illicit trade in tobacco products				
15.2(a)	Requiring marking of packaging to assist in determining the origin of the product?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
	and to assist in determining whether the product is legally for sale on the domestic market?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
15.3 <input type="checkbox"/> Help	Requiring that marking is in legible form and/or appear in its principal language or languages?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
15.4(b)	Enacting or strengthening legislation against illicit trade in tobacco products?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
15.4(e)	Enabling the confiscation of proceeds derived from the illicit trade?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
15.7	Licensing or other actions to control or regulate production and distribution?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Sales to and by minors				
16.1 <input type="checkbox"/> Help	Prohibiting the sales of tobacco products to minors?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Specify legal age: 18
16.2	Prohibiting or promoting the prohibition of the distribution of free tobacco products to the public and especially minors?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16.3	Prohibiting the sale of cigarettes individually or in small packets?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16.6	Providing for penalties against sellers and distributors?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16.7	Prohibiting the sales of tobacco products by minors?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Liability				
19.1 <input type="checkbox"/> Help	Dealing with criminal and civil liability, including compensation where appropriate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

ii. **Optional questions** [Help](#)

It should be noted that responses to these questions are not required at the time of Group 1 reports, but may be answered at this time if applicable.

Article	Have you adopted and implemented legislative, executive, administrative and/or other measures on:	Yes (please attach a brief summary and relevant documentation) ¹⁴	No
Regulation of the contents of tobacco products			
9 <input type="checkbox"/> Help	Testing and measuring the contents of tobacco products?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Testing and measuring the emissions of tobacco products?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Regulating the contents of tobacco products?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Regulating the emissions of tobacco products?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Packaging and labelling of tobacco products			
11.1(a) <input type="checkbox"/> Help	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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.1(b)	Requiring that packaging and labelling also carry health warnings describing the harmful effects of tobacco use?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.1(b)(i)	Ensuring that the health warnings are approved by the competent national authority?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.1(b)(ii)	Ensuring that the health warnings are rotating?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.1(b)(iii)	Ensuring that the health warnings are large, clear, visible and legible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.1(b)(iv)	Ensuring that the health warnings occupy no less than 30% of the principal display areas?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Ensuring that the health warnings occupy 50% or more of the principal display areas?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.1(b)(v)	Ensuring that the health warnings are in the form of, or include, pictures or pictograms?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.2	Requiring that packaging and labelling contains information on relevant constituents and emissions of tobacco products?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11.3	Requiring that the warnings and other textual information appear on each unit package, and on any outside packaging and labelling in your principal language or languages?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

¹⁴ Please provide these documents in one of the six official languages, if available, and please specify sections of your legislation related to each “yes” response.

Tobacco advertising, promotion and sponsorship <input type="checkbox"/> Help			
13.2	Instituting a comprehensive ban of all tobacco advertising, promotion and sponsorship?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	including on cross-border advertising, promotion and sponsorship originating from its territory?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13.3	Applying restrictions, in the absence of a comprehensive ban, on all tobacco advertising, promotion and sponsorship?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Restricting or instituting a comprehensive ban on cross-border advertising, promotion and sponsorship originating from its territory?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13.4(a)	Prohibiting all 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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13.4(b)	Requiring that health or other appropriate warnings or messages accompany all tobacco advertising and promotion and sponsorship?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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"/>	<input type="checkbox"/>
13.4(d)	Requiring the disclosure to relevant governmental authorities of expenditures by the tobacco industry on advertising, promotion and sponsorship not yet prohibited?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13.4(e)	Restricting tobacco advertising, promotion and sponsorship on radio, television, print media and other media, such as the Internet?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13.4(f)	Prohibiting or restricting tobacco sponsorship of international events, activities and/or participants therein?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If you have any additional legislation or other measures not covered in Question 5, you may provide additional details here: [Help](#)

6. Programmes and plans [Help](#)

i. Core questions [Help](#)

It should be noted that the measures identified below are not exhaustive, but reflect the spirit and intent of the Convention.

	Yes (please attach the relevant documentation) ¹⁵	No
Have you developed and implemented comprehensive multisectoral national tobacco control strategies, plans and programmes? (Article 5.1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If no, have some partial strategies, plans and programmes been developed and implemented? (Article 5.1)	<input type="checkbox"/>	<input type="checkbox"/>

If you responded yes to either of the first two questions, which of the following do these strategies, plans and programmes cover? Please check, and provide a brief summary. (Please provide the summary in one of the six official languages.)

General obligations <input type="checkbox"/> Help		
5.2(a)	<p>A national coordinating mechanism or focal point(s) for tobacco control?</p> <p>The main national coordinating mechanism or focal point for tobacco control is the National Tobacco Strategy 2004 -2009. The Tobacco Strategy outlines the priority areas and key strategies for tobacco control in Australia whilst the strategy has a stated goal to significantly improve health and to reduce the social costs caused by, and the inequity exacerbated by, tobacco in all its forms.</p> <p>The Intergovernmental Committee on Drugs (IGCD) and the Ministerial Council on Drug Strategy (MCDS) also operate as a national coordinating mechanism or focal point of tobacco control. The MCDS is the peak policy and decision making body on licit and illicit drugs in Australia. The Council is represented by the Australian and State and Territory Ministers of Health and Law Enforcement, including the Minister responsible for Education. The role of the Council is to determine national policies and programs intended to reduce drug related harm within the Australian community. The IGCD supports the MCDS by providing policy advice to Ministers on the full range of drug-related matters and is responsible for implementing the National Drug Strategic Framework.</p> <p>At a working level, Tobacco Policy Officers Group meetings occur regularly to track progress in each State and Territory. Membership of the group comprises the manager or a tobacco policy officer from the government sector from each of the States and Territories, the Australian Government and New Zealand.</p> <p>Some examples of other coalitions involved on a national level include the National Quit Group, the National Quitline Managers Committee, the Australian Network of Young People and Tobacco and the Centre for Excellence in Indigenous Tobacco Control.</p>	<input checked="" type="checkbox"/>
5.3	Protection of policies from the commercial and other vested interests of the tobacco industry?	<input type="checkbox"/>
Education, communication, training and public awareness <input type="checkbox"/> Help		

¹⁵ Please provide these documents in one of the six official languages, if possible.

12(a)	Broad access to effective and comprehensive educational and public awareness programmes on the health risks? Details below on media campaigns. Graphic health warnings on cigarette packs were introduced on 1 March 2006.	<input checked="" type="checkbox"/>
	... targeted at adults and/or the general public? The Australian Government has developed and implemented the National Tobacco Campaign which has been in place in various forms since 1997 and includes the successful message of "every cigarette is doing you damage". State and Territory Governments have also conducted a number of mass media campaigns, especially through the Quit organisations, which promote the Quitnow message.	<input checked="" type="checkbox"/>
	... targeted at children and youth? The Australian Government has developed a comprehensive educational and public awareness program known as the National Tobacco Youth Campaign. The campaign was launched on 26 December 2006. The campaign specifically targets youth from 12-24 years of age and smoker parents.	<input checked="" type="checkbox"/>
12(b)	Public awareness about the health risks of tobacco consumption and exposure to tobacco smoke, and about the benefits of the cessation of tobacco use and tobacco-free lifestyles? Public awareness about these issues is increased by the campaigns mentioned above; the introduction of the graphic health warnings; Quitline counsellors' discussions with clients; and by some non-government organisations through websites and the media.	<input checked="" type="checkbox"/>
12(c)	Public access to a wide range of information on the tobacco industry? Some non-government organisations (NGOs), for example the Cancer Council and the Action on Smoking and Health (Australia), have publicised the corporate irresponsibility of the tobacco industry. The 'Tobacco Control Supersite' website provides access to an extensive range of tobacco control information including resources on tobacco statistics, the impact of smoking on health, and information on the activities of the tobacco industry to promote tobacco use. The website is published and maintained by Prof Simon Chapman of the School of Public Health, University of Sydney. Further information on the 'Tobacco Control Supersite' is available at http://tobacco.health.usyd.edu.au/site/supersite/overview/docs/index.htm	<input checked="" type="checkbox"/>
12(e)	Awareness and participation of public and private agencies and nongovernmental organizations not affiliated with the tobacco industry in developing and implementing intersectoral programmes and strategies for tobacco control? Tobacco control activities throughout Australia require strong partnerships and ongoing commitment among stakeholders at the Australian Government, State and Territory, and community levels. Stakeholders include the Australian Government Department of Health and Ageing, State and Territory Departments of Health, local Area Health Services, non-government organisations, professional health associations, local community based agencies, university academics, consumers and media organisations. Non-government organisations such as the Cancer Council, National Heart Foundation of Australia and Action on Smoking and Health (ASH) are key partners in tobacco control activities. The development of the National Tobacco Strategy 2004-2009 involved wide consultation with a number of stakeholders which included representatives from State and Territory Health Departments, local Area Health Services and a number of non-government organisations such as the Cancer Council, ASH and the National Heart Foundation.	<input checked="" type="checkbox"/>

Demand reduction measures concerning tobacco dependence and cessation <input type="checkbox"/> Help		
14.1	<p>Comprehensive and integrated guidelines based on scientific evidence and best practices to promote cessation of tobacco use and adequate treatment for tobacco dependence?</p> <p>The Quitline service operated separately in each State/Territory provides confidential telephone counselling to assist smokers to quit smoking. The Quitline also provides a call back service in some areas that involves a number of follow up phone calls throughout the quitting process.</p> <p>Guidelines have been developed to assist health professionals to provide evidence-based brief intervention advice to clients who smoke, as part of their routine clinical practice (Attachment H - Smoking Cessation Guidelines for Australian General Practice).</p> <p>Guidelines for treatment of nicotine dependence in pregnancy and for mental health clients are currently being developed.</p> <p>Smoking Lifescripts resources have also been developed as part of a package of resources designed for General Practitioners to assist patients when providing lifestyle advice. There are five resources in the package including Smoking, Nutrition, Alcohol, Physical Activity and Weight Management. The package includes guidelines and an assessment pad for the doctor, and a prescription pad for the patient (Attachment I, J, K).</p> <p>NSW Health wrote the national competency standards for smoking cessation interventions for the National Population Health Training Package and is currently developing learning and assessment materials for the two units of competency.</p>	<input checked="" type="checkbox"/>
14.2(d)	<p>Facilitation of accessibility and affordability for treatment of tobacco dependence including pharmaceutical products? The principal medical products to increase success rates of quitting smoking are nicotine replacement therapy (NRT) and bupropion.</p> <p>NRT can be purchased over the counter and does not require a medical prescription. Four forms of NRT: patch; lozenge; sublingual tablet; and gum can be provided by non-pharmacists. Some products are available in supermarkets.</p> <p>A prescription from a medical practitioner is required to purchase bupropion (Zyban). The Australian Government subsidises the cost of bupropion.</p>	<input checked="" type="checkbox"/>
Provision of support for economically viable alternative activities <input type="checkbox"/> Help		
17	<p>Promotion of economically viable alternatives for tobacco workers, growers and, as the case may be, individual sellers? The Australian Government will provide restructuring assistance of approximately \$40-45 million in 2007 under the Tobacco Grower Adjustment Assistance Package 2006. The purpose of these grants is to provide adjustment assistance for former tobacco growers to re-establish themselves in alternate economic activities, either by moving to other agricultural operations on their existing farm or re-establishing themselves off farm.</p>	<input checked="" type="checkbox"/>
Research, surveillance and exchange of information <input type="checkbox"/> Help		
20.1(a)	<p>Research that addresses the determinants and consequences of tobacco consumption and exposure to tobacco smoke as well as research for identification of alternative crops?</p> <p>The Australian Government conducts research that addresses the determinants and consequences of tobacco consumption however does not do research on alternative crops.</p>	<input checked="" type="checkbox"/>
20.4(b)	<p>Updated data from national surveillance programmes? The Australian Government conducts the National Drug Strategy Household Survey every three years. The survey is Australia's most comprehensive national survey on drug issues including smoking and tobacco.</p>	<input checked="" type="checkbox"/>

ii. **Optional questions** [Help](#)

Education, communication, training and public awareness <input type="checkbox"/> Help		
12(d)	<p>Appropriate training or awareness programmes on tobacco control addressed to persons such as health, community and social workers, media professionals, educators, decision-makers, administrators and other concerned persons? Training and awareness programs occur at a State and Territory level.</p> <p>There are a number of examples of training and awareness programs. For example, regular workshops and education sessions are conducted for Environmental Health Officers and Tobacco Compliance Officers on monitoring and compliance with relevant tobacco-related legislation. Culturally appropriate smoking cessation training programs have also been developed that target specific indigenous communities.</p>	<input checked="" type="checkbox"/>
12(f)	<p>Public awareness of and access to information regarding the adverse health, economic, and environmental consequences of tobacco production and consumption? Both the federal and State and Territory health departments, as well as non-government organisations such as the Cancer Council, provide access to information regarding the adverse health, economic and environmental consequences of tobacco production and consumption.</p>	<input checked="" type="checkbox"/>

Demand reduction measures concerning tobacco dependence and cessation [Help](#)

<p>14.2(a)</p>	<p>Design and implementation of programmes aimed at promoting the cessation of tobacco use, in such locations as educational institutions, health care facilities, workplaces and sporting environments? Ad hoc funding is distributed to organisations for programmes by both the Australian Government as well as the States and Territories. In addition, examples of specific State and Territory programmes include:</p> <p>NSW- *Car & Home Smokefree Zone, *Area Health Service grants for monitoring compliance with tobacco legislation, *NSW Health Promotion Demonstration Research Grants Scheme. 3x3 year funding at \$100K pa. One grant will be to a tobacco research project.</p> <p>QLD- *Event Support Program: Smoking: It can cost us the game and Smoking: It could cost us our culture, *Financial and resource support given to local Indigenous communities to run sporting and cultural events that promote the no smoking message.</p> <p>ACT- *Healthpact funding for sports, arts and community organisations, *some funding support from Healthpact and ACT Health Department to Quit organisation.</p> <p>NT- *Aboriginal Incentives Funds and Quit Week School Grants Program.</p>	<p>☒</p>
<p>14.2(b)</p>	<p>Diagnosis and treatment of tobacco dependence and counselling services on cessation of tobacco use in national health and education programmes, plans and strategies, with the participation of health workers, community workers and social workers?</p> <p>The Australian Government is currently funding trials in sustainable interventions using NRT for Indigenous people.</p> <p>In all States and Territories the Quit campaign and Quitline operate as a means of treatment of tobacco dependence and counselling services. In addition, examples of specific State and Territory programmes include:</p> <p>NSW- *Pilot of Quit-Online, a web based cessation service, *Development of national competency standards in smoking cessation for Population Health Training Package (ANTA), *Development of accredited training program and resources to implement competency-based training through Area Health Services Learning and Development Units, *Tobacco Brief Intervention Handbook and NRT video to be distributed throughout NSW health system, *Aboriginal and Torres Strait Islander Tobacco Brief Intervention training manual, handbook resources and training program 3x3 year funding at \$100K pa.</p> <p>SA- *GPs cessation support project, *Government trial of nicotine replacement therapy to aid in quitting smoking.</p> <p>TAS- *Smoking cessation clinics provided by the Tasmanian Health Department's Alcohol and Drug Service.</p> <p>NT- *Community health program, *Indigenous resource training.</p>	<p>☒</p>
<p>14.2(c)</p>	<p>Establishment in health care facilities and rehabilitation centres of programmes for diagnosing, counselling, preventing and treating tobacco dependence? The Australian Government funds the Centre for Excellence in Indigenous Tobacco Control (CEITC). CEITC</p>	<p>☒</p>

	<p>have developed an Australian Indigenous Tobacco Control Resource Kit for use by Aboriginal Health Workers to implement smoking cessation programmes in Aboriginal and Torres Strait Islander communities.</p> <p>The Australian Government also provides funding to each State and Territory for the operating costs of hospitals and healthcare facilities. As a result programs for diagnosing, counselling, preventing and treating tobacco dependence in health care and rehabilitation facilities vary for each State and Territory.</p>	
Protection of the environment and the health of persons <input type="checkbox"/> Help		
18	<p>Due regard to the protection of the environment and the health of persons in relation to the environment in respect of tobacco cultivation and manufacture within its territory?</p> <p>The production of tobacco requires the use of a range of chemicals to control pests and other diseases. Some of these chemicals (Chlordane, Dieldrin, DDT and Heptachlor) were assessed as being highly toxic to the environment and to human health. They were withdrawn from use in Australia by 1995.</p>	<input checked="" type="checkbox"/>
Research, surveillance and exchange of information <input type="checkbox"/> Help		
20.1(b)	<p>Training and support for all those engaged in tobacco control activities, including research, implementation and evaluation?</p> <p>Training and support programmes vary between States and Territories.</p> <p>Regular workshops and education sessions are conducted for Environmental Health Officers and Tobacco Compliance Officers on monitoring and compliance with relevant tobacco-related legislation. Other ad hoc activities are conducted by States and Territories as required. Training is also conducted by Quit organisations for Quitline counsellors.</p>	<input checked="" type="checkbox"/>
20.2	<p>Programmes for national, regional and global surveillance of the magnitude, patterns, determinants and consequences of tobacco consumption and exposure to tobacco smoke?</p> <p>National data collection is conducted regularly in Australia. Results from survey and surveillance data collected have been reported in publications including:</p> <ul style="list-style-type: none"> * National Drug Strategy Household Survey (conducted every three years) * Australian Secondary Schools Alcohol and Drug Survey (conducted every three years) * National Tobacco Survey (conducted every year) * National Aboriginal and Torres Strait Islander Health Survey (2001, 2004/05 and 2010/11) * National Aboriginal and Torres Strait Islander Social Survey (2002 and 2008) * Australian and New Zealand Atlas of Avoidable Mortality * Australian Bureau of Statistics (ABS) Tobacco Smoking in Australia: A Snapshot, 2004-05 * Australian Institute of Health and Welfare (AIHW) Australia's Health 2006 * Returns on Investment in Public Health (2003) 	<input checked="" type="checkbox"/>

20.3(a)	A national system for epidemiological surveillance of tobacco consumption and related social, economic and health indicators?	<input type="checkbox"/>
20.4	The exchange of publicly available scientific, technical, socioeconomic, commercial and legal information, as well as information regarding practices of the tobacco industry and the cultivation of tobacco?	<input type="checkbox"/>
20.4(a)	An updated database of laws and regulations on tobacco control, and information about their enforcement, as well as pertinent jurisprudence? All Commonwealth legislation can be found on the comlaw website at www.comlaw.gov.au and is regularly updated. State and Territory legislation can be found on their individual websites (see Attachment A).	<input checked="" type="checkbox"/>

7. **Technical and financial assistance** [Help](#)

The goal of this section is to assist the Secretariat in facilitating the coordination of available skills and resources with identified needs.

Pursuant to **Article 21.1(c)**, 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 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 (please give details below)	Assistance received (please give details below)
Development, transfer and acquisition of technology, knowledge, skills, capacity and expertise related to tobacco control? (Article 22.1(a))	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No
Provision of technical, scientific, legal and other expertise to establish and strengthen national tobacco control strategies, plans and programmes? (Article 22.1(b))	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No
Appropriate training or sensitization programmes for appropriate personnel in accordance with Article 12? (Article 22.1(c))	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No
Provision of the necessary material, equipment and supplies, as well as logistical support, for tobacco control strategies, plans and programmes? (Article 22.1(d))	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No
Identification of methods for tobacco control, including comprehensive treatment of nicotine addiction? (Article 22.1(e))	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No
Promotion of research to increase the affordability of comprehensive treatment of nicotine addiction? (Article 22.1(f))	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No

Other. Specify:		
<p>Additional details:</p> <p>If you answered no to any of the above, please identify any financial or technical assistance that may be under consideration.</p> <p>If you answered yes to any of the above, please identify the country or countries from/to which assistance was received/provided.</p> <p>See Attachment A</p>		

Pursuant to **Article 21.3**, have you either provided or received financial or technical assistance to support developing country Parties and Parties with economies in transition in meeting reporting obligations?

Assistance provided <input type="checkbox"/> Help	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No (please give details below)	Assistance received	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No (please give details below)
<p>Additional details:</p> <p>If you answered no to any of the above, please identify any financial or technical assistance that may be under consideration.</p> <p>If you answered yes to any of the above, please identify the country or countries from/to which assistance was received/provided.</p> <p>See response to previous question</p>			

Have you identified any specific gaps between the resources available and the needs assessed, for the financial and technical assistance provided or received? [Help](#)

<input type="checkbox"/> Yes (please give details below)	<input checked="" type="checkbox"/> No
<p>Additional details:</p>	

8. Priorities for implementation of the WHO Framework Convention on Tobacco Control [Help](#)

What are the priority areas for implementation of the WHO Framework Convention on Tobacco Control in your jurisdiction? (Ref. **Article 21.1(b)**)

The implementation of the National Tobacco Strategy 2004 – 2009 outlines the priority areas and key strategies for tobacco control in Australia.

The goal is to significantly improve health and to reduce the social costs caused by, and the inequity exacerbated by, tobacco in all its forms.

The objectives of the Strategy are, across all social groups: to prevent uptake of smoking; to encourage and assist as many smokers as possible to quit as soon as possible; to eliminate harmful exposure to tobacco smoke among non-smokers; and where feasible, to reduce harm associated with continuing use of and dependence on tobacco and nicotine.

The National Tobacco Strategy is a comprehensive approach to reducing tobacco-related harm.

Jurisdictions will:

- further use regulation to reduce the use of, exposure to, and harm associated with tobacco;
- increase promotion of Quit and Smokefree messages;
- improve the quality of, and access to, services and treatment for smokers;
- provide more useful support to parents, carers and educators helping children to develop a healthy lifestyle;
- endorse policies that prevent social alienation associated with uptake of high risk behaviours such as smoking, and advocate policies that reduce smoking as a means of addressing disadvantage;
- tailor messages and services to ensure access by disadvantaged groups; and
- obtain the information we need to fine-tune our policies and programs.

What, if any, are the constraints or barriers you have encountered in implementing the Convention? (ref. **Article 21.1(b)**)

None

9. Additional comments [Help](#)

Please provide any relevant information not covered elsewhere that you feel is important.

N/A

10. Questionnaire feedback

- (a) Please provide feedback for improvement of the Group 1 questionnaire. [Help](#)

(b) Please provide input for the future development of the Group 2 questionnaire.

[Help](#)