

**REPORTING INSTRUMENT  
OF THE WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL**

**PLEASE READ THIS NOTE BEFORE COMPLETING THE QUESTIONNAIRE**

In order to use the interactive features of the reporting instrument, please follow the instructions below.

1. Save the Microsoft Word-based document (WHO FCTC reporting instrument) to a folder on the computer that will be used to complete the questionnaire.
2. Ensure your Microsoft Word security settings allow you to run macros in this document:
  - (i) Under the "Tools" menu, select "Macro".
  - (ii) In the "Macro" menu, select "Security".
  - (iii) In the "Security" pop up menu, please ensure that you have selected "Medium".
3. Close and re-open the WHO FCTC reporting instrument (Microsoft Word-based document which you saved to your computer under step 1).
4. As the document is opening, a box will appear asking if you want to enable macros. The answer is yes. Click "Enable macros".
5. Once you have clicked "Enable macros", the buttons indicating that you can add new rows or new categories to the tables provided will be functional.

**It is essential to complete the reporting instrument by providing information/data in the required format to ensure consistency and for ease of data processing and analysis.**

**I confirm that I read the note and followed the instructions therein**

## 1. ORIGIN OF THE REPORT

<b>1.1</b>	<b>NAME OF CONTRACTING PARTY</b>	Canada
<b>1.2</b>	<b>Information on national contact responsible for preparation of the report:</b>	
	Name and title of contact officer	Cathy A. Sabiston, Director General Controlled Substances and Tobacco Directorate
	Full name of institution	Health Canada
	Mailing address	123 Slater Street, 9 <sup>th</sup> Floor, Ottawa, Ontario KIA OK9
	Telephone number	613-941-1977
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	E-mail	cathy.a.sabiston@hc-sc.gc.ca
<b>1.3</b>	<b>Signature of government official submitting the report:</b>	
	Name and title of officer	Cathy A. Sabiston, Director General Controlled Substances and Tobacco Directorate
	Full name of institution	Health Canada
	Mailing address	123 Slater Street, 9th Floor, Ottawa, Ontario KIA OK9
	Telephone number	613-941-1977
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	Web page	www.gosmokefree.gc.ca
<b>1.4</b>	<b>Period of reporting</b>	January 2010 - December 2011
<b>1.5</b>	<b>Date the report was submitted</b>	February 27, 2012

## 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	<b>Smoking prevalence in the adult population (all)</b> <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
	<b>MALES</b>		
	Current smokers	19.70 %	
	Daily smokers	15.30 %	16.40
	Occasional smokers	4.50 %	
	Former smokers	29.00 %	
	Never smokers	51.20 %	
	<b>FEMALES</b>		
	Current smokers	13.80 %	
	Daily smokers	10.90 %	13.20
	Occasional smokers	2.90 %	
	Former smokers	23.70 %	
	Never smokers	62.50 %	
	<b>TOTAL (males and females)</b>		
	Current smokers	16.70 %	
	Daily smokers	13.10 %	15.10
	Occasional smokers	3.70 %	
	Former smokers	26.40 %	
	Never smokers	56.90 %	

2.1.1.1	Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.1:
	Cigarettes
2.1.1.2	Please indicate the age range to which the data used to answer question 2.1.1 refer:
	Age 15+
2.1.1.3	Please indicate the year and source of the data used to answer question 2.1.1:
	<p>Canadian Tobacco Use Monitoring Survey (CTUMS) 2010. Data is collected with one decimal. The Reporting Instrument adjusts reporting data into two decimal places implying a level of precision that is not accurate.</p> <p>English - <a href="http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php">http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php</a></p> <p>French - <a href="http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-fra.php">http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-fra.php</a></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.
	<p>Current smoker: includes daily smokers and occasional smokers. Determined from the response to the question "At the present time do you smoke cigarettes every day, occasionally, or not at all?"</p> <p>Daily smoker: refers to those who respond "Every day" to the question "At the present time do you smoke cigarettes every day, occasionally or not at all?"</p> <p>Occasional smoker: refers to those who respond "Occasionally" to the question "At the present time do you smoke cigarettes every day, occasionally or not at all?"</p> <p>Former smoker: was not smoking at the time of the interview, however, answered "YES" to the question "Have you smoked at least 100 cigarettes in your life?"</p> <p>Never smoker: was not smoking at the time of the interview and answered "NO" to the question "Have you smoked at least 100 cigarettes in your life?"</p>
2.1.1.5	Please provide a brief explanation of the trend in smoking prevalence in the adult population in the past two years or since submission of your last report.
	Overall smoking prevalence has declined since 1999. In 2010, the smoking rate was 17%, this represents the first statistically significant decline since 2005-07 (19%). From year to year, the change was not statistically significant.

2.1.2	<b>Smoking prevalence in the adult population (by age groups)</b>			
	<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>	
<b>MALES</b>				
Current smokers <sup>1</sup>		25-34	27.50 %	
		35-44	22.40 %	
	Add age group		45-54	22.80 %
			55-64	16.80 %
			65+	7.80 %
<b>FEMALES</b>				
Current smokers <sup>1</sup>		25-34	14.70 %	
		35-44	16.90 %	
	Add age group		45-54	14.60 %
			55-64	13.00 %
			65+	8.10 %
<b>TOTAL (males and females)</b>				
Current smokers <sup>1</sup>		25-34	21.10 %	
		35-44	19.70 %	
	Add age group		45-54	18.70 %
			55-64	14.90 %
			65+	7.90 %

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

2.1.2.1	Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.2:
	Cigarettes
2.1.2.2	<p>Please indicate the year and source of the data used to answer question 2.1.2:</p> <p>Canadian Tobacco Use Monitoring Survey (CTUMS) 2010. Data is collected with one decimal. The Reporting Instrument adjusts reporting data into two decimal places implying a level of precision that is not accurate.</p> <p>English - <a href="http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php">http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php</a></p> <p>French - <a href="http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-fra.php">http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-fra.php</a></p>
2.1.2.3	<p>Please provide a brief explanation of the trend in current smoking prevalence by age group in the past two years or since submission of your last report, if data are available.</p> <p>Overall, smoking prevalence has generally followed a downward trend across all age groups since 1999 but there were no significant changes from 2008 to 2010.</p>

<b>2.1.3</b>	<b>Prevalence of smokeless tobacco use in the adult population (all)</b> <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>
	<b>MALES</b>	
	Current users	0.80 %
	Daily users	%
	Occasional users	%
	Former users	%
	Never users	%
	<b>FEMALES</b>	
	Current users	%
	Daily users	%
	Occasional users	%
	Former users	%
	Never users	%
	<b>TOTAL (males and females)</b>	
	Current users	0.40 %
	Daily users	%
	Occasional users	%
	Former users	%
	Never users	%

2.1.3.1	Please indicate the smokeless tobacco products included in calculating prevalence for question 2.1.3:
	Chewing tobacco, pinch, snuff.  Results for females are unreleasable due to low sample size.
2.1.3.2	Please indicate the age range to which the data used to answer question 2.1.3 refer:
	Age 15+
2.1.3.3	Please indicate the year and source of the data used to answer question 2.1.3:
	Canadian Tobacco Use Monitoring Survey (CTUMS) 2010. Data is collected with one decimal. The Reporting Instrument adjusts reporting data into two decimal places implying a level of precision that is not accurate.  English- <a href="http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php">http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php</a>  French- <a href="http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-fra.php">http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-fra.php</a>
2.1.3.4	Please provide the definitions of “current user”, “daily user”, “occasional user”, “former user” and “never user” (of smokeless tobacco products) used in this report in the space below.
	"Current user": used chewing tobacco, pinch, snuff in the past 30 days
2.1.3.5	Please provide a brief explanation of the trend in smokeless tobacco use in the adult population in the past two years or since submission of your last report.
	Overall use of smokeless tobacco remains very low - less than 1% of the adult population ( age 15+).

2.1.4	<b>Prevalence of smokeless tobacco use in the adult population (current users) by age group</b> <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) <span style="float: right;">Prevalence (%)</span> <i>(please include all smokeless tobacco products in prevalence data)</i>
<b>MALES</b>		
Current users <sup>2</sup>  <input type="text" value="Add age group"/>	15-24	2.60 %
		%
		%
		%
		%
<b>FEMALES</b>		
Current users <sup>2</sup>  <input type="text" value="Add age group"/>		%
		%
		%
		%
		%
<b>TOTAL (males and females)</b>		
Current users <sup>2</sup>  <input type="text" value="Add age group"/>	15-24	1.40 %
		%
		%
		%
		%

<sup>2</sup> 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:
	Chewing tobacco, pinch, snuff.  Results for females and other male age groups are unreleasable due to low sample size.
2.1.4.2	Please indicate the year and source of the data used to answer question 2.1.4:
	Canadian Tobacco Use Monitoring Survey (CTUMS) 2010. Data is collected with one decimal. The Reporting Instrument adjusts reporting data into two decimal places implying a level of precision that is not accurate.  English- <a href="http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php">http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php</a>  French- <a href="http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-fra.php">http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-fra.php</a>
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 two years or since submission of your last report.
	Overall use of smokeless tobacco remains very low in both males and females aged 15-24. Since 2008 the prevalence has remained steady since Group Two reporting in this age group (i.e. no statistically significant changes).

<b>2.1.5</b>	<b>Tobacco use by ethnic group(s)</b>					
		Ethnic group(s)	Prevalence (%) <i>(please include all smoking or smokeless tobacco products in prevalence data)</i>			
			Males	Females	Total (males and females)	
	Current users <sup>3</sup>			%	%	%
				%	%	%
		<b>Add ethnic group</b>		%	%	%
				%	%	%
			%	%	%	
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:					

<sup>3</sup> 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)
	<b>Boys</b>				
	Current users <sup>4</sup>	Grades 6-9	10.50 %	1.20 %	%
	<b>Add youth group</b>	Grades 10-12	31.80 %	6.30 %	%
			%	%	%
			%	%	%
			%	%	%
	<b>Girls</b>				
	Current users <sup>4</sup>	Grades 6-9	8.00 %	0.30 %	%
	<b>Add youth group</b>	Grades 10-12	23.00 %	1.00 %	%
			%	%	%
			%	%	%
			%	%	%
	<b>TOTAL (boys and girls)</b>				
	Current users <sup>4</sup>	Grades 6-9	9.30 %	0.80 %	%
	<b>Add youth group</b>	Grades 10-12	27.60 %	3.80 %	%
			%	%	%
			%	%	%
			%	%	%
2.1.6.1	Please indicate the tobacco products included in calculating prevalence for question 2.1.6:				
	Smoking tobacco: cigarettes, pipe, cigars, cigarillos - past 30 day use Smokeless tobacco: chewing tobacco, nasal snuff, oral snuff - past 30 day use Other tobacco: not included in the 2008-09 survey				

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

2.1.6.2	Please indicate the year and source of the data used to answer question 2.1.6:
	<p>Youth Smoking Survey (YSS) 2008-09</p> <p>English - <a href="http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php">http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php</a></p> <p>French - <a href="http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-fra.php">http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-fra.php</a></p>
2.1.6.3	Please provide the definition of “current smoking/tobacco use” used to answer question 2.1.6 in the space below.
	For all tobacco products, current use has been defined as past 30 day use
2.1.6.4	Please provide a brief explanation of the trend in tobacco use by young persons in the past two years or since submission of your last report.
	In Canada, tobacco use by youth has decreased dramatically since 1994. The most dramatic changes were seen among the youngest groups. The smoking rates of youth in grades 6-9 are slightly lower since last reporting, while in grades 10-12 the rates are slightly higher. The rates of youth smokeless tobacco use remain low in both groups since last reporting.

<b>2.2</b>	<b>EXPOSURE TO TOBACCO SMOKE</b>
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	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>All results for Canadian population, age 15+</p> <p>Exposed inside vehicle: 19.1%</p> <p>Exposed inside someones home: 23.8%</p> <p>Exposed on restaurant/bar patio: 29.4%</p> <p>Exposed inside restaurant: 2.9%</p> <p>Exposed inside bar/tavern: 3.7%</p> <p>Exposed at bus stop or shelter: 16.4%</p> <p>Exposed at entrance to a building: 53.8%</p> <p>Exposed at workplace: 19.5%</p> <p>Exposed on school property: 8.5%</p> <p>Exposed at other public place: 33.8%</p> <p>Exposed on sidewalk or park: 54.5%</p> <p>Exposed anywhere else: 4.2%</p>
2.2.3	Please indicate the year and source of the data used to answer question 2.2.1:
	CTUMS 2010. Based on exposure in the past 30 days.
<b>2.3</b>	<b>TOBACCO-RELATED MORTALITY</b>

2.3.1	Do you have information on tobacco-related mortality in your population? <input checked="" 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? 37209																
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>For 2002 (most recent Canadian data)</p> <table> <tr> <td>Malignant Neoplasms</td> <td>17,427</td> </tr> <tr> <td>Cardiovascular Diseases</td> <td>10,275</td> </tr> <tr> <td>Respiratory Disease</td> <td>8,282</td> </tr> <tr> <td>Intestinal Disease</td> <td>190</td> </tr> <tr> <td>Perinatal Conditions</td> <td>92</td> </tr> <tr> <td>Injury (Fire)</td> <td>55</td> </tr> <tr> <td>Tobacco Abuse</td> <td>57</td> </tr> <tr> <td>    Passive Smoking</td> <td>831</td> </tr> </table>	Malignant Neoplasms	17,427	Cardiovascular Diseases	10,275	Respiratory Disease	8,282	Intestinal Disease	190	Perinatal Conditions	92	Injury (Fire)	55	Tobacco Abuse	57	Passive Smoking	831
Malignant Neoplasms	17,427																
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Perinatal Conditions	92																
Injury (Fire)	55																
Tobacco Abuse	57																
Passive Smoking	831																
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>The Costs of Substance Abuse in Canada 2002 released in 2006. The full report and all the supporting tables are available on-line.</p> <p><a href="http://www.ccsa.ca/Eng/Priorities/Research/CostStudy/Pages/default.aspx">http://www.ccsa.ca/Eng/Priorities/Research/CostStudy/Pages/default.aspx</a></p>																

<b>2.4</b>	<b>TOBACCO-RELATED COSTS</b>
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	<p>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> <p>The study of the social costs of substance abuse in Canada in 2002 was conducted within the framework of the revised International Guidelines for Estimating the Costs of Substance Abuse (Single et al., 2001) utilizing a modified prevalence-based human capital approach.</p> <p>The economic costs of tobacco abuse in 2002 were estimated at \$17.0 billion (CAD). The largest cost (approximately \$12.5 billion) was for lost productivity due to illness and premature death. Direct health care costs due to tobacco were estimated at about \$4.4 billion.</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>The Cost of Substance Abuse in Canada 2002 was released in 2006. The full report and all the supporting tables are available on-line.</p> <p><a href="http://www.ccsa.ca/Eng/Priorities/Research/CostStudy/Pages/default.aspx">http://www.ccsa.ca/Eng/Priorities/Research/CostStudy/Pages/default.aspx</a>.</p>

2.5	<b>SUPPLY OF TOBACCO AND TOBACCO PRODUCTS</b> <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. pieces, tonnes</i> )	Domestic production	Exports	Imports
	Smoking tobacco products	Cigarettes	units, billions	17.20	4.60
		Cigars	units, millions	133.60	33.40
	<input type="button" value="Add product"/>				
	Smokeless tobacco products	Smokeless	kg, thousands	0.00	0.00
	<input type="button" value="Add product"/>				
	Other tobacco products	Fine-Cut	kg, thousands	690.00	0.00
		Pipe Tobacco	kg, thousands	30.50	0.00
	<input type="button" value="Add product"/>				
	Tobacco	Leaves			
2.5.2	Please provide information on the volumes of duty-free sales (e.g. product, unit, quantity), if available.				
2.5.3	Please indicate the year and source of the data used to answer questions 2.5.1 and 2.5.2:				
	2010 data submitted by tobacco companies to Health Canada under the Tobacco Reporting Regulations.				

2.6	SEIZURES OF ILLICIT TOBACCO PRODUCTS (with reference to Article 15.5)				
2.6.1		Year	Product	Unit (e.g. millions of pieces)	Quantity seized
	Smoking tobacco products <input type="button" value="Add row"/>	2011	Cigarettes	Cartons/Baggies	<b>763241.00</b>
		2011	Little Cigars	units	<b>1445717</b>
		2011	Cigars	kg	<b>153.00</b>
		2011	Fine Cut	kg	<b>69280.00</b>
		2011	Water pipe	kg	6579
	Smokeless tobacco products <input type="button" value="Add row"/>	2011	Snuff	kg	<b>196.00</b>
		2011	Chewing tobacco	kg	<b>1157.00</b>
	Other tobacco products <input type="button" value="Add row"/>	2011	Raw leaf	kg	<b>2200.00</b>
		2011	Tobacco substitutions	kg	2.46
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 two 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	<p>Please provide any further information on illicit or smuggled tobacco products.</p> <p>The Canada Border Services Agency (CBSA) and the Royal Canadian Mounted Police (RCMP) have shared responsibility for the surveillance, monitoring and enforcement of illicit tobacco activity along Canada’s border and between ports of entry. The CBSA’s exercises its responsibilities at all ports of entry across Canada; while the RCMP is responsible for illicit tobacco activity between the ports of entry and domestically as well.</p> <p>Clear plastic bags containing 200 cigarettes are one of the most popular and prevalent illicit product in Canada. They account for a significant proportion of seizures made by law enforcement. It should be noted that these cigarettes originate from different manufacturing facilities, ranging from small organized crime groups, to fully equipped industrial plants.</p>				

<b>2.6</b>	<b>SEIZURES OF ILLICIT TOBACCO PRODUCTS</b> <i>(with reference to Article 15.5)</i>
2.6.6	Please indicate the source of the data used to answer questions in section 2.6: Data was provided by CBSA and RCMP.

<b>2.7</b>	<b>TOBACCO-GROWING</b>
2.7.1	Is there any tobacco-growing in your jurisdiction? <input checked="" type="checkbox"/> Yes <input 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.  Statistics Canada does not collect information specifically on the number of workers involved in tobacco-growing. In the most recent census data available from 2006, Statistics Canada reported that the manufacturing of tobacco employed 3085 individuals (2070 males and 1015 females). However, Statistics Canada information does indicate that the number of tobacco farms has been decreasing from 0.4% (1079 farms) of total farms in 2001 to 0.2% (564 farms) of total farms in 2006. The total number of farms in Canada declined during that period from 246,923 in 2001 to 229,373 in 2006. In 2011, approximately 115 licences to grow tobacco were issued in the Canadian provinces of Ontario and Quebec.
2.7.3	Please provide, if available, the share of the value of tobacco leaf production in the national gross domestic product. Based on 2006 data, Statistics Canada reports that 0.0002% of Canada's gross domestic product is a result of tobacco leaf growing.
2.7.4	Please indicate the year and source of the data used to answer questions in section 2.7: 2001 (Statistics Canada); 2006 (Statistics Canada); 2011 Ontario Flue-Cured Tobacco Growers’ Marketing Board.

<b>2.8</b>	<b>TAXATION OF TOBACCO PRODUCTS</b> <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))? Data not available.
2.8.2	How are the excise taxes levied (what types of taxes are levied)? <ul style="list-style-type: none"> <li>• Specific tax only <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</li> <li>• Ad valorem tax only <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</li> <li>• Combination of specific and ad valorem taxes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</li> <li>• More complex structure (<i>please explain:</i> Provincial/Territorial Tobacco tax, GST or equivalent at federal and provincial area and Provincial/Territorial retail tax. Please see information provided under section 2.8.7)</li> </ul>
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 <sup>5</sup>
	Smoking tobacco products <b>Add product</b>	Cigarettes	Federal Excise Duty - Specific tax	\$0.425	5 Cigarettes or fraction thereof contained in any package
		Other manufactured tobacco, including fine cut (roll-your-own) tobacco	Federal Excise Duty - Specific tax	\$2.8925	Per 50 grams or fraction of 50 grams contained in the smallest consumer package
		Cigarettes and other manufactured tobacco, including fine cut (roll-your-own) tobacco	Provincial/territorial tobacco tax	Rates range from \$0.106 to \$0.286 per cigarette and from \$0.106 to \$0.32 per gram	Cigarette or gram of manufactured tobacco
		Cigarettes and other manufactured tobacco, including fine cut (roll-your-own) tobacco	VAT	Federal GST (5%) or HST (12%, 13% or 15%) depending on the province or territory	Sale Price
	Smokeless tobacco products <b>Add product</b>	Smokeless tobacco products-	Federal Excise Duty - Specific tax	\$2.8925	Per 50 grams or fraction of 50 grams contained in the smallest consumer package
		Smokeless tobacco products	Provincial/territorial tax	Rates range from \$0.106 to \$0.32 per gram of manufactured tobacco.	Gram of manufactured tobacco.
		Smokeless tobacco products	VAT	Federal GST (5%) or HST (12%, 13% or 15%) depending on the province or territory	Sale Price
	Other tobacco products				

<sup>5</sup> 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.

	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Add product</div>				
2.8.4	<p>Please briefly describe the trends in taxation for tobacco products in the past two years or since submission of your last report in your jurisdiction.</p> <p>Federal excise duty rates are unchanged since July 1, 2008. During this reporting period; the rate of GST (sales tax) was unchanged. Provincial/territorial tobacco tax rates either increased or stayed the same. Two provinces replaced their provincial sales taxes with a harmonized sales tax (HST); the effective rate of tax on tobacco products increased in their jurisdictions.</p>				
2.8.5	<p>Do you earmark any percentage of your taxation income for funding any national plan or strategy on tobacco control in your jurisdiction?</p> <p><input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No  <i>(In reference to Article 26)</i></p>				
2.8.6	<p>If you answered “Yes” to question 2.8.5, please provide details in the space below.</p>				
2.8.7	<p>Please indicate the year and source of the data used to answer questions 2.8.1 to 2.8.6:</p> <p>The final consumer selling price for tobacco products includes the federal excise duty, the provincial/territorial tobacco taxes and the HST or the GST and, where applicable, retail sales tax.</p> <p><b>Federal Excise Duties</b></p> <p>Federal excise duties are applied on cigarettes, tobacco sticks, fine-cut tobacco (i.e., roll your own tobacco), cigars, and packaged raw leaf tobacco.</p> <p><b>Provincial/Territorial Tobacco Tax</b></p> <p>Provincial/territorial tobacco tax rates are set by the respective province or territory. The provincial/territorial tobacco tax applies to tobacco products which are destined for sale in the particular jurisdiction.</p> <p><b>Value Added Tax</b></p> <p>The Goods and Services Tax (GST) is levied on an ad valorem basis on most goods and services across Canada at the rate of 5%. Where a province/territory has chosen to harmonize its retail sales tax with the federal system, a Harmonized Sales Tax (HST) is levied on an ad valorem basis on most goods and services in that jurisdiction. Currently, HST may apply at 12%, 13% or 15%.</p> <p><b>Retail Sales Tax - provincial/territorial</b></p> <p>A province/territory that has not harmonized with the federal value-added tax system may impose a retail sales tax on goods and services sold within its jurisdiction.</p>				

2.9	<b>PRICE OF TOBACCO PRODUCTS</b> <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	Canadian Classics			King Size 25	\$9.48
		Next Blue			King Size 25	\$7.84
		Belmont			Regular Size 25	\$11.16
					Number 7 (Fine-cut)	150g \$62.60
					Captain Black (Cigar)	8 \$10.71
		Imported			King Size 25	\$10.22
					King Size 25	\$10.27
					Regular Size 25	\$8.88
			Copenhagen Snuff		34g	\$17.94
			Skoal Long Cut Straight		34g	\$19.95
			Copenhagen Long Cut		34g	\$17.94
				Peter Jackson Red (Fine-cut)	100g	\$40.62
			Bullseye (Cigar)	20	\$12.99	

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2.9.2	Please indicate the year and source of the data used to answer question 2.9.1.
	Information on 2011 retail tobacco prices in Ottawa, Canada, was provided by the Business Intelligence Unit, Office of Tobacco Regulations and Compliance, Health Canada.
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.
	Oct. 19, 2011: 1.00 Canadian Dollar = 0.99 U.S. Dollar
2.9.4	Please briefly describe the trend in the prices of tobacco products in the past two years or since submission of your last report in your jurisdiction.
	In Canada, the average retail price of cigarettes has been either stable or rising slightly, depending on the province of sale within Canada. The presence of illegal cigarettes in the two largest Canadian provinces ( Ontario and Quebec) has moderated against tax and price increases since 2007.

### 3. LEGISLATION, REGULATION AND POLICIES

3.1	<i>Article</i>	<b>GENERAL OBLIGATIONS</b> <i>(with reference to Article 5)</i>		
3.1.1	5	<b>General obligations</b>		
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 checked="" type="checkbox"/> Yes	<input 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 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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• a national coordinating mechanism for tobacco control	<input checked="" type="checkbox"/> Yes	<input 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>Canada's Federal Tobacco Control Strategy (FTCS) is led by Health Canada in partnership with Public Safety Canada, the Royal Canadian Mounted Police (RCMP), Canada Revenue Agency, Canada Border Services Agency, and the Office of the Director of Public Prosecutions.</p> <p>Health Canada is responsible for administering and enforcing the Tobacco Act. This Act regulates the manufacture, sale, labelling and promotion of tobacco products. It also undertakes and promotes initiatives that reduce or prevent the negative health impacts associated with smoking. The FTCS is championed by the Controlled Substances and Tobacco Directorate (CSTD) of the Healthy Environments and Consumer and Safety Branch within Health Canada. The Regions and Programs Branch delivers the program component of the FTCS through a grants and contribution program and supports public education through the national and regional offices.</p> <p>Contraband tobacco products are those sold without the collection of all applicable national and sub-national taxes. These illegal, lower-prices cigarettes undermine tax and public health measures put in place to reduce tobacco use.</p> <p>The FTCS provides approximately \$16 million per year to support the intelligence work of the CRA, CBSA, and RCMP to address contraband and to ensure compliance with Canada's tobacco tax laws. Health Canada's demand reduction activities such as prevention and cessation initiatives complement the contraband control activities of the these partners.</p> <p style="padding-left: 40px;">Canada places a strong emphasis on collaboration between the federal, provincial, territorial and municipal governments, as well as non-governmental organizations, tobacco control researchers, academics, and community organizations. Federal, provincial and territorial investments in tobacco control now total more than \$150 million each year.</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 two years or since submission of your last report.</p>

	<p>Canada’s successful policy of enabling a strict regulatory environment that severely limits the tobacco industry’s ability to use promotion to attract new smokers, combined with programs that provide Canadians with information on the dangers of smoking has produced results. Between 2001 and 2010, smoking rates dropped from 22% to a lowest-ever 17%. The FTCS target of reducing the Canadian youth (aged 15-17) smoking rate to 9% was reached. This is the lowest smoking rate ever recorded for Canadian youth.</p> <p>On September 22, 2011, the Tobacco Products Labelling Regulations (Cigarettes and Little Cigars) came into force. These regulations introduce new and larger health warning messages, including images targeting young people, that cover 75 percent of the front and back of cigarette and little cigar packages to increase awareness of the health hazards associated with tobacco use. Manufacturers of tobacco products have a transition period of six months for implementation and must comply as of March 21, 2012, while retailers have a transition period of nine months and must comply as of June 19, 2012. The new labels also include a pan-Canadian toll-free quitline number and web that will link callers to provincial and territorial cessation services.</p> <p>The Federal Tobacco Control Strategy was extended for one year until March 2012 to allow for the implementation of these recent initiatives and to explore new approaches for the future federal role in tobacco control. Health Canada launched an online stakeholder consultation on the future of tobacco control to provide a forum for public input. Health Canada is finalizing options for the future federal role in tobacco control.</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>

3.1.2	5.3	<p><b>Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry</b></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		<p>– protecting public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry?</p>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.1.2.2		<p>– 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?</p>	<input checked="" type="checkbox"/> Yes	<input 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>Canada has reviewed the Article 5.3 Guidelines in relation to the Canadian policy, legal and constitutional context. Canada has adopted administrative measures, such as Health Canada's policy of not partnering with the tobacco industry on tobacco control programming. Lobbying at the federal level in Canada is regulated under the Lobbyist Registration Act and it is illegal for corporations of any kind to contribute political campaign contributions for electoral purposes. Some provinces also regulate lobbying. Furthermore, the Lobbyist Registration Act introduced a requirement that consultant lobbyists (ie: tobacco related activities) file a return with the Commissioner of Lobbying if they communicate with a designated public office holder (DPOH) under certain conditions. This registry can be searched by anyone through a publicly-accessible Website.</p> <p>Health Canada has discussed the Article 5.3 Guidelines with its federal partner departments and with relevant departments of provincial/territorial governments who are collaborators in the Federal Tobacco Control Strategy (FTCS). Health Canada is considering what, if any, further measures related to the recommendation of the Article 5.3 Guidelines may be appropriate and feasible in the Canadian context. Generally, in Canada the primary channels of communication between governments and the tobacco industry are limited to (i) technical discussions as required by national law in regard to both health and tax-related regulations and (ii) litigation-related responses, as required by national law and practice.</p> <p>In Canada, many aspects of the tobacco industry's health policy, business and marketing activities are matters of public record. In addition, civil society organizations keep close track of tobacco industry activities and maintain web sites, publications etc for this and related purposes. The tobacco industry must report to government on its research and promotional</p>		

	<p>activities pursuant to Tobacco Reporting Regulations of the Tobacco Act. Public access to information about the tobacco industry which is reported to the government pursuant to these Regulations is governed by the Canadian Charter of Rights and Freedoms, Access to Information &amp; Privacy Act, and the common law as it relates to confidential business information.</p>
3.1.2.4	<p>Please provide a brief description of the progress made in implementing Article 5.3 in the past two years or since submission of your last report.</p> <p>Canada has reviewed the possible implications of Article 5.3 of the FCTC in the Canadian context and has taken steps to inform other federal government departments of the commitment. Canada is working with subsidiary levels of government to ensure that they are aware of the issues and how to manage them.</p>
3.1.2.5	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>

<b>3.2</b>	<b>Article</b>	<b>MEASURES RELATING TO THE REDUCTION OF DEMAND FOR TOBACCO</b> <i>(with reference to Articles 6–14)</i>		
3.2.1	6	<b>Price and tax measures to reduce the demand for tobacco</b> <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:		
3.2.1.1	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 two years or since submission of your last report.			
	Canada was in compliance with Article 6 prior to ratification.			
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.			
	The Promotion of Tobacco Products and Accessories Regulations (Prohibited Terms) came into force on September 22, 2011. They prohibit the use of the terms "light" and "mild", and variations thereof, on various tobacco products, their packaging, promotions, retail displays, as well as on tobacco accessories. These regulations apply to cigarettes, little cigars, cigarette tobacco, kreteks, bidis, tobacco sticks, cigarette papers, cigarette tubes and filters.			

3.2.2	8.2	<p><b>Protection from exposure to tobacco smoke</b></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>		
3.2.2.1		<p>– banning tobacco smoking in indoor workplaces, public transport, indoor public places and, as appropriate, other public places ?</p>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.2.2		<p>If you answered "Yes" to question 3.2.2.1, what is the type/nature of the measure providing for the ban?</p>		
		<ul style="list-style-type: none"> <li>• national law</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> <li>• subnational law(s)</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> <li>• administrative and executive orders</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> <li>• voluntary agreements</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> <li>• other measures (<i>please specify</i>: Municipal by-laws)</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.2.3		<p>Please provide a brief explanation of the type/nature and content of the measures providing for the ban.</p>		
		<p>Canada has comprehensive national and sub national legislation protecting Canadians from exposure to tobacco smoke. Annex A provides a summary of select federal, provincial and municipal measures.</p>		
3.2.2.4		<p>If you answered "Yes" to any options in 3.2.2.2, do any of these measures provide for a mechanism/ infrastructure for enforcement?</p>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.2.5		<p>If you answered "Yes" to question 3.2.2.4 please provide details of this system.</p>		
		<p>National, sub national and municipal legislation provides enforcement support related to specific legislation and regulations. Annex B provides a highlight of the various mechanisms and infrastructure for support.</p>		

3.2.2.6	If you answered “Yes” to question 3.2.2.1, please specify the settings and extent/comprehensiveness of measures applied in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.	Complete	Partial	None
Indoor workplaces:				
• 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 <sup>1</sup>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• universities		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• private workplaces		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• other ( <i>please specify</i> : Designated smoking rooms (DSR) are permitted by a few sub-national jurisdictions in very limited circumstances ( eg: in some cases on a compassionate basis) where traditional public spaces are deemed to be residential.(ie: palliative care and addiction treatment facilities where residents have permanent or extended residency). In most instances the compliance regulations renders the DSRs impractical and while permitted they are not widely used. )		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Public transport:				
• airplanes		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• trains		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• ferries		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• ground public transport (buses, trolleybuses, trams)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• motor vehicles used as places of work (taxis, ambulances, delivery vehicles)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• private vehicles		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<sup>1</sup> except universities

		• other ( <i>please specify:</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<table border="1"> <tr> <td colspan="4">Indoor public places:</td> </tr> <tr> <td>• cultural facilities</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>• shopping malls</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>• pubs and bars</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>• nightclubs</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>• restaurants</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>• other (<i>please specify</i>: Group living facilities and specified hotel rooms. Extensive regulations exist for ventilation and for resident use only)</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Indoor public places:				• cultural facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	• shopping malls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	• pubs and bars	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	• nightclubs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	• restaurants	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	• other ( <i>please specify</i> : Group living facilities and specified hotel rooms. Extensive regulations exist for ventilation and for resident use only)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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• other ( <i>please specify</i> : Group living facilities and specified hotel rooms. Extensive regulations exist for ventilation and for resident use only)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
3.2.2.7	<p>Please provide a brief summary of complete and partial measures, with specific details of the partial measures that have been implemented.</p> <ul style="list-style-type: none"> <li>Banning tobacco smoking in indoor workplaces</li> </ul> <p>Canada has comprehensive smoke free legislation in public workplaces, primarily governed through sub national jurisdictions. Recognizing that over 98% of indoor workplaces in Canada are smoke free, there do exist in a limited number of jurisdictions provisions for tightly regulated designated smoking rooms in indoor workplaces.</p> <ul style="list-style-type: none"> <li>Banning tobacco smoking in public transport</li> </ul> <p>National and sub-national jurisdictions provide for complete smoking bans in public transportation. A number of jurisdictions have implemented smoking bans in private vehicles where children are present. (The majority of jurisdictions identify children as under 16 with one jurisdiction under 19 years of age.)</p> <ul style="list-style-type: none"> <li>Banning tobacco smoking in indoor public places</li> </ul> <p>Canada has virtually eliminated smoking in all indoor public places with the exception of group living facilities and specified hotel rooms. The number of designated smoking rooms has been drastically reduced.</p>																												
3.2.2.8	<p>Please provide a brief description of the progress made in implementing Article 8 (<i>Protection from exposure to tobacco smoke</i>) in the past two years or since submission of your last report.</p> <p>There have been extensive developments in implementing Article 8. Comprehensive smoke-free legislation has been passed in all sub-national jurisdictions and numerous municipalities in Canada have adopted bylaws or policies to prohibit smoking in public places such as patios, play grounds and parks.</p> <p>Health Canada has provided funding for the development of tools, resources, guidebooks and knowledge transfer impacting smoke-free places and the dangers of second hand smoke. NGOs, universities, other governmental departments and agencies have received project funding supporting web based and hard copy resource material impacting smoke-free spaces in the home, car, public places, workplaces and public health and educational</p>																												

	facilities. A detailed report on activities supporting the implementation of Article 8 is attached as Annex C
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.

3.2.3	9	<p><b>Regulation of the contents of tobacco products</b></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 type="checkbox"/> Yes	<input checked="" 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 two years or since submission of your last report.</p> <p>In 2009, the Canada's Cracking Down on Tobacco Marketing Aimed at Youth Act amended the Tobacco Act in order to prohibit, inter alia, the use of additives in cigarettes, little cigars and blunts wraps that contribute to make these products more attractive to youth. The prohibited additives are listed in a Schedule annexed to the Act. This list includes most flavouring preparations, spices, seasonings and herbs, sugars and sweeteners, vitamins and mineral nutrients, fruits and vegetables, essential fatty acids, and other additives.</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>			

3.2.4	10	<p><b>Regulation of tobacco product disclosures</b></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 type="checkbox"/> Yes</p>	<p><input checked="" type="checkbox"/> No</p>
		<p>• emissions of tobacco products?</p>	<p><input type="checkbox"/> Yes</p>	<p><input checked="" 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 two years or since submission of your last report.</p>			
		<p>The Tobacco Reporting Regulations enacted in 2000 have required that tobacco manufacturers report the content and emissions of consumer tobacco products sold in Canada.</p> <p>Health Canada is making constituents and emission data available upon request to the public in aggregate form . This data is of particular interest to research and health groups. Background and contact information is provided on the Health Canada website at:</p> <p><a href="http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/legislation/reg/indust/constitu-eng.php">http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/legislation/reg/indust/constitu-eng.php</a></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	<b>Packaging and labelling of tobacco products</b>		
		<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 type="checkbox"/> Yes	<input checked="" 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)(iii)	If you answered "Yes" to question 3.2.5.6, does your law mandate, as a minimum, a style, size and colour of font to render the warning clear, visible and legible?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.8	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
3.2.5.9		– ensuring that the health warnings occupy 50% or more of the principal display areas?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.10	11.1(b)(v)	– ensuring that health warnings are in the form of, or include, pictures or pictograms?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

3.2.5.11		If you answered “Yes” to question 3.2.5.9, does the Government own the copyright to these pictures and pictograms?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.12		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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.13	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
3.2.5.14	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
3.2.5.15	<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 two years or since submission of your last report.</p> <p>The Tobacco Products Labelling Regulations (Cigarettes and Little Cigars) (TPLR-CLC) came into force in September 2011 and define new health-related labelling requirements for packages of cigarettes and little cigars intended for retail sale in Canada. The TPLR-CLC requires a health warning on at least 75% of the front and back panels, a qualitative toxic emissions statement on a side panel, and a health information message to be included either on the upper slide-flap and the exterior surface of the slide or on a leaflet inserted in the package. These will effectively rotate health warnings for cigarettes and little cigars.</p> <p>The Tobacco Products Information Regulations (TPIR) continue to apply to packages of most of the other tobacco products available on the Canadian market. The TPIR was amended in 2011 to remove the obligation to display numerical values for toxic emissions.</p> <p>Annex D provides Canada's Tobacco Products Information and Labelling Regulations.</p>			
3.2.5.16	<p>If you have any relevant information pertaining to or not covered in this section, please provide details in the space below.</p> <p>Canada's health warnings are displayed in full colour with English on one side of the package and French on the other.</p> <p>Some products with a small market share, such as waterpipe tobacco, are not required to display a health warning, while the health warnings on some cigar</p>			

and pipe packages may not occupy less than 30% of the main panels on occasions. Cigars sold individually are not required to display health warnings.

With respect to 3.2.5.11, the Government owns the copyright for most, but not all, of the pictures used in the health warnings.

3.2.6	12	<b>Education, communication, training and public awareness</b> <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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• ethnic groups	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
• other <i>(please specify: Health professionals)</i>		<input checked="" 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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	• socioeconomic status	<input checked="" 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)	• 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
		• adverse environmental consequences of		
		- tobacco production?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		- tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.6.5	12(e)	– awareness and participation of the following agencies and organizations in development and implementation of intersectoral programmes and strategies for tobacco control:		
		• public agencies?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• nongovernmental organizations not affiliated with the tobacco industry?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• private organizations?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• other ( <i>please specify: International multi-lateral organizations (i.e.: WHO, TFI, CS, PAHO)</i> )?	<input checked="" 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:		
		• health workers?	<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
		• media professionals?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• educators?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• decision-makers?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• administrators?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• other ( <i>please specify: </i> )?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

3.2.6.8	<p>Please provide a brief description of the progress made in implementing Article 12 (<i>Education, communication, training and public awareness</i>) in the past two years or since submission of your last report.</p>
	<p>Reporting on activities prescribed in Section 3.2.6 presented challenges for Canada. Responsibility for education, communication, training and public awareness is shared between federal, provincial and territorial governments. While a number of activities have national application, there are some that are supported in select sub national jurisdictions but not in others.</p> <p>To accurately report activities under Article 12, Canada has responded in the affirmative in instances where activities take place. Activities that vary between sub national jurisdictions are described in the following narrative.</p> <p>In response to question 3.2.6.2 of those jurisdictions that responded, 50% reported Yes for programs targeting men, 60% reported Yes for targeted programs for women and ethnic groups and that 60% reported Yes for programs targeted at pregnant women.</p> <p>In response to 3.2.6.3 of those jurisdictions that responded, 50% responded Yes for delivering educational and public awareness programs by gender and 50% reported Yes based on cultural background.</p> <p>In response to 3.2.6.5, 65% of the respondents indicated that they have participation of private organizations in the development and implementation of intersectoral programs and strategies for tobacco control.</p> <p>In responding to section 3.2.6.7 on the targeting of training program of those jurisdictions who responded, 90% reported Yes for community workers, 40% for social workers, 15% Yes for media, 90% Yes for education, 50% Yes for decision makers and 40% Yes for administrators.</p> <p>A number of publications and programs have been developed/supported in implementing Article 12. Annex E provides a detailed description of programs supporting Article 12.</p>
3.2.6.9	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>

3.2.7	13	<b>Tobacco advertising, promotion and sponsorship</b> <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"> <li>the same forms of cross-border advertising, promotion and sponsorship entering your territory for which domestic regulation apply?</li> </ul>	<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 checked="" type="checkbox"/> Yes	<input 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 type="checkbox"/> Yes	<input checked="" 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 type="checkbox"/> Yes	<input checked="" 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: Signs in adult only locations and publications provided by mail to a named adult</i> )?	<input type="checkbox"/> Yes	<input checked="" 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 type="checkbox"/> Yes	<input checked="" 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 type="checkbox"/> Yes	<input checked="" 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 two years or since submission of your last report.			
	<p>Tobacco products and promotion in Canada is prohibited except as authorized by the Tobacco Act and its regulations. For example, tobacco products advertising is restricted to informative and brand-preference advertising that is in signs in adult-only locations such as in nightclubs, and in publication that is provided by mail and addressed to named adults. Furthermore, Canada has legislated a prohibition of lifestyle tobacco products advertising, including a total ban on sponsorship promotion by way of a tobacco product-related brand names and manufacturers' names.</p> <p>The Promotion of Tobacco Products and Accessories Regulations (Prohibited Terms) came into force on September 22, 2011. They prohibit the use of the terms "light" and "mild", and variations thereof, on various</p>			

	tobacco products, their packaging, promotions, retail displays, as well as on tobacco accessories. These regulations apply to cigarettes, little cigars, cigarette tobacco, kreteks, bidis, tobacco sticks, cigarette papers, cigarette tubes and filters.
3.2.7.15	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.

3.2.8	14	<b>Demand reduction measures concerning tobacco dependence and cessation</b> <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:		
3.2.8.1	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:		
		○ underage girls and young women	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		○ women	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		○ pregnant women	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• telephone quitlines	<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> Incarcerated populations, aboriginal, young adults and marginalised populations for which projects are listed in Annex F.)?	<input checked="" 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> )	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• specialized centres for cessation counselling and treatment of tobacco dependence	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• rehabilitation centres	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• other ( <i>please specify:</i> )	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.8.7	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 type="checkbox"/> Partially	<input type="checkbox"/> None
		• secondary and tertiary health care	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input type="checkbox"/> None
		• specialist health-care systems ( <i>please specify:</i> )	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input type="checkbox"/> None

		<ul style="list-style-type: none"> <li>specialized centres for cessation counselling and treatment of tobacco dependence</li> </ul>	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input type="checkbox"/> None
		<ul style="list-style-type: none"> <li>rehabilitation centres</li> </ul>	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input type="checkbox"/> None
		<ul style="list-style-type: none"> <li>other (<i>please specify:</i> )</li> </ul>	<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"> <li>physicians</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>dentists</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>family doctors</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>practitioners of traditional medicine</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>other medical professionals (<i>please specify:</i> )</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>nurses</li> </ul>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>midwives</li> </ul>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>pharmacists</li> </ul>	<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"> <li>medical?</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>dental?</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>nursing?</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>pharmacy?</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		<ul style="list-style-type: none"> <li>other (<i>please specify:</i> )?</li> </ul>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.8.10	14.2(d)	– facilitating accessibility and/or	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

		affordability of pharmaceutical products for the treatment of tobacco dependence?			
3.2.8.11	14.2(d)	If you answered “Yes” to question 3.2.8.10, where and how can these products be legally purchased in your country?			
		Pharmacy			
3.2.8.12	14.2(d)	If you answered “Yes” to question 3.2.8.10, which pharmaceutical products are legally 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	
3.2.8.13	14.2(d)	If you answered “Yes” to question 3.2.8.10, are the costs of these products covered by public funding or reimbursement?			
		• nicotine replacement therapy	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input type="checkbox"/> None
		• bupropion	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input type="checkbox"/> None
		• varenicline	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input type="checkbox"/> None
		• other ( <i>please specify:</i> )?	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input type="checkbox"/> None
3.2.8.14	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 two years or since submission of your last report.				
	<p>Demand reduction, in the Canadian context, is a responsibility shared through federal policy and provincial/territorial service delivery. A number of projects have been developed/supported in implementing Article 14. Annex F provides a detailed description and web access as available.</p> <p>In responding to Section 3.2.8 Canada experienced difficulty in reporting on variations between the sub national authorities. Responses are provided to those questions that had consistent answers by all jurisdictions. The following narratives addresses the variations between jurisdictions.</p> <p>In 3.2.8.6, of those jurisdictions that responded 50% provided programs for the diagnosis and treatment of tobacco dependence in specialized centers for cessation counseling and 40% responding as having programs in rehabilitation centers.</p> <p>In responding to 3.2.8.7 on reimbursements 60% had full and 40% had partial coverage in primary health care and 60% for full and 40 % partial in secondary health care programs. In responding to specialized health care 50% had partial</p>				

	<p>with 25% with full and no coverage. Forty percent reported partial coverage in specialized centers. In responding to rehabilitation centers 30% had full funding, 20% partial and 50% did not provide funding.</p> <p>In responding to 3.2.8.8 indicating which health care professionals are involved in treatment/counseling programs, 50% of those responding indicated Yes for practitioners of traditional medicine, 71% for community workers, 62% for social workers.</p> <p>In responding to 3.2.8.9 on training curriculum, there was varied response from sub national jurisdictions as education is governed at the sub national level. Of the sub national jurisdictions that responded, 66% did not provide training in medical and dental programs, 57% did not provide training in nursing programs and 50% in pharmacy programs.</p> <p>In response to 3.2.8.10 50% responded Yes with the primary source being the pharmacy.</p> <p>In response to 3.2.8.13 on funding for NRT the majority of jurisdictions indicated support for partial funding. Specifically, 70% for NRT, 60% for bupropion and 71% for varenicline.</p>
3.2.8.15	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>

<b>3.3</b>	<b>Article</b>	<b>MEASURES RELATING TO THE REDUCTION OF THE SUPPLY OF TOBACCO</b> <i>(with reference to Articles 15–17)</i>		
3.3.1	15	<b>Illicit trade in tobacco products</b> <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 checked="" type="checkbox"/> Yes	<input 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 data-bbox="445 248 1430 344">Please provide a brief description of the progress made in implementing Article 15 (<i>Illicit trade in tobacco products</i>) in the past two years or since submission of your last report.</p> <p data-bbox="363 383 1445 488">Canada implemented an enhanced federal tobacco stamping regime in September 2010. Effective April 1, 2011, all tobacco products entering the duty-paid market in Canada must display the new excise stamp.</p> <p data-bbox="363 528 1442 781">The new excise stamp contains multi-layer security features and replaces the former paper and tear tape stamp. The new excise stamps are produced under federal government contract and their distribution is limited to persons who have demonstrated that they are eligible to purchase the stamps. An issued stamp may be traced to the person to whom it was issued. The excise stamp provides a reliable indicator of the duty-paid status of tobacco products and provides an additional enforcement tool for federal and provincial authorities.</p> <p data-bbox="445 815 1430 992">A province/territory that chooses to participate in the federal stamping regime will approve an excise stamp marked for its jurisdiction and will identify eligible persons who may purchase its jurisdiction's stamps. To date, most of the provinces/territories have either joined or expressed an interest in joining the federal stamping regime.</p>
3.3.1.15	<p data-bbox="445 1021 1410 1088">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	<b>Sales to and by minors</b> <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 checked="" type="checkbox"/> Yes	<input 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
		• 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 two years or since submission of your last report.</p> <p>In response to 3.3.2.5 two Canadian territories, Yukon and Nunavut have legislation prohibiting candy or sweets that look like tobacco products. In response to 3.3.2.7, the federal Tobacco Act bans vending machines in public places except in a bar, tavern or beverage room and has a prescribed security mechanism.</p> <p>Several provinces/territories go further. In Ontario, Quebec, NS, PEI and Nunavut the sale of tobacco products through vending machines have been banned.</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>			

3.3.3	17	<p><b>Provision of support for economically viable alternative activities</b></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, measures or programmes on any of the following:</p>		
3.3.3.1	17	<p>– promoting economically viable and sustainable alternatives for:</p>		
		<p>• tobacco growers?</p>	<p><input checked="" type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Not applicable</p>
		<p>• tobacco workers?</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p><input checked="" type="checkbox"/> Not applicable</p>
		<p>• tobacco individual sellers?</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p><input checked="" type="checkbox"/> Not applicable</p>
3.3.3.2	<p>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 two years or since submission of your last report.</p> <p>Agriculture and Agri-Food Canada (AAFC) has been supporting tobacco producers who wished to exit the production of tobacco to transition to other crops or seek other sources of income. The Tobacco Transition Program (TTP) was announced on August 1, 2008 and was implemented in mid-February 2009. Producers had until March 30, 2009 to apply to the TTP. The objectives of the program were to 1) remove the quota system, 2) facilitate the transition of tobacco quota holders, and 3) improve the viability of remaining and future tobacco producers who now operate in a free-market environment. The federal Tobacco Transition Program provided about \$284 million in 2009 to tobacco producers to help them exit the sector. The majority of Ontario tobacco producers agreed to transition out of tobacco production under this program. The program has seen the number of tobacco producers decline: before the tobacco program there were 446 tobacco producers and in 2011 there were approximately 214 licensed producers.</p> <p>For further information, visit:  <a href="http://www.agr.gc.ca/cb/index_e.php?s1=n&amp;s2=2009&amp;page=n90105">http://www.agr.gc.ca/cb/index_e.php?s1=n&amp;s2=2009&amp;page=n90105</a></p> <p>AAFC also provided funding of \$15 million over 3 years to the Sand Plains Community Development Fund, as part of the Tobacco Transition Program, to assist rural communities in the tobacco growing regions of Southern Ontario to transition to a non-tobacco based economy. Priority sectors include agribusiness and food industry, tourism, green products, renewable energy, food processing and manufacturing. Preference is being given to projects that 1) support rural communities /stakeholders to identify, develop and plan for new economic opportunities in line with regional priorities and 2) support the development and implementation of targeted strategies to attract and retain workers, entrepreneurs, residents and visitors, and investment to the region</p> <p>For further information, visit:</p>			

	<p><a href="http://www.sandplains.ca/">http://www.sandplains.ca/</a></p> <p>Under Growing Forward, the policy framework for Canada’s agriculture, agri-food and agri-based products industry, Federal-Provincial-Territorial governments launched a suite of business risk management (BRM) programs. These programs, which include AgriInvest, AgriStability, AgriInsurance and AgriRecovery, are intended to help mitigate downward fluctuations in producer incomes from the whole farm entity, increase producer capacity to manage business risk from unexpected events, and improve capacity to respond to and recover from risk events to animal-, plant-, and production-related resources. These BRM programs are the main vehicle used by governments to directly support the primary agriculture sector in Canada. These BRM programs are available to tobacco farmers. However, there are no BRM programs that are specifically designed for tobacco farmers to help them pursue economically viable alternative activities.</p> <p>In addition, under AAFC's federal-provincial-territorial Growing Forward agreement, federal funding is being used by some provinces to design and deliver business development programs that can offer access to expert advice, business planning services and farm training. Tobacco producers may be eligible participants in these programs, and this may help them plan their transition to other crops and provide them with an opportunity to acquire the skills they may need in order to grow a different crop.</p> <p>For further information, visit:</p> <p><a href="http://www4.agr.gc.ca/AAFC-AAC/display-afficher.do?id=1244131188292&amp;lang=eng#anc-1">http://www4.agr.gc.ca/AAFC-AAC/display-afficher.do?id=1244131188292&amp;lang=eng#anc-1</a></p> <p><a href="http://www4.agr.gc.ca/AAFC-AAC/display-afficher.do?id=1244131188292&amp;lang=eng#anc-1a">http://www4.agr.gc.ca/AAFC-AAC/display-afficher.do?id=1244131188292&amp;lang=eng#anc-1a</a></p>
3.3.3.3	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>

3.4	<i>Article</i>	<b>OTHER MEASURES AND POLICIES</b> (with reference to Articles 18–21)			
3.4.1	18	<b>Protection of the environment and the health of persons</b> <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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
		• the health of persons in relation to the environment?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input 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 two years or since submission of your last report.				
	Health Canada's Pest Management Regulatory Agency (PMRA) regulates pesticides for all agricultural crops, including tobacco. In doing so, it takes health and the environment into consideration.				
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><b>Liability</b></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 checked="" type="checkbox"/> Yes	<input 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 checked="" type="checkbox"/> Yes	<input 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 two years or since submission of your last report.</p> <p>All provinces have proposed or passed enabling legislation to pursue compensation for health damages by the tobacco industry.</p> <p>In March 2008, New Brunswick launched a health care cost recovery action against tobacco companies. In October 2009, Ontario launched a comparable action, seeking \$50 billion in damages. This is said to represent the health care costs borne by Ontario taxpayers since 1955. Québec has also stated its plan to sue tobacco companies for \$30 billion to offset the cost of tobacco related illnesses, claiming that smoking costs taxpayers in the province \$1 billion a year in direct and indirect costs.</p> <p>Moreover, all other provinces have passed or are in the process of passing legislation to enable the pursuit of health care cost recovery against tobacco companies.</p> <p>British Columbia's enabling legislation has been validated by Canada's Supreme Court allowing lawsuits to proceed, and the British Columbian Costs Recovery action is still active.</p>			

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

3.4.3	20	<b>Research, surveillance and exchange of information</b> <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:		
3.4.3.1	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 checked="" type="checkbox"/> Yes	<input 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	20.3(a)	If you answered "Yes" to any question under 3.4.3.3, please list all surveys, including the year of the survey, that you have undertaken in the past.		
		Canadian Tobacco Use Monitoring Survey (CTUMS) 1999-2010 Youth Smoking Survey (YSS) 1994, 2002, 2004-05, 2006-07, 2008-09.		
3.4.3.5	20.3(a)	In reference to any question under 3.4.3.3, does your country have any plans to repeat any of the above or to undertake a new tobacco survey within three to five years of your last survey? Please provide details in the space below.		
		Canadian Tobacco Use Monitoring Survey (CTUMS) is an annual survey - next release in Fall of 2012. Youth Smoking Survey (YSS) is a biannual survey - next release in Spring/Summer of 2012.		
3.4.3.6	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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.4.3.7	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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.4.3.8	Please provide a brief description of the progress made in implementing Article 20 ( <i>Research, surveillance and exchange of information</i> ) in the past two years or since submission of your last report.			
	Canada provides funding to a Canadian NGO for the purpose of maintaining a judicial activity website - see <a href="http://www.smoke-free.ca/litigation">http://www.smoke-free.ca/litigation</a> .			
3.4.3.9	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.			

#### 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.

	<b>Article</b>	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:	<b>Assistance provided</b>	<b>Assistance received</b>
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 checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" 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 checked="" 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.			
Health Canada supports Articles 22 and 26 through a variety of contribution agreements, grants and contracts totaling in excess of \$820,000 (Canadian) during the reporting period. These activities support such areas as capacity building, tobacco control policies, online courses, public awareness and central data bases. Annex G to Canada's report provides a listing of funded projects during the reporting period.				

	<p>Canada has also funded sub-national officials to exchange information and best practices on smoke free spaces to developing countries in Central America, and supports the exchange of knowledge and strategies between countries with leading tobacco control programs.</p>
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4.8	Please provide information about any assistance provided or received in the space below.
	Please refer to Annex G for a detailed list of Canada's international cooperation and assistance. Canada also provided technical assistance to Colombia and Panama on tobacco product regulation, and provided translated copies of tobacco materials to Chinese counterparts. Presentations were also provided on Canada's regulatory framework to a Turkish delegation visiting Canada.
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 checked="" 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.
	Please refer to Annex G for a list of funded activities.

## 5. PRIORITIES AND COMMENTS

5.1	What are the priorities for implementation of the WHO Framework Convention on Tobacco Control in your jurisdiction?
	Engaging other federal government partners to address the contraband tobacco, continued participation in the negotiations on the Protocol to eliminate illicit trade in tobacco products, and continued work with sub-national jurisdictions to enhance cessation initiatives.  Canada remains compliant with the FCTC in all areas where supported by national law.  Canada remains supportive of the activities undertaken by the FCTC working groups and is intent on participating at COP5.
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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5.3	If you answered "Yes" to question 5.2, please provide details in the space below.
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:
	Canada encourages the continued efforts of the WHO to develop synergies in the WHO reporting tools used to collect data on national and subnational activities on tobacco control.

**End of reporting instrument**