

REPORTING INSTRUMENT

1. Origin of the report [Help](#)

(a) Name of Contracting Party <input type="checkbox"/> Help	Republic of Serbia
(b) Information on National Contact/Focal Point <input type="checkbox"/> Help	
Name and title of contact officer	Natasa Lazarevic, MD, advisor in the Ministry of Health
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(c) Information on contact officer submitting the national report if different from the above <input type="checkbox"/> Help	
Name and title of contact officer	
Mailing address	
Telephone number	
Fax number	
E-mail	
(d) Signature of the officer responsible for submitting report <input type="checkbox"/> Help	
Name and title of officer	
Full name of the institution	
Mailing address	
Telephone number	
Fax number	
E-mail	
Web page	
(e) Period reported <input type="checkbox"/> Help	08/02/2006 to 09/05/2008

(f) Date the report was submitted <input type="checkbox"/> Help	09/05/2008
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2. Demographics [Help](#)

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

Year (latest available)	Age groups	Percentage of <i>male</i> population	Percentage of <i>female</i> population	Percentage of <i>total</i> population
2006	20-34	20.6	19.2	19.9
2006	35-44	13.8	13.3	13.6
2006	45-54	16.2	15.6	15.9
2006	55-64	10.8	11.4	11.1
2006	65-74	10.3	12.2	11.3
2006	75+	4.1	6.4	5.2
2006	20+	75.9	78.2	77.1
2006	15-19	6.9	6.3	6.6

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

Name of ethnic group	Percentage of total population
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3. Tobacco use

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

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

	Age groups ¹ (adults) 20-34	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				
Daily smokers ²		cigarettes and other smoking tobacco products	2006	40.90
Occasional smokers ²			2006	6.70
Females				
Daily smokers ²			2006	29.90
Occasional smokers ²			2006	8.80
Total (males and females)				
Daily smokers ²			2006	34.50
Occasional smokers ²			2006	7.90

	Age group (Adult) 35-44	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				
Daily smokers ³			2006	45.00
Occasional smokers ²			2006	7.00
Females				
Daily smokers ²			2006	33.60
Occasional smokers ²			2006	9.70
Total (males and females)				
Daily smokers ²			2006	38.30
Occasional smokers ²			2006	8.6

	Age group (Adult) 45-54	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				
Daily smokers ⁴			2006	38.10

¹ Preferably by 10-year categories; e.g. 25-34, 35-44, etc.

² Definitions to be provided by the Parties.

³ Definitions to be provided by the Parties.

⁴ Definitions to be provided by the Parties.

Occasional smokers ²			2006	7.00
Females				
Daily smokers ²			2006	29.70
Occasional smokers ²			2006	6.80
Total (males and females)				
Daily smokers ²			2006	33.30
Occasional smokers ²			2006	6.90

	Age group (Adult) 55-64	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				
Daily smokers ⁵			2006	32.20
Occasional smokers ²			2006	4.10
Females				
Daily smokers ²			2006	16.60
Occasional smokers ²			2006	3.40
Total (males and females)				
Daily smokers ²			2006	23.40
Occasional smokers ²			2006	3.70

	Age group (Adult) 65-74	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				
Daily smokers ⁶			2006	18.80
Occasional smokers ²			2006	3.30
Females				
Daily smokers ²			2006	6.90
Occasional smokers ²			2006	1.20
Total (males and females)				
Daily smokers ²			2006	13.10

⁵ Definitions to be provided by the Parties.

⁶ Definitions to be provided by the Parties.

Occasional smokers ²			2006	2.30
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	Age group (Adult) 75+	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				
Daily smokers ⁷			2006	7.60
Occasional smokers ²			2006	4.70
Females				
Daily smokers ²			2006	4.80
Occasional smokers ²			2006	0.90
Total (males and females)				
Daily smokers ²			2006	6.30
Occasional smokers ²			2006	3.00

	Age group (Adult) 20+	Tobacco products included	Year of data (latest available)	Prevalence (%)
Males				
Daily smokers ⁸			2006	32.50
Occasional smokers ²			2006	5.60
Females				
Daily smokers ²			2006	23.70
Occasional smokers ²			2006	6.20
Total (males and females)				
Daily smokers ²			2006	27.70
Occasional smokers ²			2006	5.90

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

	Age groups ⁹ (adults) 20-34	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day

⁷ Definitions to be provided by the Parties.

⁸ Definitions to be provided by the Parties.

⁹ Preferably by 10-year categories, e.g. 25-34, 35-44, etc.

Male smokers¹⁰				
Female smokers²				
Total smokers²				

	Age group (Adult) 35-44	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day
Male smokers¹¹				
Female smokers²				
Total smokers²				

	Age group (Adult) 45-54	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day
Male smokers¹²				
Female smokers²				
Total smokers²				

	Age group (Adult) 55-64	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day
Male smokers¹³				
Female smokers²				
Total smokers²				

	Age group (Adult) 65-74	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day

¹⁰ Definitions to be provided by the Parties.

¹¹ Definitions to be provided by the Parties.

¹² Definitions to be provided by the Parties.

¹³ Definitions to be provided by the Parties.

Male smokers¹⁴				
Female smokers²				
Total smokers²				

	Age group (Adult) 75+	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day
Male smokers¹⁵				
Female smokers²				
Total smokers²				

	Age group (Adult) 20+	Tobacco products included	Year of data (latest available)	Average number of cigarettes smoked per day
Male smokers¹⁶				
Female smokers²				
Total smokers²				

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

	Age group 20-34	Tobacco products included	Year of data (latest available)	Prevalence (%)
Male				
Daily users				
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				
Daily users				
Occasional users ²				

¹⁴ Definitions to be provided by the Parties.

¹⁵ Definitions to be provided by the Parties.

¹⁶ Definitions to be provided by the Parties.

	Age group (Adult) 35-44	Tobacco products included	Year of data (latest available)	Prevalence (%)
Male				
Daily users				
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				
Daily users				
Occasional users ²				

	Age group (Adult) 45-54	Tobacco products included	Year of data (latest available)	Prevalence (%)
Male				
Daily users				
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				
Daily users				
Occasional users ²				

	Age group (Adult) 55-64	Tobacco products included	Year of data (latest available)	Prevalence (%)
Male				
Daily users				
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				
Daily users				

Occasional users ²				
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	Age group (Adult) 65-74	Tobacco products included	Year of data (latest available)	Prevalence (%)
Male				
Daily users				
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				
Daily users				
Occasional users ²				

	Age group (Adult) 75+	Tobacco products included	Year of data (latest available)	Prevalence (%)
Male				
Daily users				
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				
Daily users				
Occasional users ²				

	Age group (Adult) 20+	Tobacco products included	Year of data (latest available)	Prevalence (%)
Male				
Daily users				
Occasional users ²				
Female				
Daily users				
Occasional users ²				
Total				

Daily users				
Occasional users ²				

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

	Ethnic group	Tobacco products included	Year of data (latest available)	Prevalence (%)
Daily users				
Occasional users ²				

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

Create Youth Group

	Youth groups ¹⁷ 15-19	Tobacco products included	Year of data (latest available)	Prevalence ¹⁸ (%)
Males			2006	18.00
Females			2006	13.0

ii. **Supply** [Help](#)

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

	Domestic production	Exports	Imports
Year (latest available)	2007	2007	2007
Quantity (specify product and unit; e.g. millions of cigarettes)	21,356.39 millions of cigarettes	921.77 millions of cigarettes 32.4kg smoking	3,448.30 millions of cigarettes 371,466.20kg

¹⁷ Definitions to be provided by the Parties.

¹⁸ Parties should provide definition for youth smoking; e.g. at least one cigarette in the past 30 days.

	Source: Tobacco Administration of the Ministry of Finance	tobacco (rolling tobacco)	smoking tobacco (rolling tobacco) 5,973.57 kg cigars and cigarillos 4,183.96kg pipe tobacco
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Note: licit supply = domestic production + (imports - exports)

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

[Help](#)

According to the Law on Customs (Official Gazette of the Republic of Serbia, No. 61/05) duty free sale is allowed only at the airport, but in reality, there are no duty-free shops in Serbia.

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

[Help](#)

	Year (latest available)	Quantity seized (specify unit, e.g., millions of pieces)
Cigarettes	2007	70,268 millions of pieces
Other tobacco products (optional; please specify product) : cigars dried tobacco in liefs Source: Tobacco Administration of the Ministry of Finance	2007	1974 peaces 2990 kg

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

Information presented above on illicit or smuggled tobacco are provided by the Tobacco Administration of the Ministry of Finance which mandate is to collect data from different sources: Tax Administration of the Ministry of Finance, Customs Administration of the Ministry of Finance, Trade Inspectorate of the Ministry of Trade and Services, Police Directorate of the Ministry of Internal Affairs and Material and Financial Operations Sector of the Ministry of Justice.

4. Taxation [Help](#)

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

All tobacco products are subject to excise duties and VAT, while customs duties are levied only to imported tobacco/tobacco products. Serbia has also a sort of "earmarking" of tobacco products system, which enables funding of the National Plan of Action for Tobacco Control.

Value of the cigarette excise tax is comprised of specific and "ad valorem" amounts. Excises for all other tobacco products are expressed only as "ad valorem" amounts.

Specific tax amount is fixed and is harmonized with yearly growth of retail selling prices each January.

Specific tax amounts for imported and domestic cigarettes predicted for the years 2008-2012 are the following (in local currency):

- 7.70 RSD/pack for the year 2008;
- 8.10 RSD/pack for the year 2009;
- 12.10 RSD/pack for the year 2010;
- 12.90 RSD/pack for the year 2011;
- 13.60 RSD/pack for the year 2012;

While term "pack" means pack of 20 cigarettes (for packs different than 20 specific excise is determined proportionally to the pack).

Predicted value of 7.70RSD for the year 2008 was harmonized with the growth of retail selling prices in January this year, thus the specific excise tax for 2008 actually amounts to 8.48RSD.

"Ad valorem" tax amount is calculated as a percentage of cigarettes retail selling price:

- 33% for the period which ends December 31st, 2009;
- 40% for the year 2010;
- 42% for the year 2011;
- 43% beginning with January 1st, 2012.

For cigars and cigarillos, excise tax is calculated as a percentage of the retail selling price per piece, and for other tobacco products as a percentage of the retail selling price per 1kg; the rates are:

- 33% for the period which ends December 31st, 2009;
- 40% for the year 2010;
- 42% for the year 2011;
- 43% beginning with January 1st, 2012.

Excise Tax Law ("Official Gazette of the Republic of Serbia", No. 22/01, 73/01, 80/02, 43/03, 72/03, 43/04, 55/04, 135/04, 46/05, 101/05 and 61/07): Articles 40a, 40b, 40g and 40d - available

in Serbian language.

VAT is paid for all tobacco products by the rate of 18%.

Value Added Tax Law ("Official Gazette of the Republic of Serbia", No. 84/04, 86/04, 61/05 and 61/07): Article 23 - available in Serbian and English.

Customs duties on imported tobacco/tobacco products, in accordance with the Customs Tariff Law are following:

- 10% on unmanufactured tobacco and tobacco refuse;
- 10% on tobacco partly or wholly stemmed/stripped;
- 15% on cigars and cigarillos containing tobacco;
- 15% on cigarettes containing tobacco containing cloves;
- 57.6% on other cigarettes containing tobacco, except in cases when this amount is lower than minimal specific customs tax or higher than maximal specific customs tax - if the rate is lower minimal specific customs tax is applied counted as €5.15/1.000 peaces, and if the rate is higher maximal specific customs tax is applied counted as €7.57/1.000;
- 30% on smoking tobacco, whether or not containing tobacco substitutes in any proportion.

Customs Tariff Law ("Official gazette of the Republic of Serbia", No. 62/05 and 61/07) - available in Serbian language;

Regulation on Harmonization Customs Tariff Nomenclature for 2008 ("Official gazette of the Republic of Serbia", No. 112/07) Section:IV, Chapter: 24 - available in Serbian language.

According to CEFTA – 2006 (Central European Free Trade Agreement) special duty rates were agreed for import of tobacco/tobacco products to Serbia from other CEFTA members: Albania, Bosnia and Herzegovina, Croatia, FYR Macedonia, Moldova, Montenegro, UNMIK on behalf of Kosovo and Metohia. These rates range from 0 to 30% depending on the tobacco product and country.

Moreover, according to Free Trade Agreement between Serbia and Russian Federation import of tobacco/tobacco products to Serbia from Russia is free.

In addition to already described taxes and duties, according to the Law on Tobacco ("Official Gazette of the Republic of Serbia" No 101/2005) all manufacturers and importers of cigarettes are obliged to pay a specific amount per each produced or imported pack of cigarettes. It started from November 21st, 2005 with the amount of 1RSD, and this amount is annually harmonised in accordance with the rate of inflation.

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

Prices are presented in local currency (RSD) for the three most popular brands of cigarettes, cigars, cigarillos, smoking tobacco (rolling tobacco), pipe tobacco and snuff for the period from 1. July 2007 to 31 December 2007. Information is provided by the Tobacco Administration of the Ministry of Finance.

CIGARETTES (domestic):

Classic Gold 57.00RSD/pack

Fast 45.00RSD/pack

Floyd 42.00RSD/pack

CIGARETTES (imported):

Ronhill White 100's 80.00RSD/pack

Ronhill White 75.00RSD/pack

Walter Wolf Gold 100's 65.00RSD/pack

CIGARS (imported):

Café Creme 34.00RSD/peace

Café Crème Oriental Aroma 34.00RSD/peace

Phillis Titan 65.00RSD/peace

CIGARILLOS (imported):

Swisher Sweets Little Cigars Strawberry 6.50RSD/peace

Swisher Sweets Little Cigars Peach 6.50RSD/peace

KE LTL CIG Menthol DW DISP 6M 7.75RSD/peace

SMOKING TOBACCO (ROLLING TOBACCO):

Domingo Original 33 g Halfzwaar 3,575.75RSD/kg

Red Bull Zware 40g 3,750.00RSD/kg

Domingo Wirginia 33g 3,575.75RSD/kg

PIPE TOBACCO (imported):

MB Vanilla Loose Cut 50g 6,400.00RSD/kg

MB Cherry Ambrosia 6,400.00RSD/kg

MB Black Ambrosia 6,400.00RSD/kg

SNUFF (imported):	
Gletscherprise Snuff 10 g	15,000.00 RSD/kg
Gawith Apricot Snuff 10g	15,000.00RSD/kg
Ozona Menthol 5g	26,000.00RSD/kg

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

i. Core questions [Help](#)

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

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

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

As explained in chapter "Supply", according to the Law on Customs since 2005 duty-free sales are banned everywhere, except at the airport, but in reality there are no duty-free shops in Serbia, not even at the airport. Importation by international travellers is limited to one box of cigarettes.

Answers to the questions were given in accordance with the definition from The European Tobacco Control Report 2007: "A ban provides effective protection from environmental tobacco smoke by imposing a total ban on smoking."

Law on Smoking on Ban in Enclosed Premises (Official Gazette of the Republic of Serbia, No 16/1995, 101/2005) bans smoking in enclosed premises in which:

- 1) Educational activities are performed (including assembly halls) and in lodgings for children, school and university students;
- 2) Admission, sojourn, treatment and care are provided for health care users and persons in state of social need;
- 3) Manufacturing, control and trade of medicines are carried out;
- 4) Manufacturing, stocking and trade of groceries are carried out;
- 5) Cultural, amusement, sports and other manifestations, performances and competitions are held;
- 6) Public taping and broadcasting are carried out;
- 7) Communal feeding is performed, and
- 8) Meetings and other organized gatherings are held.

Smoking is also banned in:

- 1) Highway traffic public transportation;
- 2) Railroad and air public transportation as well as in in-boundary sailing, except in compartments designated for smoking;
- 3) Enclosed premise in which employed non-smoker is working, in other words there are two or more employees of which at least one is non-smoker, and
- 4) Elevators.

In healthcare facilities smoking is prohibited in all premises where services to healthcare users are provided. It is not specified that smoking is banned in whole buildings or outside healthcare institutions. School yards are also not specified as areas where smoking is banned. In government buildings and other workplaces smoking is banned, except at the offices where all employees are smokers and they do not deliver services to other people.

Smoking is banned in all the premises used for food and drink preparation and in restaurants that belong to civil or state institutions and enterprises.

Fines were raised in December 2005. Still, implementation of the Law is weak. Although acceptance by citizens of Serbia rose in last few years the level of awareness about harmful effects of tobacco smoke is still low. The Law is not clear enough about smoking and non-smoking areas. Inspections in-charge for Law implementation lack in human capacities and does not perceive tobacco control high on the list of priorities. Therefore, upgrade of the existing Law, followed by raising awareness among state officials and citizens, and building capacities of the inspections for implementing the Law are a part of the National Action Plan adopted by the Government of the Republic of Serbia in January 2007 for the period up to 2011.

Unofficial translation of the Law into English is available.

Regulation of tobacco product disclosures			
10 <input type="checkbox"/> Help	Requiring manufacturers and/or importers of tobacco products to disclose to governmental authorities information about contents?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Illicit trade in tobacco products			
15.2(a)	Requiring marking of packaging to assist in determining the origin of the product?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

	and to assist in determining whether the product is legally for sale on the domestic market?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15.3 <input type="checkbox"/> Help	Requiring that marking is in legible form and/or appear in its principal language or languages?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15.4(b)	Enacting or strengthening legislation against illicit trade in tobacco products?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15.4(e)	Enabling the confiscation of proceeds derived from the illicit trade?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15.7	Licensing or other actions to control or regulate production and distribution?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sales to and by minors			
16.1 <input type="checkbox"/> Help	Prohibiting the sales of tobacco products to minors?	<input checked="" type="checkbox"/> Specify legal age: 18	<input type="checkbox"/>
16.2	Prohibiting or promoting the prohibition of the distribution of free tobacco products to the public and especially minors?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16.3	Prohibiting the sale of cigarettes individually or in small packets?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16.6	Providing for penalties against sellers and distributors?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16.7	Prohibiting the sales of tobacco products by minors?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Liability			
19.1 <input type="checkbox"/> Help	Dealing with criminal and civil liability, including compensation where appropriate?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

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

Article	Have you adopted and implemented legislative, executive, administrative and/or other measures on:	Yes (please attach a brief summary and relevant documentation) ¹⁹	No
Regulation of the contents of tobacco products			
9 <input type="checkbox"/> Help	Testing and measuring the contents of tobacco products?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Testing and measuring the emissions of tobacco products?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Regulating the contents of tobacco products?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Regulating the emissions of tobacco products?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

¹⁹ Please provide these documents in one of the six official languages, if available, and please specify sections of your legislation related to each “yes” response.

Packaging and labelling of tobacco products			
11.1(a) <input type="checkbox"/> Help	Requiring that packaging and labelling do not promote a product by any means that are false, misleading, deceptive or likely to create an erroneous impression?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.1(b)	Requiring that packaging and labelling also carry health warnings describing the harmful effects of tobacco use?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.1(b)(i)	Ensuring that the health warnings are approved by the competent national authority?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.1(b)(ii)	Ensuring that the health warnings are rotating?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.1(b)(iii)	Ensuring that the health warnings are large, clear, visible and legible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.1(b)(iv)	Ensuring that the health warnings occupy no less than 30% of the principal display areas?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Ensuring that the health warnings occupy 50% or more of the principal display areas?	<input type="checkbox"/>	<input type="checkbox"/>
11.1(b)(v)	Ensuring that the health warnings are in the form of, or include, pictures or pictograms?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11.2	Requiring that packaging and labelling contains information on relevant constituents and emissions of tobacco products?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.3	Requiring that the warnings and other textual information appear on each unit package, and on any outside packaging and labelling in your principal language or languages?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tobacco advertising, promotion and sponsorship <input type="checkbox"/> Help			
13.2	Instituting a comprehensive ban of all tobacco advertising, promotion and sponsorship?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	including on cross-border advertising, promotion and sponsorship originating from its territory?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13.3	Applying restrictions, in the absence of a comprehensive ban, on all tobacco advertising, promotion and sponsorship?	<input type="checkbox"/>	<input type="checkbox"/>
	Restricting or instituting a comprehensive ban on cross-border advertising, promotion and sponsorship originating from its territory?	<input type="checkbox"/>	<input type="checkbox"/>
13.4(a)	Prohibiting all forms of tobacco advertising, promotion and sponsorship that promote a tobacco product by any means that are false, misleading, deceptive or likely to create an erroneous impression?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13.4(b)	Requiring that health or other appropriate warnings or messages accompany all tobacco advertising and promotion and sponsorship?	<input type="checkbox"/>	<input type="checkbox"/>
13.4(c)	Restricting the use of direct or indirect incentives that encourage the purchase of tobacco products by the public?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13.4(d)	Requiring the disclosure to relevant governmental authorities of expenditures by the tobacco industry on advertising, promotion and sponsorship not yet prohibited?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13.4(e)	Restricting tobacco advertising, promotion and sponsorship on radio, television, print media and other media, such as the Internet?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

13.4(f)	Prohibiting or restricting tobacco sponsorship of international events, activities and/or participants therein?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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If you have any additional legislation or other measures not covered in Question 5, you may provide additional details here: [Help](#)

Please provide any additional legislation or other measures not covered in Question 5 in this section.

6. Programmes and plans [Help](#)

i. Core questions [Help](#)

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

	Yes (please attach the relevant documentation) ²⁰	No
Have you developed and implemented comprehensive multisectoral national tobacco control strategies, plans and programmes? (Article 5.1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If no, have some partial strategies, plans and programmes been developed and implemented? (Article 5.1)	<input type="checkbox"/>	<input type="checkbox"/>

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

General obligations <input type="checkbox"/> Help		
5.2(a)	A national coordinating mechanism or focal point(s) for tobacco control? Council for Tobacco Control of the Government of the Republic of Serbia (as multi sectoral coordinating body) and National Committee for Smoking Prevention of the Ministry of Health. There is also an Office for Tobacco Control which plays a role of the secretariat to the national coordinating mechanisms and also is a management unit for implementation of the National Plan of Action.	<input type="checkbox"/>
5.3	Protection of policies from the commercial and other vested interests of the tobacco industry? Tobacco Control Strategy adopted in January 2007 by the Government of the	<input checked="" type="checkbox"/>

²⁰ Please provide these documents in one of the six official languages, if possible.

	<p>Republic of Serbia contains following statement "...by no means, funding from the tobacco industry for implementation of tobacco control activities will be accepted". "Code of practice on tobacco control for health professional organizations" has been adopted by the Ministry of Health and integrated in the MoH's Code of Practice and in the Code of Practice Framework recommended by the MoH to all health care institutions in the country. Also, there are codes of procedure for members of the Council for Tobacco Control and National Committee for Smoking Prevention according to which their members can not have any kind of relation with tobacco industry which can be perceived as conflict of interests.</p>	
<p>Education, communication, training and public awareness <input type="checkbox"/> Help</p>		
12(a)	<p>Broad access to effective and comprehensive educational and public awareness programmes on the health risks? Since year 2002 MoH has been conducted continuous campaigns related to health risks of smoking, harmful effects of other tobacco products consumption, second hand smoke, national laws related to tobacco control, FCTC and National Strategy and Plan of Action and following the themes of WHO for each WNTD. Also, other educational programmes are conducted as a part of the NPA.</p>	<input checked="" type="checkbox"/>
	<p>... targeted at adults and/or the general public? Information provided through electronic and printed media and other suitable materials.</p>	<input checked="" type="checkbox"/>
	<p>... targeted at children and youth? Information provided either within the regular school programmes, health educational programmes conducted by the IPHs, NGOs' programmes or campaigns.</p>	<input checked="" type="checkbox"/>
12(b)	<p>Public awareness about the health risks of tobacco consumption and exposure to tobacco smoke, and about the benefits of the cessation of tobacco use and tobacco-free lifestyles? As described under 12 (a) there have been continuous campaigns and information providing through different media since 2002 about health risks of tobacco consumption and exposure to tobacco smoke, benefits of the smoking cessation, counselling services and tobacco free lifestyles.</p>	<input checked="" type="checkbox"/>
12(c)	<p>Public access to a wide range of information on the tobacco industry? There is a limited public access to right information about strategies and tactics of tobacco industry, mainly given to media by the members of the national coordinating mechanism.</p>	<input checked="" type="checkbox"/>
12(e)	<p>Awareness and participation of public and private agencies and nongovernmental organizations not affiliated with the tobacco industry in developing and implementing intersectoral programmes and strategies for tobacco control? Each year there are more and more different organizations which are supporting and actively participating in implementation of the National Plan of Action for Tobacco Control, or conducting own designed programmes for which they get the support from the National Committee for Smoking Prevention and Office for Tobacco Control.</p>	<input checked="" type="checkbox"/>
<p>Demand reduction measures concerning tobacco dependence and cessation <input type="checkbox"/> Help</p>		
14.1	<p>Comprehensive and integrated guidelines based on scientific evidence and best practices to promote cessation of tobacco use and adequate treatment for tobacco dependence? National guidelines for cessation services were published and distributed to Preventive Health Centers in primary health institutions in 2007. Training was provided to service providers in accordance.</p>	<input checked="" type="checkbox"/>
14.2(d)	<p>Facilitation of accessibility and affordability for treatment of tobacco dependence including pharmaceutical products? Cessation services are free of charge in all state health care institutions and supportive drugs (NRT and Bupropion) are provided from the budget of the NPA. Private sector is still not very well developed nor integrated in the health care system, thus there are just few private health care providers who are providing this kind of services by their own prices. In last few years a number of NGOs and profit companies or small firms which are offering different programmes, drugs and tools as successful in quitting smoking highly increased.</p>	<input checked="" type="checkbox"/>

Provision of support for economically viable alternative activities <input type="checkbox"/> Help		
17	Promotion of economically viable alternatives for tobacco workers, growers and, as the case may be, individual sellers? This kind of promotion is mainly carried out by the MoH and National Committee for Smoking Prevention since it is a part of the ratified WHO FCTC and National Strategy and Plan of Action.	<input checked="" type="checkbox"/>
Research, surveillance and exchange of information <input type="checkbox"/> Help		
20.1(a)	Research that addresses the determinants and consequences of tobacco consumption and exposure to tobacco smoke as well as research for identification of alternative crops? Researches that address determinants and consequences of tobacco consumption and exposure to tobacco smoke has been conducted, while there were no researches for identification of alternative crops.	<input checked="" type="checkbox"/>
20.4(b)	Updated data from national surveillance programmes? The latest data, as presented under chapter 3. Tobacco use, are from the National Health Survey, conducted in 2006, following the WHO recommendations given at the Meeting of WHO national counterparts in Paris, 2005, and in accordance with the methodology used for the same survey in the year 2000. As a main result, it showed 6.9% decrease in number of smokers in general population, 9.8% decrease among males and 3.8% among females.	<input checked="" type="checkbox"/>

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

Education, communication, training and public awareness <input type="checkbox"/> Help		
12(d)	Appropriate training or awareness programmes on tobacco control addressed to persons such as health, community and social workers, media professionals, educators, decision-makers, administrators and other concerned persons? Trainings and awareness activities for health workers, teachers, media professionals, decision-makers, NGO representatives etc. has been provided within the National Plan of Action for Tobacco Control.	<input checked="" type="checkbox"/>
12(f)	Public awareness of and access to information regarding the adverse health, economic, and environmental consequences of tobacco production and consumption? Members of the National Committee for Smoking Prevention, supported by the Minister of Health are continuously providing information on the health, economic and environmental consequences of tobacco production and consumption, and this is also a part of the National Strategy and Plan of Action for Tobacco Control.	<input checked="" type="checkbox"/>

Demand reduction measures concerning tobacco dependence and cessation <input type="checkbox"/> Help		
14.2(a)	Design and implementation of programmes aimed at promoting the cessation of tobacco use, in such locations as educational institutions, health care facilities, workplaces and sporting environments? There is a number of different programmes which are implemented by- or with the support of the National Committee for Smoking Prevention. Serbia is also regularly participating in Q&W campaign. Different actors from governmental, NGO, even private sector, are initiating and implementing their programs with the aim to motivate people to quit smoking.	<input checked="" type="checkbox"/>
14.2(b)	Diagnosis and treatment of tobacco dependence and counselling services on cessation of tobacco use in national health and education programmes, plans and strategies, with the participation of health workers, community workers and social workers? Within the health care system there is a modest network of counseling services, which are applying individual or group approaches to smoking cessation. Both are based on behavioural changes, adopting healthy life styles instead habits related to tobacco smoking. If needed, NRT or Bupropion are advised. Survices and drugs are provided free of charge and funded by the NPA budget. Besides strenghtening of the network of counseling services, with special focus on preventive centers at primary level institutions, upgrade of curricula for all under graduate and post graduate students with medical background is also a part of the National Strategy and Plan of Action. At the moment only health workers are involved, with the plan to include different profile of actors.	<input checked="" type="checkbox"/>
14.2(c)	Establishment in health care facilities and rehabilitation centres of programmes for diagnosing, counselling, preventing and treating tobacco dependence? Presently, there are only few programmes of this kind in the country, in the capital city, thus the plan is to establish more services in in-patient wards.	<input checked="" type="checkbox"/>
Protection of the environment and the health of persons <input type="checkbox"/> Help		
18	Due regard to the protection of the environment and the health of persons in relation to the environment in respect of tobacco cultivation and manufacture within its territory?	<input type="checkbox"/>
Research, surveillance and exchange of information <input type="checkbox"/> Help		
20.1(b)	Training and support for all those engaged in tobacco control activities, including research, implementation and evaluation? There is no national policy about capacity building in making policy, management of the action plan, or in implementation of different tobacco control programmes.	<input type="checkbox"/>
20.2	Programmes for national, regional and global surveillance of the magnitude, patterns, determinants and consequences of tobacco consumption and exposure to tobacco smoke? There is national survey, already mentioned above, conducted in 2000 and 2006 which tends to be regularly repeated on 5-6 years period. Serbia also participated at GYTS in 2003 and is repeating the survey in 2008, than it took part in pilot GHPS in 2005 and in GHPS in 2006.	<input checked="" type="checkbox"/>

20.3(a)	A national system for epidemiological surveillance of tobacco consumption and related social, economic and health indicators? National surveys mentioned above, conducted in 2000 and 2006 were focused mainly at health indicators. The intention is to establish a national system not only for epidemiological surveillance, but also to follow-up socio-economic aspects of tobacco consumption.	<input type="checkbox"/>
20.4	The exchange of publicly available scientific, technical, socioeconomic, commercial and legal information, as well as information regarding practices of the tobacco industry and the cultivation of tobacco? Exchange of all these information exists between relevant actors for tobacco control in the country and at international level. It is provided through tobacco control programmes, projects, WHO initiatives, participation in congresses and conferences etc.	<input checked="" type="checkbox"/>
20.4(a)	An updated database of laws and regulations on tobacco control, and information about their enforcement, as well as pertinent jurisprudence? The database does not exist. National coordinator for tobacco control is keeping, updating and distributing the data about laws and regulations and their enforcement.	<input type="checkbox"/>

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

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

Pursuant to **Article 21.1(c)**, have you either provided or received financial or technical assistance (be it through unilateral, bilateral, regional, subregional or other multilateral channels, including relevant regional and international intergovernmental organizations and financial and development institutions) for the development and strengthening of multisectoral comprehensive tobacco control programmes of developing country Parties and Parties with economies in transition in any of the following areas:

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

treatment of nicotine addiction? (Article 22.1(e))		
Promotion of research to increase the affordability of comprehensive treatment of nicotine addiction? (Article 22.1(f))	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
Other. Specify:		
<p>Additional details:</p> <p>If you answered no to any of the above, please identify any financial or technical assistance that may be under consideration.</p> <p>Support related to counseling services strengthening would be appreciated as well as in building capacities on the program management, monitoring and evaluation.</p> <p>If you answered yes to any of the above, please identify the country or countries from/to which assistance was received/provided.</p> <p>In past five years, Serbia has been receiving technical support by the WHO, CIDA, Canadian Public Health Agency (CPHA), EAR / Euro Health Group, EPOS and through Health Network of the Stability Pact of the South-Eastern Europe.</p>		

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

Assistance provided <input type="checkbox"/> Help	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No (please give details below)	Assistance received	<input type="checkbox"/> Yes / <input checked="" type="checkbox"/> No (please give details below)
<p>Additional details:</p> <p>If you answered no to any of the above, please identify any financial or technical assistance that may be under consideration.</p> <p>Technical assistance of the WHO is crucial at the time when the country has to make a position towards new FCTC protocols, for which consensus of different ministries is required. It would be also meaningful while the country is preparing new legislation on tobacco control.</p> <p>If you answered yes to any of the above, please identify the country or countries from/to which assistance was received/provided.</p>			

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

<input checked="" type="checkbox"/> Yes (please give details below) There were situations when development agencies prepared budgets for activities without participation of local tobacco control team, thus sometimes happened that planned activities were not always very high on national priority list, or the budget did not consider all the needs. WHO technical support for tobacco control is not specifically budgeted within the BCA thus mobilising financial resources for these purposes can be a problem.	<input type="checkbox"/> No
<p>Additional details:</p>	

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

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

Presently, main priorities are:

1. New legislation on 100% smoke-free work and public places with all related activities;
2. Protocol on Illicit Trade of Tobacco Products;
3. Programmes aimed at reducing number of smokers among health workers;
4. Strengthening the network of counseling services.

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

It is always a complex task to attract ministries, which have different interests, to gain and agree around one public health issue. Lack of technical support and frequent elections are also slowing the process. Efficiency and effectiveness could be better with enhanced capacities of the national coordinating mechanisms for management, monitoring and evaluation.

9. Additional comments [Help](#)

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

10. Questionnaire feedback

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

General comments – The majority of questions require attaching relevant documentation and providing sources of information but option to attach relevant documentation was not enabled and there are no fields in which the source of information could be entered. If a textual answer is required, there was no possibility to insert a table with the text if needed. Also, using more than one table was suggested in chapter ii. Supply under (a) and (c) but the option to add the table or rows

has not been enabled. It is also not very clear which questions belong to Group 1 and which to Group 2.

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

[Help](#)