

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

1. ORIGIN OF THE REPORT

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1.4	Period of reporting	2008-2010
1.5	Date the report was submitted	22 October 2010

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

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

2.1	PREVALENCE OF TOBACCO USE		
2.1.1	Smoking prevalence in the adult population (all) <i>(Please provide prevalence data for total adult population, and identify the age considered, e.g. 15 years old and over, 18-64 years; see 2.1.1.2)</i>		
		Prevalence (%) <i>(please include all smoking tobacco products in prevalence data)</i>	Average number of the most-consumed smoking tobacco product used per day
MALES			
	Current smokers	%	
	Daily smokers	23.70 %	13.00
	Occasional smokers	2.50 %	
	Former smokers	3.90 %	
	Never smokers	69.90 %	
FEMALES			
	Current smokers	%	
	Daily smokers	3.70 %	9.00
	Occasional smokers	0.70 %	
	Former smokers	0.80 %	
	Never smokers	94.80 %	
TOTAL (males and females)			
	Current smokers	%	
	Daily smokers	13.60 %	
	Occasional smokers	1.60 %	
	Former smokers	2.30 %	
	Never smokers	82.50 %	

2.1.1.1	<p>Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.1:</p> <p>Cigarettes</p>
2.1.1.2	<p>Please indicate the age range to which the data used to answer question 2.1.1 refer:</p> <p>18 to 69 years</p>
2.1.1.3	<p>Please indicate the year and source of the data used to answer question 2.1.1:</p> <p>National Health Surveillance Survey, 2007. Access the survey at: http://www.moh.gov.sg/mohcorp/uploadedFiles/Publications/Reports/2009/nhss2007.pdf</p>
2.1.1.4	<p>Please provide the definitions of “current smoker”, “daily smoker”, “occasional smoker”, “former smoker” and “never smoker” used in this report.</p> <p>Current Smoker = Daily Smoker - Smokes at least once a day Occasional Smoker - Smokes cigarette but not everyday Former Smoker - Formerly a daily smoker, but currently does not smoke at all Never Smoker - Never smoked before or smoked too little in the past to be regarded as an ex-smoker</p>
2.1.1.5	<p>Please provide a brief explanation of the trend in smoking prevalence in the adult population in the past three years or since submission of your last report.</p> <p>The National Health Surveillance Survey (NHSS) is a 6-yearly national health survey, with last being conducted in 2001 and 2007. A National Health Survey (NHS) is another 6-yearly survey, which was last conducted in 2004 and is ongoing in 2010. With regard to tobacco consumption, both survey instruments use actual survey question for self-reporting to determine the smoking status.</p> <p>The prevalence of daily smoking among Singapore residents aged 18 to 69 years dipped from 13.8% in 2001 to 12.6% in 2004. However, it increased to 13.6% in 2007. Between the genders, the prevalence declined in males but remained about the same in females. Among ethnic groups, the prevalence decreased in Chinese but increased in Malays and Indians. The corresponding changes in age-standardised prevalence between the two years were not statistically significant.</p>

2.1.2	Smoking prevalence in the adult population (by age groups) <i>(If data are available, please provide prevalence data by age group, and identify the age group considered, preferably by 10-year categories, e.g. 25-34, 35-44 years)</i>		
		Age group (adults)	Prevalence (%) <i>(please include all smoking tobacco products in prevalence data)</i>
MALES			
	Current smokers ¹	18-29	25.40 %
		30-39	21.80 %
	Add age group	40-49	24.60 %
		50-59	24.20 %
		60-69	20.40 %
FEMALES			
	Current smokers ¹	18-29	9.10 %
		30-39	4.20 %
	Add age group	40-49	1.30 %
		50-59	0.70 %
		60-69	2.10 %
TOTAL (males and females)			
	Current smokers ¹	18-29	17.20 %
		30-39	12.80 %
	Add age group	40-49	13.00 %
		50-59	12.50 %
		60-69	11.00 %

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

2.1.2.1	<p>Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.2:</p> <p>Cigarettes</p>
2.1.2.2	<p>Please indicate the year and source of the data used to answer question 2.1.2:</p> <p>National Health Surveillance Survey, 2007. See at: http://www.moh.gov.sg/mohcorp/uploadedFiles/Publications/Reports/2009/nhss2007.pdf</p>
2.1.2.3	<p>Please provide a brief explanation of the trend in current smoking prevalence by age group in the past three years or since submission of your last report, if data are available.</p> <p>Males in all age groups had consistently higher daily smoking prevalence than females. Among males, the proportions of daily smokers were fairly similar across the age groups (20.4% to 25.4%). On the other hand, the daily smoking prevalence in females ranged from 9.1% the highest, among those aged 18 to 29 years to 0.7%, the lowest, in the 50 to 59 age group. Overall, daily smoking was most prevalent in the 18 to 29 age group and least prevalent among those aged 60 to 69 years.</p>

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

2.1.3.1	<p>Please indicate the smokeless tobacco products included in calculating prevalence for question 2.1.3:</p>
2.1.3.2	<p>Please indicate the age range to which the data used to answer question 2.1.3 refer:</p>
2.1.3.3	<p>Please indicate the year and source of the data used to answer question 2.1.3:</p>
2.1.3.4	<p>Please provide the definitions of “current user”, “daily user”, “occasional user”, “former user” and “never user” (of smokeless tobacco products) used in this report in the space below.</p>
2.1.3.5	<p>Please provide a brief explanation of the trend in smokeless tobacco use in the adult population in the past three years or since submission of your last report.</p> <p>There is smokeless tobacco use in Singapore, but smoked tobacco remains the prevalent tobacco of choice. Currently, we do not have data on the prevalence for use of smokeless tobacco in Singapore.</p>

2.1.4	Prevalence of smokeless tobacco use in the adult population (current users) by age group <i>(If data are available, please provide prevalence data by age group, and identify the age group considered, preferably by 10-year categories, e.g. 25-34, 35-44 years)</i>			
		Age group (adults) <table border="1" data-bbox="919 394 1421 491"> <tr> <td colspan="2" data-bbox="919 394 1421 491"> Prevalence (%) <i>(please include all smokeless tobacco products in prevalence data)</i> </td> </tr> </table>	Prevalence (%) <i>(please include all smokeless tobacco products in prevalence data)</i>	
Prevalence (%) <i>(please include all smokeless tobacco products in prevalence data)</i>				
MALES				
Current users ² <input type="text" value="Add age group"/>		%		
		%		
		%		
		%		
		%		
FEMALES				
Current users ² <input type="text" value="Add age group"/>		%		
		%		
		%		
		%		
		%		
TOTAL (males and females)				
Current users ² <input type="text" value="Add age group"/>		%		
		%		
		%		
		%		
		%		

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

2.1.4.1	Please indicate the smokeless tobacco products included in the answer to question 2.1.4:				
2.1.4.2	Please indicate the year and source of the data used to answer question 2.1.4:				
2.1.4.3	Please provide a brief explanation of the trend in current use of smokeless tobacco by adult age groups in the past three years or since submission of your last report.				
2.1.5	Tobacco use by ethnic group(s)				
		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 ³	Malay	41.30 %	5.50 %	23.20 %
	Add ethnic group	Chinese	21.20 %	3.60 %	12.30 %
		Indian	20.60 %	1.50 %	11.40 %
			%	%	%
			%	%	%
2.1.5.1	Please indicate the tobacco products included in the answer to question 2.1.5:				
	Cigarettes				
2.1.5.2	Please indicate the age range to which the data used to answer question 2.1.5 refer:				
	18 to 69 years				
2.1.5.3	Please indicate the year and source of the data used to answer question 2.1.5:				
	National Health Surveillance Survey, 2007. See at: http://www.moh.gov.sg/mohcorp/uploadedFiles/Publications/Reports/2009/nhss2007.pdf				

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

2.1.6	Tobacco use by young persons			
	Age range	Prevalence (%) <i>(please include all smoking or smokeless tobacco products in prevalence data)</i>		
		Smoking tobacco	Smokeless tobacco	Other tobacco (e.g. water pipe)
Boys				
Current users ⁴	13-16	11.00 %	%	%
Add youth group		%	%	%
		%	%	%
		%	%	%
		%	%	%
Girls				
Current users ⁴	13-16	6.00 %	%	%
Add youth group		%	%	%
		%	%	%
		%	%	%
		%	%	%
TOTAL (boys and girls)				
Current users ⁴	13-16	9.00 %	%	%
Add youth group		%	%	%
		%	%	%
		%	%	%
		%	%	%
2.1.6.1	Please indicate the tobacco products included in calculating prevalence for question 2.1.6:			
	Cigarettes			

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

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2.1.6.2	Please indicate the year and source of the data used to answer question 2.1.6:
	Students' Health Survey 2006. See report at: http://www.hpb.gov.sg/uploadedFiles/HPB_Online/Publications/student-health-survey-2006c.pdf
2.1.6.3	Please provide the definition of “current smoking/tobacco use” used to answer question 2.1.6 in the space below.
	Current Users - Smokes at least one day in the past 30 days
2.1.6.4	Please provide a brief explanation of the trend in tobacco use by young persons in the past three years or since submission of your last report.
	In 2009, compared to in 2006, there was a decline in the prevalence of smoking from 9% to 6%, on at least 1 cigarette a day in the past 30 days among youth aged 13 – 16 years. The 2009 Students' Health Survey, also observed a downtrend from 2% to 1% of students who were daily smokers, whereby daily smokers was defined to be those who smokes everyday for the past 30 days. The median age of initiation with experimentation with smoking remained at 12 years across both surveys.

2.2	EXPOSURE TO TOBACCO SMOKE
2.2.1	Do you have any data on exposure to tobacco smoke in your population? <input type="checkbox"/> Yes <input checked="" 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).
2.2.3	Please indicate the year and source of the data used to answer question 2.2.1:

2.3	TOBACCO-RELATED MORTALITY
2.3.1	Do you have information on tobacco-related mortality in your population? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.3.2	If you answered “Yes” to question 2.3.1, what is the estimated total number of deaths attributable to tobacco use in your population?
2.3.3	If available, please provide any additional information on mortality attributable to tobacco use (e.g. lung cancer, cardiovascular diseases) in your jurisdiction.
2.3.4	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:

2.4	TOBACCO-RELATED COSTS
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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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.4.2	If you answered “Yes” to question 2.4.1, please provide details (e.g. direct (health care-related) and indirect costs and, if possible, the method used to estimate these costs).
2.4.3	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:

2.5	SUPPLY OF TOBACCO AND TOBACCO PRODUCTS <i>(with reference to Articles 6.2(b), 20.4(c), and 15.5)</i>				
2.5.1	Licit supply of tobacco products				
	Product	Unit (e.g. pieces, tonnes)	Domestic production	Exports	Imports
	Smoking tobacco products <input type="button" value="Add product"/>	Cigarettes	TONNE		2546.59
		Cigar, Cheroots & Cigarillos	TONNE		4.55
		Smoking tobacco	TONNE		27.46
	Smokeless tobacco products <input type="button" value="Add product"/>	Snuff	TONNE		0.09
		Other Smokeless	TONNE		10.40
	Other tobacco products <input type="button" value="Add product"/>	Ang Hoon	TONNE		55.53
		Beedies	TONNE		44.70
		Others including unmanufactured tobacco and tobacco refuse	TONNE		12.80
	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:				
	FY 2009 Singapore Customs Import data. See information at: http://www.customs.gov.sg/NR/rdonlyres/238D48DF-D429-4E58-8E8F-DF2FE81FFD3C/26863/FY2009monthlystats1.pdf and http://www.customs.gov.sg/topNav/pub/Statistics.htm				

2.6		SEIZURES OF ILLICIT TOBACCO PRODUCTS <i>(with reference to Article 15.5)</i>			
2.6.1		Year	Product	Unit (e.g. millions of pieces)	Quantity seized
	Smoking tobacco products <input type="button" value="Add row"/>	2009	cigarette	million sticks	5.80
		2008	cigarette	million sticks	9.2
	Smoking tobacco products <input type="button" value="Add row"/>				
	Smoking tobacco products <input type="button" value="Add row"/>				
	2.6.2	Do you have any information on the percentage of smuggled tobacco products on the national tobacco market? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	2.6.3	If you answered "Yes" to question 2.6.2, what percentage of the national tobacco market do smuggled tobacco products constitute? %			
2.6.4	If you answered "Yes" to question 2.6.3 and you have information available, what is the trend over the past three years or since submission of your last report in the percentage of smuggled tobacco products in relation to the national tobacco market?				
2.6.5	Please provide any further information on illicit or smuggled tobacco products.				
2.6.6	Please indicate the source of the data used to answer questions in section 2.6: Singapore Customs' Annual Enforcement Results 2009				

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

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2.8	TAXATION OF TOBACCO PRODUCTS <i>(with reference to Articles 6.2(a) and 6.3)</i>
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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))? Approximately 69% (inclusive of 7% GST as well as excise tax)
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2.8.2	How are the excise taxes levied (what types of taxes are levied)?
	<ul style="list-style-type: none"> • Specific tax only <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No • Ad valorem tax only <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No • Combination of specific and ad valorem taxes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<ul style="list-style-type: none"> • More complex structure (<i>please explain:</i> • Tobacco products in stick form (vix cigarette) weighing less than 1 gram - excise duty of \$0.352 per stick and each additional 1 gram or part thereof attracts a duty of another \$0.352per stick • Unmanufactured tobacco and cut tobacco - excise duty of \$300 per kg • Beedies, Ang Hoon and Smokeless Tobacco - excise duty of \$181 per kg • Other tobacco products - excise duty of \$ 352 per kg • An additional 7% VAT and other sales tax is imposed on top of the above excise duties)

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)
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	Product	Type of tax	Rate or amount	Base of tax ⁵
Smoking tobacco products <div style="text-align: center; border: 1px solid gray; padding: 2px; width: fit-content; margin: 5px auto;">Add product</div>				
Smokless tobacco products <div style="text-align: center; border: 1px solid gray; padding: 2px; width: fit-content; margin: 5px auto;">Add product</div>				

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

	Other tobacco products <input type="button" value="Add product"/>				
2.8.4	Please briefly describe the trends in taxation for tobacco products in the past three years or since submission of your last report in your jurisdiction. The last increase in excise duties was in 2005. Average retail price has increase from S\$11.00 (2005) - S\$11.60 (2010). The current taxation rate is approximately 69%				
2.8.5	Do you earmark any percentage of your taxation income for funding any national plan or strategy on tobacco control in your jurisdiction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(In reference to Article 26)</i>				
2.8.6	If you answered "Yes" to question 2.8.5, please provide details in the space below.				
2.8.7	Please indicate the year and source of the data used to answer questions 2.8.1 to 2.8.6: 2010, Singapore Customs. http://www.customs.gov.sg/topNav/pub/Statistics.htm				

2.9	PRICE OF TOBACCO PRODUCTS <i>(with reference to Article 6.2(a))</i>				
2.9.1	Please provide the retail prices of the three most widely sold brands of domestic and imported tobacco products at the most widely used point of sale in your capital city.				
	Most widely sold brand			Number of units or amount per package	Retail price
	Smoking tobacco products	Smokeless tobacco products	Other tobacco products		
Domestic	Marlboro			20	11.70
	Next			20	10.30
	Sampoerna			20	11.30
Imported	Viceroy			20	10.20
	Salem			20	11.60
	Dunhill			20	11.60

2.9.2	Please indicate the year and source of the data used to answer question 2.9.1.
	Mar 2010
2.9.3	Please provide the currency used to complete the “Rate or amount” section of question 2.8.3 and the “Retail price” section of question 2.9.1. If known, please provide the exchange rate of this currency to US dollars as well as the date of this exchange rate.
	Singapore Dollars
2.9.4	Please briefly describe the trend in the prices of tobacco products in the past three years or since submission of your last report in your jurisdiction.
	The average price of a pack of cigarettes had steadily increased, due to increases in tobacco taxes, from \$6.90 for a pack of 20 sticks in 2001 to \$11.00 in 2006. It increased to \$11.30 in 2007, due to an increase in GST. It had recently increased to \$11.70 in 2010.

3. LEGISLATION, REGULATION AND POLICIES

3.1	Article	GENERAL OBLIGATIONS (with reference to Article 5)		
3.1.1	5	General obligations		
3.1.1.1	5.1	Have you developed and implemented comprehensive multisectoral national tobacco control strategies, plans and programmes in accordance with the Convention?	<input 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>Tobacco control efforts in Singapore started in the early 1970s, when legislations were enacted to ban smoking in public places and prohibit tobacco advertising and promotion. The National Smoking Control Programme (NSCP) was launched in 1986 to develop and implement initiatives to reduce smoking rates in Singapore.</p> <p>To address new and emerging products in the industry, new initiatives have been introduced under the National Tobacco Control Programme (NTCP). (http://www.hpb.gov.sg/smokefree/article.aspx?id=428)</p> <p>The NTCP's multi-pronged approach includes legislation, taxation, public education, partnerships and aims to prevent the initiation of smoking, especially by youths, and encourage smokers to quit the habit of smoking.</p> <p>The Health Promotion Board (HPB) which is a statutory board under the Ministry of Health, formulates national policies, develops evidence-based strategies and innovative programmes for health promotion, disease prevention and patient education.</p> <p>HPB is the focal point for tobacco control in Singapore and manages the National Tobacco Control Programme (NTCP).</p>
3.1.1.6	<p>Please provide a brief description of the progress made in implementing Article 5.1 and 5.2 (<i>General obligations</i>) in the past three years or since submission of your last report.</p>

	<p>The multi-pronged approach employed by the NTCP aims at reducing the demand and supply of tobacco. This includes taxation, tobacco control legislation, public education and the provision of smoking cessation services. Many of these efforts are through collaborative partnerships with governmental and non-governmental agencies, at both regional and international levels.</p> <p>HPB works together with partner agencies such as the Health Sciences Authority, which enforces licensing regime of tobacco sellers; National Environment Agency, which enforces ban of smoking in certain places and with Singapore Customs, which enforces licensing of trade in tobacco and regulates border control of any tobacco products.</p> <p>From the NHSS 2007 survey, with the increase in smoking rates being most marked in the 18 to 29 age group, the National Smoking Control Campaign (NSCC) 2009 focused on youth and young working adults (13 – 29 years). NSCC 2009 aimed to highlight the benefits of a smoke-free lifestyle, focusing on four key areas that resonate with youth namely their appearance, fitness, spending power and the environment.</p> <p>In 2010, HPB/ Ministry of Health has successfully passed the Tobacco (Control of Advertisements and Sale) Amendment Act. Amendments include removing the exemption which allows tobacco company sponsorship of the arts; lowering maximum tar and nicotine limits; empowering the Health Minister to prohibit new and emerging tobacco products; increasing composition fine for underage smokers; reviewing criteria for licensing of tobacco retailers; banning misleading labelling; and requiring new minimum packaging size for cigarillos. The amendments seek to curb the increasing trend of smoking among young adults and to curb the introduction of new emerging tobacco products into Singapore.</p> <p>Singapore is also actively involved in regional and international workshops. Singapore was part of the drafting work group for Articles 9 and 10 and 14.</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>Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry</p> <p><i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i></p>		
		<p>Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:</p>		
3.1.2.1		– protecting public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.1.2.2		– ensuring that the public has access, in accordance with Article 12(c), to a wide range of information on tobacco industry activities relevant to the objectives of the Convention, such as in a public repository?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.1.2.3	<p>If you answered “Yes” to any of the questions under 3.1.2.1 or 3.1.2.2, please provide details in the space below.</p>			
	<p>HPB has put in place guidelines governing interaction with tobacco industry. Meetings are minuted and discussions follow agreed Agenda closely.</p> <p>As the national coordinator, HPB facilitates understanding of FCTC obligations through bilateral engagement..</p>			
3.1.2.4	<p>Please provide a brief description of the progress made in implementing Article 5.3 in the past three years or since submission of your last report.</p>			
	<p>Implementation is in the initial phase.</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>			

3.2	<i>Article</i>	MEASURES RELATING TO THE REDUCTION OF DEMAND FOR TOBACCO (with reference to Articles 6–14)		
3.2.1	6	Price and tax measures to reduce the demand for tobacco (Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)		
		Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:		
3.2.1.1	6.2(a)	– tax policies and, where appropriate, price policies on tobacco products so as to contribute to the health objectives aimed at reducing tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.1.2	6.2(b)	– prohibiting or restricting, as appropriate, sales to international travellers of tax- and duty-free tobacco products?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.2.1.3		– prohibiting or restricting, as appropriate, imports by international travellers of tax- and duty-free tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.1.4	Please provide a brief description of the progress made in implementing Article 6 (<i>Price and tax measures to reduce the demand for tobacco</i>) in the past three years or since submission of your last report. Singapore had utilized tobacco taxation strategy successfully since the early 1990s to reduce the smoking prevalence. Aggressive tobacco tax increases from 2001 to 2005, signalled Singapore's commitment to strong tobacco control policies as one of the key factors in further reducing an already low smoking prevalence. Duty-free imports of tobacco products is not allowed in Singapore.			
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. Although there were no tax increase for the past years, efforts have been made to step up on enforcement and public education to reduce the demand for tobacco			

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

3.2.2.5		– protection from exposure to tobacco smoke in indoor public places?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.2.6		If you answered “Yes” to question 3.2.2.5, how comprehensive is the protection from exposure to tobacco smoke in the following indoor public places:	Complete	Partial	None
		• cultural facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		• 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>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2.2.7		Please provide a brief summary of complete and partial measures, with specific details of the partial measures that have been implemented.			
		• Protection from exposure to tobacco smoke in indoor workplaces			
		<p>The Smoking (Prohibition in Certain Places) Act and Notification prohibits smoking in all office premises, except in a designated enclosed room, which is independently ventilated and is not a common area to be used by all other persons. The amendment also provides for the prohibition of smoking in any factory, any enclosed corridor, lobby, stairwell or other common area of any building which consists of office premises.</p> <p>See Annex 1 and Annex 2 of this report.</p>			
		• Protection from exposure to tobacco smoke in public transport			
		<p>The Act and Notification also prohibits the smoking in the following public service transports:</p> <p>(1) Any omnibus. (2) Any private bus. (3) Any private hire bus. (4) Any school bus. (5) Any taxi.</p>			
		• Protection from exposure to tobacco smoke in indoor public places			
		<p>The Act and Notification above also provides the provision to prohibit smoking in the following places: (Please refer to Annexes).</p> <p>While the legislative measures under the Act stipulates that smoking is banned in pubs and night bars, with the exception of an allocated smoking room, limited to 10% of its floor space, the smoking ban in these entertainment places are effectively complete due to the requirements for these rooms to be fully enclosed, separately ventilated and exhausted to the outdoor.</p>			
3.2.2.8	Please provide a brief description of the progress made in implementing Article 8				

	<p><i>(Protection from exposure to tobacco smoke)</i> in the past three years or since submission of your last report.</p>
	<p>Amendment to the Act in 2007 and 2009 has expanded the smoking ban to more public areas, which has been successful in implementing Article 8 for the protection against tobacco smoke.</p>
3.2.2.9	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>

3.2.3	9	<p>Regulation of the contents of tobacco products <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i></p>		
		<p>Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:</p>		
3.2.3.1		– testing and measuring the contents of tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.3.2		– testing and measuring the emissions of tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.3.3		– regulating the contents of tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.3.4		– regulating the emissions of tobacco products?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.3.5	<p>Please provide a brief description of the progress made in implementing Article 9 (<i>Regulation of the contents of tobacco products</i>) in the past three years or since submission of your last report.</p> <p>Section 15 of the previous Smoking (CAST) Act precribes the maximum allowable tar and nicotine limits. The recent amendments to the Tobacco (Control of Advertisements and Sale) Act transfers this to subsidiary legislation, allowing flexibility for future changes.</p> <p>The Tobacco (Control of Advertisements and Sale) Amendment Bill, which was recently passed in Parliament in July 2010, have reduced the maximum allowable yield limits for tar and nicotine from 15 mg to 10 mg for tar and from 1.3 mg to 1.0 mg for nicotine. This requirement is aligned with international best practices.</p> <p>See Annex 3 and Annex 4 of this report.</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>Regulation of tobacco product disclosures</p> <p><i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i></p>		
		<p>Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:</p>		
3.2.4.1			<p>– requiring manufacturers or importers of tobacco products to disclose to Government authorities information about the:</p>	
		<p>• contents of tobacco products?</p>	<p><input checked="" type="checkbox"/> Yes</p>	<p><input type="checkbox"/> No</p>
		<p>• emissions of tobacco products?</p>	<p><input checked="" type="checkbox"/> Yes</p>	<p><input type="checkbox"/> No</p>
3.2.4.2			<p>– requiring public disclosure of information about the:</p>	
		<p>• contents of tobacco products?</p>	<p><input checked="" type="checkbox"/> Yes</p>	<p><input type="checkbox"/> No</p>
		<p>• emissions of tobacco products?</p>	<p><input checked="" type="checkbox"/> Yes</p>	<p><input type="checkbox"/> No</p>
3.2.4.3	<p>Please provide a brief description of the progress made in implementing Article 10 (<i>Regulation of tobacco product disclosures</i>) in the past three years or since submission of your last report.</p>			
		<p>The Tobacco (Control of Advertisements and Sale) Amendment Bill also prescribes that under the new Labelling Regulations, the tar and nicotine yield information will be replaced with a new health information message. See Annex 3 and Annex 4 of this report.</p>		
3.2.4.4	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>			

3.2.5	11	Packaging and labelling of tobacco products		
		<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>		
3.2.5.1	11	– requiring that packaging, individual cigarettes or other tobacco products do not carry advertising or promotion?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.2	11.1(a)	– requiring that packaging and labelling do not promote a product by any means that are false, misleading, deceptive or likely to create an erroneous impression about its characteristics, health effects, hazards or emissions?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.3	11.1(b)	– requiring that each unit packet and package of tobacco products and any outside packaging and labelling of such products carry health warnings describing the harmful effects of tobacco use?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.4	11.1(b)(i)	– ensuring that the health warnings are approved by the competent national authority?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.5	11.1(b)(ii)	– ensuring that the health warnings are rotated?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.6	11.1(b)(iii)	– ensuring that the health warnings are clear, visible and legible?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.7	11.1(b)(iv)	– ensuring that the health warnings occupy no less than 30% of the principal display areas?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.8		– ensuring that the health warnings occupy 50% or more of the principal display areas?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.9	11.1(b)(v)	– ensuring that health warnings are in the form of, or include, pictures or pictograms?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

3.2.5.10		If you answered “Yes” to question 3.2.5.9, does the Government own the copyright to these pictures and pictograms?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.11		If you answered “Yes” to question 3.2.5.10, would you grant a non-exclusive and royalty-free licence for the use of health warnings developed in your jurisdiction with other Parties?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.12	11.2	– requiring that each unit packet and package of tobacco products and any outside packaging and labelling of such products contain information on relevant constituents and emissions of tobacco products?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.2.5.13	11.3	– requiring that the warnings and other textual information appear on each unit packet and package and on any outside packaging and labelling in the principal language or languages of the country?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.5.14	<p>Please provide a brief description of the progress made in implementing Article 11 (<i>Packaging and labelling of tobacco products</i>) in the past three years or since submission of your last report.</p> <p>An recent amendment to Section 17(1) of the Tobacco (Control of Advertisements and Sale) Act will extend the display of graphic health warnings to outer packaging, such as the box or, carton that holds the individual packages for retail. (See Annex 4 of this report.)</p> <p>The new Section 17A of the Act would prohibit the importation, distribution, sale or offer for sale of any tobacco product that has or is accompanied by any false or misleading packaging or labelling. The actual terms to be prohibited will be prescribed within the subsidiary legislation, and is targeted to be gazetted by end 2010. Tobacco manufacturers will be given a grace period of 12 months from the date of gazette deplete old stocks and to effect the necessary changes.</p> <p>Singapore does not own the copyright of all of the graphic health warning images that have appeared on the labelling of tobacco products. Those that Singapore owns can be shared royalty free.</p>			
3.2.5.15	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>			

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

	12(f)	<ul style="list-style-type: none"> • adverse economic consequences of 		
		- tobacco production?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		- tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> • adverse environmental consequences of 		
		- tobacco production?	<input type="checkbox"/> Yes	<input checked="" 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:		
		<ul style="list-style-type: none"> • public agencies? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> • nongovernmental organizations not affiliated with the tobacco industry? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> • private organizations? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> • other (<i>please specify:</i>)? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.6.6	12	Are the elaboration, management and implementation of communication, education, training and public awareness programmes guided by research and do they undergo pre-testing, monitoring and evaluation?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.6.7	12(d)	Are appropriate and special training or sensitization and awareness programmes on tobacco control addressed to:		
		<ul style="list-style-type: none"> • health workers? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> • community workers? 	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		<ul style="list-style-type: none"> • social workers? 	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		<ul style="list-style-type: none"> • media professionals? 	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		<ul style="list-style-type: none"> • educators? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> • decision-makers? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<ul style="list-style-type: none"> • administrators? 	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		<ul style="list-style-type: none"> • other (<i>please specify:</i>)? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No

3.2.6.8	<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 three years or since submission of your last report.</p>
	<p>Partnerships are key to the implementation of programmes. Health Promotion Board actively engages educational institutions, private workplaces, the uniformed groups, healthcare professionals, youth organisations, community and religious groups, and parents, to promote a smoke-free lifestyle. Partnership is often in the form of training and consultative service to provide knowledge and skills pertaining to tobacco control, as well as providing assistance in the organisation for appropriate tobacco control programmes for various target audiences.</p> <p>Health care professionals are HPB's major partners. We also train pharmacists, general practitioners, optometrists and dentists to provide opportunistic smoking cessation advice to patients. Workplaces are also excellent platforms to develop comprehensive and sustainable programmes to address issues affecting the health and health behaviors of the working population. In addition, we also work with various uniformed groups, namely Singapore Police Force and Singapore Arms Forces and the Singapore Civil Defence Force to implement smoking control programmes. Through these partners, we had put in place several measures such as partial smoking bans within army camps, annual health awareness talks and smoking cessation services.</p> <p>HPB's public education programmes for youths focus on equipping young people with knowledge, skills and strategies to discourage tobacco use, as well as promoting a smoke-free lifestyle as the preferred norm. HPB has worked closely with the Ministry of Education to include information on smoking in the school curriculum, in topics such as Health Education, Science, and Civics and Moral Education. Smoking control messages are weaved appropriately into a variety of other programmes that complement the school curricula. HPB also coordinates competitions and project work that allow students to delve deeper into smoking-related issues. In addition, through its Youth Advolution for Health Programme, HPB provides consultation and funding support for youth to organise tobacco control programmes targeted at their peers.</p> <p>Efforts to raise public awareness include the month-long National Smoking Control Campaign, held in conjunction with World No Tobacco Day on 31st May. Annually, HPB organizes community events such as roadshows, street marches, carnivals and public performances to promote a tobacco-free lifestyle. Mass and online media platforms such as television, radio, blogsites and social networking media, are used to disseminate smoking control messages. Information is also creatively woven into articles on personal grooming, fitness and financial matters to provide different perspectives on the benefits of leading a smoke-free lifestyle.</p> <p>In addition, customised intervention programmes are designed for specific groups. For example, to tackle the relatively higher smoking rates among the Malay community, HPB partners with mosques and Malay/Muslim</p>

	<p>organisations to promote a smoke-free lifestyle among Malay youth & adults as well as encourage those who smoke to kick the habit. Special programmes are also organized for youth in institutional homes, who may be more prone to smoking, to motivate them to lead a smoke-free lifestyle.</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	Tobacco advertising, promotion and sponsorship <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>		
		Have you adopted and implemented, where appropriate, any legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes:		
3.2.7.1	13.2	– instituting a comprehensive ban on all tobacco advertising, promotion and sponsorship?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If you answered “No” to question 3.2.7.1, please proceed to question 3.2.7.3.				
3.2.7.2		If you answered “Yes” to question 3.2.7.1, does your ban cover:		
		• display and visibility of tobacco products at points of sales?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• the domestic Internet?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• the global Internet?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• brand stretching and/or brand sharing?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• product placement as a means of advertising or promotion?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• the depiction of tobacco or tobacco use in entertainment media products?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• tobacco sponsorship of international events or activities and/or participants therein?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		• contributions from tobacco companies to any other entity for “socially responsible causes” and/or any other activities implemented under the umbrella of “corporate social responsibility” by the tobacco industry?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• cross-border advertising, promotion and sponsorship originating from your territory?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

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

3.2.7.10	13.4(e)	– restricting tobacco advertising, promotion and sponsorship on:		
		• radio?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• television?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• print media?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• the domestic Internet?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• the global Internet?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		• other media (<i>please specify:</i>)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.7.11	13.4(f)	– restricting tobacco sponsorship of:		
		• international events and activities?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• participants therein?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Whether you answered “Yes” or “No” to question 3.2.7.1, are you:				
3.2.7.12	13.6	– cooperating with other Parties in the development of technologies and other means necessary to facilitate the elimination of cross-border advertising?	<input 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 three years or since submission of your last report.			
	The recent amendments in the Tobacco (Control of Advertisements and Sale) Act will remove the exemption clause Section 3(2)(a) which allows tobacco companies to offer sponsorship for any arts related events. The arts organisations will be given a grace period until end 2010 before exemption clause comes into effect. See Annex 4 of this report (section 9).			
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	Demand reduction measures concerning tobacco dependence and cessation <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 women and/or pregnant women?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• local events, such as activities related to World No Tobacco Day or National No Smoking Day, if appropriate?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• other (<i>please specify:</i>)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.2.8.3	14.2(a)	– design and implementation of programmes aimed at promoting the cessation of tobacco use, in such locations as:		
		• educational institutions?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• health-care facilities?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• workplaces?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• sporting environments?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• other (<i>please specify:</i> Smoking cessation has been introduced in cultural, religious, workplace settings. It has also been developed to address gender and lower-	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

		income populations)?		
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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> Gynaecology clinics & public healthcare obstetrician)	<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 checked="" type="checkbox"/> Partially	<input type="checkbox"/> None
		• secondary and tertiary health care	<input type="checkbox"/> Fully	<input checked="" type="checkbox"/> Partially	<input type="checkbox"/> None
		• specialist health-care systems (<i>please specify:</i>)	<input type="checkbox"/> Fully	<input checked="" type="checkbox"/> Partially	<input type="checkbox"/> None

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

		<ul style="list-style-type: none"> • other (<i>please specify:</i>)? 	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.8.10	14.2(d)	– facilitating accessibility and/or affordability of pharmaceutical products for the treatment of tobacco dependence?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.8.11	14.2(d)	If you answered “Yes” to question 3.2.8.10, which pharmaceutical products are available for the treatment of tobacco dependence in your jurisdiction?			
		• nicotine replacement therapy	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• bupropion	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• varenicline	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
		• other (<i>please specify:</i>)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3.2.8.12	14.2(d)	If you answered “Yes” to question 3.2.8.10, are the costs of treatment with these products covered by public funding or reimbursement?			
		• nicotine replacement therapy	<input type="checkbox"/> Fully	<input checked="" type="checkbox"/> Partially	<input type="checkbox"/> None
		• bupropion	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input checked="" type="checkbox"/> None
		• varenicline	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input checked="" type="checkbox"/> None
		• other (<i>please specify:</i>)?	<input type="checkbox"/> Fully	<input type="checkbox"/> Partially	<input type="checkbox"/> None
3.2.8.13	Please provide a brief description of the progress made in implementing Article 14 (<i>Demand reduction measures concerning tobacco dependence and cessation</i>) in the past three years or since submission of your last report.				
	<p>Since the last update, HPB has stepped up smoking cessation services targeted at youth. HPB engages schools, Family Service Centers (FSCs) and various Youth Organisations (YOs) to provide smoking cessation services to youth smokers. To complement the face-to-face smoking cessation interventions, HPB has a web-based smoking cessation programme, www.breakfree.sg, which encourages youths to quit smoking through the use of testimonies and self-reflection tools. Underage smoking offenders are also required to log on to www.breakfree.sg/compound to complete a brief online intervention that motivates them to think about quitting smoking.</p> <p>For adults, since the 1990s, smoking cessation services have been integrated into the primary healthcare settings, hospitals and polyclinics. These services are also now available in non-governmental organizations such as the Singapore Cancer Society, Singapore Heart Foundation, and retail pharmacy chains, providing a wide network of accessible smoking cessation services.</p>				

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

3.3	Article	MEASURES RELATING TO THE REDUCTION OF THE SUPPLY OF TOBACCO <i>(with reference to Articles 15–17)</i>		
3.3.1	15	Illicit trade in tobacco products <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>		
		Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:		
3.3.1.1	15.2	– requiring marking of all unit packets and packages of tobacco products and any outside packaging of such products to assist in determining the origin of the product?	<input type="checkbox"/> Yes	<input checked="" 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 type="checkbox"/> Yes	<input checked="" 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 type="checkbox"/> Yes	<input checked="" 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 type="checkbox"/> Yes	<input checked="" 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 type="checkbox"/> Yes	<input checked="" 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	Please provide a brief description of the progress made in implementing Article 15
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	<p><i>(Illicit trade in tobacco products)</i> in the past three years or since submission of your last report.</p>
	<p>All duty-paid cigarettes imported or manufactured to be sold in Singapore is legally required to be marked with the letters “SDPC”, since 1 Jan 2009. Singapore Customs have continually increased enforcement efforts against smuggling, peddling and buying of duty-unpaid cigarettes.</p>
3.3.1.15	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p>

3.3.2	16	Sales to and by minors <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>		
		Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:		
3.3.2.1	16.1	– prohibiting the sales of tobacco products to minors? If “Yes”, please specify the legal age: 18 ?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.2	16.1(a)	– requiring that all sellers of tobacco products place a clear and prominent indicator inside their point of sale about the prohibition of tobacco sales to minors?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.3	16.1(a)	– requiring that, in case of doubt, each seller of tobacco products requests that the purchaser provides appropriate evidence of having reached full legal age?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.4	16.1(b)	– banning the sale of tobacco products in any manner by which they are directly accessible, such as open store shelves?	<input 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 checked="" type="checkbox"/> Yes	<input 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 type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.8	16.2	– prohibiting and/or promoting the prohibition of the distribution of free tobacco products:		
		• to the public?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

		<ul style="list-style-type: none"> • to minors? 	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.9	16.3	– prohibiting the sale of cigarettes individually or in small packets?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.10	16.6	– providing for penalties against sellers and distributors in order to ensure compliance?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.11	16.7	– prohibiting the sales of tobacco products by minors?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.3.2.12	<p>Please provide a brief description of the progress made in implementing Article 16 (<i>Sales to and by minors</i>) in the past three years or since submission of your last report.</p> <p>The Health Sciences Authority (HSA) is the primary agency overseeing the enforcement of laws and regulations relating to underage smoking, and the issuing of tobacco retail licences.</p> <p>HPB collaborates with the Health Sciences Authority (HSA) to regulate tobacco licensing, point of sale displays and equip retailers with skills to refuse tobacco sales to underage youth. The prohibition of imitation tobacco products, tobacco vending machine, distribution of free tobacco samples to public and the prohibition of sales of tobacco to underage use was implemented from 1993. A first offence constitutes a sum of up to \$5,000 and up to \$10,000 for subsequent offences.</p> <p>Prohibitive signages at all tobacco retail outlets and the prohibition of sales of tobacco by underage youth was implemented in 1998 and finally the prohibition of sale of cigarette packs containing less than 20 sticks of cigarettes was implemented in 2003, which completes the implementation of Article 16. New amendments in the Tobacco (Control of Advertisements and Sale) Act will extend the prohibition of cigarettes sold in packs less than 20 sticks to miniature cigars or cigarillos. Tobacco importers and local distributors and retailers will be given a grace period of 12 months from the date of gazette to effect the changes.</p> <p>HPB recognises that the tobacco industry is becoming more creative in their marketing strategies to market new and emerging products, which would appeal to the vulnerable groups, such as youths and young adults. As such, the recent amendments to the Act have taken a pre-emptive step to empower the Health Minister to ban these new and emerging products such as fruit or confectionary-flavoured cigarettes, cigarillos, beedies and other dissolvable tobacco and nicotine products.</p>			
3.3.2.13	<p>If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.</p> <p>HPB developed smoking cessation modules and provided training for counsellors and youth workers to enable them to conduct programmes in schools and Family Service Centres (FSCs) to help youth smokers to quit smoking. A web-based smoking cessation programme – www.breakfree.sg -</p>			

	<p>was also developed, which uses testimonies and self-reflection tools to guide and support youth smokers on their quit journey.</p>
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	<p>In addition, further proposals to increase the amount of fines for imposed for minors caught smoking have been included in Amendment bill that is introduced to Parliament.</p>
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3.3.3	17	Provision of support for economically viable alternative activities <i>(Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)</i>			
		Have you adopted and implemented, where appropriate, measures or programmes on any of the following:			
3.3.3.1	17	– promoting economically viable and sustainable alternatives for:			
		• tobacco growers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Not applicable
		• tobacco workers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Not applicable
		• tobacco individual sellers?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Not applicable
3.3.3.2	Please provide a brief description of the progress made in implementing Article 17 <i>(Provision of support for economically viable alternative activities)</i> in the past three years or since submission of your last report.				
3.3.3.3	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.				

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

3.4.2	19	Liability <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:		
3.4.2.1	19.1	– dealing with criminal and civil liability, including compensation where appropriate?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.4.2.2	19.1	Has any person in your jurisdiction launched any criminal and/or civil liability action, including compensation where appropriate, against any tobacco company in relation to any adverse health effect caused by tobacco use?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.4.2.3	19.1	Have you taken, as appropriate, any legislative, executive, administrative and/or other action against the tobacco industry for full or partial reimbursement of medical, social and other relevant costs related to tobacco use in your jurisdiction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.4.2.4	Please provide a brief description of any progress made, as appropriate, in implementing Article 19 (<i>Liability</i>) in the past three years or since submission of your last report.			
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	Research, surveillance and exchange of information (Please check “Yes” or “No”. For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)		
		Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:		
3.4.3.1	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 type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		• social and economic indicators related to tobacco consumption?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		• tobacco use among women, with special regard to pregnant women?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• the determinants and consequences of exposure to tobacco smoke?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• identification of effective programmes for the treatment of tobacco dependence?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• identification of alternative livelihoods?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		• other (<i>please specify:</i>)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3.4.3.2	20.1(b)	– training and support for all persons engaged in tobacco control activities, including research, implementation and evaluation?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.4.3.3	20.3(a)	– a national system for epidemiological surveillance of:		
		• patterns of tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• determinants of tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• consequences of tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• social, economic and health indicators related to tobacco consumption?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• exposure to tobacco smoke?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• other relevant information (<i>please</i>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

		<i>specify:</i>)		
3.4.3.4	20.4	– regional and global exchange of publicly available national:		
		• scientific, technical, socioeconomic, commercial and legal information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		• information on the practices of the tobacco industry?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
		• information on the cultivation of tobacco?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3.4.3.5	20.4(a)	– an updated database of:		
		• laws and regulations on tobacco control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• information about the enforcement of laws on tobacco control?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		• pertinent jurisprudence?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
3.4.3.6	Please provide a brief description of the progress made in implementing Article 20 (<i>Research, surveillance and exchange of information</i>) in the past three years or since submission of your last report.			
3.4.3.7	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.

	<i>Article</i>	Pursuant to Article 21.1(c) and in accordance with Article 26, have you either provided or received financial or technical assistance (be it through unilateral, bilateral, regional, subregional or other multilateral channels, including relevant regional and international intergovernmental or nongovernmental organizations and financial and development institutions) for the development and strengthening of multisectoral, comprehensive tobacco control programmes of developing country Parties and Parties with economies in transition in any of the following areas:	Assistance provided	Assistance received
4.1	22.1(a)	– development, transfer and acquisition of technology, knowledge, skills, capacity and expertise related to tobacco control?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.2	22.1(b)	– provision of technical, scientific, legal and other expertise to establish and strengthen national tobacco control strategies, plans and programmes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.3	22.1(c)	– appropriate training or sensitization programmes for appropriate personnel in accordance with Article 12?	<input type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> Yes <input checked="" 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.			
	<p>Singapore has received clarifications from countries e.g. EU, India, Thailand, Malaysia, Australia, Brazil, with regard to their implementation of emerging products bans and misleading descriptors.</p> <p>In the area of graphic health warning labels, Singapore have shared the graphics HWL with Malaysia and Thailand. Our experience in the</p>			

	<p>implementation of the HWLs was shared during the 14th WCTOH in 2009.</p>
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	<p>In 2010, Singapore has hosted a study visit for Vietnam to learn on tobacco taxation and pricing strategies and policies and have shared our experience with the enforcement of TAPS at the AFACT Conference.</p>
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4.8	Please provide information about any assistance provided or received in the space below.
4.9	If you have not received or provided assistance in any of the aforementioned areas, please identify any financial or technical assistance that may be under consideration, if appropriate.
4.10	Have you encouraged relevant regional and international intergovernmental organizations and financial and development institutions in which you are represented to provide financial assistance for developing country Parties and for Parties with economies in transition to assist them in meeting their obligations under the Convention? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Please refer to Article 26.4.)</i>
4.11	If you answered “Yes” to question 4.10, please provide details in the space below.

5. PRIORITIES AND COMMENTS

5.1	<p>What are the priorities for implementation of the WHO Framework Convention on Tobacco Control in your jurisdiction?</p> <p>Singapore considers the implementation of the FCTC holistically and in ensuring that all the obligations are met, Singapore has focused on the time-bound implementation as well as targeting measures to control both the supply and demand of tobacco products domestically. In reducing the demand of tobacco, Singapore places a strong emphasis on the implementation of Article 12 on education, creating public awareness as well as capacity building and leveraging on strategic partners to communicate our anti-smoking messages. Implementation of Articles 6-14 on demand control, particularly on Articles 6, 8 and 11, Singapore is in its advanced stage of implementation, with constant reviews for further strengthening or to address any gaps in the implementation. With the adoption of Guidelines of Articles 9 and 10, national implementation measures on those provisions may be further addressed.</p> <p>Implementation of Articles 15-17 which targets reduction of supply are in the process of implementation. Singapore considers implementation of Article 16 of importance to protect the youth from exposure to smoking.</p> <p>Singapore constantly reviews our national policies with the various Ministries/ Agencies in Singapore to ensure a whole of government approach in implementing the FCTC obligations.</p>
5.2	Have you identified any specific gaps between the resources available and the needs assessed for implementing the WHO Framework Convention on Tobacco Control? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.3	<p>If you answered “Yes” to question 5.2, please provide details in the space below.</p> <p>Facilitation of case study sharing for the actual implementatino of the</p>

	<p>FCTC, inclusive of overcoming challenges</p> <p>Facilitation of exchange of sample policies and legislation for the various articles</p> <p>Provision of legal expertise/advice, for example, in advising on risk analysis during policy development</p> <p>Provision of global industry trends to inform policy decisions</p>
5.4	<p>What, if any, are the constraints or barriers, other than lack of resources, you have encountered in implementing the Convention?</p> <p><i>(Please refer to Article 21.1(b).)</i></p>
5.5	<p>Please provide any relevant information not covered elsewhere that you consider important.</p>
5.6	<p>Your suggestions for further development and revision of the reporting instrument:</p> <p>To align the instrument with WHO's regional tobacco control indicators to streamline reporting to the Secretariat and WHO TFI</p>

End of reporting instrument