

2020 - CORE QUESTIONNAIRE OF THE REPORTING INSTRUMENT OF WHO FCTC

A. ORIGIN OF THE REPORT

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Period of reporting:

	Month	Year
Start date	March (3)	2018 (19)
End date	March (3)	2020 (21)

B1. TOBACCO CONSUMPTION

Prevalence of tobacco use

Smoking prevalence in the adult population (all)

(Please provide prevalence data for total adult population, and identify the age considered, e.g. 15 years old and over, 18-64 years; see B112)

Current smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)	Average number of the most-consumed smoking tobacco product used per day
MALE	14	
FEMALE	13	
TOTAL (males and females)	13	

Daily smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)	Average number of the most-consumed smoking tobacco product used per day
MALE	7	12
FEMALE	7	11
TOTAL (males and females)	7	11

Occasional smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALE	7
FEMALE	6
TOTAL (males and females)	6

Former smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALE	21
FEMALE	22
TOTAL (males and females)	22

Never smokers

	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALE	65
FEMALE	65
TOTAL (males and females)	65

Please indicate the smoking tobacco products included in calculating prevalence for question B11:

Cigarettes, cigarillos, cigars and pipes

Please indicate the age range to which the data used to answer question B11 refer:

	From	To
Age range	16	84

Please indicate the year of the data used to answer question B11:

2018

Please indicate the source of the data used to answer question B11:

Public Health Agency of Sweden (2018). The National Survey of Public Health - Health on Equal Terms. Please note that the data submitted is NOT age-standardized (in contrast to some previous report).

Please provide the definitions of "current smoker", "daily smoker", "occasional smoker", "former smoker" and "never smoker" used in this report.

Current smoker	Answered "Yes" to either the question "Do you smoke daily?" or "Do you smoke occasionally?"
Daily smoker	Answered "Yes" to the question "Do you smoke daily?"
Occasional smoker	Answered "Yes" to the question "Do you smoke occasionally?" but "No" to the question "Do you smoke daily?"
Former smoker	Answered "Yes" to the question "Have you ever smoked daily for a period of at least six months?" but "No" to the question "Do you smoke daily?" and "Do you smoke occasionally?"
Never smoker	Answered "No" to being a daily smoker, an occasional smoker or a former smoker.

Please provide a brief explanation of the trend in smoking prevalence in the adult population in the past two years or since submission of your last report.

Smoking prevalence has decreased (and there is no longer any gender difference).

Smoking prevalence in the adult population (by age groups)

(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)

	Range - start age	Range - end age	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALES - current smokers ¹	16	29	16
MALES - current smokers ¹	30	44	13
MALES - current smokers ¹	45	64	14
MALES - current smokers ¹	65	84	11
FEMALES - current smokers ¹	16	29	16
FEMALES - current smokers ¹	30	44	11
FEMALES - current smokers ¹	45	64	15
FEMALES - current smokers ¹	65	84	11
TOTAL (males and females) - current smokers ¹	16	29	16
TOTAL (males and females) - current smokers ¹	30	44	12
TOTAL (males and females) - current smokers ¹	45	64	14
TOTAL (males and females) - current smokers ¹	65	84	11

Please indicate the smoking tobacco products included in calculating prevalence for question B12:

Cigarettes, cigarillos, cigars and pipes

Please indicate the year of the data used to answer question B12:

2018

Please indicate the source of the data used to answer question B12:

Public Health Agency of Sweden (2018). The National Survey of Public Health - Health on Equal Terms. Please note that the data is NOT age-standardized (in contrast to some previous report).

Please provide a brief explanation of the trend in current smoking prevalence by age group in the past two years or since submission of your last report, if data are available.

Smoking prevalences 2018 are similar in all age groups (both sexes), as compared to data from 2016.

Prevalence of smokeless tobacco use in the adult population (all)

(Please provide prevalence data for total adult population, and identify the age considered in B132, e.g. 15 years old and over, 18-64 years; see B132)

Males

Prevalence (%)
(please include all smokeless tobacco products in prevalence data)

Current users	22
Daily users	18
Occasional users	4
Former users	10
Never users	68

Females

Prevalence (%)
(please include all smokeless tobacco products in prevalence data)

Current users	6
Daily users	4
Occasional users	2
Former users	2
Never users	92

TOTAL (males and females)

Prevalence (%)
(please include all smokeless tobacco products in prevalence data)

Current users	14
Daily users	11
Occasional users	3
Former users	6
Never users	80

Please indicate the smokeless tobacco products included in calculating prevalence for question B13:

Snus (moist snuff)

Please indicate the age range to which the data used to answer question B13 refer:

	From	To
Age range	16	84

Please indicate the year of the data used to answer question B13:

2018

Please indicate the source of the data used to answer question B13:

Public Health Agency of Sweden (2018). The National Survey of Public Health - Health of Equal Terms. Please note that the data submitted relates to 2015 and that it is NOT age-standardized (in contrast to some previous report). Current snus-user refers to the sum of daily and occasional snus-users. Please also note that there is no data available regarding former and never use of smokeless tobacco.

Please provide the definitions of "current user", "daily user", "occasional user", "former user" and "never user" (of smokeless tobacco products) used in this report in the space below.

Current user	Answered "Yes" to either the question "Do you use snus daily?" or "Do you use snus occasionally?"
Daily user	Answered "Yes" to the question "Do you use snus daily?"
Occasional user	Answered "Yes" to the question "Do you use snus occasionally?" but "No" to the question "Do you use snus daily?"
Former user	
Never user	

Please provide a brief explanation of the trend in smokeless tobacco use in the adult population in the past two years or since submission of your last report.

No change in daily or current smokeless tobacco use, as compared to data from 2016. An increase in occasional use was observed among women (from 1% in 2016 to 2% in 2018).

Prevalence of smokeless tobacco use in the adult population (current users) by age group (by age groups)

(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)

	Range - start age	Range - end age	Prevalence (%) (please include all smoking tobacco products in prevalence data)
MALES - current smokers ²	16	29	22
MALES - current smokers ²	30	44	25
MALES - current smokers ²	45	64	25
MALES - current smokers ²	65	84	15
FEMALES - current smokers ²	16	29	9
FEMALES - current smokers ²	30	44	9
FEMALES - current smokers ²	45	64	6
FEMALES - current smokers ²	65	84	2
TOTAL (males and females) - current smokers ²	16	29	15
TOTAL (males and females) - current smokers ²	30	44	17
TOTAL (males and females) - current smokers ²	45	64	16
TOTAL (males and females) - current smokers ²	65	84	8

Please indicate the smokeless tobacco products included in the answer to question B14:

Snus (moist snuff)

Please indicate the year of the data used to answer question B14:

2018

Please indicate the source of the data used to answer question B14:

Public Health Agency of Sweden (2018). The National Survey of Public Health - Health of Equal Terms. Please note that the data submitted is NOT age-standardized (in contrast to some of the previous report). Current snus-user refers to the sum of daily and occasional snus-users.

Please provide a brief explanation of the trend in current use of smokeless tobacco by adult age groups in the past two years or since submission of your last report.

Similar prevalences 2018 in all of the age groups for current smokeless tobacco use, as compared to data from 2016.

Tobacco use by ethnic group(s)

(please include all smoking or smokeless tobacco products in prevalence data)

	Ethnic group(s)	MALES - Prevalence (%)	FEMALES - Prevalence (%)	TOTAL (males and females) - Prevalence (%)
Current users ³	Tobacco use (origin Sweden)	32	19	25
Current users ³	Tobacco use (origin other Nordic country)	25	19	21
Current users ³	Tobacco use (origin Europe, Nordic countries excluded)	23	21	22
Current users ³	Tobacco use (origin outside Europe)	29	9	20

Please indicate the tobacco products included in the answer to question B15:

Cigarettes, cigarillos, cigars, pipes, snus (moist snuff)

Please indicate the age range to which the data used to answer question B15 refer:

	From	To
Age range	16	84

Please indicate the year of the data used to answer question B15:

2018

Please indicate the source of the data used to answer question B15:

Public Health Agency of Sweden (2018). The National Survey of Public Health - Health of Equal Terms. Please note that the data submitted is NOT age-standardised (in contrast to some of the previous report).

Tobacco use by young persons

(please include all smoking or smokeless tobacco products in prevalence data)

	Age range	SMOKING TOBACCO - Prevalence (%)	SMOKELESS TOBACCO - Prevalence (%)	WATER PIPE - Prevalence (%)
BOYS - Current users ⁴	15-16	8	13	4
BOYS - Current users ⁴	17-18	20	22	6
GIRLS - Current users ⁴	15-16	12	3	3
GIRLS - Current users ⁴	17-18	21	10	5
TOTAL (boys and girls) - Current users ⁴	15-16	10	9	4
TOTAL (boys and girls) - Current users ⁴	17-18	20	17	5

Please indicate the tobacco products included in calculating prevalence for question B16:

Prevalence of smoking tobacco: cigarette smoking.

Prevalence of smokeless tobacco: snus [moist snuff].

Prevalence of water pipe use: water pipe.

Please indicate the year of the data used to answer question B16:

2019

Please indicate the source of the data used to answer question B16:

The Swedish Council for Information on Alcohol and Other Drugs (CAN; 2019); Alcohol and drug use among students (Skolevers drogvanor)

Please provide the definition of "current smoking/tobacco use" used to answer question B16 in the space below.

Current users of smoking tobacco: Those respondents that reported having smoked cigarettes (daily, almost daily or occasionally).

Current users of smokeless tobacco: Those respondents that reported having used snus (daily, almost daily or occasionally).

Current users of water pipe: Those respondents that reported having smoked water pipe within the last 30 days.

Please provide a brief explanation of the trend in tobacco use by young persons in the past two years or since submission of your last report.

Smoking: For girls and boys, 15-16 years old, the prevalence has not changed. Among older youth, 17-18 years old, a decrease in smoking prevalence was observed.

Snus use: The prevalence of snus use has increased among boys and girls 15-16 years old, as well as among girls 17-18 years old.

Water pipe use: The prevalence of water pipe use has not changed.

Please attach the relevant documentation.

**CAN report,
Alcohol and Drug
Use Among
Students
The National
Survey of Public
Health 2019**

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Use of novel and emerging tobacco and nicotine products

	Age range	Heated tobacco products (HTPs) - Prevalence (%)	Electronic Nicotine Delivery Systems (ENDS) - Prevalence (%)	Electronic Non-Nicotine Delivery Systems (ENNDS) - Prevalence (%)	Other products - Prevalence (%)
ADULT POPULATION - Males	16-84		E-cigarette use (2018): 3 (current); 1 (daily)		
ADULT POPULATION - Females	16-84		E-cigarette use (2018): 2 (current); 1 (daily)		
ADULT POPULATION - Total (males and females)	16-84		E-cigarette use (2018): 2 (current); 1 (daily)		
YOUNG PERSONS - Boys	15-16		E-cigarette use (2019): 9 (past 30 days); 37 (tried)		
YOUNG PERSONS - Girls	15-16		E-cigarette use (2019): 5 (past 30 days); 27 (tried)		
YOUNG PERSONS - Total (boys and girls)	15-16		E-cigarette use (2019): 7 (past 30 days); 33 (tried)		

B2-B9. HEALTH, SOCIAL AND ECONOMIC INDICATORS

Exposure to tobacco smoke

Do you have any data on exposure to tobacco smoke in your population?

Yes ✓

Please provide details in the space below (e.g. exposure by gender, at home, in the workplace, on public transport).

- Exposure by gender and indoor exposures (at home, in the workplace, in public places, e.g. restaurants/café and other). Data source: Public Health Agency of Sweden (2014). The National Survey of Public Health - Health on Equal Terms.

<https://www.folkhalsomyndigheten.se/folkhalsorapportering-statistik/om-vara-datainsamlingar/nationella-folkhalsoenkaten/>

- Exposure by gender, at home, on the balcony/outdoor area near home, in the workplace, other places (e.g. visit friends or in the car) and outdoor places (e.g. commercial outdoor dining areas, public transport stations and stops and entrances). Data source: Public Health Agency of Sweden (2015). The Environmental Health Survey.

<https://www.folkhalsomyndigheten.se/publicerat-material/publikationsarkiv/m/miljohalsorapport-2017/>

- Outdoor exposures (sport arenas, sidewalks, playgrounds, commercial outdoor dining areas, public transport stations and stops and public entrances). Data source: Public Health Agency of Sweden (2019). Hälsorapports junienkät om rökfria miljöer.

<https://www.halsorapport.se/sv/resultat/resultat-juni-2019/>

Please indicate the year of the data used to answer question B21:

2014

Please indicate the source of the data used to answer question B21:

Public Health Agency of Sweden (2014). The National Survey of Public Health - Health on Equal Terms.

Please attach the relevant documentation.

Tobacco-related mortality

Do you have information on tobacco-related mortality in your population?

Yes ✓

What is the estimated total number of deaths attributable to tobacco use in your population?

11881

If available, please provide any additional information on mortality attributable to tobacco use (e.g. lung cancer, cardiovascular diseases) in your jurisdiction.

Please note that the following numbers are for smoking related death only.

Incidence of smoking related death per year 2010-2012: 11 881

Cancer: 5 250 cases

Diseases of the lung: 2 855 cases

Cardiovascular disease: 3 513 cases

Adverse pregnancy outcomes: 3 cases

Other: 260 cases

Please indicate the year of the data used to answer question B32 and 33:

2012

Please indicate the source of the data used to answer questions B32 and B33:

The National Board of Health and Welfare. Registeruppgifter om tobaksrökningens skadeverkningar (Register information about the harm of tobacco smoking). Stockholm: The National Board of Health and Welfare, 2014.

Please submit a copy of the study you refer to:

No comment

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Tobacco-related costs

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?

Yes ✓

Please provide details (e.g. direct (health care-related) and indirect costs and, if possible, the method used to estimate these costs).

The estimated total cost due to smoking in Sweden 2013 was 31 billion SEK. The cost for health care services (direct costs) accounted for 2.5 billion SEK and productivity losses (indirect costs) for 7.2 billion SEK. Productivity losses included costs due to early retirement and early death. Other costs associated with sick leave caused by smoking were approximately 21.3 billion SEK. The study employed a top-down methodology to estimate the different cost components and used lost gross annual income as the measure of lost production during a person-year. For the estimates on relative risks and Swedish smoking patterns, published studies on attributable risks for smokers and former smokers were used. These were applied to cost estimates for smoking-related diseases based on data from public Swedish registers.

Bolin, K and Lindgren, B (2007). Smoking, healthcare cost, and loss of productivity in Sweden 2001. Scand J Public Health. 2007; 35(2):187-96. Please note that the cost figures are adjusted from 2001 to 2013 by using the Swedish Consumer Price Index.

Please indicate the year of the data used to answer question B42:

2007

Please indicate the source of the data used to answer question B42:

Bolin, K and Lindgren, B (2007). Smoking, healthcare cost, and loss of productivity in Sweden 2001. Scand J Public Health. 2007; 35(2):187-96. Please note that the cost figures are adjusted from 2001 to 2013 by using the Swedish Consumer Price Index.

Please submit a copy of the study you refer to:

Supply of tobacco and tobacco products

(with reference to Articles 6.2(b), 20.4(c), and 15.5)

Licit supply of tobacco products

Product	Unit (e.g. pieces, tonnes)	Domestic production	Retail sales	Exports	Imports
Smoking tobacco products	kg			19 081 488	18 416
Smokeless tobacco products	kg			35 916 555	12 823
Other tobacco products	kg			4 298 988	4 686 276

Please provide information on the volumes of duty-free sales (e.g. product, unit, quantity), if available.

Please indicate the year of the data used to answer question B51 and 52:

2019

Please indicate the source of the data used to answer questions B51 and B52:

Anna Björklund Swedish Customs (anna.bjorklund@tullverket.se)

Please attach the relevant documentation.

Seizures of illicit tobacco products

(with reference to Article 15.5)

Seizures of illicit tobacco

	Year	Product	Unit (e.g. pieces, tonnes)	Quantity seized
Smoking tobacco products	2019	Cigarettes	pieces	42 425 602,60
Smoking tobacco products	2019	Cigars/cigarillos	pieces	17 199,00
Smoking tobacco products	2019	Hand rolling tobaccos	kg	8 900,17
Smoking tobacco products	2019	snus	kg	390,03

Do you have any information on the percentage of illicit tobacco products on the national tobacco market?

Yes ✓

What percentage of the national tobacco market do illicit tobacco products constitute? (%)

0.8

What is the trend over the past two years or since submission of your last report in the percentage of illicit tobacco products in relation to the national tobacco market?

A decrease.

2016:1,1%

2017:1,4 %

2018: 0,8%

Please provide any further information on illicit tobacco products.

Please indicate the source of the data used to answer questions in section B6:

Källa: Zetterqvist, M (red)(2019) Tobaksvanor i Sverige 2003–2018. CAN-rapport 183.

Please attach the relevant documentation.

Report 151 No comment

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Tobacco-growing

Is there any tobacco-growing in your jurisdiction?

No ✘

Please indicate the year of the data used to answer questions in section B7:

Please indicate the source of the data used to answer questions in section B7:

Please attach the relevant documentation.

Taxation of tobacco products

(with reference to Articles 6.2(a) and 6.3)

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))?

68

How are the excise taxes levied (what types of taxes are levied)?

Specific tax only	Yes
Ad valorem tax only	No
Combination of specific and ad valorem taxes	Yes
More complex structure (please explain below)	No

If available, please provide details on the rates of taxation for tobacco products at all levels of Government and be as specific as possible (specify the type of tax, e.g. VAT, sales, import duties)

	Product	Type of tax	Rate or amount	Base of tax ⁵
Smoking tobacco products	Cigarettes	specific excise	EUR 160.03	Per 1000
Smoking tobacco products	Cigarettes	Ad valorem	1 %	Tax Inclusive Retail Selling Price
Smoking tobacco products	Cigarettes	VAT	25 %	On sales price
Smoking tobacco products	Cigars and cigarillos	specific excise	EUR 141.33	Per 1000
Smoking tobacco products	Cigars and cigarillos	VAT	25 %	On sales price
Smoking tobacco products	Fine cut smoking tobacco	specific excise	EUR195.79	Per 1000
Smoking tobacco products	Fine cut smoking tobacco	VAT	25 %	On sales price
Smokeless tobacco products	Snuff	Specific excise	EUR 45.93	Per kg
Smokeless tobacco products	Snuff	VAT	25 %	On sales price
Smokeless tobacco products	Chewing tobacco	Specific excise	EUR 50.61	Per kg
Smokeless tobacco products	Chewing tobacco	VAT	25 %	On sales price

Please briefly describe the trends in taxation for tobacco products in the past two years or since submission of your last report in your jurisdiction.

The tax rates are increasing, more information is available on page 182 in the following publication:

<https://www.regeringen.se/4ad5e6/contentassets/eab5f519d5ad4ade95b02390c700b2ff/berakningskonventioner-2020.pdf>

but there is no direct relation between excise duty rate and generated income for the state (more information is available on page 183 in the publication above) as the consumption may go down when the price goes up.

Do you earmark any percentage of your taxation income for funding any national plan or strategy on tobacco control in your jurisdiction?

No ✘

Please indicate the year of the data used to answer questions B81 to B86:

2018

Please indicate the source of the data used to answer questions B81 to B86:

Mattias Qvist, mattias.qvist@skatteverket.se.

Please attach the relevant documentation.

Price of tobacco products

(with reference to Articles 6.2(a))

Domestic

Please provide the retail prices of the three most widely sold brands of domestic tobacco products at the most widely used point of sale in your capital city.

Name of the most widely sold brands Number of units or amount per package Retail price Currency

Imported

Please provide the retail prices of the three most widely sold brands of imported tobacco products at the most widely used point of sale in your capital city.

	Name of the most widely sold brands	Number of units or amount per package	Retail price	Currency
Smoking tobacco products	Level	19	47	SEK
Smoking tobacco products	Marlboro	19	56	SEK
Smoking tobacco products	L&M	19	47	SEK

Please indicate the year of the data used to answer question B91:

2014

Please indicate the source of the data used to answer question B91:

Tobacco companies

Please briefly describe the trend in the prices of tobacco products in the past two years or since submission of your last report in your jurisdiction.

Please attach the relevant documentation.

C1. GENERAL OBLIGATIONS

With reference to Article 5

Have you developed and implemented comprehensive multisectoral national tobacco control strategies, plans and programmes in accordance with the Convention?

Yes ✓

Have you established or reinforced and financed:

a focal point for tobacco control? Yes

a tobacco control unit? Yes

a national coordinating mechanism for tobacco control? Yes

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).

The focal point for tobacco control with regards to policymaking is a government official based at the Ministry of Health and Social Affairs.

The Public Health Agency, a government agency, functions as the national coordinating mechanism concerning evidence-based tobacco prevention and tobacco statistics. The agency has central supervisory responsibility with regard to the law on tobacco and similar Products (2018:2088) relating to smoke-free environments, sales, labelling and product control.

The Swedish Consumer Agency exercise central supervisory responsibility regarding marketing.

The Swedish Work Environment Authority has central supervisory responsibility relating to smoke-free work environments.

The county administrative boards have regional supervisory responsibility whereas the municipalities and the police exercise immediate supervisory responsibility in accordance with the law on tobacco and similar Products (2018:2088).

The Swedish Tax Agency and the Swedish Customs are responsible for making sure that customs duties, taxes and charges associated with tobacco trade are collected and that illicit import of tobacco products is counteracted.

Please provide a brief description of the progress made in implementing Article 5.1 and 5.2 (*General obligations*) in the past two years or since submission of your last report.

Sweden has adopted a new law on tobacco and similar Products (2018:2088)

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

Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry

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:

protecting public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry?

No

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?

No

Please provide a brief description of the progress made in implementing Article 5.3 in the past two years or since submission of your last report.

Have you utilized the "Guidelines for implementation of Article 5.3 of the WHO FCTC" when developing or implementing policies in this area?

No

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

Sweden has not adopted any program or any legal measures explicitly aimed at protecting public Health policies from Commercial and other vested interests of the Tobacco industry. There are however general rules of public law, objectivity and impartiality. Provision relating to disqualification of officials due to personal interest serve a related purpose.

The NGO, The Swedish Think Tank Tobaksfakta, has in 2014 published a guide about protecting public health policy against tobacco industry: Skydda folkhälsopolitiken mot tobaksindustrin – en vägledning. <http://tobaksfakta.se/bokbestallning2/>

Please attach the relevant documentation.

C2. MEASURES RELATING TO THE REDUCTION OF DEMAND FOR TOBACCO

With reference to Articles 6–14

Price and tax measures to reduce the demand for tobacco

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:

tax policies and, where appropriate, price policies on tobacco products so as to contribute to the health objectives aimed at reducing tobacco consumption?

Yes ✓

prohibiting or restricting, as appropriate, sales to international travellers of tax- and duty-free tobacco products?

Yes ✓

prohibiting or restricting, as appropriate, imports by international travellers of tax- and duty-free tobacco products?

Yes ✓

Please provide a brief description of the progress made in implementing Article 6 (*Price and tax measures to reduce the demand for tobacco*) in the past two years or since submission of your last report.

Sweden has had minor tax increases on tobacco in both 2018, 2019 and 2020 due to indexation based on consumer price index.

Have you utilized the “Guidelines for implementation of Article 6 of the WHO FCTC” when developing or implementing policies in this area?

No ✘

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

Please attach the relevant documentation.

Protection from exposure to tobacco smoke

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:

banning tobacco smoking in indoor workplaces, public transport, indoor public places and, as appropriate, other public places ?

Yes ✓

What is the type/nature of the measure providing for the ban?

national law	Yes
subnational law(s)	Yes
administrative and executive orders	Yes
voluntary agreements	Yes
other measures (please specify in C223 below)	Yes

Please provide a brief explanation of the type/nature and content of the measures providing for the ban.

Smoking is banned in all described areas. It is however possible to arrange designated smoking areas. In addition to legal requirements, the social norm of none-smoking in public areas has been widely accepted which in turn has resulted in relatively few designated smoking areas. This is in a large part due to individual policies on completely smoke-free airplanes, trains, ferries, hotels and health-care facilities.

Do any of these measures provide for a mechanism/ infrastructure for enforcement?

Yes ✓

Please provide details of this system.

It is possible, according to law on tobacco and similar Products (2018:2088) 7 kap. 2 and 9 §§, for a local authority to apply an administrative injunction which can be combined with an administrative fine. The sanction should be used to stop and to prevent that smoking occurs where it is forbidden according to e.g. law on tobacco and similar Products (2018:2088) 6 kap. 2 §.

https://www.riksdagen.se/sv/dokument-lagar/dokument/svensk-forfattningssamling/lag-20182088-om-tobak-och-liknande-produkter_sfs-2018-2088

Please specify the settings and extent/comprehensiveness of measures applied in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.

Indoor workplaces:

government buildings	Partial
health-care facilities	Partial
educational facilities ⁶	Partial
universities	Partial
private workplaces	Partial
other (please specify below)	

Please specify the settings and extent/comprehensiveness of measures applied in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.

Public transport:

airplanes	Complete
trains	Complete
ferries	Partial
ground public transport (buses, trolleybuses, trams)	Complete
motor vehicles used as places of work (taxis, ambulances, delivery vehicles)	Partial
private vehicles	None
other (please specify below)	

Please specify the settings and extent/comprehensiveness of measures applied in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.

Indoor public places:

cultural facilities	Partial
shopping malls	Partial
pubs and bars	Partial
nightclubs	Partial
restaurants	Partial
other (please specify below)	

Please provide a brief summary of complete and partial measures, with specific details of the partial measures that have been implemented:

Banning tobacco smoking in indoor workplaces

Employers are responsible to assure that employees do not become exposed to tobacco smoke in the workplace (or at a similar place where the employee is active) against his or her will.

Banning tobacco smoking in public transport

It is permitted to arrange designated smoking areas.

Banning tobacco smoking in indoor public places

It is permitted to arrange designated smoking areas.

Please provide a brief description of the progress made in implementing Article 8 (*Protection from exposure to tobacco smoke*) in the past two years or since submission of your last report.

Sweden has adopted a new law on tobacco and similar Products (2018:2088). In the new law the current ban on smoking in the Tobacco Act shall be broadened and also include certain public places outdoors, such as café and restaurant terraces, entrances to establishments and other spaces to which the public has access, areas outdoors that are intended to be used by those travelling by domestic public transport, and playgrounds to which the public has access.

https://www.riksdagen.se/sv/dokument-lagar/dokument/svensk-forfattningssamling/lag-20182088-om-tobak-och-liknande-produkter_sfs-2018-2088

<http://www.regeringen.se/rattsdokument/proposition/2018/03/prop.-201718156/>

Have you utilized the "Guidelines for implementation of Article 8 of the WHO FCTC" when developing or implementing policies in this area?

No ✘

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

All indoor public places are smoke-free including restaurants and bars. Designated smoking rooms are however permitted, but only if they are situated so that nobody has to pass through them in order to reach other parts of the premises. No serving is allowed in the smoking rooms. Smoking rooms must have adequate ventilation to ensure that pollutants from the smoking do not spread to other parts of the premises. Some areas do not have legal support to be qualified as non-smoking areas, but due to successful policies these areas are perceived as non-smoking areas. There is a notion that the law is "complete", when it is more accurate to say that it has contributed to a national standard stating that certain areas should be smoke-free

The Public Health Agency of Sweden has been commissioned to investigate and analyze the presence of passive smoking in public areas and particularly where children are present. The commission also involved providing proposals for measures to further reduce passive smoking in these areas. As indoor smoking is currently already regulated by the law, the commission entailed focusing on outdoor public places. A report on the findings and suggestions was published in 2014. <http://www.folkhalsomyndigheten.se/documents/om-myndigheten/uppdrag-styrdokument/avslutade/slutrapport-utredning-framtida-rokfria-miljoer.pdf>

Please attach the relevant documentation.

Regulation of the contents of tobacco products

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:

testing and measuring the contents of tobacco products?

Yes ✓

testing and measuring the emissions of tobacco products?

Yes ✓

regulating the contents of tobacco products?

Yes ✓

regulating the emissions of tobacco products?

Yes ✓

Please provide a brief description of the progress made in implementing Article 9 (*Regulation of the contents of tobacco products*) in the past two years or since submission of your last report.

Nothing new since last report.

Have you utilized the "Guidelines for implementation of Articles 9 and 10 of the WHO FCTC" when developing or implementing policies in this area?

No ✗

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below (e.g., whether your country 1) has incorporated product regulation in the national tobacco control legislation; 2) has access to either governmental or independent – not owned or controlled by the tobacco industry – laboratories for testing contents and/or emissions of tobacco products; 3) has regulated ingredients, such as flavours (e.g. menthol); 4) has regulated product characteristics, such as design features (e.g., cigarette ventilation); etc.).

Please attach the relevant documentation.

Regulation of tobacco product disclosures

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:

requiring manufacturers or importers of tobacco products to disclose to Government authorities information about the:

contents of tobacco products? Yes

emissions of tobacco products? Yes

requiring public disclosure of information about the:

contents of tobacco products? Yes

emissions of tobacco products? No

Please provide a brief description of the progress made in implementing Article 10 (*Regulation of tobacco product disclosures*) in the past two years or since submission of your last report.

No progress. No implement concerning effective measures to ensure that the public is informed of the toxic substances in the tobacco products and the emissions that they may give rise to has been made.

In Excel files, published on the website, have the tobacco products that have been reported to the Public Health Authority been listed.

Have you utilized the "Guidelines for implementation of Articles 9 and 10 of the WHO FCTC" when developing or implementing policies in this area?

No ✘

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below (e.g. whether your country has incorporated tobacco product disclosures in the national tobacco control legislation; has regulated the public disclosure of toxic constituents and emissions of tobacco products, aiming to raise public awareness and advance tobacco control policy; etc.).

Please attach the relevant documentation.

Packaging and labelling of tobacco products

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:

requiring that packaging, individual cigarettes or other tobacco products do not carry advertising or promotion?

Yes ✓

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?

Yes ✓

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?

Yes ✓

ensuring that the health warnings are approved by the competent national authority?

No ✘

ensuring that the health warnings are rotated?

Yes ✓

ensuring that the health warnings are clear, visible and legible?

Yes ✓

Does your law mandate, as a minimum, a style, size and colour of font to render the warning clear, visible and legible?

Yes ✓

ensuring that the health warnings occupy no less than 30% of the principal display areas?

Yes ✓

ensuring that the health warnings occupy 50% or more of the principal display areas?

Yes ✓

ensuring that health warnings are in the form of, or include, pictures or pictograms?

Yes ✓

Does the Government own the copyright to these pictures and pictograms?

No ✗

Would you grant a non-exclusive and royalty-free licence for the use of health warnings developed in your jurisdiction with other Parties?

No ✗

requiring that each unit packet and package of tobacco products and any outside packaging and labelling of such products contain information on relevant:

constituents of tobacco products?	No
emissions of tobacco products?	No

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?

Yes ✓

Please provide a brief description of the progress made in implementing Article 11 (*Packaging and labelling of tobacco products*) in the past two years or since submission of your last report.

Nothing new since last report.

Have you utilized the "Guidelines for implementation of Article 11 of the WHO FCTC" when developing or implementing policies in this area?

No ✗

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

Please attach the relevant documentation.

Education, communication, training and public awareness

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:

educational and public awareness programmes? *(Please refer to programmes implemented since submission of your two-year report.)*

Yes ✓

To whom are these programmes targeted?

adults or the general public
 children and young people
 men
 women
 pregnant women
 ethnic groups
 other (please specify)
 Other

Do you reflect the following key differences among targeted population groups in educational and public awareness programmes?

age
 gender
 educational background
 cultural background
 socioeconomic status
 other (please specify)
 Other

Do these educational and public awareness programmes cover:

health risks of tobacco consumption?
 health risks of exposure to tobacco smoke?
 benefits of the cessation of tobacco use and tobacco-free
 lifestyles?
 adverse economic consequences of tobacco production?
 adverse economic consequences of tobacco consumption?
 adverse environmental consequences of tobacco
 production?
 adverse environmental consequences of tobacco
 consumption?

awareness and participation of the following agencies and organizations in development and implementation of intersectoral programmes and strategies for tobacco control:

- public agencies?
- nongovernmental organizations not affiliated with the tobacco industry?
- private organizations?
- other (please specify)?
- Other

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?

Yes ✓

Are appropriate and special training or sensitization and awareness programmes on tobacco control addressed to:

- health workers?
- community workers?
- social workers?
- media professionals?
- educators?
- decision-makers?
- administrators?
- other (please specify)
- Other

Please provide a brief description of the progress made in implementing Article 12 (*Education, communication, training and public awareness*) in the past two years or since submission of your last report.

Have you utilized the "Guidelines for implementation of Article 12 of the WHO FCTC" when developing and implementing policies in this area?

No ✘

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

Please attach the relevant documentation.

Tobacco advertising, promotion and sponsorship

Have you adopted and implemented, where appropriate, any legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes:

instituting a comprehensive ban on all tobacco advertising, promotion and sponsorship?

Yes ✔

Does your ban cover:

- display and visibility of tobacco products at points of sales?
- the domestic Internet?
- the global Internet?
- brand stretching and/or brand sharing?
- product placement as a means of advertising or promotion?
- the depiction of tobacco or tobacco use in entertainment media products?
- tobacco sponsorship of international events or activities and/or participants therein?
- 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?
- cross-border advertising, promotion and sponsorship originating from your territory?
- the same forms of cross-border advertising, promotion and sponsorship entering your territory for which domestic regulation apply?

cooperating with other Parties in the development of technologies and other means necessary to facilitate the elimination of cross-border advertising?

No ✘

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?

No ✘

Please provide a brief description of the progress made in implementing Article 13 (*Tobacco advertising, promotion and sponsorship*) in the past two years or since submission of your last report.

Sweden has passed a new law on tobacco and similar Products (2018:2088). In dealing with this, the Riksdag decided not to adopt the proposals for amended provisions on the marketing of tobacco products. The committee argued that the Government should return to Parliament with legislative proposals on the marketing of tobacco products on the Internet.

An investigation has now been set up where the investigator will analyze the Swedish rules on marketing and sponsorship of tobacco, e-cigarettes and refill containers.

https://www.regeringen.se/4906aa/contentassets/6dd172eb91b2423dbe496579aaf0b459/dir.-2020_9.pdf

Regulations on marketing and sponsorship of tobacco products, e-cigarettes and refill containers relate to EU rules.

Have you utilized the "Guidelines for implementation of Article 13 of the WHO FCTC" when developing and implementing policies in this area?

No ✘

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

Please attach the relevant documentation.

Demand reduction measures concerning tobacco dependence and cessation

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:

developing and disseminating appropriate, comprehensive and integrated guidelines based on scientific evidence and best practices?

Yes ✔

programmes to promote cessation of tobacco use, including:

- media campaigns emphasizing the importance of quitting?
- programmes specially designed for underage girls and young women?
- programmes specially designed for women?
- programmes specially designed for pregnant women?
- telephone quitlines?
- local events, such as activities related to World No Tobacco Day or National No Smoking Day, if appropriate?
- other (please specify)?
- Other

design and implementation of programmes aimed at promoting the cessation of tobacco use, in such locations as:

- educational institutions?
 - health-care facilities?
 - workplaces?
 - sporting environments?
 - other (please specify)?
 - Other
-

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?
- health?
- education?

inclusion of programmes on the diagnosis and treatment of tobacco dependence in your health-care system?

Yes ✓

Which structures in your health-care system provide programmes for the diagnosis and treatment of tobacco dependence?

- primary health care
- secondary and tertiary health care
- specialist health-care systems (please specify below)
- specialized centres for cessation counselling and treatment of tobacco dependence
- rehabilitation centres
- Other

Are the services provided in these settings covered by public funding or reimbursement schemes?

primary health care	Partially
secondary and tertiary health care	Partially
specialist health-care systems (please specify below)	Partially
specialized centres for cessation counselling and treatment of tobacco dependence	Partially
rehabilitation centres	Partially
other (please specify below)	

Which health and other professionals are involved in programmes offering treatment for tobacco dependence and counselling services?

Health professionals including:

- physicians
- dentists
- family doctors
- practitioners of traditional medicine
- other medical professionals (please specify below)
- nurses
- midwives
- pharmacists
- Community workers
- Social workers
- other (please specify)
- physiotherapists, psychologist
- Other

training on tobacco dependence treatment incorporated into the curricula of health professional training at pre- and post-qualification levels at the following schools:

- medical?
- dental?
- nursing?
- pharmacy?
- Other

facilitating accessibility and/or affordability of pharmaceutical products for the treatment of tobacco dependence?

Yes ✓

Where and how can these products be legally purchased in your country?

Pharmacias, supermarkets or equivalent.

Which pharmaceutical products are legally available for the treatment of tobacco dependence in your jurisdiction?

- nicotine replacement therapy
- bupropion
- varenicline
- other (please specify)
- Other

Are the costs of these products covered by public funding or reimbursement?

- nicotine replacement therapy Partially
- bupropion Partially
- varenicline Partially
- other (please specify below)

Please provide a brief description of the progress made in implementing Article 14 (*Demand reduction measures concerning tobacco dependence and cessation*) in the past two years or since submission of your last report.

Have you utilized the "Guidelines for implementation of Article 14 of the WHO FCTC" when developing and implementing policies in this area?

No ✘

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

Please attach the relevant documentation.

C3. MEASURES RELATING TO THE REDUCTION OF THE SUPPLY OF TOBACCO

With reference to Articles 15–17

Illicit trade in tobacco products

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:

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?

Yes ✓

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?

Yes ✓

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?

Yes ✓

developing a practical tracking and tracing regime that would further secure the distribution system and assist in the investigation of illicit trade?

Yes ✓

requiring that marking is presented in legible form and/or appears in the principal language or languages of the country?

Yes ✓

requiring the monitoring and collection of data on cross-border trade in tobacco products, including illicit trade?

Yes ✓

facilitating 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?

Yes ✓

enacting or strengthening legislation, with appropriate penalties and remedies, against illicit trade in tobacco products, including counterfeit and contraband cigarettes?

Yes ✓

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?

Yes ✓

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?

Yes ✓

enabling the confiscation of proceeds derived from illicit trade in tobacco products?

Yes ✓

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?

Yes ✓

licensing or other actions to control or regulate production and distribution in order to prevent illicit trade?

No ✗

Please provide a brief description of the progress made in implementing Article 15 (*Illicit trade in tobacco products*) in the past two years or since submission of your last report.

Sweden has passed a new law on tobacco and similar Products (2018:2088). Articles 15 and 16 of the Directive on traceability and safety marking have been implemented in the new law. According to the directive, these provisions will apply on May 20, 2019 in the case of cigarettes and rolling tobacco and on May 20, 2024, in the case of other tobacco products. Sweden has successfully implemented the EU regulation on track & trace and security features.

https://www.riksdagen.se/sv/dokument-lagar/dokument/svensk-forfattningssamling/lag-20182088-om-tobak-och-liknande-produkter_sfs-2018-2088

<http://www.regeringen.se/rattsdokument/proposition/2018/03/prop.-201718156/>

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

Within Sweden, from 2014, EMCS (Excise Movement and Control System) is applicable as a control system. EMCS is an electronic system that must be used by authorized operators when products are moved under duty, which is meant to ease the administrative management of the company and to enable an effective fiscal control of the delivery of alcohol, tobacco and certain energy products across the EU.

<http://www.skatteverket.se/foretagorganisationer/skatter/punktskatter/tobaksskatt/nyheter2015/nyheter1april2014.4.77dbcb041438070e03962cf.htm>

Please attach the relevant documentation.

Sales to and by minors

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:

prohibiting the sales of tobacco products to minors?

Yes ✓

Please specify the legal age:

18

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?

Yes ✓

requiring that, in case of doubt, each seller of tobacco products requests that the purchaser provides appropriate evidence of having reached full legal age?

Yes ✓

banning the sale of tobacco products in any manner by which they are directly accessible, such as open store shelves?

Yes ✓

prohibiting the manufacture and sale of sweets, snacks, toys or any other objects in the form of tobacco products which appeal to minors?

No ✗

prohibiting the sale of tobacco products from vending machines?

No ✗

Do you ensure that tobacco vending machines are not accessible to minors and/or do not promote the sale of tobacco products to minors?

Yes ✓

prohibiting and/or promoting the prohibition of the distribution of free tobacco products:

to the public?

to minors?

prohibiting the sale of cigarettes individually or in small packets?

Yes ✓

providing for penalties against sellers and distributors in order to ensure compliance?

Yes ✓

prohibiting the sales of tobacco products by minors?

No ✗

Please provide a brief description of the progress made in implementing Article 16 (*Sales to and by minors*) in the past two years or since submission of your last report.

No progress.

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

Please attach the relevant documentation.

Provision of support for economically viable alternative activities

Have you adopted and implemented, where appropriate, measures or programmes on any of the following:

promoting economically viable and sustainable alternatives for:

tobacco growers?	Not applicable
tobacco workers?	Not applicable
tobacco individual sellers?	Not applicable

Please provide a brief description of the progress made in implementing Article 17 (*Provision of support for economically viable alternative activities*) in the past two years or since submission of your last report.

Have you utilized the "Policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)" when developing and implementing policies in this area?

No

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

Please attach the relevant documentation.

C4. OTHER MEASURES AND POLICIES

With reference to Articles 18–21

Protection of the environment and the health of persons

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:

implementing measures in respect of tobacco cultivation within your territory, which take into consideration:

the protection of the environment?	Not applicable
the health of persons in relation to the environment?	Not applicable

implementing measures in respect of tobacco manufacturing within your territory, which take into consideration:

the protection of the environment?	No
the health of persons in relation to the environment?	No

Please provide a brief description of the progress made in implementing Article 18 (*Protection of the environment and the health of persons*) in the past two years or since submission of your last report.

Have you utilized the "Policy options and recommendations on economically sustainable alternatives to tobacco growing (in relation to Articles 17 and 18 of the WHO FCTC)" when developing and implementing policies in this area?

No

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

Please attach the relevant documentation.

Liability

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:

Does your tobacco control legislation contain measures regarding criminal liability for any violations of that tobacco control legislation?

Yes

Do you have separate criminal liability provisions in relation to tobacco control (outside of the tobacco control legislation)?

Yes

Do you have any civil liability measures that are specific to tobacco control?

No

Do you have any general civil liability provisions that could apply to tobacco control?

Yes

Do you have civil or criminal liability provisions that provide for compensation for adverse health effects and/or for reimbursement of medical, social or other relevant costs?

No

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?

No

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?

No

Please provide a brief description of any progress made, as appropriate, in implementing Article 19 (*Liability*) in the past two years or since submission of your last report.

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

Regarding C425. Sweden do not have special provisions that provide for compensation for adverse health effects and/or for reimbursement of medical, social or other relevant costs. However, general provisions may be applicable.

Please attach the relevant documentation.

Research, surveillance and exchange of information

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:

developing and/or promoting research that addresses:

- determinants of tobacco consumption?
- consequences of tobacco consumption?
- social and economic indicators related to tobacco consumption?
- tobacco use among women, with special regard to pregnant women?
- the determinants and consequences of exposure to tobacco smoke?
- identification of effective programmes for the treatment of tobacco dependence?
- identification of alternative livelihoods?
- Other

training and support for all persons engaged in tobacco control activities, including research, implementation and evaluation?

No ✘

a national system for epidemiological surveillance of:

- patterns of tobacco consumption?
- determinants of tobacco consumption?
- consequences of tobacco consumption?
- social, economic and health indicators related to tobacco consumption?
- exposure to tobacco smoke?
- Other

Please list all surveys, including the year of the survey, that you have undertaken in the past.

With the purpose of assigning goals and a general direction to society's efforts within alcohol, narcotics, doping and tobacco prevention for 2011–2015, the Swedish Parliament has adopted the Government bill "A Cohesive Strategy for Alcohol, Narcotic Drugs, Doping and Tobacco Policy" (prop. 2010/11:47), also known as "the ANDT-strategy". The strategy continues 2016-2020. An important part of the strategy is to develop a long-term system of indicators, making it possible to monitor development in the field of alcohol, narcotic drugs, doping and tobacco. This system was implemented in 2013 and include indicators as mortality. <http://www.andtuppfoljning.se/> (in Swedish and English).

The Public Health Agency conducts a national public health survey annually (biannually from 2016) titled "Health on equal terms?" involving a randomized sample of 20 000 individuals, 16-84. The aim of the survey is to monitor how people in general perceive their health and to monitor changes in the population over time. Both smoking and snuff habits and exposure to tobacco smoke. For more information on the survey please visit: <http://folkhalsomyndigheten.se/amnesomraden/statistik-och-undersokningar/enkater-och-undersokningar/nationella-folkhalsoenkaten/levnadsvanor/tobaksvanor/>

CAN (The Swedish Council for Information on Alcohol and Other Drugs) conducts a yearly nation-wide school survey on tobacco and other drugs among students in year nine and eleven. The results from the survey are published in a report called "Skolelevers drogvanor" (Alcohol and Drug Use Among Students). <http://can.se/sv/Undersokningar/Skolelevers-drogvanor1/> (only in Swedish).

The government has given The National Board of Health and Welfare to investigate the possibility of developing a method for measuring tobacco-related morbidity and mortality from existing records. This new report from 2014 calculates mortality and morbidity from smoking-related diseases based on records from The National Board of Health and Welfare and Statistic Sweden. <http://www.socialstyrelsen.se/publikationer2014/2014-3-4> (only in Swedish).

Bolin, K and Lindgren, B (2007). Smoking, healthcare cost, and loss of productivity in Sweden 2001. Scand J Public Health. 2007; 35(2):187-96.

Does your country have any plans to repeat any of the above or to undertake a new tobacco survey within three to five years of your last survey? Please provide details in the space below.

The Public Health survey "Health on equal terms" is a biannual survey (from 2016). Will be repeated (next survey 2020).
CAN (The Swedish Council for Information on Alcohol and Other Drugs) annual survey. Will be repeated.

regional and global exchange of publicly available national:

- scientific, technical, socioeconomic, commercial and legal information?
- information on the practices of the tobacco industry?
- information on the cultivation of tobacco?

an updated database of:

- laws and regulations on tobacco control?
- information about the enforcement of laws on tobacco control?
- pertinent jurisprudence?

Please provide a brief description of the progress made in implementing Article 20 (*Research, surveillance and exchange of information*) in the past two years or since submission of your last report.

The Government bill "A Cohesive Strategy for Alcohol, Narcotic Drugs, Doping and Tobacco Policy" (prop. 2010/11:47), also known as "the ANDT-strategy", continues 2016-2020. One important part of the strategy is to support more research and develop evidence based methods concerning alcohol, Narcotic Drugs, Doping and Tobacco. The Government is preparing a new ANDT-strategy that is planned to continue from 2021.

If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below (e.g. whether you included information on WHO FCTC implementation in your Voluntary National Review (VNR) on the Sustainable Development Goals (SDGs), related to target 3.a).

Please attach the relevant documentation.

D. INTERNATIONAL COOPERATION AND ASSISTANCE

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:

development, transfer and acquisition of technology, knowledge, skills, capacity and expertise related to tobacco control?

Assistance provided	No
Assistance received	No

provision of technical, scientific, legal and other expertise to establish and strengthen national tobacco control strategies, plans and programmes?

Assistance provided No
Assistance received No

appropriate training or sensitization programmes for appropriate personnel in accordance with Article 12?

Assistance provided No
Assistance received No

provision of the necessary material, equipment and supplies, as well as logistic support, for tobacco control strategies, plans and programmes?

Assistance provided No
Assistance received No

identification of methods for tobacco control, including comprehensive treatment of nicotine addiction?

Assistance provided No
Assistance received No

promotion of research to increase the affordability of comprehensive treatment of nicotine addiction?

Assistance provided No
Assistance received No

Please provide information about any assistance provided or received in the space below, including any support received from nongovernmental organizations (please, specify).

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.

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?

No ✘

E. PRIORITIES AND COMMENTS

What are the priorities for implementation of the WHO Framework Convention on Tobacco Control in your jurisdiction?

The Swedish priorities are set out in the government cohesive strategy for alcohol, narcotic drugs, doping and tobacco (ANDT) policy 2016-2020, adopted in February 2016. The Government is preparing a new ANDT-strategy that is planned to continue from 2021.

<http://www.regeringen.se/rattsdokument/skrivelse/2016/02/skr.20151686/>

Have you identified any specific gaps between the resources available and the needs assessed for implementing the WHO Framework Convention on Tobacco Control?

Yes ✔

Please provide details in the space below.

Conclusions from the assessment of previous strategy for alcohol, narcotic drugs, doping and tobacco (ANDT) policy 2011-2015 may be found in the revised strategy.

<http://www.regeringen.se/rattsdokument/skrivelse/2016/02/skr.20151686/>

What, if any, are the constraints or barriers, other than lack of resources, you have encountered in implementing the Convention?

Conclusions from the assessment of previous strategy for alcohol, narcotic drugs, doping and tobacco (ANDT) policy 2011-2015 may be found in the revised strategy.

<http://www.regeringen.se/rattsdokument/skrivelse/2016/02/skr.20151686/>

Sweden has made progress in tobacco prevention and implemented rules in line with the WHO FCTC, but the efforts in tobacco prevention needs to continue. A governmental investigation will, among other things, review the regulation of marketing and sponsorship of tobacco products, the regulation of ENDS and make suggestions on how to regulate novel products.

Do you have any of the following products available on your national tobacco market?

- smokeless tobacco products
- water pipe tobacco
- Electronic Nicotine Delivery Systems (ENDS)
- Electronic Non-Nicotine Delivery Systems (ENNDS)
- heated tobacco products (HTPs)
- Tobacco free nicotine pouches
- Other

Have you adopted and implemented any policy or regulation that is specific to the following tobacco products?

- smokeless tobacco products
- water pipe tobacco
- Electronic Nicotine Delivery Systems (ENDS)
- Electronic Non-Nicotine Delivery Systems (ENNDS)
- heated tobacco products (HTPs)
- Other

If you have any relevant information related to questions E5 and E6, please provide details in the space below.

HTPs are covered by the ordinary tobacco regulation.

A governmental investigation will, among other things, make suggestions on how to regulate novel products including tobacco free nicotine pouches. Tobacco free nicotine pouches are covered by tax measures since 1 July 2018, but is not covered by other tobacco regulations at this moment.

Please provide any other relevant information not covered elsewhere that you consider important.

Your suggestions for further development and revision of the reporting instrument:

In future reporting, it would be of great help if a feature is added in the reporting instrument so that the parties can export questions and answers in the survey during the preparation of their responses.

