

REPORTING INSTRUMENT OF THE WHO FRAMEWORK CONVENTION ON TOBACCO CONTROL

In order to use the interactive features of the reporting instrument, please follow the instructions below. It is essential to complete the reporting instrument by providing information/data in the required format to ensure consistency and for ease of data processing and analysis.

If you use a version of Microsoft Word of before 2010:

1. Save the Microsoft Word-based document (WHO FCTC reporting instrument) to a folder on the computer that will be used to complete the questionnaire.

2. Ensure your Microsoft Word security settings allow you to run macros in this document:

(i) Under the "Tools" menu, select "Macro".

(ii) In the "Macro" menu, select "Security".

(iii) In the "Security" pop up menu, please ensure that you have selected "Medium".

3. Close and re-open the WHO FCTC reporting instrument (Microsoft Word-based document which you saved to your computer under step 1).

4. As the document is opening, a box will appear asking if you want to enable macros. The answer is yes. Click "Enable macros".

5. Once you have clicked "Enable macros", the buttons indicating that you can add new rows or new categories to the tables provided will be functional.

If you use a newer version of Microsoft Word:

1. When receiving the security warning "Some active content has been disabled", click "Enable content".

2. When receiving another security warning "Macros have been disabled", click "Enable content".

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

1.1	NAME OF CONTRACTING PARTY	BAHRAIN	
1.2	Information on national contact responsible for preparation of the report:		
	Name and title of contact officer	Dr Ejlal AlAlawi. Head, Antismoking Group	
	Full name of institution	Ministry of Health	
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1.3	Signature of government official submit	ting the report:	
	Name and title of officer	Dr Mariam AlJalhma. Assisstant Undersecretary of Public Health & Primary Care	
	Full name of institution	Ministry of Health	
	Mailing address	Ministry of Health, P.O. Box 12, Manama, Bahrain	
	Telephone number	009731729015	
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	Web page		
1.4	Period of reporting	1/1/2012-31/12/-2013	
1.5	Date the report was submitted	13 th April 2014	

1. ORIGIN OF THE REPORT

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)						
		provide prevalence data for total adult population, and identify the age ed, e.g. 15 years old and over, 18-64 years; see 2.1.1.2)					
		Prevalence (%) (please include all smoking tobacco products in prevalence data)	Average number of the most- consumed smoking tobacco product used per day				
	MALES						
	Current smokers	33.4 %					
	Daily smokers	30.6 %					
	Occasional smokers	2.8 %					
	Former smokers	15.3 %	_				
	Never smokers	51.3 %					
	FEMALES						
	Current smokers	7.01 %					
	Daily smokers	5.7 %					
	Occasional smokers	1.3 %	_				
	Former smokers	4.1 %	_				
	Never smokers	88.9 %					
	TOTAL (males and	females)					
	Current smokers	19.9 %					
	Daily smokers	17.9 %					
	Occasional smokers	2.0 %					
	Former smokers	9.6 %	_				
	Never smokers	70.5 %					

2.1.1.1	Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.1:
	Cigarettes, shisha and cigar
2.1.1.2	Please indicate the age range to which the data used to answer question 2.1.1 refer:
	20-64
2.1.1.3	Please indicate the year and source of the data used to answer question 2.1.1:
	National Noncommunicable Diseases Risk Factors Survey, 2007
2.1.1.4	Please provide the definitions of "current smoker", "daily smoker", "occasional smoker", "former smoker" and "never smoker" used in this report.
	Current Smoker: Someone who at the times of survey, Smokes in any form either daily or occasionally.
	Daily Smoker: Someone who smokes at least once day.
	Occasional Smoker: Someone who smokes / uses tobacco, but not on every day.
	Former Smokers: People who where former daily smokers but currently do not smokes at all or those who were former occasional smokers.
	Never smokers: Comprises individuals who have never smoked at all
2.1.1.5	Please provide a brief explanation of the trend in smoking prevalence in the adult population in the past two years or since submission of your last report.
	No updated data available since submission of last report

2.1.2	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)					
		Age group (adults)	Prevalence (%) (please include all smoking tobacco products in prevalence data)			
	MALES					
	Current	20-29	39.00 %			
	smokers ¹	30-39	37.20 %			
		40-49	27.80 %			
	Add age group	50-59	28.50 %			
		60-64	30.40 %			
	FEMALES					
	Current	20-29	5.90 %			
	smokers ¹	30-39	5.40 %			
		40-49	5.10 %			
	Add age group	50-59	13.60 %			
		60-64	13.20 %			
	TOTAL (male	es and females)				
	Current	20-29	24.50 %			
	smokers ¹	30-39	19.70 %			
		40-49	16.00 %			
	Add age group	50-59	20.70 %			
		60-64	19.70 %			

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

2.1.2.1	Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.2:
	Cigarettes, shisha and cigar
2.1.2.2	Please indicate the year and source of the data used to answer question 2.1.2:
	National Noncommunicable Diseases Risk Factors Survey, 2007
2.1.2.3	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.
	No updated data available since submission of last report

2.1.3	Prevalence of smol	keless tobacco use in the adult population (all)
		revalence data for total adult population, and identify the age 2, e.g. 15 years old and over, 18–64 years; see 2.1.3.2)
		Prevalence (%)
		(please include all smokeless tobacco products in prevalence data)
	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	Please indicate the smokeless tobacco products included in calculating prevalence for question 2.1.3:
2.1.3.2	Please indicate the age range to which the data used to answer question 2.1.3 refer:
2.1.3.3	Please indicate the year and source of the data used to answer question 2.1.3:
2.1.3.4	Please provide the definitions of "current user", "daily user", "occasional user", "former user" and "never user" (of smokeless tobacco products) used in this report in the space below.
2.1.3.5	Please provide a brief explanation of the trend in smokeless tobacco use in the adult population in the past two years or since submission of your last report.

2.1.4	Prevalence of smokeless tobacco use in the adult population (current users) by age group(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)					
		MALES				
	Current users ²		%			
	Add age group		%			
			%			
			%			
			%			
	FEMALES					
	Current users ²		%			
	Add age group		%			
			%			
			%			
			%			
	TOTAL (males	and females)				
	Current users ²		%			
	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 two years or since submission of your last report.

2.1.5	Tobacco use	by ethnic group	(s)		
		Ethnic group(s)	(please include a	Prevalence (%) all smoking or smo cts in prevalence a	
			Males	Females	Total (males and females)
	Current users ³		%	%	%
			%	%	%
	Add ethnic group		%	%	%
			%	%	%
			%	%	%
2.1.5.1	Please indicate the tobacco products included in the answer to question 2.1.5:			estion 2.1.5:	
2.1.5.2	Please in	dicate the age ran	nge to which the data u	used to answer que	estion 2.1.5 refer:
2.1.5.3	Please in	dicate the year an	nd source of the data u	used to answer que	stion 2.1.5:

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

2.1.6	Tobacco use	e by young pers	sons		
		Age range	Prevalence (%) (please include all smoking or smokeless tobacco products in prevalence data)		
			Smoking tobacco	Smokeless tobacco	Other tobacco (e.g. water pipe)
	Boys				
	Current users ⁴	13-15	28.00 %	%	19.90 %
	Add youth		%	%	%
	group		%	%	%
			%	%	%
			%	%	%
	Girls				
	Current users ⁴	13-15	11.70 %	%	10.50 %
	Add youth		%	%	%
	group		%	%	%
			%	%	%
			%	%	%
	TOTAL (b	ooys and girls)			
	Current users ⁴	13-15	19.90 %	%	15.30 %
	Add youth		%	%	%
	group		%	%	%
			%	%	%
			%	%	%
2.1.6.1	Please in question		cco products included i	n calculating pre	valence for
	Ciga	arette and othe	r tobacco products		

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:
	Global Youth Tobacco Survey (GTYS),2003
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 Smoker: Someone who at the times of survey, Smokes in any form either daily or occasionally
2.1.6.4	Please provide a brief explanation of the trend in tobacco use by young persons in the past two years or since submission of your last report.
	No updated data available since submission of last report

2.2	EXPOSURE TO TOBACCO SMOKE
2.2.1	Do you have any data on exposure to tobacco smoke in your population?
	Yes 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).
	The study was conducted by using special PM2.5 monitoring instrument that measured the concentration of suspended SHS particulate matter (PM) in indoor
	air. Indoor Air monitoring was conducted for thirty minutes at every venue in a
	sample of hospitals, schools, public offices, transportation, and recreation venues.
	The study took place during July, 2010. A total of 18 venues were monitored
	using PM2.5. A brief summary of the findings from this study is presented here. In Manama, the study found an average PM2.5 level of $211 \ \mu g/m3$ in venues with
	evidence of smoking, which is 15 times higher than indoor places where no
	smoking was observed.
	Study Findings
	 Levels of PM2.5 in Indoor Places in Bahrain PM2.5 levels were 15 times higher in venues where smoking was observed compared to venues with no smoking observed and nearly 8 times higher than outdoors.
	• Smoking was only observed in recreation venues. All other venues had signs prohibiting smoking and very low levels of PM2.5.
	• The average PM2.5 levels detected in recreation venues with smoking was 211 μ g/m3. In only 30 minutes, visitors to these venues would be exposed to levels 8 times higher than what is acceptable for a whole day (25 μ g/m3), defined by the World Health Organization.6
	• There was no evidence of smoking in schools, hospitals, public offices or transportation venues included in this study.
2.2.3	Please indicate the year and source of the data used to answer question 2.2.1:
	Clearing the Air: Measuring Secondhand Smoke in Manama, Bahrain,

2011		

TOBACCO-RELATED MORTALITY
Do you have information on tobacco-related mortality in your population?
☐ Yes Vo
If you answered "Yes" to question 2.3.1, what is the estimated total number of deaths attributable to tobacco use in your population?
If available, please provide any additional information on mortality attributable to tobacco use (e.g. lung cancer, cardiovascular diseases) in your jurisdiction.
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					
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?					
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 (with reference to Articles 6.2(b), 20.4(c), and 15.5)							
2.5.1	Licit s	upply of tobace	co products					
		Product	Unit (e.g. pieces, tonnes)	Domestic production	Retail sales	Exports	Imports	
	Smoking tobacco products Add product	Cigarret es	Kg	0		0	5981568 Kg	
		cigar	Kg	0		0	1151 Kg	

	Smokeless tobacco products Add product						
	Other tobacco products Add product						
	Tobacco	Leaves					
2.5.2		provide inforr y), if available	nation on the vo e.	lumes of duty-	free sales	(e.g. produ	ct, unit,
	40	0 cigarettes a	nd/or 250 mg	of molasses f	or person	al use.	
2.5.3	Please 2.5.2:	indicate the ye	ear and source o	f the data used	to answe	r questions	2.5.1 and
	Cen	tral Informat	ion Organizati	on, 2013. Cos	stume lav	v, article 20	0

2.6	SEIZURES OF ILLICIT TOBACCO PRODUCTS									
	(with reference to Article 15.5)									
2.6.1		Year	Product	Unit (e.g. millions of pieces)	Quantity seized					
	Smoking tobacco products									
	Add row									
	Smokeless tobacco products Add row									
	Other tobacco products									
	Add row									
2.6.2	-	ou have any infor nal tobacco marke		entage of illicit tobacco	products on the					
2.6.3			' to question 2.6.2, co products constitu	what percentage of the name	national tobacco					
2.6.4	is the	trend over the pa	st two years or sinc	nd you have information e submission of your la lation to the national to	st report in the					
2.6.5	Please	provide any furt	her information on	illicit tobacco products						
2.6.6	Please	indicate the sour	rce of the data used	to answer questions in	section 2.6:					

2.7	TOBACCO-GROWING
2.7.1	Is there any tobacco-growing in your jurisdiction? Ves
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:

2.8	TAXATION OF TOBACCO PRODUCTS								
	(with reference t	o Articles 6.2(a) d	and 6.3)						
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))?								
2.8.2	8.2 How are the excise taxes levied (what types of taxes are levied)?								
	• Speci	fic tax only		☐ Yes	✓ No				
	Ad va	lorem tax only		Ves	□ No				
	• Comb	pination of specifi	c and ad valorer	n taxes	✓ No				
	• More	complex structur	e (please explai	n:)					
2.8.3	If available, please provide details on the rates of taxation for tobacco products at all levels of Government and be as specific as possible (specify the type of tax, e.g. VAT, sales, import duties)								
		Product	Type of tax	Rate or amount	Base of tax ⁵				
	Smoking tobacco products	gars, cheroots nd cigarillos aining tobacco	Ad valorem	100% with imum charge of BD 15	Per direct overed kg				
	Add product	Cigarettes aining tobacco	Ad valorem	100% with imum charge of BD 10	Per 1000 rettes covered kg				
	Smokeless tobacco products								
	Add product								
	Other tobacco products Add product	Chopped or sed tobacco for oking or pipes, snuff	Ad valorem	00% ad valorem minimum charge of BD 4	Per kg net				

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.

2.8.4	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.								
	In Bahrain, taxes on tobacco and tobacco products are levied based on ad valorem only, however currently negotiation is underway between Gulf Counsel Countries to add other types of taxes such as sales tax and special taxes on harmful goods. For more details see Annex 3.								
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? Yes No (In reference to Article 26)								
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:								
	2014, Central Information Organisation								

2.9		CE OF TOBACO to reference to Art		S				
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 capit city.							
		Mos	t widely sold bra	and	Number of	Retail price		
		Smoking	Smokeless	Other	units or	-		
		tobacco	tobacco	tobacco	amount per			
		products	products	products	package			
	Domestic							

	Imported	Marloboro			20	0.9 BD
		Parlimant			20	1 BD
		Davidoff			20	1 BD
2.9.2	Pleas	se indicate the yea	r and source of	the data used to	answer question	2.9.1.
	20)14, Ministry of	Industry and c	ommerce		
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.					
	В	ahraini Dinars, 1	1 US dollars =	0.375 Bahrain	i Dinars (16 th N	Iarch, 2014)
2.9.4		se briefly describe s or since submiss		•	•	e past two
	I n Bahrain, taxes on tobacco and tobacco products are levied based on ad valorem only, however currently negotiation is underway between Gulf Council Countries to add other types of taxes such as sales tax.					

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?	Ves	☐ No	
3.1.1.2		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?	T Yes	☐ No	
3.1.1.3		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?	T Yes	☐ No	
3.1.1.4	5.2(a)	Have you established or reinforced and financ	ed		
		• a focal point for tobacco control	Ves	□ No	
		• a tobacco control unit	Ves	□ No	
		• a national coordinating mechanism for tobacco control	Ves	□ No	
3.1.1.5	(e.g.	u answered "Yes" to any of the questions under 3.1 the nature of the national coordinating mechanism, point for tobacco control or the tobacco control un	the institution		
	In 2009, the National Antismoking comittiee was formulated including members from different sectors in the government, in addition, a representitive of antismoking society was assigned as a member in the comittiee starting 2013. Focal point for tobacco control was assigned and she belongs to Public Health Directorate in Ministry of Health. Antismoking Group was formulated in 2013 with specialized and trained staff to implement the Antismoking Law				
3.1.1.6		se provide a brief description of the progress made 5.2 (<i>General obligations</i>) in the past two years or sirt.	-	e e	

	The issuance of Royal Decree-Law No. (8) for the year 2009 on the control of smoking and tobacco, which gave a strong impetus to efforts to combat smoking in the Kingdom, also contributed to the formation of the National Committee to combat smoking and tobacco, headed by the Minister of Health, which includes representatives on the various governmental sectors. Since then several decrees were issued to implement the antismoking law including banning smokeless tobacco in Bahrain, role and regulations of tobacco products sales, regulations of tobacco products serving places (shisha), banning of tobacco products promotion and advertisements, implementing pictorial warnings starting August 2012 and banning E-cigarette.
3.1.1.7	If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

E.

3.1.2	5.3	³ Protection of public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry					
		(Please check "Yes" or "No". For affirmative answers, please provide a br summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one the six official languages.)					
	Have you adopted and implemented, where appropriate, legislative administrative or other measures or have you implemented, where appropriate, programmes on any of the following:						
3.1.2.1		 protecting public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry? 	Ves	☐ 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? 	Yes	I No			
3.1.2.3		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.					
		According to antismoking law, tobacco indu- lirectly or indirectly sponsor any event related	•				
3.1.2.4		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.					
	a C W	Bahrain's business association made an official application requesting to add a member who was a tobacco investor to the National Antismoking Committee as part of community involvement in decision making, request was denied and it was stated clearly that tobacco industry representatives are not allowed to interfere with tobacco control policies					
3.1.2.5		USE OF THE GUIDELINES ADOPTED BY THE CONFERENCE OF THE PARTIES					
	Please use the space below to provide additional information regarding use of the "Guidelines for implementation of Article 5.3 of the WHO FCTC" in your jurisdiction (please refer to the section on Article 5.3 of the step-by-step instructions document when responding to this question). Alternatively, you may wish to provide detailed information through the additional questionnaire on the use of guidelines. Response to this section or to the additional questionnaire is voluntary .						
3.1.2.6	If	f you have any other relevant information pertaining	ng to but not cove	red in this			
5.1.2.0	section, please provide details in the space below.						

3.2	Article	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 den	nand 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 executive, administrative or other measures where appropriate, programmes on any of th	or have you imple			
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? 	Yes	V No		
3.2.1.2	6.2(b)	 prohibiting or restricting, as appropriate, sales to international travellers of tax- and duty-free tobacco products? 	Ves	□ No		
3.2.1.3		 prohibiting or restricting, as appropriate, imports by international travellers of tax- and duty-free tobacco products? 	Ves	☐ No		
3.2.1.4	Please provide a brief description of the progress made in implementing Article 6 (<i>Price and tax measures to reduce the demand for tobacco</i>) in the past two years or since submission of your last report.					
	Currently ad valorem tax is applied to tobacco products amounting to 100% of its price; however, negotiation is underway to introduce sales customs.					
3.2.1.5	•	you have any other relevant information pertaining tion, please provide details in the space below.	ng to but not cover	red in this		

3.2.2	8.2	Protection from exposure to tobacco s	smoke				
		(Please check "Yes" or "No". For affirmative answers, please provide a brie 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.)					
		administrative or other measures or have	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		 banning tobacco smoking in indoor workplaces, public transport, indoor public places and, as appropriate, other public places ? 	✓ Yes	No No			
3.2.2.2		If you answered "Yes" to question 3.2.2 measure providing for the ban?	.1, what is the type/n	ature of the			
		• national law	Ves	□ No			
		• subnational law(s)	T Yes	✓ No			
		• administrative and executive orders	Ves	☐ No			
		• voluntary agreements	Ves	□ No			
		 other measures (<i>please</i> specify:) 	T Yes	☐ No			
3.2.2.3		Please provide a brief explanation of the measures providing for the ban.	type/nature and conte	ent of the			
		According to article 4 of antismoking law, smoking is prohibite in all colsed public places, however a designated area for smokers can be allocated provided it is compliant with specifications of smoking areas stated by Ministry of Health.					
3.2.2.4		If you answered "Yes" to any options in 3.2.2.2, do any of these measures provide for a mechanism/ infrastructure for enforcement?	Ves	☐ No			
3.2.2.5		If you answered "Yes" to question 3.2.2.	4 please provide deta	ils of this system.			
		Article 4 of antismoking law, smoking is prohibited in all colsed public places, however a designated area for smokers can be allocated provided it is compliant with specifications of smoking areas stated in decree (2)/2011 issued by Minister of Health.					

3.2.2.6	If you answered "Yes" to question 3.2.2.1, please specify the settings and extent/comprehensiveness of measures applied in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.	Complete	Partial	None
	Indoor workplaces:	·		
	• government buildings		•	
	• health-care facilities		2	
	• educational facilities ¹		>	
	• universities		>	
	• private workplaces		>	
	• other (<i>please specify:</i>)			
	Public transport:			
	• airplanes	•		
	• trains			>
	• ferries		>	
	• ground public transport (buses, trolleybuses, trams)	V		
	 motor vehicles used as places of work (taxis, ambulances, delivery vehicles) 			
	• private vehicles			
	• other (<i>please specify:</i>)			

¹ except universities

	Indoor public places:					
	cultural facilities		•			
	shopping malls		•			
	• pubs and bars		•			
	• nightclubs					
	• restaurants					
	• other (<i>please specify</i> :)					
3.2.2.7	Please provide a brief summary of con specific details of the partial measures			rith		
	• Banning tobacco smoking in indo	or workplaces				
	moking is workplace allocated p eas stated b	rovided it				
	Banning tobacco smoking in public transport					
	According to article 4 of antismoking law, smoking is prohibited in all colsed public places including public transport, however a designated area for smokers can be allocated provided is compliant with specifications of smoking areas stated by Ministry of Health. • Banning tobacco smoking in indoor public places					
	According to article 4 of anti- in all colsed public places inclu designated area for smokers ca compliant with specifications of of Health.	iding workplace	s, however rovided it i	ra s		
3.2.2.8	Please provide a brief description of the prog (<i>Protection from exposure to tobacco smoke</i> submission of your last report.					
	Work in the campaign which was launch smoking ban in public places continued Ministry of Health. In addition, we are st willing to allocate a designated smoking health specifications of smoking areas.	by Public Health ill working clos	Directorately to assis	te in st those		

3.2.2.9	USE OF THE GUIDELINES ADOPTED BY THE CONFERENCE OF THE PARTIES
	Please use the space below to provide additional information regarding use of the "Guidelines for implementation of Article 8 of the WHO FCTC" in your jurisdiction (please refer to the section on Article 8 of the step-by-step instructions document when responding to this question). Alternatively, you may wish to provide detailed information through the additional questionnaire on the use of guidelines. Response to this section or to the additional questionnaire is voluntary .
3.2.2.10	If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

	(Please check "Yes" or "No". For affirmative answers, please provide a brid 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, execution administrative or other measures or have you implemented, where appropriate, programmes on any of the following:					
	 testing and measuring the contents of tobacco products? 	T Yes	✓ No			
	 testing and measuring the emissions of tobacco products? 	Yes	▼ No			
	 regulating the contents of tobacco products? 	Yes	□ No			
	 regulating the emissions of tobacco products? 	Ves	□ No			
(4	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 ubmission of your last report.					
		CONFERENCE	OF THE			
۰۰ jı d p	Please use the space below to provide additional information regarding use of the "Guidelines for implementation of Articles 9 and 10 of the WHO FCTC" in your jurisdiction (please refer to the section on Article 9 of the step-by-step instructions document when responding to this question). Alternatively, you may wish to provide detailed information through the additional questionnaire on the use of guidelines. Response to this section or to the additional questionnaire is voluntary .					
	If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.					
	(/ st U P " ju ju d p g If	the six official languages.) Have you adopted and implemented, where a administrative or other measures or have you appropriate, programmes on any of the follow appropriate, programmes on any of the follow - testing and measuring the contents of tobacco products? - testing and measuring the emissions of tobacco products? - regulating the contents of tobacco products? - regulating the emissions of tobacco products? - regulating the emissions of tobacco products? Please provide a brief description of the progress m (<i>Regulation of the contents of tobacco products</i>) in submission of your last report. USE OF THE GUIDELINES ADOPTED BY THE PARTIES Please use the space below to provide additional in "Guidelines for implementation of Articles 9 and 1 jurisdiction (please refer to the section on Article 9 document when responding to this question). Altern provide detailed information through the additional guidelines. Response to this section or to the additional guidelines. Response to this section or to the additional guidelines. Response to this section or to the additional guidelines. Response to this section or to the additional guidelines. Response to this section or to the additional guidelines. Response to this section or to the additional guidelines. Response to this section or to the additional guidelines. Response to this section or to the additional guidelines. Response to this section or to the additional guidelines. Response to this section or to the additional guidelines. Response to this section or to the additional guidelines.	the six official languages.) Have you adopted and implemented, where appropriate, legisla administrative or other measures or have you implemented, what appropriate, programmes on any of the following: - testing and measuring the contents of tobacco products? - testing and measuring the emissions of tobacco products? - testing the contents of tobacco products? - regulating the contents of tobacco products? - regulating the emissions of tobacco products? - regulating the emissions of tobacco products? - regulating the emissions of tobacco products? - regulating the contents of tobacco products? - regulating the contents of tobacco products? Please provide a brief description of the progress made in implement (<i>Regulation of the contents of tobacco products</i>) in the past two year submission of your last report. USE OF THE GUIDELINES ADOPTED BY THE CONFERENCE PARTIES Please use the space below to provide additional information regardit "Guidelines for implementation of Articles 9 and 10 of the WHO FC jurisdiction (please refer to the section on Article 9 of the step-by-stet document when responding to this question). Alternatively, you may provide detailed information through the additional questionnaire on guidelines. Response to this section or to the additional questionnaire or guidelines. Response to this section or to the additional questionnaire			

3.2.4	10	Regulation of tobacco product disclosures				
		(Please check "Yes" or "No". For affirmative answers, please provide a b summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one the six official languages.)				
	Have you adopted and implemented, where appropriate, legislative administrative or other measures or have you implemented, where appropriate, programmes on any of the following:					
3.2.4.1	.1 – requiring manufacturers or importers of tobacco products to disc Government authorities information about the:					
		• contents of tobacco products?	Ves	□ No		
		• emissions of tobacco products?	Ves	□ No		
3.2.4.2	.2 – requiring public disclosure of information about the:					
		• contents of tobacco products?	Ves	□ No		
		• emissions of tobacco products?	Ves	□ No		
3.2.4.3	()	Please provide a brief description of the progress made in implementing Article 10 (<i>Regulation of tobacco product disclosures</i>) in the past two years or since submission of your last report.				
3.2.4.4		USE OF THE GUIDELINES ADOPTED BY THE PARTIES	CONFERENCE	OF THE		
	Please use the space below to provide additional information regarding use of the "Guidelines for implementation of Articles 9 and 10 of the WHO FCTC" in your jurisdiction (please refer to the section on Article 10 of the step-by-step instructions document when responding to this question). Alternatively, you may wish to provide detailed information through the additional questionnaire on the use of guidelines. Response to this section or to the additional questionnaire is voluntary .					
3.2.4.5		If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.				

3.2.5	11	Packaging and labelling of tobacco prod	ucts	
		(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 executive, administrative or other measures where appropriate, programmes on any of	s or have you in	
3.2.5.1	11	 requiring that packaging, individual cigarettes or other tobacco products do not carry advertising or promotion? 	Ves	□ 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? 	Ves	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? 	Ves	■ No
3.2.5.4	11.1(b)(i)	 ensuring that the health warnings are approved by the competent national authority? 	Ves	□ No
3.2.5.5	11.1(b)(ii)	 ensuring that the health warnings are rotated? 	Ves	□ No
3.2.5.6	11.1(b)(iii)	 ensuring that the health warnings are clear, visible and legible? 	Ves	□ No
3.2.5.7	11.1(b)(iii)	If you answered "" to question 3.2.5.6, does your law mandate, as a minimum, a style, size and colour of font to render the warning clear, visible and legible?	Ves	□ No
3.2.5.8	11.1(b)(iv)	 ensuring that the health warnings occupy no less than 30% of the principal display areas? 	Ves	□ No
3.2.5.9		 ensuring that the health warnings occupy 50% or more of the principal display areas? 	Ves	□ No
3.2.5.10	11.1(b)(v)	 ensuring that health warnings are in the form of, or include, pictures or pictograms? 	Ves	□ No

3.2.5.11		If you answered "Yes" to question 3.2.5.10, does the Government own the copyright to these pictures and pictograms?	Ves	□ No
3.2.5.12		If you answered "Yes" to question 3.2.5.10, would you grant a non- exclusive and royalty-free licence for the use of health warnings developed in your jurisdiction with other Parties?	Ves	No
3.2.5.13	 <i>11.2</i> – requiring that each unit packet and package of tobacco products and outside packaging and labelling of such products contain informatio on relevant: 			
		• constituents of tobacco products	Ves	□ No
		• emissions of tobacco products	Ves	□ No
3.2.5.14	11.3	 requiring that the warnings and other textual information appear on each unit packet and package and on any outside packaging and labelling in the principal language or languages of the country? 	Ves	No
3.2.5.15	Please provide a brief description of the progress made in implementing Article 11 (<i>Packaging and labelling of tobacco products</i>) in the past two years or since submission of your last report.			
	Bahrain as part of Gulf Counsil Countries (GCC) agreed to start implementing pictorial warning on tobacco products packets (cigarretes, cigars and moassel) starting August 2012 and granted tobaco selling representitives 6 months to clear their stocks.			
3.2.5.16	USE OF THE GUIDELINES ADOPTED BY THE CONFERENCE OF THE PARTIES			
	Please use the space below to provide additional information regarding use of the "Guidelines for implementation of Article 11 of the WHO FCTC" in your jurisdiction (please refer to the section on Article 11 of the step-by-step instructions document when responding to this question). Alternatively, you may wish to provide detailed information through the additional questionnaire on the use of guidelines. Response to this section or to the additional questionnaire is voluntary .			
3.2.5.17	If you have any other relevant information pertaining to or not covered in this section, please provide details in the space below.			

3.2.6	12	Education, communication, training and public awareness		
		(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:		
3.2.6.1	12(a)	 educational and public awareness programmes? (Please refer to programmes implemented since submission of your two-year report.) 	Yes	No No
3.2.6.2		If you answered "Yes" to question 3.2.6.1 targeted?	, to whom are the	se programmes
		• adults or the general public	Ves	□ No
		• children and young people	Ves	No
		• men	Ves	No
		• women	Ves	No
		• pregnant women	Ves	□ No
		• ethnic groups	Ves	No
		• other (<i>please specify:</i>)	T Yes	□ No
3.2.6.3		If you answered "Yes" to question 3.2.6.1, do you reflect the following key differences among targeted population groups in educational and public awareness programmes?		
		• age	Ves	□ No
		• gender	Ves	□ No
		educational background	Ves	No
		• cultural background	Ves	No
		socioeconomic status	Ves	□ No
		• other (<i>please specify:</i>)	☐ Yes	☐ No

3.2.6.4	12(b)	If you answered "Yes" to question 3.2.6.1, awareness programmes cover:	do these educati	onal and public
		• health risks of tobacco consumption?	Ves	□ No
		• health risks of exposure to tobacco smoke?	Ves	□ No
		• benefits of the cessation of tobacco use and tobacco-free lifestyles?	Ves	□ No
	12(f)	• adverse economic consequences of		
		- tobacco production?	Ves	□ No
		- tobacco consumption?	Ves	□ No
		• adverse environmental consequences	of	
		- tobacco production?	Ves	□ No
		- tobacco consumption?	Ves	□ No
3.2.6.5	 awareness and participation of the following agencies and organiza in development and implementation of intersectoral programmes a strategies for tobacco control: 			
		• public agencies?	Ves	□ No
		• nongovernmental organizations not affiliated with the tobacco industry?	Ves	□ No
		• private organizations?	Ves	□ No
		• other (<i>please specify:</i>)?	☐ Yes	□ 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?	Ves	■ No
3.2.6.7	$\frac{12(d)}{12(d)}$ Are appropriate and special training or sensitization and awa programmes on tobacco control addressed to:		areness	
		• health workers?	Ves	□ No
		• community workers?	Ves	□ No
		• social workers?	Ves	□ No

	• media professionals?	Ves	□ No	
	• educators?	Ves	□ No	
	• decision-makers?	Ves	□ No	
	• administrators?	Ves	□ No	
	• other (<i>please specify:</i>)?	☐ Yes	□ No	
3.2.6.8	Please provide a brief description of the progres 12 (<i>Education, communication, training and p</i> years or since submission of your last report.	-	-	
Since the formulation of National Antismoking Committee, collaboration with Ministry of information and Ministry of medi strengthened, hence more emphasis on tobacco harmful effects v displayed on all types of media and free time was allocated for th harmful effects on National TV. In addition, a hotline was assign any complain about antismoking law violations any other inquiri- to smoking.				
3.2.6.9	USE OF THE GUIDELINES ADOPTED BY THE CONFERENCE OF THE PARTIES Please use the space below to provide additional information regarding use of the "Guidelines for implementation of Article 12 of the WHO FCTC" in your jurisdiction (please refer to the section on Article 12 of the step-by-step instructions document when responding to this question). Alternatively, you may wish to provide detailed information through the additional questionnaire on the use of guidelines. Response to this section or to the additional questionnaire is voluntary .			
3.2.6.10	6.10 If you have any other relevant information pertaining to but not covered in section, please provide details in the space below.			

3.2.7	13	Tobacco advertising, promotion and sponsorship			
		(Please check "Yes" or "No". For affirmative answers, please probrief summary in the space provided at the end of the section and relevant documentation. Please provide documentation, if available of the six official languages.)			
		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? 	Ves	■ No	
If	you answe	red "No" to question 3.2.7.1, please proceed to a	question 3.2.7.3.		
3.2.7.2		If you answered "Yes" to question 3.2.7.1,	does your ban cov	ver:	
		• display and visibility of tobacco products at points of sales?	Ves	□ No	
		• the domestic Internet?	Ves	□ No	
		• the global Internet?	☐ Yes	✓ No	
		• brand stretching and/or brand sharing?	Ves	□ No	
		• product placement as a means of advertising or promotion?	Ves	□ No	
		• the depiction of tobacco or tobacco use in entertainment media products?	Ves	■ No	
		• tobacco sponsorship of international events or activities and/or participants therein?	Ves	No 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?	Ves	☐ No	
		• cross-border advertising, promotion and sponsorship originating from your territory?	Ves	■ No	

	13.7	• the same forms of cross-border advertising, promotion and sponsorship entering your territory for which domestic regulation apply?	Ves	No
Pl	ease procee	ed 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?	T Yes	■ No
3.2.7.4	13.3	 applying restrictions on all tobacco advertising, promotion and sponsorship? 	T Yes	No
3.2.7.5	13.3	 applying restrictions on cross-border advertising, promotion and sponsorship originating from your territory with cross-border effects? 	T Yes	☐ 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? 	Yes	No
3.2.7.7	13.4(b)	 requiring that health or other appropriate warnings or messages accompany all tobacco advertising, promotion and sponsorship? 	T Yes	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? 	T Yes	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? 	T Yes	No

3.2.7.10	2.7.10 13.4(e) — restricting tobacco advertising, promotion and sponsorship			hip on:
		• radio?	T Yes	□ No
		• television?	T Yes	□ No
		• print media?	T Yes	□ No
		• the domestic Internet?	Yes	□ No
		• the global Internet?	T Yes	□ No
		• other media (<i>please specify:</i>)?	T Yes	□ No
3.2.7.11	13.4(f)	 restricting tobacco sponsorship of: 		
		• international events and activities?	☐ Yes	□ No
		• participants therein?	T Yes	□ No
	WI	hether 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? 	Ves	☐ 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? 	Ves	No No
3.2.7.14	Please provide a brief description of the progress made in implementing Article 13 (<i>Tobacco advertising, promotion and sponsorship</i>) in the past two years or since submission of your last report.			
	Articles 6,7, and 15 of Antismoking law and decree (3) of 2011 prohibit any form of advertising, promotion and sponsorship by tobacco manufacturers, distributors and sales. In addition, social media like facebook and instagram originating from Bahrain is closly monitired.			
3.2.7.15	USE OF THE GUIDELINES ADOPTED BY THE CONFERENCE OF THE PARTIES			OF THE
	Please use the space below to provide additional information regarding use of the "Guidelines for implementation of Article 13 of the WHO FCTC" in your jurisdiction (please refer to the section on Article 13 of the step-by-step instructions document when responding to this question). Alternatively, you may wish to provide detailed information through the additional questionnaire on the use of			
	guidelines. Response to this section or to the additional questionnaire is voluntary .			
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3.2.7.16	If you have any other 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(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:				
3.2.8.1	14.1	 developing and disseminating appropriate, comprehensive and integrated guidelines based on scientific evidence and best practices? 	Ves	No		
3.2.8.2	14.1	 programmes to promote cessation of 	f tobacco use, incl	uding:		
		 media campaigns emphasizing the importance of quitting? 	Ves	☐ No		
	programmes specially designed for:					
		 underage girls and young women 	Ves	□ No		
		o women	Ves	□ No		
		 pregnant women 	Ves	□ No		
		• telephone quitlines	Ves	□ No		
		 local events, such as activities related to World No Tobacco Day or National No Smoking Day, if appropriate? 	Ves	No		
		• other (<i>please specify:</i>)?	T Yes	□ No		
3.2.8.3	14.2(a)	 design and implementation of progracessation of tobacco use, in such loc 	•	romoting the		
		• educational institutions?	Ves	□ No		
		health-care facilities?	Ves	□ No		
		• workplaces?	Ves	□ No		

		• sporting environments?	Ves	□ No	
		• other (<i>please specify</i> :)?	☐ Yes	□ No	
3.2.8.4	14.2(b)	 inclusion of diagnosis and treatment counselling services for cessation of programmes, plans and strategies for 	f tobacco use in na		
		• tobacco control?	Ves	□ No	
		• health?	Ves	□ No	
		• education?	Ves	□ No	
3.2.8.5		 inclusion of programmes on the diagnosis and treatment of tobacco dependence in your health-care system? 	Ves	☐ No	
3.2.8.6	14.2(b)	If you answered "Yes" to question 3.2.8. health-care system provide programmes tobacco dependence?			
		• primary health care	Ves	□ No	
		• secondary and tertiary health care	Ves	□ No	
		• specialist health-care systems (<i>please specify:</i>)	☐ Yes	▼ No	
		• specialized centres for cessation counselling and treatment of tobacco dependence	T Yes	V No	
		• rehabilitation centres	Yes	▼ No	
		• other (<i>please specify:</i>)	Yes	□ No	
3.2.8.7	14.2(b)	If you answered "Yes" to question 3.2.8. these settings covered by public funding			
		• primary health care	Fully Partia	ally 🗌 None	
		• secondary and tertiary health care	Fully Partia	ally 🗌 None	
		 specialist health-care systems (<i>please specify:</i>) 	Fully Partia	ally Vone	

		• specialized centres for cessation counselling and treatment of tobacco dependence	Fully Parti	ally Vone
		• rehabilitation centres	Fully Parti	ally Vone
		• other (<i>please specify</i> :)	Fully Parti	ally 🗌 None
3.2.8.8	14.2(b)	If you answered "Yes" to question 3.2.8. professionals are involved in programme dependence and counselling services?		
		Health professionals including:		
		• physicians	Ves	□ No
		• dentists	Ves	□ No
		• family doctors	Ves	□ No
		• practitioners of traditional medicine	T Yes	V No
		 other medical professionals (<i>please specify:</i>) 	T Yes	☐ No
		• nurses	Ves	□ No
		• midwives	T Yes	✓ No
		• pharmacists	Ves	□ No
		Community workers	Ves	□ No
		Social workers	Ves	□ No
		Others (<i>please specify:</i>)	T Yes	□ No
3.2.8.9	14.2(c)	 training on tobacco dependence trea curricula of health professional train levels at the following schools: 		
		• medical?	Ves	□ No
		• dental?	Ves	□ No
		• nursing?	Ves	□ No
		• pharmacy?	Ves	□ No

		• other (<i>please specify</i> :)?	□ Ye	es	No No	
3.2.8.10	14.2(d)	 facilitating accessibility and/or affordability of pharmaceutical products for the treatment of tobacco dependence? 	Ve	es	No	
3.2.8.11	14.2(d)	If you answered "Yes" to question 3.2.8. products be legally purchased in your co		and how ca	an these	
		Some products such as patches and gums are available in smoking cessation clinics free of charge or can be bought over the counter from the pharmacy, other products can be obtained by doctor prescription and are available in most pharmacies in Bahrain				
3.2.8.12	14.2(d)	If you answered "Yes" to question 3.2.8. products are legally available for the trea your jurisdiction?		•		
		• nicotine replacement therapy	Ve	es	□ No	
		• bupropion	Ve	es	□ No	
		• varenicline	Ve	es	□ No	
		• other (<i>please specify</i> :)	□ Ye	es	□ No	
3.2.8.13	14.2(d)	If you answered "Yes" to question 3.2.8. covered by public funding or reimbursen		costs of th	ese products	
		• nicotine replacement therapy	Fully	Partially	☐ None	
		• bupropion	Fully	Partially	None	
		• varenicline	Fully	Partially	None	
		• other (<i>please specify</i> :)	Fully	Partially	☐ None	
3.2.8.14	Art	Please provide a brief description of the progress made in implementing Article 14 (<i>Demand reduction measures concerning tobacco dependence and cessation</i>) in the past two years or since submission of your last report.			nce and	
		Nicotine replacement therapies such as patche ently as part of the essential drugs list in Bah	-	s were app	proved	
3.2.8.15	USE OF THE GUIDELINES ADOPTED BY THE CONFERENCE OF THE PARTIES				OF THE	
	PARTIES Please use the space below to provide additional information regarding use of the "Guidelines for implementation of Article 14 of the WHO FCTC" in your					

	jurisdiction (please refer to the section on Article 14 of the step-by-step instructions document when responding to this question). Alternatively, you may wish to provide detailed information through the additional questionnaire on the use of guidelines. Response to this section or to the additional questionnaire is voluntary .
3.2.8.16	If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

3.3	Article	MEASURES RELATING TO THE REDUC	CTION OF TH	HE SUPPLY	
		(with reference to Articles 15–17)			
3.3.1	15	Illicit trade in tobacco products			
		(Please check "Yes" or "No". For affirmative brief summary in the space provided at the end relevant documentation. Please provide docum of the six official languages.)	l of the section	and attach the	
		Have you adopted and implemented, where ap executive, administrative or other measures or where appropriate, programmes on any of the	have you impl		
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? 	Ves	No 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? 	Ves	No 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? 	Yes	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? 	T Yes	V 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? 	Yes	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? 	Yes	No	

3.3.1.7	15.4(a)	_	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	☐ 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?	Yes	☐ 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?	Ves	No 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?	Yes	☐ No
3.3.1.11	15.4(e)	_	enabling the confiscation of proceeds derived from illicit trade in tobacco products?	Ves	□ 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?	Ves	☐ No
3.3.1.13	15.7	_	licensing or other actions to control or regulate production and distribution in order to prevent illicit trade?	Yes	☐ No

3.3.1.14	Please provide a brief description of the progress made in implementing Article 15 (<i>Illicit trade in tobacco products</i>) in the past two years or since submission of your last report.
	Collaboration between Ministry of Health and Ministry of Interior is strenghthened to combat illicit trade of tobacco products. Ratification of Illicit trade Protocol is under negotiation in the Government
3.3.1.15	If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.

3.3.2	16	Sales to and by minors				
		(Please check "Yes" or "No". For affirmative answers, please probrief summary in the space provided at the end of the section and a the relevant documentation. Please provide documentation, if avai 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:				
3.3.2.1	16.1	 prohibiting the sales of tobacco products to minors? If "Yes", please specify the legal age: 18 	Ves	No 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? 	Ves	No 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? 	Ves	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? 	Ves	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? 	Ves	No		
3.3.2.6	16.1(d)	 prohibiting the sale of tobacco products from vending machines? 	Ves	□ No		
If	you answere	ed "Yes" to question 3.3.2.6, please proceed to que	estion 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?	Yes	No		
3.3.2.8	16.2	 prohibiting and/or promoting the proh free tobacco products: 	ibition of the d	istribution of		
		• to the public?	Ves	□ No		

		• to minors?	Ves	No		
3.3.2.9	16.3	prohibiting the sale of cigarettes individually or in small packets?	Ves	□ No		
3.3.2.10	16.6	 providing for penalties against sellers and distributors in order to ensure compliance? 	Ves	□ No		
3.3.2.11	16.7	 prohibiting the sales of tobacco products by minors? 	Ves	□ No		
3.3.2.12		se provide a brief description of the progress mad as to and by minors) in the past two years or since rt.				
	Several articles in antismoking law which was issued in 2009 prohibited sales to and by minors, baned tobacco vending machines and distribution of free tobacco products. In addition, a decree was issued by Minister of Health in 2011 regualting sales of tobacco products. Starting 2011 and still going, a campaign was launched to monitor the					
	implementation of antsmoking law at points of sale of tobacco products including sales to and by minors. Persons caught selling tobacco products to minors are referred to public prosecutor					
3.3.2.13	If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.					

3.3.3	17	Provision of support for econ	omically viabl	e alternativ	e activities	
		(Please check "Yes" or "No". summary in the space provided relevant documentation. Please the six official languages.)	at the end of th	he section an	ad attach the	
		Have you adopted and impleme programmes on any of the follo	· · · · · · · · · · · · · · · · · · ·	propriate, m	easures or	
3.3.3.1	17	 promoting economically viabl 	e and sustainab	le alternative	es for:	
		• tobacco growers?	☐ Yes	□ No	Not applicable	
		• tobacco workers?	☐ Yes	▼ No	Not applicable	
		• tobacco individual sellers?	T Yes	No No	□ 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 two years or since submission of your last report.					
3.3.3.3	3 If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.				covered in this	

3.4	Article	OTHER MEASURES AND POLI	ICIES			
	(with reference to Articles 18–21)					
3.4.1	18	Protection of the environment and the health of persons				
		(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 executive, administrative or other m where appropriate, programmes on a	easures or l	have you		
3.4.1.1	18	 implementing measures in respect of territory, which take into consideration 		cultivatior	n within your	
		• the protection of the environment?	T Yes	☐ No	Not applicable	
		• the health of persons in relation to the environment?	☐ Yes	☐ No	Not applicable	
3.4.1.2	18	 implementing measures in respect of territory, which take into consideration 		manufactu	ring within your	
		• the protection of the environment?	T Yes	No No	□ Not applicable	
		• the health of persons in relation to the environment?	Yes	▼ No	Not applicable	
3.4.1.3	Please provide a brief description of the progress made in implementing Article 18 (<i>Protection of the environment and the health of persons</i>) in the past two years or since submission of your last report.					
3.4.1.4	If you have any other relevant information pertaining to but not covered in this section, please provide details in the space below.					

3.4.2	19	Liability (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.)				
3.4.2.1	19.1	Does your tobacco control legislation contain measures regarding criminal liability for any violations of that tobacco control legislation?	Ves	☐ No	Not applicable	
3.4.2.2	19.1	Do you have separate criminal liability provisions in relation to tobacco control (outside of the tobacco control legislation)?	Ves	☐ No	Not applicable	
3.4.2.3	19.1	Do you have any civil liability measures that are specific to tobacco control?	Ves	□ No	Not applicable	
3.4.2.4	19.1	Do you have any general civil liability provisions that could apply to tobacco control?	Ves	□ No	Not applicable	
3.4.2.5	19.1	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?	T Yes	V No	Not applicable	
3.4.2.6	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?	T Yes	V No	Not applicable	
3.4.2.7	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?	T Yes	V No	Not applicable	
3.4.2.8		Please provide a brief description of any progress made, as appropriate, in implementing Article 19 (<i>Liability</i>) in the past two years or since submission of your last report.				

3.4.2.9	If you have any other 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?	Ves	□ No		
		• consequences of tobacco consumption?	Ves	□ No		
		• social and economic indicators related to tobacco consumption?	Yes	No No		
		• tobacco use among women, with special regard to pregnant women?	Ves	□ No		
		• the determinants and consequences of exposure to tobacco smoke?	Ves	□ No		
		• identification of effective programmes for the treatment of tobacco dependence?	Ves	No No		
		• identification of alternative livelihoods?	☐ Yes	▼ No		
		• other (<i>please specify</i> :)	☐ Yes	□ No		
3.4.3.2	20.1(b)	 training and support for all persons engaged in tobacco control activities, including research, implementation and evaluation? 	Ves	☐ No		
3.4.3.3 20.3(a) – a national sys		– a national system for epidemiological surveilla	system for epidemiological surveillance of:			
		• patterns of tobacco consumption?	Ves	□ No		
		• determinants of tobacco consumption?	Ves	□ No		
		• consequences of tobacco consumption?	Ves	□ No		
		• social, economic and health indicators related to tobacco consumption?	Ves	☐ No		
		• exposure to tobacco smoke?	Ves	□ No		

		 other relevant information (<i>please</i> specify:) 	☐ Yes	No		
3.4.3.4	20.3(a)	r 3.4.3.3, plea at you have ur				
	Non communicable diseases and risk factors survey (2007),Global Health Professions Student Survey (GHPSS), 200 Global Youth Tobacco Survey (GTYS),2003.					
3.4.3.5	20.3(a) In reference to any question under 3.4.3.3, does your country have an plans to repeat any of the above or to undertake a new tobacco surver within three to five years of your last survey? Please provide details the space below.					
		Non communicable diseases and risl repeated in 2013 in a more comprehensi survey) We are still awaiting results		•		
3.4.3.6	5 20.4 – regional and global exchange of publicly available national:					
		• scientific, technical, socioeconomic, commercial and legal information?	Ves	□ No		
		• information on the practices of the tobacco industry?	Ves	□ No		
		• information on the cultivation of tobacco?	T Yes	✓ No		
3.4.3.7	20.4(a)	– an updated database of:				
		• laws and regulations on tobacco control?	Ves	□ No		
		• information about the enforcement of laws on tobacco control?	Ves	□ No		
		• pertinent jurisprudence?	Ves	□ No		
3.4.3.8 Please provide a brief description of the progress made in a (Research, surveillance and exchange of information) in the submission of your last report.				-		
	Non communicable diseases and risk factors survey including smoking was repeated in 2013 in a more comprehensive form (Global health survey) We are still awaiting results.					
3.4.3.9	If you have any other 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.

	Article	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? 	Yes Vo	Yes Vo
4.2	22.1(b)	 provision of technical, scientific, legal and other expertise to establish and strengthen national tobacco control strategies, plans and programmes? 	Yes Vo	Yes Vo
4.3	22.1(c)	 appropriate training or sensitization programmes for appropriate personnel in accordance with Article 12? 	Yes Vo	Yes Vo
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? 	Yes Vo	Yes No
4.5	22.1(e)	 identification of methods for tobacco control, including comprehensive treatment of nicotine addiction? 	Yes Vo	Yes No
4.6	22.1(f)	 promotion of research to increase the affordability of comprehensive treatment of nicotine addiction? 	Yes V No	Yes Vo
4.7	-	you answered "Yes" to any of questions 4.1–4.6 rties from which assistance was received or to w		-

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? Ves 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	What are the priorities for implementation of the WHO Framework Convention on Tobacco Control in your jurisdiction?		
	Our priorities are to reduce demand on tobacco products by implementing complete ban to tobacco products promotion, advertisement and sponsorship, also complete ban of sales to and by minors, in addition to reduce illicit trade of tobacco products as much as possible		
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?		
5.3	If you answered "Yes" to question 5.2, please provide details in the space below.		
	No certified labs are available in Bahrain and regional countries to monitor contents of tobacco products		
5.4	What, if any, are the constraints or barriers, other than lack of resources, you have encountered in implementing the Convention?		
	(Please refer to Article 21.1(b).)		
	Taxes are not periodically raised and currently ad valorem tax is applied only which makes the prices of tobacco products affordable		
5.5	Please provide any other relevant information not covered elsewhere that you consider important.		
5.6	Your suggestions for further development and revision of the reporting instrument:		

End of reporting instrument