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

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

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

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

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

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

#### 1. ORIGIN OF THE REPORT

1.1	NAME OF CONTRACTING PARTY	GUYANA			
1.2	Information on national contact responsible for preparation of the report:				
	Name and title of contact officer	SABELLA YUSSUF			
	Full name of institution	MINISTRY OF HEALTH, GUYANA			
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1.3	Signature of government official submitting the report:				
	Name and title of officer	SABELLA YUSSUF, HEALTH PROMOTION COORDINATOR			
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1.4	Period of reporting	2007-2010			
1.5	Date the report was submitted	21 December 2010			

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

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

2.1	PREVALENCE OF TOBACCO USE				
2.1.1	Smoking prevalence in the adult population (all)  (Please provide prevalence data for total adult population, and identify the age considered, e.g. 15 years old and over, 18-64 years; see 2.1.1.2)				
		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	31.00 %			
	Daily smokers	%			
	Occasional smokers	%			
	Former smokers	%			
	Never smokers %				
	FEMALES				
	Current smokers	3.00 %			
	Daily smokers	%			
	Occasional smokers	%			
	Former smokers	%			
	Never smokers	%			
	TOTAL (males and	females)			
	Current smokers	34.00 %			
	Daily smokers	%			
	Occasional smokers	%			
	Former smokers	%			
	Never smokers	%			

2.1.1.1	Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.1:
	Cigarettes, pipe and other tobacco products
2.1.1.2	Please indicate the age range to which the data used to answer question 2.1.1 refer:
	15 to 49
2.1.1.3	Please indicate the year and source of the data used to answer question 2.1.1:
	Demographic Health Survey 2009
2.1.1.4	Please provide the definitions of "current smoker", "daily smoker", "occasional smoker", "former smoker" and "never smoker" used in this report.
	This was not identified in the survey.
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.
	This is the first survey that provided adult prevalence data. Since none was done before there isn't any data to compare it with so as to establish a trend.

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	15- 19	7.50 %		
	smokers <sup>1</sup>	20 - 24	29.10 %		
		25 - 29	25.10 %		
	Add age group	30 - 34	33.20 %		
		35 - 39	38.10 %		
		40 - 44	44.60 %		
		45 - 49	39.80 %		
	FEMALES				
	Current smokers <sup>1</sup>	15- 19	1.00 %		
	smokers	20 - 24	2.20 %		
		25 - 29	2.20 %		
	Add age group	30 - 34	2.00 %		
		35 - 39	4.80 %		
		40 - 44	6.60 %		
		45 - 49	5.40 %		
	TOTAL (male	es and females)			
	Current	15- 19	8.50 %		
	smokers <sup>1</sup>	20 - 24	31.30 %		
		25 - 29	27.30 %		
	Add age group	30 - 34	35.20 %		
		35 - 39	42.90 %		

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

	40 - 44	51.90 %	
	45 - 49	45.20 %	

2.1.2.1	Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.2:
	Cigarettes, smokeless tobacco and other products.
2.1.2.2	Please indicate the year and source of the data used to answer question 2.1.2:
	Preliminary data from the Demographic health Survey 2009
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.
	Since this is the first round of the Demographic Healh Survey and the first survey that looks at smokig in adult population, a trend cannot be established as yet.

Prevalence of smokeless tobacco use in the adult population (all)				
(Please provide prevalence data for total adult population, and identify the age considered in 2.1.3.2, e.g. 15 years old and over, 18–64 years; see 2.1.3.2)				
	Prevalence (%)			
	(please include all smokeless tobacco products in prevalence data)			
MALES				
Current users	3.00 %			
Daily users	%			
Occasional users	%			
Former users	%			
Never users	%			
FEMALES				
Current users	2.00 %			
Daily users	%			
Occasional users	%			
Former users	%			
Never users	%			
TOTAL (males and females)				
Current users	5.00 %			
Daily users	%			
Occasional users	%			
Former users	%			
Never users	%			
	(Please provide pronsidered in 2.1.3.  MALES  Current users  Daily users  Occasional users  Former users  FEMALES  Current users  Daily users  Occasional users  Former users  Torner users  Total (males and Current users)  Daily users  Occasional users  Former users  Total (males and Current users)  Daily users  Occasional users  Former users			

2.1.3.1	Please indicate the smokeless tobacco products included in calculating prevalence for question 2.1.3:		
	Was not specified in the report.		
2.1.3.2	Please indicate the age range to which the data used to answer question 2.1.3 refer:		
	15 to 49		
2.1.3.3	Please indicate the year and source of the data used to answer question 2.1.3:		
	Demographic Health Survey 2009		
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.		
	Was not specified in the report.		
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.		
	Since this is the first round of the Demographic Health Survey and the first survey that looks at smokig in adult population, a trend cannot be established as yet.		

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)					
		Age group (adults)	Prevalence (%) (please include all smokeless tobacco products in prevalence data)			
	MALES					
•	Current users <sup>2</sup>	15 - 19	1.20 %			
	Add age group	20 - 24	4.90 %			
		25 - 29	4.80 %			
		30 - 34	2.90 %			
		35 - 39	4.00 %			
		40 - 44	1.50 %			
		45- 49	2.10 %			
	FEMALES					
1	Current users <sup>2</sup>	15 - 19	0.10 %			
	Add age group	20 - 24	0.60 %			
		25 - 29	%			
		30 - 34	0.20 %			
		35 - 39	0.20 %			
		40 - 44	0.40 %			

<sup>&</sup>lt;sup>2</sup> Please provide data on either all current users or daily users only, whichever is available.

2.1.4	e adult population (current users) by age						
	(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 smokeless tobacco products in prevalence data)				
	Current users <sup>2</sup>	1.30 %					
	Add age group	20 - 24	5.50 %				
		25 - 29	4.80 %				
		30 - 34	3.10 %				
		35 - 39 4.20 %					
		40 - 44	1.90 %				
		45 - 49	2.30 %				

2.1.4.1	Please indicate the smokeless tobacco products included in the answer to question 2.1.4:		
	Product not specified		
2.1.4.2 Please indicate the year and source of the data used to answer question			
	Demographic Health Survey 2009		
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.		
	Since this is the first round of the Demographic Healh Survey and the first survey that looks at smoking in adult population, a trend cannot be established as yet.		

2.1.5	Tobacco use	by ethnic group	(s)		
	Ethnic group(s)		Prevalence (%) (please include all smoking or smokeless tobacco products in prevalence data)		
			Males	Females	Total (males and females)
	Current users <sup>3</sup>		%	%	%
			%	%	%
	Add ethnic group		%	%	%
			%	%	%
			%	%	%
2.1.5.1	Please indicate the tobacco products included in the answer to question 2.1.5:				
2.1.5.2	Please indicate the age range to which the data used to answer question 2.1.5 refer			nestion 2.1.5 refer:	
2.1.5.3	Please indicate the year and source of the data used to answer question 2.1.5:				

<sup>&</sup>lt;sup>3</sup> Please provide data on either all current users or daily users only, whichever is available.

2.1.6		Age range	Prevalence (%) (please include all smoking or smokeless tobacco products in prevalence data)					
			Smoking tobacco	Smokeless tobacco	Other tobacco			
	Boys							
	Current users <sup>4</sup>	13-15	13.30 %	%	16.70 %			
	Add youth		%	%	%			
	group		%	%	%			
			%	%	%			
			%	%	%			
	Girls							
,	Current users <sup>4</sup>	13-15	5.60 %	%	12.30 %			
	Add youth group		%	%	%			
			%	%	%			
			%	%	%			
			%	%	%			
	TOTAL (boys and girls)							
	Current users <sup>4</sup>	13-15	9.50 %	%	14.80 %			
	Add youth		%	%	%			
	group		%	%	%			
			%	%	%			
			%	%	%			
2.1.6.1	Please in question		acco products included	in calculating pre	evalence for			
	Bidis, cigars, pipes, water pipes, cigarillos, little cigars							

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

1	
2.1.6.2	Please indicate the year and source of the data used to answer question 2.1.6:
	GYTS 2010
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 tobacco use" was defined by how many days during the past thirty days were smoked.
2.1.6.4	Please provide a brief explanation of the trend in tobacco use by young persons in the past two years or since submission of your last report.
	In the 2004 to 2010 surveys the percentage of of boys who ever smoke was significantly higher than that of girls - 34.7 % of boys compared to 20.4 percent of girls ( 2004 ) and 33.5% of boys compared to 17.1 % of girls ( 2010).
	The use of "other tobacco products" was significantly greater in 2010 compared to 2000 and 2004: 14.8% of students aged 13-15 years used oral tobacco in 2010 compared to 8.4% in 2000 and 8.3% in 2004.
	Also, the use of oral tobacco significantly increased among girls from 2000 $(5.2\%)$ to 2010 $(12.3\%)$ .

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).
	There is exposure on most public places and in homes. 31.8% of students live in homes where others smoke in their presence and more than half of students (55%) are exposed to smoke around others outside of the home. More than 3 in 10 students have at least one parent who smokes.
2.2.3	Please indicate the year and source of the data used to answer question 2.2.1:
	Global Tobacco Surveillance System - GYTS 2010 and GSHS 2010, Demographic Health Survey 2008.

2.3	TOBACCO-RELATED MORTALITY
2.3.1	Do you have information on tobacco-related mortality in your population?   Yes   No
2.3.2	If you answered "Yes" to question 2.3.1, what is the estimated total number of deaths attributable to tobacco use in your population?
2.3.3	If available, please provide any additional information on mortality attributable to tobacco use (e.g. lung cancer, cardiovascular diseases) in your jurisdiction.
2.3.4	Please indicate the year and source of the data used to answer questions 2.3.2 and 2.3.3, and please submit a copy of the study you refer to:

2.4	TOBACCO-RELATED COSTS				
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?   Yes No				
2.4.2	If you answered "Yes" to question 2.4.1, please provide details (e.g. direct (health care-related) and indirect costs and, if possible, the method used to estimate these costs).				
2.4.3	Please indicate the year and source of the data used to answer question 2.4.2, and please submit a copy of the study you refer to:				

2.5	SUPPLY OF TOBACCO AND TOBACCO PRODUCTS					
	(with reference to Articles 6.2(b), 20.4(c), and 15.5)					
2.5.1	5.1 Licit supply of tobacco products					
		Product	Unit (e.g. pieces, tonnes)	Domestic production	Exports	Imports
	Smoking tobacco products					
	Add product					
	Smokeless tobacco products  Add product					
	Other tobacco products  Add product					
	Tobacco	Leaves			1	
2.5.2	Please provide information on the volumes of duty-free sales (e.g. product, unit, quantity), if available.					
2.5.3	Please 2.5.2:	indicate the yea	ar and source of the	data used to ans	wer questions	2.5.1 and

2.6	SEIZURES OF ILLICIT TOBACCO PRODUCTS					
	(with 1	reference to Arti	icle 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		u have any info tional tobacco n		entage of smuggled toba	acco products on	
2.6.3	If you answered "Yes" to question 2.6.2, what percentage of the national tobacco market do smuggled tobacco products constitute?					
2.6.4	If you answered "Yes" to question 2.6.3 and you have information available, what is the trend over the past two years or since submission of your last report in the percentage of smuggled tobacco products in relation to the national tobacco market?					
2.6.5	Please	provide any fu	rther information or	n illicit or smuggled toba	acco products.	
2.6.6	Please	e indicate the sou	urce of the data use	d to answer questions in	section 2.6:	
2.7	TOBA	CCO-GROWI	ING			
2.7.1			rowing in your juri	sdiction? 🗌 Yes 🛮 🖂	No	
2.7.2	If you answered "Yes" to question 2.7.1, please provide information on the number of workers involved in tobacco-growing. If available, please provide this figure broken down by gender.					
2.7.3		e provide, if avai al gross domest		the value of tobacco leaf	production in the	
2.7.4	Please indicate the year and source of the data used to answer questions in section 2.7:					

			0.5.1.0.50						
2.8	TAXATION OF								
	(with reference to	Articles 6.2(a)	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))? 27%								
2.8.2	How are the excise taxes levied (what types of taxes are levied)?								
	Specific tax only     Yes  No								
	Ad val	lorem tax only		Yes	No No				
	• Combi	ination of specifi	c and ad valorem	taxes Xes	☐ No				
	• More	complex structur	e (please explain	: )					
2.8.3	If available, please provide details on the rates of taxation for tobacco products at all levels of Government and be as specific as possible (specify the type of tax, e.g. VAT, sales, import duties)								
		Product	Type of tax	Rate or amount	Base of tax <sup>5</sup>				
	Smoking tobacco products  Add product	Cigarette	Specific Excise,Ad Valorem, Import Duties	0.27	Retail price in a pack of 20 cigarettes of the most popular brand consumed locally.				
	Smokeless tobacco products								
	Add product								
	Other tobacco products								
	Add product								
• • •	<u></u>								
2.8.4	Please briefly des			pacco products in the invised of the contraction of	ne past two				

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

	No Changes
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:
	Tobacco Control Report for the Region of the Americas

2.9		CE OF TOBACO		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 capital city.						
			widely sold bra		Number of	Retail price	
		Smoking tobacco products	Smokeless tobacco products	Other tobacco products	units or amount per package		
	Domestic	Bristol			20	280	
		Pal Mall			20	240	
		Benson and Hedges			20	500	
	Imported						

2.9.2	Please indicate the year and source of the data used to answer question 2.9.1.
	Retail price from distributors.
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.
	Guyana Dollars (GYD)
2.9.4	Please briefly describe the trend in the prices of tobacco products in the past two years or since submission of your last report in your jurisdiction.
	There have been no significant changes in the last three years.

### 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?	⊠ Yes	□ No
3.1.1.2	5.1	If you answered "No" to question 3.1.1.1, have you partially developed and implemented tobacco control strategies by including tobacco control in national health, public health or health promotion strategies, plans and programmes?	Yes	□ No
3.1.1.3	5.1	If you answered "No" to question 3.1.1.2, is any aspect of tobacco control that is referred to in the Convention included in any national strategy, plan or programme?	Yes	□ No
3.1.1.4	5.2(a)	Have you established or reinforced and finance	ed	
		a focal point for tobacco control	⊠ Yes	☐ No
		a tobacco control unit	⊠ Yes	☐ No
		<ul> <li>a national coordinating mechanism for tobacco control</li> </ul>	⊠ Yes	☐ No
3.1.1.5	(e.g.	the nature of the national coordinating mechanism, point for tobacco control or the tobacco control un	the institution	
The national coordinating mechanism for Tobacco Control is Tobacco Control Council which is chaired by the Minister of consists of partners from international organisations, government and non governmental agencies. The focal point for tobacco of Health Promotion's Coordinator, Health Promotion and Educatis paid by and stationed at the Ministry of Health.				lealth and ental agencies ntrol is the
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.	-	•

	The tobacco control focal point is the employed permanently at the Ministry of Health. The strategies and policies are guided by those outlined in the National Health Sector Strategy 2008-2012, and the draft Health Promotion's Act. Money is provided in the National Budget for Tobacco Control for every fiscal year.
	The tobacco focal point is also the coordinator and secretary of the National Tobacco Control Council. The council meets quarterly to monitor all activities in tobacco control. There are representatives from all of the relevant Ministries, International Organisations and Non- Governmental Organization. The Tobacco Company does not serve on this council.
	The focal point works in collaboration with the Health Promotion's Advisors of the Pan American Health Organisation and the Health Promotion's officer at the Ministry of Education, and all other parties that are involved in Tobacco Control in Guyana.
3.1.1.7	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.

3.1.2	5.3 Protection of public health policies with respect to tobacco control f commercial and other vested interests of the tobacco industry						
		(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 a administrative or other measures or have you appropriate, programmes on any of the follow	implemented, wh				
3.1.2.1		<ul> <li>protecting public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry?</li> </ul>	⊠ Yes	□ No			
3.1.2.2		<ul> <li>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?</li> </ul>	⊠ Yes	□ No			
3.1.2.3		If you answered "Yes" to any of the questions und provide details in the space below.	er 3.1.2.1 or 3.1.2.	2, please			
Interms of administrative and executive bodies, there is the Nat Tobacco Control Council, in which the Tobacco Industry is not The National Health Sector Strategy for Guyana 2008- 2012 g Tobacco Control activity and schedules.  Through the Health Communication and Health Promotion's Dethere is a rigorous Communication Strategy that addresses all as Tobacco Education in all target groups and utilizes all medium suitable for each target group and the regions in which they live materials and information can be uplifted from the Ministry of I							
	]	As mandated by the Health Facilities Licensing Decree from the Ministry of Education, All Health Facilities must be 100% smoke free.	-				
	1	The Ministry of Health also has a Smoke Free the moment it is a voluntary program and partic A declaration that is certified by the Minister of along with Smoke Free Environments Signs. Adeveloping enforcement strategies and penaliti	icipants enter into of Health is prese Assistance is also	o it by choice. ented to them in			
		As of 2010, the Ministry of Health has also est Cessation Strategy to assist current smokers we passage of this strategy was facilitated by the I Diseases, Pan American Health Organization at (This is an NGO that works with the Ministry activities. Through collaboration with the National Chest Clinic, a department under the Ministry	ho are interested Health Promotion and Guyana Ches of Health in Tob onal Tuberculosi	to quit. The n, Chronic st Society bacco Control s Clinic a.k.a.			

	services for chest related diseases, the Cessation Program has now been made a permanent service that will be budgetted and offered. A pilot study was conducted and a service is currently being offered there. For 2011 and 2012 plans have been established to rolloutthe cesation program nationally, with the establishment of sixteen permanent sites and forty staff trained and equipped for tobacco cessation.
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.
	Tobacco control policies and standards fall under the responsibility of the National Tobacco Control Council in accordance with FCTC and the Tobacco Company is not represented on the council.
3.1.2.5	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.

Article	MEASURES RELATING TO THE REDUCTION OF DEMAND FOR TOBACCO (with reference to Articles 6–14)				
6	Price and tax measures to reduce the den	nand for tobacco			
	brief summary in the space provided at the	end of the section	and attach the		
	executive, administrative or other measures	or have you imple			
6.2(a)	<ul> <li>tax policies and, where appropriate, price policies on tobacco products so as to contribute to the health objectives aimed at reducing tobacco consumption?</li> </ul>	Yes	⊠ No		
6.2(b)	<ul> <li>prohibiting or restricting, as appropriate, sales to international travellers of tax- and duty-free tobacco products?</li> </ul>	Yes	⊠ No		
	<ul> <li>prohibiting or restricting, as appropriate, imports by international travellers of tax- and duty-free tobacco products?</li> </ul>	Yes	⊠ No		
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.					
If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.			this section,		
	6.2(a)  6.2(b)  Plea (Pr since)	FOR TOBACCO (with reference to Articles 6–14)  Price and tax measures to reduce the den (Please check "Yes" or "No". For affirmat brief summary in the space provided at the relevant documentation. Please provide doc of the six official languages.)  Have you adopted and implemented, where executive, administrative or other measures where appropriate, programmes on any of the objectives and, where appropriate, price policies on tobacco products so as to contribute to the health objectives aimed at reducing tobacco consumption?  6.2(b)  — prohibiting or restricting, as appropriate, sales to international travellers of tax- and duty-free tobacco products?  — prohibiting or restricting, as appropriate, imports by international travellers of tax- and duty-free tobacco products?  Please provide a brief description of the progress m (Price and tax measures to reduce the demand for the since submission of your last report.	FOR TOBACCO (with reference to Articles 6–14)  Price and tax measures to reduce the demand for tobacco (Please check "Yes" or "No". For affirmative answers, please brief summary in the space provided at the end of the section relevant documentation. Please provide documentation, if any of the six official languages.)  Have you adopted and implemented, where appropriate, legise executive, administrative or other measures or have you implemented appropriate, programmes on any of the following:  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?  6.2(b)  - prohibiting or restricting, as appropriate, sales to international travellers of tax- and duty-free tobacco products?  - prohibiting or restricting, as appropriate, imports by international travellers of tax- and duty-free tobacco products?  Please provide a brief description of the progress made in implement (Price and tax measures to reduce the demand for tobacco) in the passince submission of your last report.		

3.2.2	8.2	Protection from exposure to tobacco s	smoke		
		(Please check "Yes" or "No". For affirm summary in the space provided at the ended relevant documentation. Please provide the six official languages.)	nd of the section a	ınd attack	the
		Have you adopted and implemented, what administrative or other measures or have appropriate, programmes on any of the	e you implemente		e, executive,
3.2.2.1		<ul> <li>banning tobacco smoking in indoor workplaces, public transport, indoor public places and, as appropriate, other public places?</li> </ul>	Yes		⊠ No
3.2.2.2		If you answered "Yes" to question 3.2.2 measure providing for the ban?	.1, what is the typ	oe/nature	of the
		• national law	Yes		☐ No
		• subnational law(s)	Yes		☐ No
		administrative and executive orders	Yes		□ No
		<ul> <li>voluntary agreements</li> </ul>	Yes		☐ No
		• other measures ( <i>please</i> specify:	Yes		☐ No
3.2.2.3		Please provide a brief explanation of the measures providing for the ban.	type/nature and c	content of	the
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?	Yes		□ No
3.2.2.5		If you answered "Yes" to question 3.2.2.	4 please provide of	details of	this system.
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		$\boxtimes$	
health-care facilities	$\boxtimes$		
• educational facilities <sup>1</sup>	$\boxtimes$		
• universities		$\boxtimes$	
private workplaces		$\boxtimes$	
• other (please specify: )			
Public transport:			
• airplanes			
• trains			
• ferries			
<ul> <li>ground public transport (buses, trolleybuses, trams)</li> </ul>			
<ul> <li>motor vehicles used as places of work (taxis, ambulances, delivery vehicles)</li> </ul>			
• private vehicles			
• other (please specify: )			

<sup>&</sup>lt;sup>1</sup> except universities

	Indoor public places:					
	<ul> <li>cultural facilities</li> </ul>					
	<ul> <li>shopping malls</li> </ul>					
	<ul> <li>pubs and bars</li> </ul>					
	<ul> <li>nightclubs</li> </ul>					
	<ul> <li>restaurants</li> </ul>					
	• other (please specify: )					
3.2.2.7	Please provide a brief summary of com specific details of the partial measures t			rith		
	Banning tobacco smoking in indoc	or workplaces				
	Banning tobacco smoking in publi	c transport				
	Banning tobacco smoking in indoor public places					
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.					
	As mandated by the Health Facilities Lice Decree from the Ministry of Education, A Facilities must be 100% smoke free.	-				
	The Ministry of Health also has a Smoke Free Environments Program. At the moment it is a voluntary program and participants enter into it by choic A declaration that is certified by the Minister of Health is presented to them along with Smoke Free Environments Signs. Assistance is also given in developing enforcement strategies and penalities strategies that are suitable When they are declared smoke free, the media is present and it is reported					
	nationally. This serves to support the awa	-		-		
3.2.2.9	If you have any relevant information pertaini please provide details in the space below.	ng to but not cov	ered in this	section,		

3.2.3	9	Regulation of the contents of tobacco prod	ucts		
		(Please check "Yes" or "No". For affirmative summary in the space provided at the end of relevant documentation. Please provide documents the six official languages.)	the section and at	tach the	
		Have you adopted and implemented, where a administrative or other measures or have you appropriate, programmes on any of the follow	implemented, wh		
3.2.3.1		<ul> <li>testing and measuring the contents of tobacco products?</li> </ul>	Yes	⊠ No	
3.2.3.2		<ul> <li>testing and measuring the emissions of tobacco products?</li> </ul>	Yes	⊠ No	
3.2.3.3		<ul> <li>regulating the contents of tobacco products?</li> </ul>	Yes	⊠ No	
3.2.3.4		<ul> <li>regulating the emissions of tobacco products?</li> </ul>	Yes	⊠ No	
3.2.3.5	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.				
3.2.3.6	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.				

3.2.4	10	Regulation of tobacco product disclosures				
		(Please check "Yes" or "No". For affirmati summary in the space provided at the end of relevant documentation. Please provide docu the six official languages.)	the section and at	tach the		
		Have you adopted and implemented, where a administrative or other measures or have you appropriate, programmes on any of the follows:	implemented, wh			
3.2.4.1		<ul> <li>requiring manufacturers or importers of Government authorities information about</li> </ul>		to disclose to		
		• contents of tobacco products?	Yes	⊠ No		
		emissions of tobacco products?	Yes	⊠ No		
3.2.4.2		requiring public disclosure of informati	on about the:			
		contents of tobacco products?	Yes	⊠ No		
		emissions of tobacco products?	Yes	⊠ No		
3.2.4.3	(1	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.				
3.2.4.4 If you have any relevant information pertaining to but not covere please provide details in the space below.			but not covered in	this section,		

3.2.5	Packaging and labelling of tobacco products			
		(Please check "Yes" or "No". For affirma brief summary in the space provided at the the relevant documentation. Please provide in one of the six official languages.)	ion and attach	
		Have you adopted and implemented, where executive, administrative or other measures where appropriate, programmes on any of the second	s or have you in	_
3.2.5.1	11	<ul> <li>requiring that packaging, individual cigarettes or other tobacco products do not carry advertising or promotion?</li> </ul>	⊠ Yes	☐ No
3.2.5.2	11.1(a)	<ul> <li>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?</li> </ul>	⊠ Yes	□ 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?	⊠ Yes	□ No
3.2.5.4	11.1(b)(i)	<ul> <li>ensuring that the health warnings are approved by the competent national authority?</li> </ul>	X Yes	☐ No
3.2.5.5	11.1(b)(ii)	ensuring that the health warnings are rotated?	X Yes	☐ No
3.2.5.6	11.1(b)(iii)	ensuring that the health warnings are clear, visible and legible?	⊠ Yes	☐ No
3.2.5.7	11.1(b)(iii)	If you answered "Yes" to question 3.2.5.6, does your law mandate, as a minimum, a style, size and colour of font to render the warning clear, visible and legible?	⊠ Yes	□ No
3.2.5.8	11.1(b)(iv)	ensuring that the health warnings occupy no less than 30% of the principal display areas?	⊠ Yes	☐ No
3.2.5.9		ensuring that the health warnings occupy 50% or more of the principal display areas?	Yes	☐ No
3.2.5.10	11.1(b)(v)	ensuring that health warnings are in the form of, or include, pictures or pictograms?	Yes	⊠ 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?	Yes	⊠ 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?	Yes	□ No	
3.2.5.13	11.2	<ul> <li>requiring that each unit packet and package of tobacco products and any outside packaging and labelling of such products contain information on relevant constituents and emissions of tobacco products?</li> </ul>	⊠ Yes	□ No	
3.2.5.14	11.3	<ul> <li>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?</li> </ul>	⊠ Yes	□ No	
3.2.5.15	(Paci	be provide a brief description of the progress makaging and labelling of tobacco products) in the hission of your last report.			
	The Standards for Packaging and Labelling of Tobacco Products was approved by the Standards Council of the Bureau of Standards. This document is currently awaiting submission to Cabinet for enactment. Upon passage in Cabinet and Parliament, the standards will be made mandatory.				
3.2.5.16	3.2.5.16 If you have any relevant information pertaining to or not covered in 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	
3.2.6.2		If you answered "Yes" to question 3.2.6.1, to whom are these programmes targeted?			
		adults or the general public	⊠ Yes	☐ No	
		children and young people	⊠ Yes	☐ No	
		• men	⊠ Yes	☐ No	
		• women	⊠ Yes	☐ No	
		• pregnant women	⊠ Yes	☐ No	
		• ethnic groups	Yes	☐ No	
		• other (please specify: )	Yes	☐ No	
3.2.6.3			ou answered "Yes" to question 3.2.6.1, do you reflect the following differences among targeted population groups in educational and lic awareness programmes?		
		• age	⊠ Yes	☐ No	
		• gender	⊠ Yes	☐ No	
		educational background	⊠ Yes	☐ No	
		cultural background	Yes	⊠ No	
		socioeconomic status	⊠ Yes	☐ No	
		• other (please specify: )	Yes	☐ No	
3.2.6.4	12(b)	If you answered "Yes" to question 3.2.6.1, do these educational and public awareness programmes cover:			
		health risks of tobacco consumption?	⊠ Yes	☐ No	
		<ul> <li>health risks of exposure to tobacco smoke?</li> </ul>	⊠ Yes	☐ No	
		<ul> <li>benefits of the cessation of tobacco use and tobacco-free lifestyles?</li> </ul>	⊠ Yes	☐ No	
	12(f)	adverse economic consequences of			

		- tobacco production?	X Yes	☐ No	
		- tobacco consumption?	⊠ Yes	□No	
		adverse environmental consequences of			
		- tobacco production?	X Yes	☐ No	
		- tobacco consumption?	X Yes	☐ No	
3.2.6.5	12(e)	<ul> <li>awareness and participation of the follow in development and implementation of in strategies for tobacco control:</li> </ul>			
		• public agencies?	⊠ Yes	☐ No	
		<ul> <li>nongovernmental organizations not affiliated with the tobacco industry?</li> </ul>	⊠ Yes	□No	
		• private organizations?	⊠ Yes	□No	
		<ul><li>other (<i>please specify:</i> General Public)?</li></ul>	⊠ 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?	⊠ Yes	□ No	
3.2.6.7	12(d)	Are appropriate and special training or ser programmes on tobacco control addressed			
		• health workers?	X Yes	☐ No	
		• community workers?	X Yes	☐ No	
		• social workers?	X Yes	☐ No	
		• media professionals?	⊠ Yes	□No	
		• educators?	X Yes	☐ No	
		decision-makers?	⊠ Yes	☐ No	
		• administrators?	Yes	⊠ No	
		• other (please specify: )?	Yes	☐ No	

3.2.6.8	Please provide a brief description of the progress made in implementing Article 12 ( <i>Education, communication, training and public awareness</i> ) in the past two years or since submission of your last report.
	Results from the the GYTS studies show that over three quarters of students saw anti smoking messages in the past 30 days, 50.4 % had been taught in class during the past year about the dangers of smoking and 47% had been taught on the effects of smoking during the past year. Also, from the GSPS three in five schools include tobacco use prevention in the school curriculum and two in five schools have access to teaching materials.
	The Education, Promotion and Training component falls under the responsibility of the Health Promotion and Communications Unit. The methods used are outlined in an established communication strategy which identifies risk populations and appropriate communication medium, whether it be from media methods, print methods or person to person to person communication. This component is a permanent service offered by the Ministry of Health and is funded by the Government of Guyana.
	All materials produced are free of cost and are available at the Ministry of Health.
	Information about the latest anti-tobacco communication campaign is available at: http://www.health.gov.gy/campaigns_smokefree.php
3.2.6.9	If you have any relevant information pertaining to but not covered in this 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 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, any legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes:			
3.2.7.1	13.2	<ul> <li>instituting a comprehensive ban on all tobacco advertising, promotion and sponsorship?</li> </ul>	Yes	⊠ No	
If	you answe	red "No" to question 3.2.7.1, please proceed to	question 3.2.7.3.		
3.2.7.2		If you answered "Yes" to question 3.2.7.1, does your ban cover:			
		display and visibility of tobacco products at points of sales?	Yes	☐ No	
		• the domestic Internet?	Yes	☐ No	
		• the global Internet?	Yes	□No	
		<ul> <li>brand stretching and/or brand sharing?</li> </ul>	Yes	☐ No	
		<ul> <li>product placement as a means of advertising or promotion?</li> </ul>	Yes	☐ No	
		the depiction of tobacco or tobacco use in entertainment media products?	Yes	☐ No	
		tobacco sponsorship of international events or activities and/or participants therein?	Yes	☐ 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?	Yes	□ No	
		<ul> <li>cross-border advertising, promotion and sponsorship originating from your territory?</li> </ul>	Yes	☐ No	

	13.7	<ul> <li>the same forms of cross-border advertising, promotion and sponsorship entering your territory for which domestic regulation apply?</li> </ul>	Yes	□ 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?	Yes	⊠ No
3.2.7.4	13.3	<ul> <li>applying restrictions on all tobacco advertising, promotion and sponsorship?</li> </ul>	Yes	⊠ No
3.2.7.5	13.3	<ul> <li>applying restrictions on cross-border advertising, promotion and sponsorship originating from your territory with cross-border effects?</li> </ul>	Yes	⊠ No
3.2.7.6	13.4(a)	<ul> <li>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?</li> </ul>	☐ 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?	Yes	⊠ No
3.2.7.8	13.4(c)	<ul> <li>restricting the use of direct or indirect incentives that encourage the purchase of tobacco products by the public?</li> </ul>	Yes	⊠ No
3.2.7.9	13.4(d)	<ul> <li>requiring the disclosure to relevant         Government authorities of         expenditures by the tobacco industry         on advertising, promotion and         sponsorship not yet prohibited?</li> </ul>	Yes	⊠ No

3.2.7.10	13.4(e)	13.4(e) – restricting tobacco advertising, promotion and sponsorship on:				
		• radio?	Yes	⊠ No		
		• television?	Yes	⊠ No		
		• print media?	Yes	⊠ No		
		• the domestic Internet?	Yes	⊠ No		
		• the global Internet?	Yes	⊠ No		
		• other media (please specify: )?	Yes	☐ No		
3.2.7.11	13.4(f)	<ul> <li>restricting tobacco sponsorship of:</li> </ul>				
		<ul> <li>international events and activities?</li> </ul>	Yes	⊠ No		
		• participants therein?	Yes	⊠ No		
	$\mathbf{W}$	hether you answered "Yes" or "No" to question 3	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?	Yes	⊠ No		
3.2.7.13	13.7	<ul> <li>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?</li> </ul>	Yes	⊠ 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.					
	The current Standard for Tobacco Advertisement and Sponsorhip was updated, reviewed and the first draft has been submitted for review by the Standards Council.					
3.2.7.15		you have any relevant information pertaining to base provide details in the space below.	out not covered in	this section,		

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, who executive, administrative or other measure where appropriate, programmes on any o	res or have you im			
3.2.8.1	14.1	<ul> <li>developing and disseminating appropriate, comprehensive and integrated guidelines based on scientific evidence and best practices?</li> </ul>	⊠ Yes	□ No		
3.2.8.2	14.1	<ul> <li>programmes to promote cessation of tobacco use, including:</li> </ul>				
		media campaigns     emphasizing the importance     of quitting?	⊠ Yes	☐ No		
		programmes specially designed	for:			
		<ul> <li>underage girls and young women</li> </ul>	Yes	⊠ No		
		o women	Yes	⊠ No		
		o pregnant women	Yes	⊠ No		
		telephone quitlines	Yes	☐ No		
		<ul> <li>local events, such as activities related to World No Tobacco Day or National No Smoking Day, if appropriate?</li> </ul>	⊠ Yes	□ No		
		• other ( <i>please specify:</i> Television program geared at Drug Demand Reduction, which a focus on Tobacco use.)?	⊠ Yes	□ No		
3.2.8.3	14.2(a)	design and implementation of progrecessation of tobacco use, in such loc	_	romoting the		
		educational institutions?	X Yes	☐ No		
		health-care facilities?	X Yes	☐ No		
		• workplaces?	X Yes	☐ No		

• sporting environments?	Yes	⊠ No
• other (please specify: )?	Yes	☐ No

3.2.8.4	14.2(b)	counselling services for cessation o	<ul> <li>inclusion of diagnosis and treatment of tobacco dependence and counselling services for cessation of tobacco use in national programmes, plans and strategies for:</li> </ul>		
		• tobacco control?	⊠ Yes	☐ No	
		• health?	Yes	☐ No	
		• education?	⊠ Yes	☐ No	
3.2.8.5		<ul> <li>inclusion of programmes on the diagnosis and treatment of tobacco dependence in your health-care system?</li> </ul>	⊠ Yes	□ 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	⊠ Yes	☐ No	
		secondary and tertiary health care	⊠ Yes	☐ No	
		• specialist health-care systems ( <i>please specify:</i> )	Yes	☐ No	
		<ul> <li>specialized centres for cessation counselling and treatment of tobacco dependence</li> </ul>	⊠ Yes	□ No	
		rehabilitation centres	Yes	⊠ No	
		• other (please specify: )	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 Parti	ally None	
		secondary and tertiary health care	Fully Parti	ally None	
		• specialist health-care systems (please specify: )	Fully Parti	ally None	

		<ul> <li>specialized centres for cessation counselling and treatment of tobacco dependence</li> </ul>	Fully Parti	ally None
		rehabilitation centres	Fully Parti	ally None
		• other (please specify: )	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:		
		<ul> <li>physicians</li> </ul>	⊠ Yes	☐ No
		• dentists	Yes	⊠ No
		family doctors	Yes	⊠ No
		practitioners of traditional medicine	Yes	⊠ No
		• other medical professionals (please specify:	Yes	☐ No
		• nurses	⊠ Yes	☐ No
		• midwives	Yes	⊠ No
		• pharmacists	Yes	⊠ No
		Community workers	Yes	⊠ No
		Social workers	Yes	⊠ No
		Others (please specify:	Yes	☐ No
3.2.8.9	14.2(c)	<ul> <li>training on tobacco dependence trea curricula of health professional train levels at the following schools:</li> </ul>		
		• medical?	⊠ Yes	☐ No
		• dental?	Yes	⊠ No
		• nursing?	Yes	⊠ No
		• pharmacy?	⊠ Yes	☐ No
		• other (please specify: )?	Yes	☐ No
3.2.8.10	14.2(d)	<ul> <li>facilitating accessibility and/or</li> </ul>	⊠ Yes	☐ No

		affordability of pharmaceutical products for the treatment of tobacco dependence?			
3.2.8.11	14.2(d)	If you answered "Yes" to question 3.2.8.10, where and how can these products be legally purchased in your country?			
3.2.8.12	14.2(d)	If you answered "Yes" to question 3.2.8.10, which pharmaceutical products are legally available for the treatment of tobacco dependence in your jurisdiction?			
		nicotine replacement therapy		Yes	⊠ No
		• bupropion		Yes	☐ No
		• varenicline		Yes	⊠ No
		• other (please specify: )?		Yes	☐ No
3.2.8.13	14.2(d)	If you answered "Yes" to question 3.2 covered by public funding or reimburs		e costs of	these products
		nicotine replacement therapy	Fully	☐ Parti	ally None
		• bupropion	Fully	☐ Parti	ally None
		• varenicline	Fully	☐ Parti	ally None
		• other (please specify: )?	Fully	☐ Parti	ally None
3.2.8.14	Art	ase provide a brief description of the progricle 14 ( <i>Demand reduction measures concessation</i> ) in the past two years or since subm	erning tobac	co depen	dence and
	As of 2010, the Ministry of Health has established an approved Cessation Strategy to assist current smokers who are interested to quit. The passage of this strategy was facilitated by the Health Promotion, Chronic Diseases, Pan American Health Organization and Guyana Chest Society (This is an NGO that works with the Ministry of Health in Tobacco Control activities. Through collaboration with the National Tuberculosis Clinic a.k.a. the Chest Clinic, a department under the Ministry of Health that offers services for chest related diseases, the Cessation Program has now been made a permanent service that will be budgetted and offered. A pilot study was conducted at the Chest Clinic and a service is currently being offered there. For 2011 and 2012 plans have been established to roll out the cessation program nationally, with the establishment of sixteen permanent sites and forty staff trained and equipped for tobacco cessation.				
3.2.8.15	_	ou have any relevant information pertaining ase provide details in the space below.	ng to but not	covered	in this section,

3.3	Article	MEASURES RELATING TO THE REDUCTION OF THE SUPPLY OF TOBACCO			
		(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.)	d 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	<ul> <li>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?</li> </ul>	Yes Yes	□ No	
3.3.1.2	15.2(a)	<ul> <li>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?</li> </ul>	Yes	⊠ No	
3.3.1.3	15.2(a)	<ul> <li>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?</li> </ul>	Yes	⊠ No	
3.3.1.4	15.2(b)	<ul> <li>developing a practical tracking and tracing regime that would further secure the distribution system and assist in the investigation of illicit trade?</li> </ul>	Yes	⊠ 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)	If you answered "Yes" to question 3.3.1.6, do you facilitate the exchange of this information among customs, tax and other authorities, as appropriate, and in accordance with national law and applicable bilateral and multilateral agreements?	Yes	□ No
3.3.1.8	15.4(b)	<ul> <li>enacting or strengthening         legislation, with appropriate         penalties and remedies, against         illicit trade in tobacco products,         including counterfeit and         contraband cigarettes?</li> </ul>	Yes	□ No
3.3.1.9	15.4(c)	<ul> <li>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?</li> </ul>	Yes	□ No
3.3.1.10	15.4(d)	<ul> <li>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?</li> </ul>	Yes	□ No
3.3.1.11	15.4(e)	enabling the confiscation of proceeds derived from illicit trade in tobacco products?	Yes	☐ 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?	Yes	□ 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.
3.3.1.15	If you have any 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 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 a executive, administrative or other measures where appropriate, programmes on any of the	or have you im		
3.3.2.1	16.1	<ul> <li>prohibiting the sales of tobacco</li> <li>products to minors? If "Yes", please</li> <li>specify the legal age: ?</li> </ul>	Yes	⊠ No	
3.3.2.2	16.1(a)	<ul> <li>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?</li> </ul>	Yes	⊠ No	
3.3.2.3	16.1(a)	<ul> <li>requiring that, in case of doubt, each seller of tobacco products requests that the purchaser provides appropriate evidence of having reached full legal age?</li> </ul>	Yes	⊠ No	
3.3.2.4	16.1(b)	<ul> <li>banning the sale of tobacco products in any manner by which they are directly accessible, such as open store shelves?</li> </ul>	Yes	⊠ No	
3.3.2.5	16.1(c)	<ul> <li>prohibiting the manufacture and sale of sweets, snacks, toys or any other objects in the form of tobacco products which appeal to minors?</li> </ul>	Yes	□ No	
3.3.2.6	16.1(d)	<ul> <li>prohibiting the sale of tobacco products from vending machines?</li> </ul>	Yes	⊠ No	
If	you answere	d "Yes" to question 3.3.2.6, please proceed to qu	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	<ul> <li>prohibiting and/or promoting the prof free tobacco products:</li> </ul>	nibition of the d	istribution of	
		• to the public?	Yes	⊠ No	
		• to minors?	Yes	☐ No	

3.3.2.9	16.3	_	prohibiting the sale of cigarettes individually or in small packets?	∑ Yes	☐ No
3.3.2.10	16.6	_	providing for penalties against sellers and distributors in order to ensure compliance?	Yes	⊠ No
3.3.2.11	16.7	_	prohibiting the sales of tobacco products by minors?	Yes	⊠ No
3.3.2.12	Please provide a brief description of the progress made in implementing Article 16 ( <i>Sales to and by minors</i> ) in the past two years or since submission of your last report.				
3.3.2.13	If you have any 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 economically viable alternative activities  (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, measures or programmes on any of the following:			
3.3.3.1	17	<ul> <li>promoting economically viable and sustainable alternatives for:</li> </ul>			
		• tobacco growers?	Yes	☐ No	Not applicable
		• tobacco workers?	Yes	No No	☐ Not applicable
		<ul><li>tobacco individual sellers?</li></ul>	Yes	⊠ 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	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.				

	( 1.1 ( ) ) ( ) ( ) ( ) ( ) ( )			
(with reference to Articles 18–21)				
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, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:			
18			cultivatio	n within your
	• the protection of the environment?	Yes	☐ No	Not applicable
	• the health of persons in relation to the environment?	Yes	☐ No	Not applicable
18				
	• the protection of the environment?	Yes	☐ No	Not applicable
	• the health of persons in relation to the environment?	Yes	☐ No	Not applicable
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.				
If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.			ed in this section,	
	Ple (Pr sin	brief summary in the space provider relevant documentation. Please proof the six official languages.)  Have you adopted and implemented executive, administrative or other many where appropriate, programmes on the protection of the environment?  • the protection of the environment?  • the health of persons in relation to the environment?  • the protection of the environment?  • the protection of the environment?  • the protection of the environment?  • the health of persons in relation to the environment?  • the health of persons in relation to the environment?  • the health of persons in relation to the environment?  If you have any relevant information pertain	brief summary in the space provided at the end relevant documentation. Please provide documentation of the six official languages.)  Have you adopted and implemented, where approximate appropriate, programmes on any of the first table of the protection of the environment?  - implementing measures in respect of tobacconterritory, which take into consideration:  - the protection of the environment?  - implementing measures in respect of tobacconterritory, which take into consideration:  - implementing measures in respect of tobacconterritory, which take into consideration:  - the protection of the environment?  - the health of persons in relation to the environment?  - the health of persons in relation to the environment?  - the health of persons in relation to the environment?  - The health of persons in relation to the environment?  - The health of persons in relation to the environment?	brief summary in the space provided at the end of the secrelevant documentation. Please provide documentation, of the six official languages.)  Have you adopted and implemented, where appropriate, executive, administrative or other measures or have you where appropriate, programmes on any of the following:    Implementing measures in respect of tobacco cultivation territory, which take into consideration:   Implementing measures in respect of tobacco cultivation territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco cultivation:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consideration:   Implementing measures in respect of tobacco manufactor territory, which take into consider

3.4.2	19	Liability				
	(Please check "Yes" or "No". For affirmative answers, please provided at the end of the section and relevant documentation. Please provide documentation, if available of the six official languages.)		and attach the			
		executive, administrative or other measures or	Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented, where appropriate, programmes on any of the following:			
3.4.2.1	19.1	dealing with criminal and civil liability, including compensation where appropriate?	Yes	⊠ No		
3.4.2.2	19.1	Has any person in your jurisdiction launched any criminal and/or civil liability action, including compensation where appropriate, against any tobacco company in relation to any adverse health effect caused by tobacco use?	Yes	⊠ No		
3.4.2.3	19.1	Have you taken, as appropriate, any legislative, executive, administrative and/or other action against the tobacco industry for full or partial reimbursement of medical, social and other relevant costs related to tobacco use in your jurisdiction?	Yes	⊠ No		
3.4.2.4	Please provide a brief description of any progress made, as appropriate, in implementing Article 19 ( <i>Liability</i> ) in the past two years or since submission of your last report.					
3.4.2.5	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.					

3.4.3	20	Research, surveillance and exchange of information  (Please check "Yes" or "No". For affirmative answers, please provide a brief summary in the space provided at the end of the section and attach the relevant documentation. Please provide documentation, if available, in one of the six official languages.)  Have you adopted and implemented, where appropriate, legislative, executive, administrative or other measures or have you implemented,		
		where appropriate, programmes on any of the f		emented,
3.4.3.1	20.1(a)	developing and/or promoting research that add	lresses:	
		determinants of tobacco consumption?	⊠ Yes	☐ No
		consequences of tobacco consumption?	⊠ Yes	☐ No
		social and economic indicators related to tobacco consumption?	Yes Yes	☐ No
		• tobacco use among women, with special regard to pregnant women?	X Yes	☐ No
		the determinants and consequences of exposure to tobacco smoke?	∑ Yes	☐ No
		identification of effective programmes for the treatment of tobacco dependence?	⊠ Yes	☐ No
		identification of alternative livelihoods?	Yes	⊠ No
		• other (please specify:	Yes	☐ No
3.4.3.2	20.1(b)	<ul> <li>training and support for all persons engaged in tobacco control activities, including research, implementation and evaluation?</li> </ul>	⊠ Yes	☐ No
3.4.3.3	20.3(a)	a national system for epidemiological surveilla	ance of:	
		• patterns of tobacco consumption?	⊠ Yes	☐ No
		determinants of tobacco consumption?	⊠ Yes	☐ No
		consequences of tobacco consumption?	⊠ Yes	☐ No
		social, economic and health indicators related to tobacco consumption?	⊠ Yes	☐ No
		exposure to tobacco smoke?	⊠ Yes	☐ No
		• other relevant information ( <i>please</i> specify: )	Yes	☐ No

3.4.3.4	20.3(a)	If you answered "Yes" to any question under 3.4.3.3, please list all surveys, including the year of the survey, that you have undertaken in the past.			
3.4.3.5	20.3(a)	In reference to any question under 3.4.3.3, does your country have any plans to repeat any of the above or to undertake a new tobacco survey within three to five years of your last survey? Please provide details in the space below.			
3.4.3.6	20.4	regional and global exchange of publicly available national:			
		scientific, technical, socioeconomic, commercial and legal information?	X Yes	☐ No	
		information on the practices of the tobacco industry?	X Yes	☐ No	
		• information on the cultivation of tobacco?	Yes	⊠ No	
3.4.3.7	20.4(a)	- an updated database of:			
		laws and regulations on tobacco control?	X Yes	☐ No	
		information about the enforcement of laws on tobacco control?	X Yes	☐ No	
		• pertinent jurisprudence?	X Yes	☐ No	
3.4.3.8	(Re	ase provide a brief description of the progress made esearch, surveillance and exchange of information) is omission of your last report.		_	
	Yo Per the sm	nas conducted vey, Global Survey. In als Survey. In als survey and a second is shared well as the shared wel	School In additon, ction on with both local		
3.4.3.9		you have any relevant information pertaining to but a ase provide details in the space below.	not covered in	this section,	

## 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)	<ul> <li>development, transfer and acquisition of technology, knowledge, skills, capacity and expertise related to tobacco control?</li> </ul>	Yes No	⊠ Yes □ No
4.2	22.1(b)	<ul> <li>provision of technical, scientific, legal and other expertise to establish and strengthen national tobacco control strategies, plans and programmes?</li> </ul>	Yes No	∑ Yes □ No
4.3	22.1(c)	<ul> <li>appropriate training or sensitization programmes for appropriate personnel in accordance with Article 12?</li> </ul>	⊠ Yes □ No	⊠ Yes □ No
4.4	22.1(d)	<ul> <li>provision of the necessary material, equipment and supplies, as well as logistic support, for tobacco control strategies, plans and programmes?</li> </ul>	⊠ Yes □ No	⊠ Yes □ No
4.5	22.I(e)	identification of methods for tobacco control, including comprehensive treatment of nicotine addiction?	Yes No	⊠ Yes □ No
4.6	22.1(f)	<ul> <li>promotion of research to increase the affordability of comprehensive treatment of nicotine addiction?</li> </ul>	Yes No	⊠ Yes □ No
4.7		If you answered "Yes" to any of questions 4.1–4.6 Parties from which assistance was received or to v		•
	Assistance was received from the Pan American Health Organisation (International Organisation) and the Guyana Chest Society (NGO). the Guyana Chest Society received funding from the Jamaican Heart Foundation, who receives funding from the Bloomberg Initiative.			

4.8	Please provide information about any assistance provided or received in the space below.
	The Pan American Health Organisation and Guyana Chest Society are key partners in Tobacco Control and serve on the Tobacco Control Council, also. They serve on the Tobacco Council and facilitate, trainings, materials, technical assistance and other areas that are necessary for Tobacco Control.
	The Ministry of Health as the pioneer for Tobacco Control provide assistance to all organizations or groups that require training, equipment or materials in Tobacco Control, for example, the Ministry of Education, Culture Youth and Sports, local NGOs, and general public.
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?   Yes No
	(Please refer to Article 26.4.)
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?
	Tobacco Control is one of top priorities in Guyana. It is directy and indirectly related to the chronic disease burden that has been set upon the country and as such, there is much interest in it's part to play in reducing these diseases. Some of the main areas are tobacco education, smoke free zones, the tobacco control legislation and tobacco cessation.
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? ⊠ Yes ☐ No
5.3	If you answered "Yes" to question 5.2, please provide details in the space below.
	The GTSS proves to be an important tool for expressing to Governments on the need for Tobacco Control. However, there is need for an ecnomic evaluation on the burden of tobacco use in country. This data is very much needed to plead the case for Tobacco Control.
	Other gaps identified include funding for the drafting and implementation of legislation, to provide consistent education and awareness programs, funding for the NRT, other necessary strategies and other cessation sites in

	the cessation program
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).)
	The Tobacco Company is still aggressive in it's efforts to delay the Tobacco Control process for example, indirect sponsorship and advertising.
5.5	Please provide any relevant information not covered elsewhere that you consider important.
5.6	Your suggestions for further development and revision of the reporting instrument:

**End of reporting instrument**