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	New Zealand		
1.2	Information on national contact responsible for preparation of the report:			
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1.3	Signature of government official submit	ting the report:		
	Name and title of officer	Ashley Bloomfield (Dr)		
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1.4	Period of reporting	27 February 2010 - 30 April 2012		
1.5	Date the report was submitted			

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	21.90 %				
	Daily smokers	19.70 %				
	Occasional smokers	2.20 %				
	Former smokers	20.90 %				
	Never smokers	31.40 %				
	FEMALES					
	Current smokers	20.20 %				
	Daily smokers	18.90 %				
	Occasional smokers	1.30 %				
	Former smokers	20.10 %				
	Never smokers	37.00 %				
	TOTAL (males and	females)				
	Current smokers	21.00 %				
	Daily smokers	19.20 %				
	Occasional smokers	1.80 %				
	Former smokers	20.50 %				
	Never smokers	34.30 %				

2.1.1.1	Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.1:
	Manufactured cigarettes, roll-your-own tobacco, cigars, pipe tobacco
2.1.1.2	Please indicate the age range to which the data used to answer question 2.1.1 refer:
	15-64 years
2.1.1.3	Please indicate the year and source of the data used to answer question 2.1.1:
	New Zealand Tobacco Use Survey (NZTUS), 2009. On line data tables relating to the 2009 NZTUS are available at http://www.health.govt.nz/publication/tobacco-use-new-zealand-online-data-tables-2009-new-zealand-tobacco-use-survey.
	Key findings from the 2009 Tobacco Use Survey are available at http://www.health.govt.nz/publication/tobacco-use-new-zealand-key-findings-2009-nz-tobacco-use-survey
	The NZTUS survey was discontinued after the 2009 survey. The first data from the New Zealand Health Survey, which has replaced it, will become available late this year.
2.1.1.4	Please provide the definitions of "current smoker", "daily smoker", "occasional smoker", "former smoker" and "never smoker" used in this report.
	A current smoker is defined as someone who has smoked more than 100 cigarettes in their lifetime and currently smokes at least once a month (World Health Organization 1998)
	A daily smoker is someone who has smoked more than 100 cigarettes in their lifetime and currently smokes one or more cigarettes daily.
	A former or "Ex" smoker is someone who has smoked greater than 100 cigarettes in their lifetime and at the time of the survey had not smoked for at least a month.
	A never smokers is someone who has not smoked more than 100 cigarettes in their lifetime and does not currently smoke.
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.
	There has been a general downward trend. NZTUS prevalence data for recent years reports current smoking among adults aged 15-64 was 23.5 per cent in 2006, 23.1 per cent in 2008, and 21 per cent in 2009.

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	Age group (adults)	0-year categories, e.g. 25-34, 35-44 years) Prevalence (%) (please include all smoking tobacco products in prevalence data)	
	MALES			
	Current	15-19	16.90 %	
	smokers ¹	20-24	30.10 %	
		25-29	33.40 %	
	Add age group	30-39	22.50 %	
		40-49	22.60 %	
		50-59	18.60 %	
		60-64	10.60 %	
	FEMALES			
	Current	15-19	19.10 %	
	smokers ¹	20-24	31.20 %	
		25-29	21.10 %	
	Add age group	30-39	21.50 %	
		40-49	22.30 %	
		50-59	14.00 %	
		60-64	11.20 %	
	TOTAL (male	es and females)		
	Current	15-19	18.00 %	
	smokers ¹	20-24	30.70 %	
		25-29	26.60 %	
	Add age group	30-39	22.00 %	
		40-49	22.40 %	

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

	50-59	16.30 %
	60-64	10.90 %

2.1.2.1	Please indicate the smoking tobacco products included in calculating prevalence for question 2.1.2:		
	Cigarettes, roll-your-own tobacco, cigars and pipes		
2.1.2.2	Please indicate the year and source of the data used to answer question 2.1.2:		
	New Zealand Tobacco Use 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.		
	Some fluctuations, but generally down since submission of the last report		

2.1.3	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	%				
	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	%				
	L					

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.
	The supply and sale of oral tobacco products is prohibited in New Zealand. See section 29 of the Smoke-free Environments Act 1990 (attached). Very small amounts are imported for personal use but they cannot be sold or distributed.

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)						
		Age group (adults)	Prevalence (%) (please include all smokeless tobacco products in prevalence data)				
	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:			
	The sale and supply of oral tobacco products is prohibited in New Zealand. See section 29 of the Smoke-free Environments Act 1990 (attached)			
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)	Prevalence (%) (please include all smoking or smokeless tobacco products in prevalence data)		
			Males	Females	Total (males and females)
	Current users ³	Maori	40.20 %	49.30 %	45.10 %
		Pacific	32.30 %	28.50 %	30.30 %
	Add ethnic group	Asian	16.20 %	4.40 %	10.70 %
		European / Other	20.60 %	18.90 %	19.70 %
			%	%	%
2.1.5.1	Please in	ndicate the tobacc	o products included	in the answer to qu	estion 2.1.5:
	Cigarett	tes, roll-your-ow	vn tobacco, cigars a	and pipes	
2.1.5.2	Please in	dicate the age ran	ge to which the data	used to answer que	estion 2.1.5 refer:
	15-64 ye	ears			
2.1.5.3	Please indicate the year and source of the data used to answer question.		estion 2.1.5:		
	NZ Tobacco Use Survey 2009				

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

2.1.6	Tobacco use by young persons Age range Prevalence (%) (please include all smoking or smokeless tobacco					
				octs in prevalence Smokeless	Other tobacco	
	Boys			tobacco	(e.g. water pipe)	
	Current users ⁴	15-19	16.90 %	%	%	
			%	%	%	
	Add youth group		%	%	%	
			%	%	%	
			%	%	%	
	Girls					
	Current users ⁴	15-19	19.10 %	%	%	
	Add youth		%	%	%	
	group		%	%	%	
			%	%	%	
			%	%	%	
	TOTAL (b	oys and girls)				
	Current users ⁴	15-19	18.00 %	%	%	
	Add youth		%	%	%	
	group		%	%	%	
			%	%	%	
			%	%	%	
2.1.6.1	Please i		acco products included	in calculating pre	evalence for	
	Cigare	ttes, roll-your-	own tobacco, cigars a	and pipes		

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

2.1.6.2	Please indicate the year and source of the data used to answer question 2.1.6:
	NZ Tobacco Use Survey 2009
2.1.6.3	Please provide the definition of "current smoking/tobacco use" used to answer question 2.1.6 in the space below.
	A current smoker is defined as someone who has smoked more than 100 cigarettes in their lifetime and at the time of the survey was smoking at least once a month (World Health Organization 1998)
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.
	There is a downward trend for both males and females aged 15-19 years 2008-2009. The total for this age group declined from 20.8% to 18.0% over this one year period.

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).
	see http://www.secondhandsmoke.org.nz/pdfs/SFHmini-final.pdf.
	Also, NZTUS 2009 found that 6.4 per cent of non-smokers were exposed to second-hand smoke in their home in the past week; 6.1 per cent of non-smoking adults were exposed to second-hand smoke in the car they usually travel in during the last week; and, 4.5 per cent on non-smokers were exposed to second-hand smoke indoors at their workplace, in the past month.
2.2.3	Please indicate the year and source of the data used to answer question 2.2.1:
	HSC Monitor 2003-2006, December 2006 and NZ Tobacco Use Survey, 2009.

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? 4381					
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.					
	This information is provided on page 5 of the Tobacco Trends 2008 report - available at http://www.health.govt.nz/publication/tobacco-trends-2008-brief-update-tobacco-use-new-zealand					
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:					
	4381 is the average number of tobacco-related deaths per year between					

2002 and 2006.

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. dir care-related) and indirect costs and, if possible, the method used to estimosts).							
	The details of this work are available from page 19 (see the summary on page 29) of the following report: http://www.sfc.org.nz/pdfs/TobTaxVolTwoNovember.pdf						
2.4.3 Please indicate the year and source of the data used to answer question 2 please submit a copy of the study you refer to:							
	Report published in 2007 based on 2005 data.						

2.5	SUPP	LY OF TOBAC	CCO AND TOBAC	CCO PRODUC	TS	
	(with r	eference to Artic	cles 6.2(b), 20.4(c),	and 15.5)		
2.5.1	1 Licit supply of tobacco products					
		Product	Unit (e.g. pieces, tonnes)	Domestic production	Exports	Imports
	Smoking tobacco products Add product	See attachment outlining New Zealand's tobacco imports and exports				
	Smokeless tobacco products Add product					
	Other tobacco products Add product					
	Tobacco	Leaves				
2.5.2	Please provide information on the volumes of duty-free sales (e.g. product, unit, quantity), if available.					
2.5.3	Please indicate the year and source of the data used to answer questions 2.5.1 and 2.5.2:					
	Please see the attached tables for tobacco imports and exports for 2011. Tobacco is not comercially grown in New Zealand.					

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							
	products							
	Add row							
2.6.2		ou have any infor ational tobacco m		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	is the	trend over the pa ntage of smuggle	ast two years or sind	nd you have information be submission of your later in relation to the nation	st report in the			
2.6.5				illicit or smuggled toba				
	It is difficult to make accurate estimates of the size and scale of the illicit tobacco market due to the limited research available. Smuggling of tobacco has remained a low-level but persistent problem for Customs in different forms for many years. That said New Zealand has not seen the regular large container-size interceptions of cigarettes that many other countries are experiencing and it is thought that the market share of illicit tobacco remains below the levels encountered in other countries in the Asia Pacific region.							
	The c	current New Ze	aland illicit tobacc	o market is believed	to be fuelled by:			
	• small scale importations by passengers exceeding their concession allowance (either unwittingly or as a calculated risk), for personal use. The overwhelming majority of seizures are made at the airports, from incoming air travellers. The tobacco products seized appear to have been legitimately sourced.							

2.6	SEIZURES OF ILLICIT TOBACCO PRODUCTS							
	(with reference to	Article 15.5)						
	• some cultivation sale in certain r			oll your own" tob	pacco for			
	• occasional importation of chewing tobacco, often for the Indian community in New Zealand.							
2.6.6	Please indicate th	ne source of the d	ata used to answe	er questions in sect	ion 2.6:			
2.7	TODA CCO CD	OWING						
2.7 2.7.1	TOBACCO-GR		ii- di ati a 9	☐ Yes ⊠ No				
2.7.1	Is there any tobac	co-growing in y	our jurisdiction?	☐ res ☐ No				
2.7.2				ovide information of				
	of workers involved broken down by	U	owing. If availab	le, please provide	this figure			
	broken down by	gender.						
2.7.3	Please provide, it	f available, the sh	nare of the value of	of tobacco leaf prod	duction in the			
	national gross do			•				
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 to	Articles 6.2(a)	and 6.3)					
2.8.1				lar price category				
	product consists of and value added to			and import duties (i	if applicable)			
2.0.2								
2.8.2	How are the excis		hat types of taxe		N			
	•	ic tax only lorem tax only		☐ Yes	No			
	Yes	⊠ No						
	• Comb	ination of specifi	c and ad valorem	taxes X Yes	☐ No			
	• More	• More complex structure (<i>please explain</i> :)						
2.8.3	If available, pleas	e provide details	on the rates of ta	xation for tobacco	products at			
			specific as possi	ble (specify the type	pe of tax, e.g.			
	VAT, sales, impo	Product	Type of tax	Rate or amount	Base of tax ⁵			
		Troduct	1 ype or tax	Kate of afficult	Dase Of tax			

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.

	Smoking tobacco products Add product	Manufactured cigarettes (not exceeding in weight 0.8kg of tobacco content per 1,000 cigarettes)	Excise Duty	\$442.10	per 1,000 cigarettes		
		Manufactured cigarettes (exceeding in weight 0.8kg of tobacco content per 1,000 cigarettes	Excise Duty	\$629.99	per kilo of tobacco content (KCT)		
		Cigars, cheroots and cigarillos	Excise Duty	\$552.62	per KCT		
		Other manufactured tobacco	Excise Duty	\$629.99	per KCT		
		All products	GST (Goods and Services Tax)	15.0%	Ad valorem New Zealand Goods and Services Tax of 15% is applied to all goods - in addition to the excise duty		
	Smokeless tobacco products						
	Add product						
	Other tobacco products						
	Add product						
2.8.4	Please briefly des			 pacco products in the r jurisdiction.	he past two		
	Tobacco tax is i annually (on 1 J		Consumer Price	Index (CPI) and a	adjusted		
	The tobacco excise was increased by 25.4% for loose or roll-your-own tobacco and 10% for manufactured cigarettes on 28 April 2010						
	11.65% on all to CPI adjustment	_		bacco products pl	us 1.65%		
	14.49% on all to CPI adjustment	-		bacco products pl	us 4.49%		

	Goods and Services Tax (GST) increased from 12.5% to 15% on 1 October 2010.
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:

2.9	PRICE OF TOBACCO PRODUCTS (with reference to Article 6.2(a))						
2.9.1	Please provide the retail prices of the three most widely sold brands of domestic and imported tobacco products at the most widely used point of sale in your capital city.						
	Most widely sold brand Number of Retail price						
		Smoking	Smokeless	Other	units or	_	
		tobacco	tobacco	tobacco	amount per		
		products	products	products	package		
	Domestic						
	Imported	Pall Mall Baseline			20 cigarettes / package	\$13.80	
		Holiday			20 cigarettes / package	\$14.40	
		Benson and Hedges			20 cigarettes / package	\$15.90	

2.9.2	Please indicate the year and source of the data used to answer question 2.9.1.
	2012. Prices are from the tobacco companies annual returns as at 1 January 2012. Note that Pall Mall Baseline is not the Pall Mall product reported in 2010. Pall Mall Baseline is new and less expensive.
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.
	New Zealand Dollars. The exchange rate is 0.8139 to the US dollar at 25 April 2012.
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.
	The price of tobacco has increased by about 40% since the last report as a result of increases in the excise on tobacco products - see 2.8.4 above for details.

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
		 a national coordinating mechanism for tobacco control 	⊠ Yes	□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	
	The focal point for tobacco control and the tobacco control unit both sit in the Ministry of Health. A National Tobacco Control Working Group coordinates tobacco control activities across the sector. This group includ both government and non-government organisations.			
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.	_	-

After considering submissions and oral presentations on tobacco issues Parliament's Maori Affairs Select Committee, in October 2010 made 42 recommendations on how to reduce the harm caused by tobacco in New Zealand. In its response in March 2011 the Government generally accepted the recommendations including the adoption of the goal that New Zealand should be essentially smoke-free by 2025. One of the six Government priority health targets is 'better help for smokers to quit'. The target for hospitals is "95 per cent of hospitalised smokers will be provided with advice and help to guit by July 2012" and for primary care, "90 per cent of enrolled patients who smoke and are seen in General Practice, will be provided with advice and help to quit by July 2012" Legislation removing tobacco products from display and other related matters was passed by Parliament on 23 July 2011. Most provisions are effective from 23 July 2012. Tobacco excise increases 2010-2012 are noted above. 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 from 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.)	теншион, у ачан	idote, in one of	
		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		 protecting public health policies with respect to tobacco control from commercial and other vested interests of the tobacco industry? 	⊠ Yes	□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	⊠ No	
3.1.2.3		f you answered "Yes" to any of the questions underovide details in the space below.	er 3.1.2.1 or 3.1.2.	2, please	
	h	The Ministry of Health maintains a publicly available register of meetings it has with the tobacco industry. It indicates the date of such meetings, who attended, and the topics discussed.			
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.			
	Е	Establishment of the register above.			
3.1.2.5		f you have any relevant information pertaining to lease provide details in the space below.	but not covered in	this section,	

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 the	or have you impl	
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	□ No
3.2.1.2	6.2(b)	 prohibiting or restricting, as appropriate, sales to international travellers of tax- and duty-free tobacco products? 	⊠ Yes	□No
3.2.1.3		 prohibiting or restricting, as appropriate, imports by international travellers of tax- and duty-free tobacco products? 	⊠ Yes	□ No
3.2.1.4	(Pr	ase provide a brief description of the progress mice and tax measures to reduce the demand for the submission of your last report.	_	-
	The tobacco excise has been increased three times 2010 to 2012. The details are set out in section 2.8.4 above. New Zealand has a customs allowance (on entering New Zealand) of 200 cigarettes or 250 grams of tobacco or 50 cigars or a combination weighing not more than 250 grams for each passenger aged 17 years and over.			
3.2.1.5		rou have any relevant information pertaining to base provide details in the space below.	out not covered in	this section,

3.2.2.1	8.2	Protection from exposure to tobacco smoke (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: — banning tobacco smoking in indoor workplaces, public transport, indoor public places and, as appropriate, other public				
3.2.2.2		If you answered "Yes" to question 3.2.2.1, what is the type/nature of the measure providing for the ban?				
		• national law	⊠ Yes	□ No		
		• subnational law(s)	⊠ Yes	☐ No		
		administrative and executive orders	Yes	⊠ No		
		voluntary agreements	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 con	tent of the		
	Smoking is banned in the enclosed areas of all workplaces, on all school grounds, in public transport, including buses and taxis, the indoor areas of restaurants, cafes and bars. The provisions are set of a 2003 anendment to the Smoke-free Environments Act 1990. Mail local authorities have no-smoking policies for parks, sports ground children's playgrounds and the like.					
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 deta	ails of this system.		
		Smoke-free Officers attached to Distr throughout the country. They initiate complaints and investigate possible b Environments Act 1990, work to seek	investigations or reaches of the Smo	receive oke-free		

	prepare papers for prosecutions to be	prepare papers for prosecutions to be taken through through the Courts.			
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 ¹	\boxtimes			
	• universities				
	• private workplaces				
	• other (please specify:)				
	Public transport:				
	• airplanes				
	• trains				
	• ferries				
	• ground public transport (buses, trolleybuses, trams)				
	 motor vehicles used as places of work (taxis, ambulances, delivery vehicles) 				
	• private vehicles			\boxtimes	
	• other (please specify:)				

¹ except universities

	Indoor public places:			
	cultural facilities			
	shopping malls	\boxtimes		
	• pubs and bars			
	• nightclubs	\boxtimes		
	• restaurants	\boxtimes		
	• other (please specify:)			
3.2.2.7	Please provide a brief summary of comspecific details of the partial measures			rith
	Banning tobacco smoking in indoc	or workplaces		
	The Smoke-free Environments workplaces to be smoke-free. In hospital care (mental health instresidents may be permitted to swhich must be mechanically very of smoke is minimised (see see Environments Act 1990). Prison	There is a partial stitutions) and formoke in a dedice of the Smith of	l exemption or rest home ated smokin om which the toke-free	n for the where ting room the escape
	Banning tobacco smoking in public	c transport		
	The Smoke-free Environments passenger service vehicles, for	-		ıg in all
	Banning tobacco smoking in indoc	or public places		
	The Smoke-free Environments certain public places including	-		-
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.	_	-	
	New Zealand has been running mass med exposure to second-hand smoke. These of free homes and smoke-free cars in recent	campaigns have	_	
3.2.2.9	If you have any relevant information pertaining 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 products (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:			
3.2.3.1		 testing and measuring the contents of tobacco products? 	Xes	☐ No	
3.2.3.2		 testing and measuring the emissions of tobacco products? 	⊠ Yes	□No	
3.2.3.3		regulating the contents of tobacco products?	Yes	⊠ No	
3.2.3.4		 regulating the emissions of tobacco products? 	Yes	⊠ No	
3.2.3.5	(,	Please provide a brief description of the progress made in implementing Article 9 (<i>Regulation of the contents of tobacco products</i>) in the past two years or since submission of your last report.			
	t]	No changes since the 2010 report. In its response to the recommendations of the Maori Affairs Select Committee, the Government has indicated its willingness to consider changes in this area.			
3.2.3.6		f you have any relevant information pertaining to blease provide details in the space below.	out not covered in	this section,	

3.2.4	Regulation of tobacco product disclosures				
		(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:				
3.2.4.1	2.4.1 – requiring manufacturers or importers of tobacco products to disclose Government authorities information about the:				
		contents of tobacco products?	⊠ Yes	□No	
		emissions of tobacco products?	⊠ Yes	□No	
3.2.4.2		requiring public disclosure of information	on about the:		
		contents of tobacco products?	⊠ Yes	□No	
		emissions of tobacco products?	⊠ Yes	□No	
3.2.4.3	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.				
	E a i	Tobacco companies are required under section 35 of the Smoke-free Environments Act 1990 an annual report that includes information on additives to tobacco and the emission levels for tar, nicotine and CO. There is a requirement that the returns are placed on a Ministry of Health website. See http://www.ndp.govt.nz/moh.nsf/indexcm/ndp-tobacco-returns			
3.2.4.4		f you have any relevant information pertaining to blease provide details in the space below.	but not covered in	this section,	

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?	⊠ Yes	□ 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? 	⊠ 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)	ensuring that the health warnings are approved by the competent national authority?	⊠ Yes	☐ No
3.2.5.5	11.1(b)(ii)	ensuring that the health warnings are rotated?	⊠ 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	 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? 	Yes	⊠ 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? 	⊠ Yes	□ No	
3.2.5.15	Please provide a brief description of the progress made in implementing Article 11 (Packaging and labelling of tobacco products) in the past two years or since submission of your last report.				
	These requirements are set out in the Smoke-free Environments Regulations 2007. There have been no changes since the last report. These regulations removed information on tar, nicotine and CO emissions from packs - as recommended by TobReg. They were replaced with a general statement about harmful chemicals and the damage they can cause to parts of the body.				
3.2.5.16		u have any relevant information pertaining to or e provide details in the space below.	not covered in	this section,	

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, whe executive, administrative or other measur where appropriate, programmes on any of	es or have you im			
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 program 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		If you answered "Yes" to question 3.2.6.1 key differences among targeted populatio public awareness programmes?	-			
		• age	X Yes	☐ No		
		• gender	X Yes	☐ No		
		educational background	X 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 awareness programmes cover:	, do these educati	onal and public		
		• health risks of tobacco consumption?	⊠ Yes	☐ No		
		• health risks of exposure to tobacco smoke?	⊠ Yes	☐ No		
		benefits of the cessation of tobacco use and tobacco-free lifestyles?	⊠ Yes	□No		
	12(f)	adverse economic consequences of				

		- tobacco production?	Yes	⊠ No	
		- tobacco consumption?	X Yes	☐ No	
	adverse environmental consequences of				
		- tobacco production?	Yes	⊠ No	
		- tobacco consumption?	Yes	⊠ No	
3.2.6.5	12(e)	 awareness and participation of the following agencies and organizations in development and implementation of intersectoral programmes and strategies for tobacco control: 			
		• public agencies?	∑ Yes	☐ No	
		 nongovernmental organizations not affiliated with the tobacco industry? 	⊠ Yes	☐ No	
		• private organizations?	Yes	⊠ No	
		• other (please specify:)?	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?	⊠ Yes	☐ No	
		• community workers?	⊠ Yes	☐ No	
		• social workers?	⊠ Yes	□No	
		media professionals?	⊠ Yes	☐ No	
		• educators?	Yes Yes	☐ No	
		• decision-makers?	⊠ Yes	☐ No	
		• administrators?	X 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.
	New Zealand has continued to run public awareness / education campaigns on the dangers of smoking and of exposure to second-hand smoke, campaigns promot2ing smoking cessation and the services available, and campaigns directed at young people. Training for health professionals and others who provide smoking cessation services is also available.
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	 instituting a comprehensive ban on all tobacco advertising, promotion and sponsorship? 	⊠ Yes	☐ No	
If	you answe	red "No" to question 3.2.7.1, please proceed to o	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?	X Yes	☐ No	
		• the global Internet?	Yes	⊠ No	
		 brand stretching and/or brand sharing? 	⊠ Yes	☐ No	
		 product placement as a means of advertising or promotion? 	⊠ 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	
		 cross-border advertising, promotion and sponsorship originating from your territory? 	⊠ Yes	☐ No	

	13.7	 the same forms of cross-border advertising, promotion and sponsorship entering your territory for which domestic regulation apply? 	⊠ 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	 applying restrictions on all tobacco advertising, promotion and sponsorship? 	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? 	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? 	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? 	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? 	☐ Yes	□ No

3.2.7.10	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)	 restricting tobacco sponsorship of: 					
		• international events and activities?	Yes	☐ No			
		• participants therein?	Yes	☐ No			
	Whether you answered "Yes" or "No" to question 3.2.7.1, are you:						
3.2.7.12	13.6	 cooperating with other Parties in the development of technologies and other means necessary to facilitate the elimination of cross-border advertising? 	Yes	⊠ 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?	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.						
	New Zealand has had a comprehensive ban on tobacco advertising, promotion and sponsorship since 1990. The provisions were strengthened in in July 2011 when legislation banning the display of tobacco products and related provisions was passed. It comes into force on 23 July 2012.						
3.2.7.15		you have any relevant information pertaining to base provide details in the space below.	out not covered in	this section,			
	In regard to 3.2.7.2 - contributions from tobacco companies. While such contributions are not illegal, it is an offence to associate the contributors name, logo, etc with the entity that receives the contribution or to publicise the relationship.						

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 measur where appropriate, programmes on any o	es or have you im	₹		
3.2.8.1	14.1	 developing and disseminating appropriate, comprehensive and integrated guidelines based on scientific evidence and best practices? 	⊠ Yes	□ No		
3.2.8.2	14.1	 programmes to promote cessation of 	tobacco use, incl	uding:		
		media campaigns emphasizing the importance of quitting?	⊠ Yes	□ No		
		programmes specially designed	for:			
		o underage girls and young women	⊠ Yes	☐ No		
		o women	X Yes	□No		
		o pregnant women	X Yes	☐ No		
		telephone quitlines	X Yes	☐ No		
		local events, such as activities related to World No Tobacco Day or National No Smoking Day, if appropriate?	⊠ Yes	□ No		
		• other (please specify:)?	Yes	☐ No		
3.2.8.3	14.2(a)	design and implementation of progracessation 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)	 inclusion of diagnosis and treatmen counselling services for cessation o programmes, plans and strategies for 	tobacco use in national		
		• tobacco control?	⊠ Yes	□No	
		• health?	⊠ Yes	☐ No	
		• education?	Yes	⊠ No	
3.2.8.5		 inclusion of programmes on the diagnosis and treatment of tobacco dependence in your health-care system? 	∑ 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> eg maternity care)	⊠ Yes	☐ No	
		 specialized centres for cessation counselling and treatment of tobacco dependence 	⊠ 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	

		 specialized centres for cessation counselling and treatment of tobacco dependence 	Fully Par	tially None
		rehabilitation centres	Fully Par	tially None
		• other (please specify:)	Fully Par	tially 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 	⊠ 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)	 training on tobacco dependence trea curricula of health professional trair levels at the following schools: 		
		• medical?	⊠ Yes	☐ No
		• dental?	⊠ Yes	☐ No
		• nursing?	⊠ Yes	☐ No
		• pharmacy?	⊠ Yes	☐ No
		• other (please specify:)?	Yes	□No
3.2.8.10	14.2(d)	 facilitating accessibility and/or 	⊠ Yes	□ No

		affordability of pharmaceutical products for the treatment of tobacco dependence?				
3.2.8.11	14.2(d)	1	you answered "Yes" to question 3.2.8.10, where and how can these oducts be legally purchased in your country?			
		NRT products - patches, gum etc. are available free of charge through the government funded Quitline, Aukati kai paipa and other approved providers as well as through a prescription from a medical practitioner. NRT products are also available over the counter. The other products listed - bupropion, varenicline and nortripline, are only available through a prescription from a medical practitioner. Although the products themselves are free of charge, there is a \$3 prescription co-payment.				
3.2.8.12	14.2(d)	_	ed "Yes" to question 3.2.8.10, which pharmaceutical egally available for the treatment of tobacco dependence in on?			
		nicotine replacement therapy		Yes		☐ No
		• bupropion		Yes		□ No
		• varenicline		Yes		☐ No
		• other (<i>please specify</i> : nortripline)?		☐ Yes ☐ No		☐ No
3.2.8.13	14.2(d)	If you answered "Yes" to question 3.2.8. covered by public funding or reimbursen		e costs of	f these	e products
		nicotine replacement therapy	⊠ Fully	☐ Parti	ally	None
		• bupropion	⊠ Fully	☐ Parti	ally	None
		• varenicline	⊠ Fully	☐ Parti	ally	None
		• other (<i>please specify</i> : nortripline)?	⊠ Fully	☐ Parti	ally	None
3.2.8.14	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.					
	New Zealand uses a set of smoking cessation guidelines that outline the use of the 'ABC' approach by all health care professionals - ask, brief advice, cessation support. As noted above, one of the six Government priority health targets is 'better help for smokers to quit'. The target for hospitals is "95 per cent of hospitalised smokers will be provided with advice and help to quit by July 2012" and for primary care, "90 per cent of enrolled patients who smoke and are seen in General Practice, will be provided with advice and help to quit by July 2012" Nicotine replacement therapy and other quit aids have become more readily available than previously, for example all medical practitioner's can					

	now prescribe NRT,, not just those who are quit card providers.
3.2.8.15	If you have any relevant information pertaining to but not covered in this section, please provide details in the space below.

3.3	Article	MEASURES RELATING TO THE REDUCTION OF THE SUPPLY OF TOBACCO				
		(with reference to Articles 15–17)				
3.3.1	15	Illicit trade in tobacco products				
		(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:				
3.3.1.1	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? 	X Yes	□ 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? 	⊠ Yes	□ 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? 	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)	 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? 	⊠ Yes	□ 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? 	⊠ 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? 	X 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.
	New Zealand has been actively engaging in the INB process negotiating a Protocol on Illicit trade.
	The Maori language health warning and the New Zealand 0800 Quitline telephone number (both required under the Smoke-free Environments Regulations 2007) and the manufacturer's batch number all assist authorities to determine that the tobacco in question was destined for, or otherwise legally for sale in New Zealand.
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 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? 	⊠ Yes	□ 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? 	⊠ Yes	□ 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? 	⊠ Yes	□ 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? 	☐ Yes	⊠ 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? 	⊠ Yes	□No		
3.3.2.6	16.1(d)	 prohibiting the sale of tobacco products from vending machines? 	Yes	⊠ No		
If	you answere	d "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?	⊠ Yes	☐ No		
		• to minors?	⊠ Yes	☐ No		

3.3.2.9	16.3	-	prohibiting the sale of cigarettes individually or in small packets?	Yes 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	(Sale	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.					
	Legislation effective from July 2012 increases fines and provides for infringement notices for several offences, including sales to minors, as an alternative to prosecution through the courts						
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 econo	omically viabl	e alternativ	e 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	promoting economically viable	e and sustainab	le alternativ	es for:	
		• tobacco growers?	Yes	☐ No	Not applicable	
		• tobacco workers?	Yes	☐ No	Not applicable	
		• tobacco individual sellers?	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.				

3.4	Article	OTHER MEASURES AND POL	ICIES		
		(with reference to Articles 18–21)			
3.4.1	1 18 Protection of the environment and the health of persons			ons	
		(Please check "Yes" or "No". For brief summary in the space provide relevant documentation. Please pro of the six official languages.)	d at the ena	of the sec	ction and attach the
		Have you adopted and implemented executive, administrative or other n where appropriate, programmes on	neasures or	have you	implemented,
3.4.1.1	18	implementing measures in respect territory, which take into considerate.		cultivation	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
3.4.1.2	18	implementing measures in respect territory, which take into considerate.		manufactı	uring within your
		the protection of the environment?	Yes	□ 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 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.)			
		executive, administrative or other measures or	ve you adopted and implemented, where appropriate, legislative, ecutive, administrative or other measures or have you implemented, ere 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	im	ease provide a brief description of any progress made plementing Article 19 (<i>Liability</i>) in the past two years ur last report.			
3.4.2.5		you have any relevant information pertaining to but ease provide details in the space below.	not covered in	this section,	

3.4.3	20	Research, surveillance and exchange of info	rmation			
		(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 approximate executive, administrative or other measures or where appropriate, programmes on any of the f	have you impl			
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? 	\(\sum \text{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?	X Yes	□ No		
		• identification of alternative livelihoods?	Yes	⊠ No		
		• other (please specify:)	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? 	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?	\(\sum \text{Yes}	☐ No		
		exposure to tobacco smoke?	Yes	☐ No		
		• other relevant information (please 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.		
		New Zealand Tobacco Use Surveys 2006 - 20 NZ Continuous Monitor, NZ Census, Year 10 young people.		
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.		
		Yes. NZ Health Survey, which has replaced to Survey, will be conducted every 2-4 years - 20 continuously in the field. The year 10 survey conducted every year and other youth surveys	0 core question (14 and 15 y	ons are ear olds) is
3.4.3.6	20.4	regional and global exchange of publicly avail	able national:	
		scientific, technical, socioeconomic, commercial and legal information?	Yes Yes	☐ No
		• information on the practices of the tobacco industry?	Yes	No 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?	Yes Yes	☐ No
		• information about the enforcement of laws on tobacco control?	X Yes	☐ No
		• pertinent jurisprudence?	Yes	⊠ No
3.4.3.8	Please provide a brief description of the progress made in implementing Article 2 (Research, surveillance and exchange of information) in the past two years or sing submission of your last report.		•	
	The Ministry of Health's tobacco website www.moh.govt.nz/tobacco provides comprehensive information on all aspects of tobacco control in New Zealandnortripline, including information about legislation, enforcement and a wide range of publications including tobacco use surveys and their results.			
3.4.3.9		ou have any relevant information pertaining to but asse 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)	development, transfer and acquisition of technology, knowledge, skills, capacity and expertise related to tobacco control?	⊠ Yes □ No	☐ Yes ⊠ No	
4.2	22.1(b)	 provision of technical, scientific, legal and other expertise to establish and strengthen national tobacco control strategies, plans and programmes? 	⊠ Yes □ No	☐ Yes ⊠ No	
4.3	22.1(c)	appropriate training or sensitization programmes for appropriate personnel in accordance with Article 12?	⊠ Yes □ No	Yes No	
4.4	22.1(d)	 provision of the necessary material, equipment and supplies, as well as logistic support, for tobacco control strategies, plans and programmes? 	⊠ Yes □ No	☐ Yes ⊠ No	
4.5	22.1(e)	identification of methods for tobacco control, including comprehensive treatment of nicotine addiction?	⊠ Yes □ No	☐ Yes ⊠ No	
4.6	22.1(f)	 promotion of research to increase the affordability of comprehensive treatment of nicotine addiction? 	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 w			
] 1 1	All 22 Pacific Island countries and territories have been supported by the New Zealand government through the New Zealand Aid Programme. The most significant contribution is a Pacific regional Non-Communicable Disease Prevention and Control programme between 2008-2012. Funds and technical support is directed towards individual country needs, based on national NCD plans. In most countries, this includes support to tobacco			

	control initiatives.	
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4.8	Please provide information about any assistance provided or received in the space below.
	As noted above, overseas development assistance funds for Pacific countries include funds for tobacco control as part of wider NCD-related efforts. This technical support has sought to strengthen tobacco control measures, legislation, and FCTC compliance in the region.
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?
	Recent priorities, which strengthen New Zealand's compliance with the FCTC, include increasing the price of tobacco through taxation, promoting smoking cessation by various means, removing tobacco products from display at retail outlets, media and other information campaigns to inform of the harm caused by tobacco. The Government has adopted the objective of New Zealand becoming an essentially smokefree nation by 2025. Consideration is being given to policies that will assist the Government to meet this target.
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.
5.4	What, if any, are the constraints or barriers, other than lack of resources, you have
3.4	encountered in implementing the Convention?
	(Please refer to Article 21.1(b).)
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