

## 调查目的

全球成人烟草调查（GATS）是一项系统监测成人烟草使用（有烟和无烟烟草制品）和跟踪关键烟草控制指标的全球统一标准调查。

GATS调查具有全国代表性，包括中国在内的多个国家均使用全球统一的标准方案。GATS不仅提高了各国设计、实施和评估烟草控制项目的的能力，同时，它还协助各国获得国内纵向比较和国家间横向比较的可比性数据，从而推动各国履行世界卫生组织（WHO）《烟草控制框架公约》（以下简称《公约》）。WHO基于《公约》制定了MPOWER系列政策，这是一套有效减少烟草需求的系列控烟措施，内容包括：

监测烟草使用和预防政策

保护人们免受烟草烟雾危害

提供戒烟帮助

警示烟草危害

确保禁止烟草广告、促销和赞助

提高烟税



## 调查方法

GATS采用全球统一的调查方法。调查内容包括：调查对象的背景信息、烟草（有烟与无烟烟草制品）使用、电子烟使用、戒烟、二手烟、烟草经济、媒体以及对烟草使用的知识、态度和认知。2018年中国成人烟草调查（GATS中国2018）由中国疾病预防控制中心组织实施，目标人群是15岁及以上中国居民。调查采取分层多阶段随机整群抽样设计，采用入户调查的方式进行数据采集。数据具有全国代表性。本次调查共抽取24,370个住户，每户随机抽取一人进行个人调查。调查信息通过使用平板电脑进行收集。共19,376人完成了个人调查，总体应答率为91.5%。



## 主要发现

### 烟草使用

- 15岁及以上人群（以下简称成人）现在吸烟率为26.6%（现在吸烟者人数3.08亿），其中男性为50.5%，女性为2.1%。
- 每日吸烟者现在吸烟率为23.2%（每日吸烟者人数为2.69亿），其中男性为44.4%，女性为1.6%。
- 22.2%的每日吸烟者在18岁之前开始每日吸烟。

### 戒烟

- 16.1%的现在吸烟者打算在未来12个月内戒烟。
- 19.8%的吸烟者在过去12个月内曾尝试戒烟。
- 15.6%的曾经和现在每日吸烟者已经戒烟。
- 在过去12个月内尝试过戒烟的吸烟者中，有90.1%的人戒烟时未使用任何方法。

### 二手烟

- 50.9%的从事室内工作的成人（2.17亿）在工作场所接触二手烟。
- 44.9%成人（5.15亿）在家中接触二手烟。

### 烟草经济

- 50%的现在吸烟者购买一盒机制卷烟（20支）的花费不超过9.9元。
- 每100盒机制卷烟的花费占2018年中国人均国内生产总值的1.5%。

### 媒体

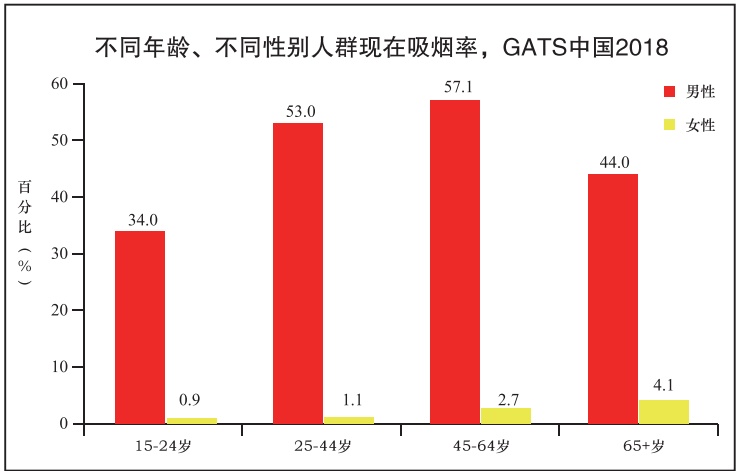
- 18.1%的成人在过去30天内看到过烟草广告、促销或赞助活动。
- 63.0%的成人在过去30天内看到过吸烟危害或鼓励戒烟的信息。
- 36.3%的现在吸烟者表示，在过去30天内看到烟盒包装上的健康警语后会考虑戒烟。

### 知识、态度和认知

- 成人对吸烟会导致中风、心脏病和肺癌的知晓率分别为41.4%、50.8%和82.8%。
- 成人对接触二手烟会导致成人心脏病、成人肺癌以及儿童肺部疾病的知晓率分别为39.7%、65.8%和66.7%。

烟草使用

吸烟者	总体 (%)	男性 (%)	女性 (%)
现在吸烟者	26.6	50.5	2.1
每日吸烟者	23.2	44.4	1.6
吸机制卷烟者占现在吸烟者的比例 <sup>1</sup>	96.7	97.1	86.7
在18岁之前开始每天吸烟的每日吸烟者	22.2	22.3	18.1
无烟烟草使用者			
现在无烟烟草使用者	0.9	1.6	0.1
烟草使用者（吸烟和/或无烟烟草制品）			
现在烟草使用者	26.6	50.5	2.1

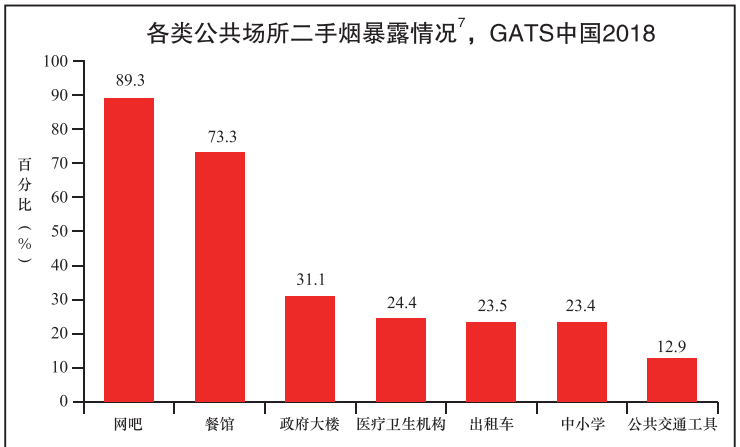


戒烟

	总体 (%)	男性 (%)	女性 (%)
打算在未来12个月内戒烟的现在吸烟者	16.1	16.1	17.6
在过去12个月内曾尝试戒烟的吸烟者 <sup>2</sup>	19.8	19.6	23.5
曾经和现在每日吸烟者中的曾经每日吸烟者所占比例 <sup>3</sup>	15.6	15.3	23.0
在过去12个月内得到医务人员戒烟建议的吸烟者 <sup>2,4</sup>	46.4	46.4	46.7
在过去12个月内曾尝试戒烟而未使用任何戒烟方法的吸烟者	90.1	89.9	93.2

二手烟

	总体 (%)	男性 (%)	女性 (%)
在工作场所接触二手烟的成人 <sup>5,†</sup>	50.9	60.5	39.6
在家中接触二手烟的成人 <sup>6</sup>	44.9	51.7	37.9



烟草经济

现在吸烟者购买一盒机制卷烟（20支）的花费中位数	9.9元
现在吸烟者每月购买机制卷烟的花费中位数	217.8元
每100盒机制卷烟的花费中位数占2018年人均国内生产总值（GDP）的百分比 <sup>8</sup>	1.5%

媒体

烟草广告	总体 (%)	男性 (%)	女性 (%)
在电视上看到烟草广告的成人 <sup>†</sup>	2.8	3.3	2.2
看到烟草广告的成人 <sup>†</sup>	10.7	12.8	8.6
看到烟草广告、促销或赞助活动的成人 <sup>†</sup>	18.1	22.9	13.2
控烟宣传			
看到吸烟危害或鼓励戒烟的信息的成人 <sup>†</sup>	63.0	63.7	62.8
健康警示			
因为烟盒包装上的健康警语而考虑戒烟的现在吸烟者 <sup>9,†</sup>	36.3	36.2	38.4

知识、态度和认知

	总体 (%)	现在吸烟者 (%)	非吸烟者 (%)
认为吸烟会导致			
中风	41.4	36.9	43.0
心脏病	50.8	45.4	52.8
肺癌	82.8	78.0	84.5
认为接触二手烟会导致			
成人心脏病	39.7	36.5	40.8
成人肺癌	65.8	60.2	67.9
儿童肺部疾病	66.7	61.9	68.5

电子烟

	总体 (%)	男性 (%)	女性 (%)
曾听说过电子烟	48.5	59.1	37.7
曾使用过电子烟	5.0	9.3	0.5
电子烟的现在使用者	0.9	1.6	0.1

<sup>1</sup> 吸机制卷烟者在现在吸烟者中所占的比例。<sup>2</sup> 包括现在吸烟者和戒烟不足12个月的曾经吸烟者。<sup>3</sup> 现在非吸烟者。<sup>4</sup> 占过去12个月看过病的人的百分比。<sup>5</sup> 占室内工作的人的百分比。<sup>6</sup> 家中有人吸烟至少每月发生一次。<sup>7</sup> 占过去30天内前往该场所的人的百分比。<sup>8</sup> 根据中国国家统计局数据，2018年中国人均国内生产总值估算值为64,644元（人民币）。<sup>9</sup> 占过去30天内看到烟盒包装上的健康警语的人的百分比。<sup>†</sup> 在过去30天内。

注：现在使用烟草是指每日使用以及少于每日使用的情形。成人是指年龄在15岁及以上的人。调查数据经过加权调整后可用于估计全国总体、男女和城乡烟草流行状况以及各项控烟政策执行情况。百分比反映的是每组人群中每项指标的流行状况，而不是跨组分布情况。

本次调查由世界卫生组织、美国疾病预防控制中心以及美国三角洲国际研究院共同提供技术支持。彭博减少烟草使用倡议行动通过美国疾病预防控制中心基金会以及比尔与梅林达·盖茨基金会提供资金支持。本次调查还得到了国家卫生健康委员会的资金支持。

本内容摘要中的调查结果和结论均为作者的调查结果和结论，并不代表美国疾病预防控制中心的官方立场。

## 背景

全球成人烟草调查（GATS）是一项系统监测成人烟草使用（有烟和无烟烟草制品）、跟踪关键烟草控制指标的全球统一标准调查。调查采用入户调查的方式，目标人群是15岁及以上人群。在中国，中国疾病预防控制中心分别于2010年和2018年组织实施了两轮GATS项目。两次调查都使用了相似的分层多阶段随机整群抽样设计，调查数据均具有全国代表性。GATS中国2010共有13,354人完成个人调查，总体应答率为96.0%。GATS中国2018共有19,376人完成个人调查，总体应答率为91.5%。如需了解更多信息，请参阅GATS中国2010内容摘要和GATS中国2018内容摘要。

GATS不仅提高了各国设计、实施和评估烟草控制项目的的能力，同时，它还协助各国获得国内纵向比较和国家间横向比较的可比性数据，从而推动各国履行世界卫生组织（WHO）《烟草控制框架公约》（以下简称《公约》）。WHO基于《公约》制定了MPOWER系列政策，这是一套基于证据的有效减少烟草需求的系列控烟措施。



监测烟草使用和预防政策  
保护人们免受烟草烟雾危害  
提供戒烟帮助  
警示烟草危害  
确保禁止烟草广告、促销和赞助  
提高烟税

## 关键控烟政策变化

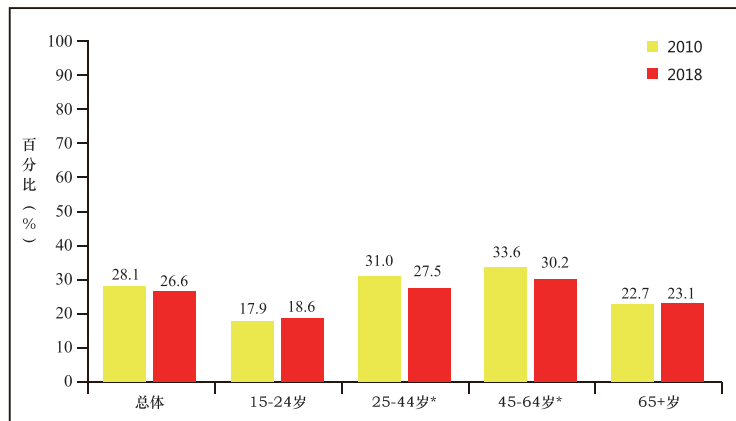
- 2013年，中共中央办公厅、国务院办公厅印发《关于领导干部带头在公共场所禁烟有关事项的通知》，要求各级领导干部不得在公共场所吸烟，要求各级党政机关无烟。
- 2014年
  - 教育部印发《教育部关于在全国各级各类学校禁烟有关事项的通知》，要求所有中小学和幼儿园实现100%无烟，所有高等学校建筑物内一律禁止吸烟。
  - 原国家卫生和计划生育委员会印发《国家卫生计生委办公厅关于进一步加强控烟履约工作的通知》，要求全面创建无烟卫生计生系统。
  - 国务院制定的《铁路安全管理条例》通过，明确规定旅客在动车组列车上吸烟将处以500元以上2000元以下罚款。
  - 国家开始提供资金和技术支持，在全国31个省建立戒烟热线，至今已在全国范围内支持开设400多家戒烟门诊。
- 2015年
  - 修订后的《中华人民共和国广告法》第二十二规定：禁止在大众传播媒介、公共场所、公共交通工具和户外发布烟草广告。
  - 财政部印发《财政部 国家税务总局关于调整卷烟消费税的通知》，宣布增加烟草税，将卷烟批发环节从价税税率由5%提高至11%，并按0.005元/支加征从量税。
  - 全国爱国卫生运动委员会印发的新版《国家卫生城市标准》开始施行，要求卫生城市（区）开展无烟学校、无烟机关、无烟医疗卫生机构等无烟场所建设。
- 2016年，《中华人民共和国慈善法》颁布，第四十条规定，任何组织和个人不得利用慈善捐赠违反法律规定宣传烟草制品，不得利用慈善捐赠以任何方式宣传法律禁止宣传的产品和事项。
- 截止2019年5月，包括北京、上海、深圳和西安在内的超过20个城市实施了无烟城市法律法规，约10%的人口受到全面无烟法规的保护。
- 烟草控制纳入了多项重要的国家发展规划，如《“健康中国2030”规划纲要》、《中国防治慢性病中长期规划（2017—2025年）》和《国民经济和社会发展第十三个五年规划》。

## 主要发现

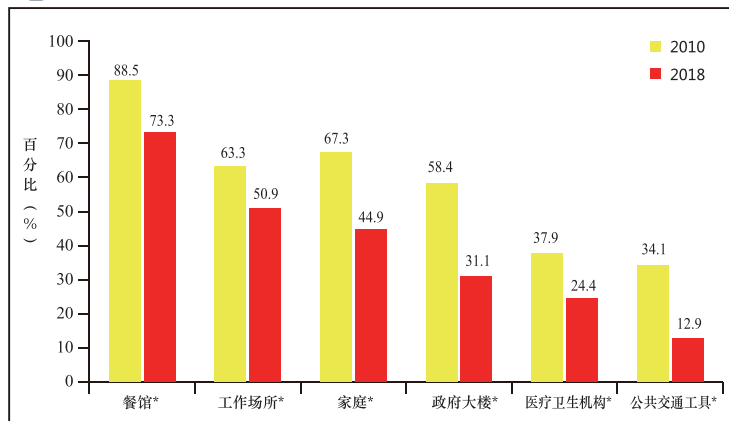
- 2010年至2018年，15岁及以上人群（以下简称成人）现在吸烟率有所下降（2010年为28.1%，2018年为26.6%），但是差异无统计学意义。25-44岁年龄组人群（从31.0%下降至27.5%）和45-64岁年龄组人群（从33.6%下降至30.2%）现在吸烟率均有显著下降。
- 2010年至2018年，家庭（从67.3%下降至44.9%）、工作场所（从63.3%下降至50.9%）、政府大楼（从58.4%下降至31.1%）、医疗机构（从37.9%下降至24.4%）、餐馆（从88.5%下降至73.3%）、公共交通工具（从34.1%下降至12.9%）的室内二手烟暴露率显著下降。
- 在过去12个月内曾尝试戒烟的吸烟者比例从2010年的14.4%上升至2018年的19.8%。
- 医务人员向吸烟者提供戒烟建议的比例从2010年的33.9%上升至2018年的46.4%。
- 吸烟者的戒烟率从2010年的16.0%上升至2018年的20.1%。
- 2010年至2018年，在互联网上看到吸烟危害和控烟信息的成人比例增加（8.1%至28.4%），而在报纸或杂志（21.8%至17.1%）和电视上（45.4%到40.6%）看到吸烟危害和控烟信息的成人比例有所下降。
- 在看到烟盒包装上的健康警句后表示会考虑戒烟的现在吸烟者的比例几乎没有变化（2010年为36.4%，2018年为36.3%）。
- 看到烟草广告的成人比例从2010年的15.0%下降到2018年的10.7%。
- 尽管现在吸烟者购买一盒机制卷烟（20支）的花费中位数从2010年的6.3元增加至2018年的9.9元，但是每100盒机制卷烟的花费中位数占当年人均国内生产总值（GDP）的百分比从2010年的2.0%下降至2018年的1.5%，提示卷烟相对价格降低。



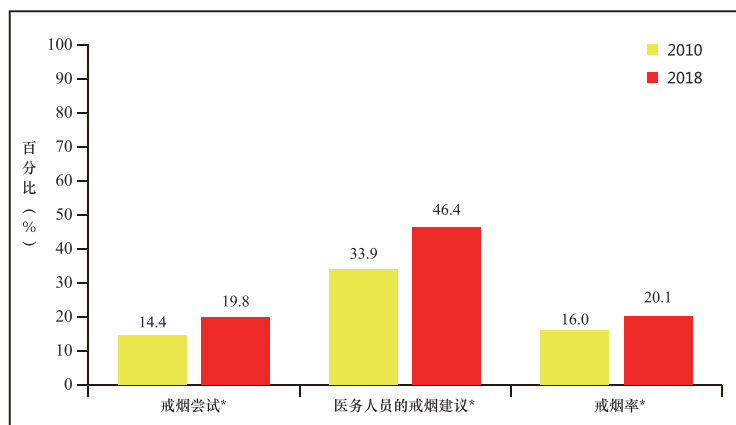
**m** 不同年龄组人群现在吸烟率，GATS中国2010和2018



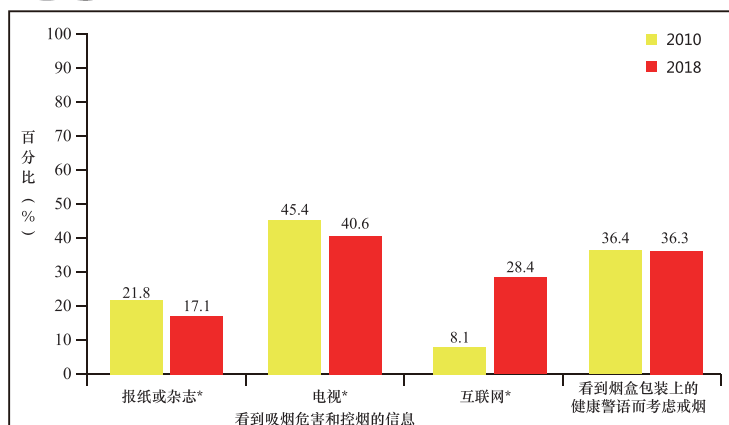
**p** 各类场所二手烟暴露情况<sup>1,2</sup>，GATS中国2010和2018



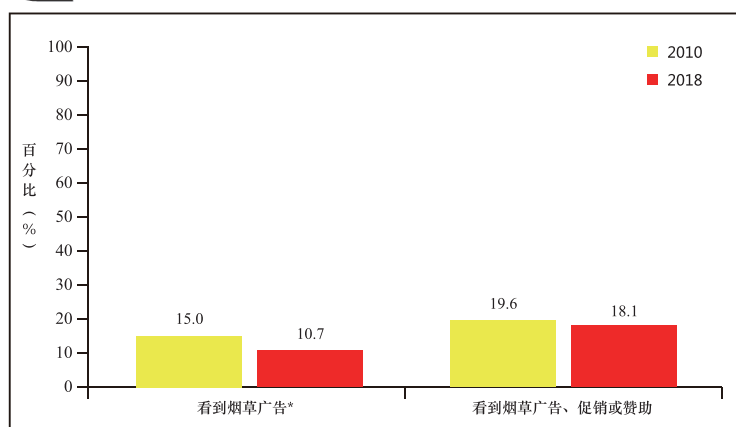
**o** 过去12个月的戒烟尝试、医务人员的戒烟建议、以及戒烟率<sup>3</sup>，GATS中国2010和2018



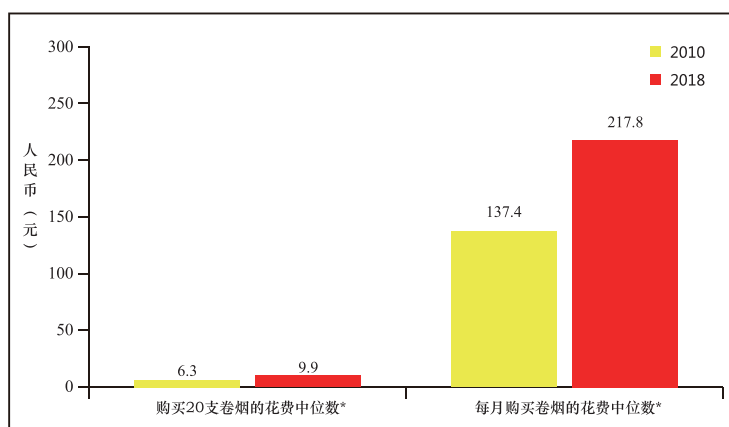
**w** 看到吸烟危害和控烟的信息以及看到烟盒包装上的健康警句考虑戒烟<sup>4</sup>，GATS中国2010和2018



**E** 在过去30天内看到烟草广告以及看到烟草广告、促销或赞助活动，GATS中国2010和2018



**r** 购买20支卷烟的花费中位数和每月购买卷烟的花费中位数（单位：人民币元），GATS中国2010<sup>5</sup>和2018



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本次调查由世界卫生组织、美国疾病预防控制中心以及美国三角洲国际研究院共同提供技术支持。彭博减少烟草使用倡议行动通过美国疾病预防控制中心基金会以及比尔与梅琳达·盖茨基金会提供资金支持。本次调查还得到了国家卫生健康委员会的资金支持。

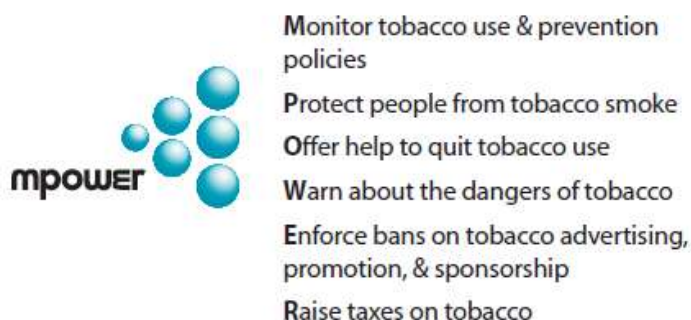
本内容摘要中的调查结果和结论均为作者的调查结果和结论，并不代表美国疾病预防控制中心的官方立场。



## GATS Objectives

The Global Adult Tobacco Survey (GATS) is a global standard for systematically monitoring adult tobacco use (smoking and smokeless) and tracking key tobacco control indicators.

GATS is a nationally representative survey, using a consistent and standard protocol across countries including China. GATS enhances countries' capacity to design, implement and evaluate tobacco control programs. It will also assist countries to fulfill their obligations under the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) to generate comparable data within and across countries. WHO developed MPOWER, a technical package of selected demand reduction measures contained in the WHO FCTC that include:



## GATS Methodology

GATS uses a global standardized methodology. It includes information on respondents' background characteristics, tobacco use (smoking and smokeless), electronic cigarette use, cessation, secondhand smoke, economics, media, and knowledge, attitudes and perceptions towards tobacco use. In China, GATS was conducted in 2018 as a household survey of persons 15 years of age and older by China CDC. A multi-stage, geographically clustered sample design was used to produce nationally representative data. A total of 24,370 households were sampled and one individual was randomly selected from each participating household to complete the survey. Survey information was collected electronically by using handheld devices. There were a total of 19,376 completed individual interviews with an overall response rate of 91.5%.

## GATS Highlights

### TOBACCO USE

- 26.6% overall (307.6 million adults), 50.5% of men, and 2.1% of women currently smoked tobacco.
- 23.2% overall (268.9 million adults), 44.4% of men, and 1.6% of women currently smoked tobacco on a daily basis.
- 22.2% of ever daily smokers started smoking on a daily basis before the age of 18.

### CESSATION

- 16.1% of current smokers planned to or were thinking about quitting in the next 12 months.
- 19.8% of smokers made a quit attempt in the past 12 months.
- 15.6% of ever daily smokers have quit.
- 90.1% of smokers who tried to quit in the past 12 months did not use any quitting assistance for at least one quit attempt.

### SECONDHAND SMOKE

- 50.9% of adults who worked indoors (216.9 million adults) were exposed to tobacco smoke at the workplace.
- 44.9% of adults (515.0 million adults) were exposed to tobacco smoke at home.

### ECONOMICS

- The median price paid for a pack of 20 manufactured cigarettes was 9.9 CNY.
- The median cost of 100 packs of manufactured cigarettes was 1.5% of per capita Gross Domestic Product 2018.

### MEDIA

- 18.1% of adults noticed cigarette advertising, promotion, or sponsorship in the past 30 days.
- 63.0% of adults noticed anti-cigarette smoking information in the past 30 days.
- 36.3% of current smokers thought about quitting after noticing health warnings on cigarette packages in the past 30 days.

### KNOWLEDGE, ATTITUDES & PERCEPTIONS

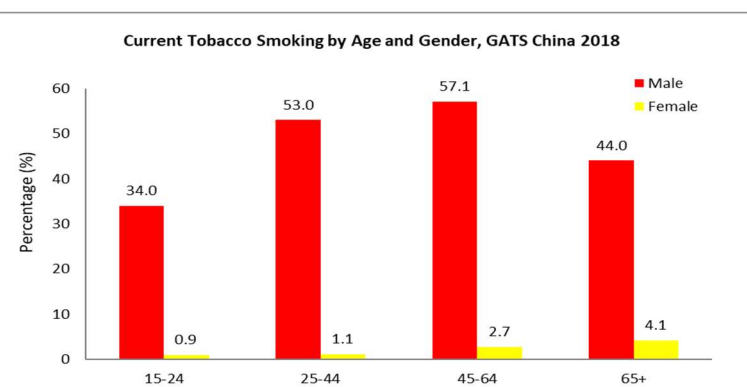
- 41.4%, 50.8%, and 82.8% of adults believed smoking tobacco causes stroke, heart disease, and lung cancer, respectively.
- 39.7%, 65.8%, and 66.7% of adults believed breathing other people's smoke causes heart disease in adults, lung cancer in adults, and lung illnesses in children, respectively.



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## TOBACCO USE

TOBACCO SMOKERS	OVERALL (%)	MEN (%)	WOMEN (%)
Current tobacco smokers	26.6	50.5	2.1
Daily tobacco smokers	23.2	44.4	1.6
Manufactured cigarette smokers among current smokers <sup>1</sup>	96.7	97.1	86.7
Ever daily tobacco smokers who started smoking daily before the age of 18	22.2	22.3	18.1
SMOKELESS TOBACCO USERS			
Current smokeless tobacco users	0.9	1.6	0.1
TOBACCO USERS (smoked and/or smokeless)			
Current tobacco users	26.6	50.5	2.1

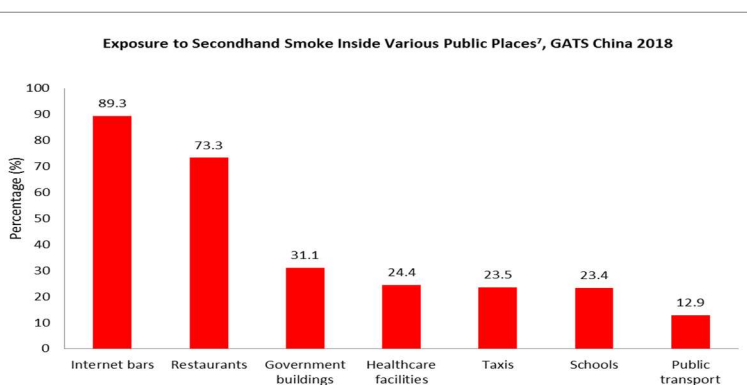


## CESSATION

	OVERALL (%)	MEN (%)	WOMEN (%)
Current smokers who planned to or were thinking about quitting in the next 12 months	16.1	16.1	17.6
Smokers who made a quit attempt in the past 12 months <sup>2</sup>	19.8	19.6	23.5
Former daily smokers among ever daily smokers <sup>3</sup>	15.6	15.3	23.0
Smokers advised to quit by a health care provider in the past 12 months <sup>2,4</sup>	46.4	46.4	46.7
Smokers who made at least one quit attempt in the past 12 months without any assistance	90.1	89.9	93.2

## SECONDHAND SMOKE

	OVERALL (%)	MEN (%)	WOMEN (%)
Adults exposed to tobacco smoke at the workplace <sup>5,†</sup>	50.9	60.5	39.6
Adults exposed to tobacco smoke at home <sup>6</sup>	44.9	51.7	37.9



## ECONOMICS

Median amount spent on 20 manufactured cigarettes (1 pack) (Chinese yuan, CNY)	9.9
Median monthly individual expenditure on manufactured cigarettes (Chinese yuan, CNY)	217.8
Median cost of 100 packs of manufactured cigarettes as a percentage of per capita Gross Domestic Product (GDP) 2018 <sup>8</sup>	1.5%

## MEDIA

TOBACCO INDUSTRY ADVERTISING	OVERALL (%)	MEN (%)	WOMEN (%)
Adults who noticed cigarette advertisements on TV <sup>†</sup>	2.8	3.3	2.2
Adults who noticed cigarette advertisements anywhere <sup>†</sup>	10.7	12.8	8.6
Adults who noticed any cigarette advertising, promotion, or sponsorship <sup>†</sup>	18.1	22.9	13.2

COUNTER ADVERTISING	OVERALL (%)	CURRENT SMOKERS (%)	NON-SMOKERS (%)
Adults who noticed anti-cigarette smoking information <sup>†</sup>	63.0	63.7	62.8

HEALTH WARNINGS	OVERALL (%)	MEN (%)	WOMEN (%)
Current smokers who thought about quitting because of health warnings on cigarette packages <sup>9,†</sup>	36.3	36.2	38.4

## KNOWLEDGE, ATTITUDES & PERCEPTIONS

	OVERALL (%)	CURRENT SMOKERS (%)	NON-SMOKERS (%)
Adults who believed smoking causes:			
Stroke	41.4	36.9	43.0
Heart disease	50.8	45.4	52.8
Lung cancer	82.8	78.0	84.5
Adults who believed exposure to tobacco smoke causes:			
Heart disease in adults	39.7	36.5	40.8
Lung cancer in adults	65.8	60.2	67.9
Lung illnesses in children	66.7	61.9	68.5

## ELECTRONIC CIGARETTES

	OVERALL (%)	MEN (%)	WOMEN (%)
Ever heard of electronic cigarettes	48.5	59.1	37.7
Ever used electronic cigarettes	5.0	9.3	0.5
Current user of electronic cigarettes	0.9	1.6	0.1

<sup>1</sup> The percentage of manufactured cigarette smokers among current tobacco smokers. <sup>2</sup> Includes current smokers and former smokers who have been abstinent for less than 12 months. <sup>3</sup> Current non-smokers. <sup>4</sup> Among those who visited a health care provider in past 12 months. <sup>5</sup> Among those who work outside of the home who usually work indoors or both indoors and outdoors. <sup>6</sup> Smoking occurs in the home at least monthly. <sup>7</sup> Among those who visited in the past 30 days. <sup>8</sup> Estimated China 2018 per capita GDP = 64,644 (Chinese yuan, CNY), provided by the National Bureau of Statistics of China. <sup>9</sup> Among those who noticed health warnings on cigarette packages in the past 30 days. <sup>†</sup> During the past 30 days.

**NOTE:** Current use refers to daily and less than daily use. Adults refer to persons aged 15 years and older. Data have been weighted to be nationally representative of all non-institutionalized men and women aged 15 years and older. Percentages reflect the prevalence of each indicator in each group, not the distribution across groups.

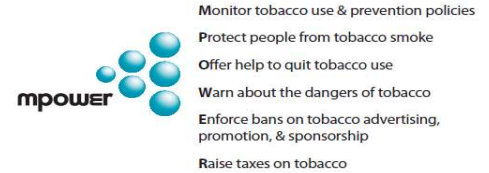
Technical assistance was provided by the World Health Organization (WHO), the U.S. Centers for Disease Control and Prevention (CDC), and RTI International. Resources and program support were provided by the *Bloomberg Initiative to Reduce Tobacco Use* through the CDC Foundation, with grants from Bloomberg Philanthropies and the Bill & Melinda Gates Foundation. Additional resources and in-kind support were provided by the National Health Commission of the People's Republic of China.

The findings and conclusions in this fact sheet are those of the author(s) and do not necessarily represent the official position of the U.S. Centers for Disease Control and Prevention.

### BACKGROUND

The Global Adult Tobacco Survey (GATS) is a global standard protocol for systematically monitoring adult tobacco use (smoking and smokeless) and tracking key tobacco control indicators. This household survey collects data on persons 15 years of age and older. In China, China CDC conducted GATS in 2010 and in 2018. Both the surveys used similar multistage stratified cluster sample designs to produce nationally representative data. There were 13,354 interviews completed in the 2010 survey with an overall response rate of 96.0%. There were 19,376 interviews completed in the 2018 survey with an overall response rate of 91.5%. For additional information, refer to the GATS China 2010 and 2018 country fact sheets.

GATS enhances countries' capacity to design, implement and evaluate tobacco control programs. It will also assist countries to fulfill their obligations under the World Health Organization's (WHO) Framework Convention on Tobacco Control (FCTC) to generate comparable data within and across countries. WHO has developed MPOWER, a package of six evidence-based demand reduction measures contained in the WHO FCTC.



### KEY POLICY CHANGES

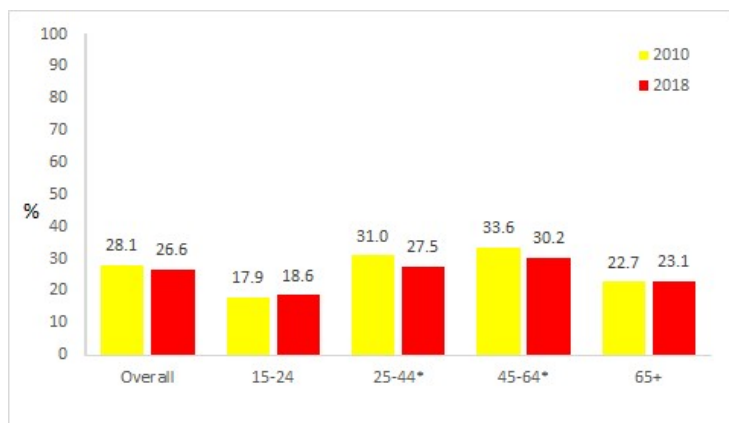
- In 2013, the General Office of the Central Committee of the Central Party of China and the General Office of the State Council jointly issued a directive for government officials to take the lead in making public places smoke-free.
- In 2014:
  - The Ministry of Education issued a directive for all schools and kindergartens to be 100% smoke-free and universities to ban smoking in all indoor buildings.
  - The National Health Commission issued a directive for all health facilities in China to become 100% smoke-free.
  - The Railway Safety Law was adopted which banned smoking in all carriages of high-speed trains with fines between 500 and 2000 Chinese yuan assessed to passengers for violations.
  - The central government started providing financial and technical support for establishing more than 400 cessation clinics nationwide and quit lines in all 31 provinces in mainland China.
- In 2015:
  - The Advertising Law was adopted which prohibited tobacco advertising in mass media, public places, public transportation, and on billboards.
  - The Ministry of Finance announced an increase in tobacco taxation, raising the ad valorem tax rate for wholesale cigarettes from 5% to 11%, and levying an additional ad valorem tax at 0.005 yuan per expenditure.
  - National Health City Standards were revised by the National Patriotic Health Campaign Committee, requiring health cities (districts) to implement smoke-free schools, government buildings, and health facilities.
- In 2016, the Philanthropy Law was adopted which prohibited marketing tobacco products through charitable donations.
- More than 20 cities—including Beijing, Shanghai, Shenzhen and Xi'an—have implemented smoke-free laws which covers approximately 10% of the population in China.
- Tobacco control has been integrated into several important national development plans such as the Healthy China 2030 Plan, the National Mid- and Long-Term Plan for NCD Prevention (2017-2025), and the 13<sup>th</sup> Five-Year Plan for Economic and Social Development.

### KEY FINDINGS

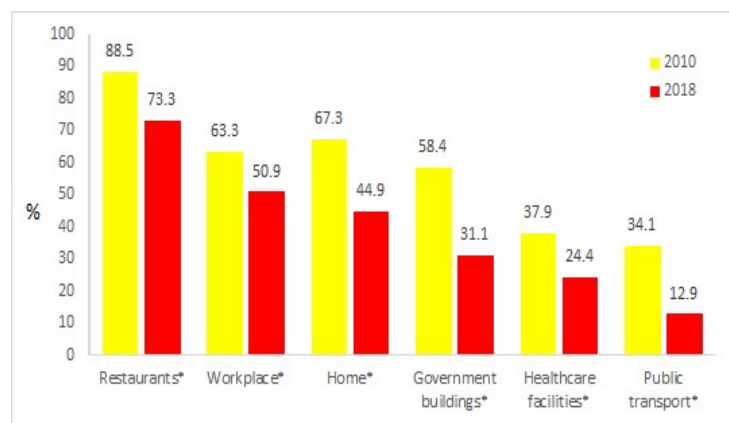
- From 2010 to 2018, overall current tobacco smoking decreased, however, the difference was not statistically significant (28.1% in 2010 and 26.6% in 2018). Current tobacco smoking did significantly decline among those aged 25-44 years (31.0% to 27.5%) and 45-64 years (33.6% to 30.2%).
- Secondhand smoke exposure in indoor places significantly declined from 2010 to 2018 in homes (67.3% to 44.9%), workplaces (63.3% to 50.9%), government buildings (58.4% to 31.1%), healthcare facilities (37.9% to 24.4%), restaurants (88.5% to 73.3%), and public transportation (34.1% to 12.9%).
- The percentage of smokers who made a quit attempt in the last 12 months significantly increased from 14.4% in 2010 to 19.8% in 2018.
- The percentage of smokers who were advised to quit by a healthcare provider significantly increased from 33.9% in 2010 to 46.4% in 2018.
- The quit rate among ever smokers significantly increased from 16.0% in 2010 to 20.1% in 2018.
- From 2010 to 2018, the percentage of adults who noticed anti-cigarette smoking information on the internet significantly increased (8.1% to 28.4%) while the percentage significantly decreased for noticing in newspapers or in magazines (21.8% to 17.1%) and on television (45.4% to 40.6%).
- The percentage of current smokers who thought about quitting after noticing health warning labels on cigarette packages did not change (36.4% in 2010 and 36.3% in 2018).
- The percentage of adults who noticed any cigarette advertisements significantly declined from 15.0% in 2010 to 10.7% in 2018.
- Although the median cost of 20 manufactured cigarettes significantly increased from 6.3 Chinese yuan in 2010 to 9.9 Chinese yuan in 2018, the median cost of 100 packs of manufactured cigarettes as a percentage of per capita Gross Domestic Product (GDP) significantly declined from 2.0% in 2010 to 1.5% in 2018, suggesting that cigarettes have become more affordable.



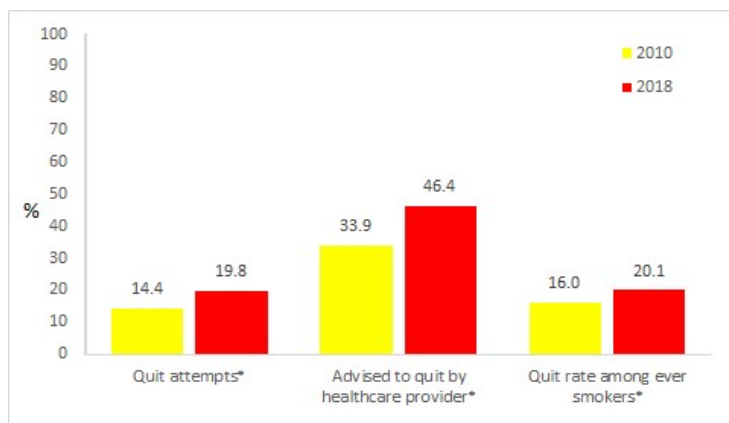
### m Prevalence of current tobacco smoking by age, China 2010 and 2018



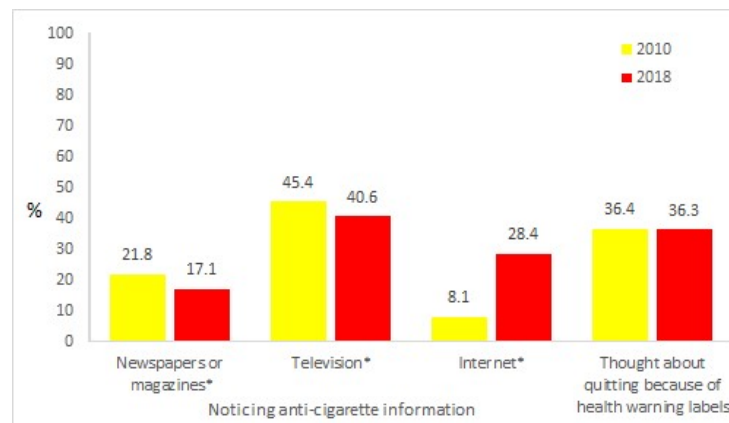
### p Exposure to secondhand smoke inside various places<sup>1,2</sup>, China 2010 and 2018



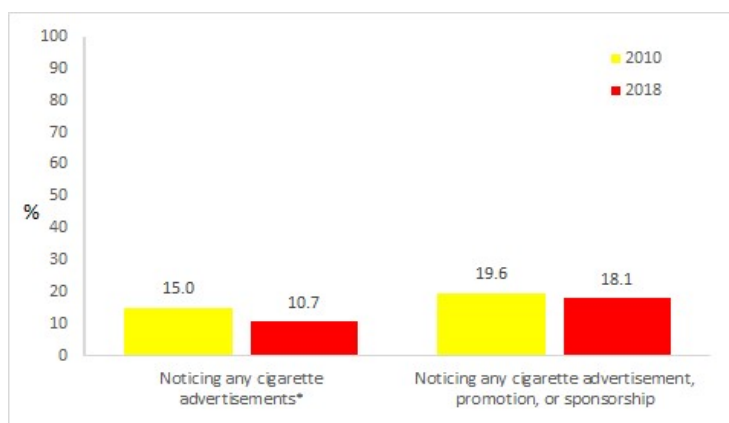
### o Quit attempts and advice to quit by a healthcare provider among smokers in the past 12 months and the quit rate among ever smokers<sup>3</sup>, China 2010 and 2018



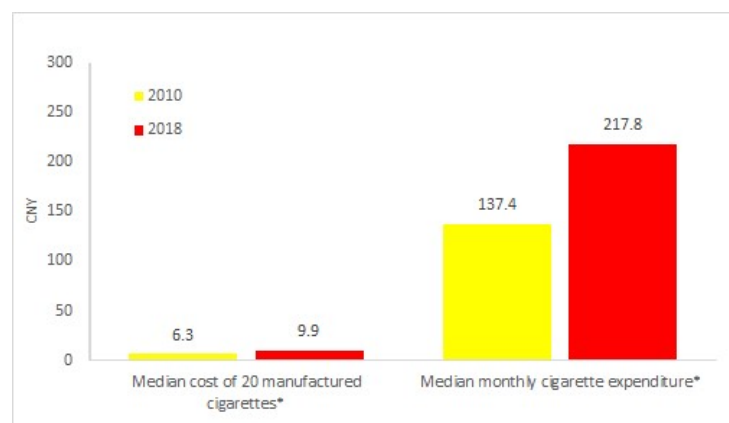
### w Noticing anti-cigarette smoking information and effects of noticing health warning labels on cigarette packages<sup>4</sup>, China 2010 and 2018



### E Noticing any cigarette advertisements and any advertisement, promotion, or sponsorship during the last 30 days, China 2010 and 2018



### r Median cost of 20 manufactured cigarettes and median cigarette expenditure per month in Chinese yuan (CNY), China 2010<sup>5</sup> and 2018



**NOTE:** Current use refers to daily and less than daily use. Adults refer to persons aged 15 years and older. Data have been weighted to be nationally representative of all non-institutionalized men and women aged 15 years and older. Percentages reflect the prevalence of each indicator in each group, not the distribution across groups. <sup>1</sup> Secondhand smoke indicators calculated as follows: Homes: exposure to tobacco smoke at home at least monthly; Workplace: among those who work outside of the home who usually work indoors or both indoors and outdoors; Public places: among those who visited in the past 30 days. <sup>2</sup> In 2018, the question about public transportation stated "not including taxis". <sup>3</sup> Former smokers (current non-smokers) among ever smokers. <sup>4</sup> Current smokers who thought about quitting because of health warning labels on cigarette packages among those who noticed the labels in the past 30 days. <sup>5</sup> GATS China 2010 cost data were adjusted for inflation for direct comparison to 2018 using the Inflation Rate for Average Consumer Prices from the International Monetary Fund's World Economic Outlook Database. \* Indicates comparison is statistically significant at p<0.05.

Technical assistance was provided by the World Health Organization (WHO), the U.S. Centers for Disease Control and Prevention (CDC), and RTI International. Resources and program support were provided by the *Bloomberg Initiative to Reduce Tobacco Use* through the CDC Foundation, with grants from Bloomberg Philanthropies and the Bill & Melinda Gates Foundation. Additional resources and in-kind support were provided by the National Health Commission of the People's Republic of China.

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