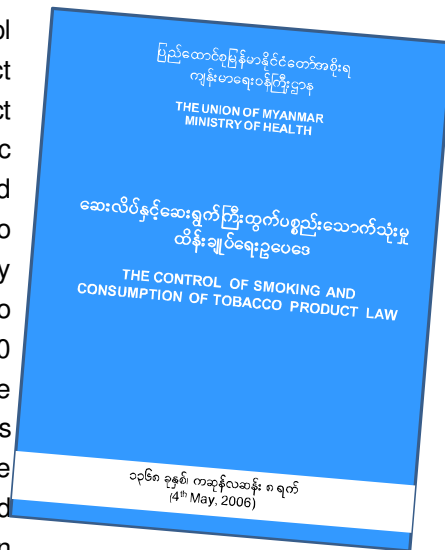
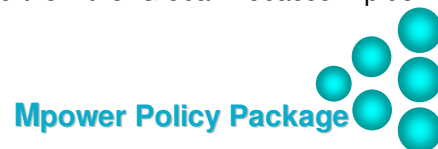


Tobacco Control Measures

Myanmar became a Party to the WHO Framework Convention on Tobacco Control in 2005. The “Control of Smoking and Consumption of Tobacco Product Law” was enacted in May, 2006 and came into effect in May, 2007. The Law prohibits smoking at public places, public transport, health facilities and educational institutions; ban all forms of tobacco advertisements and prohibits sale of tobacco to and by minors. The Law also prohibits sale of tobacco products within the school compound and within 100 feet from the compound of the school. It prohibits sale by vending machine, sale of cigarettes in loose forms and requirement of health warnings in local language on tobacco products. Ministry of Health had conducted a series of multisectoral workshops in collaboration with WHO to strengthen law enforcement.



The Myanmar Tobacco Control Programme has been implementing its activities in line with the six MPOWER policies recommended in the “WHO Report on the Global Tobacco Epidemic 2008”.



1. Monitor tobacco use and prevention policies: The National Tobacco Control Programme has been monitoring tobacco use through conducting of sentinel prevalence studies and global tobacco surveillance system, i.e. by conducting Global Health Professions Students Surveys, Global School Personnel Surveys and Global Youth Tobacco Surveys periodically. The recent studies done in 2009 showed an increasing trend in both smoking and smokeless tobacco use, especially among male. The similar trend was found both in urban and rural areas. Monitoring of prevention policies is also conducted through collection of data and reporting instruments such as Global Tobacco Control Reports.
2. Protect people from tobacco smoke: In line with the Myanmar Tobacco Control Policy and Plan of Action, all the health facilities had been established as smoke -free since 2001; education department started to establish tobacco-free schools in 2002 and sports grounds were declared smoke-free in 2002. The National legislation prohibits smoking at public

places, public transport and in enclosed public places. However, it is a challenging issue to be aware of and follow the regulations accordingly.

3. Offer help to quit tobacco: Community-based cessation programmes are being implemented in project townships where community facilitators were trained to provide support and counseling for tobacco users to quit. Basic health personnel are also trained for health education on dangers of tobacco and on cessation. Clinical support for Nicotine Replacement Therapy and establishment of quit lines are yet to be implemented.
4. Warn about the dangers of tobacco: National legislation requires cigarette, cheroot and cigar packages to display health warnings in local language. Measures are underway to enforce regulations for the health warnings to be rotating, pictorial as well as textual and to be displayed taking at least 30% of the front of cigarette packages.
5. Enforce bans on tobacco advertising, promotion and sponsorship: The 2006 Control of Smoking and Consumption of Tobacco Product Law prohibits all forms of direct and indirect advertising, promotion and sponsorship of tobacco. Even before the Law was enacted, tobacco advertisement on TV and Radio was prohibited in 2000-2001 in collaboration with Ministry of Information. Tobacco billboards had been totally banned since 2002 in collaboration with City Development Committees and Department of Development Affairs. Tobacco advertisement via print media was prohibited in 2002 in collaboration with the General Administrative Department.
6. Raise taxes on tobacco: Cigarette taxes in Myanmar are levied at 75% (commercial tax) of taxable turnover; Myanmar is among a few countries in the world which levied cigarette taxes higher than 70%. Advocacy workshops had been conducted to increase taxes harmoniously on all tobacco products such as cheroots, pipes, cigars, betel with tobacco etc.

