- 香港大學公共衞生學院
- 香港中文大學公共衞生及基層醫療學院
- 香港醫學會
- 香港防癆心臟及胸病協會
- 東華三院
- 基督教聯合那打素社康服務
- School of Public Health, The University of Hong Kong
- School of Public Health and Primary Care,
   The Chinese University of Hong Kong
- The Hong Kong Medical Association
- The Hong Kong Tuberculosis,
   Chest and Heart Diseases Association
- Tung Wah Group of Hospitals
- United Christian Nethersole Community Health Service







# 控煙辦五大主要工作範疇 THE FIVE CORE ELEMENTS OF TCO

為進一步加強及協調政府的反吸煙工作,衛生署於2001 年成立控煙辦公室(控煙辦)。控煙辦致力透過跨界別合作 和動員市民大眾的參與,在香港培育無煙文化。

Tobacco Control Office (TCO) was established under the Department of Health in 2001 to enhance and coordinate the Government's tobacco control efforts. The mission of TCO is to nurture a smoke-free culture in Hong Kong through intersectoral collaboration and community mobilization.



法例及政策

LEGISLATION AND POLICY

於1982年頒布的《吸煙(公眾衞生)條例》(第371章)(下稱「條例」), 是香港主要的控煙法例,也是控煙歷史的重要里程碑。自此,在公眾 地方吸煙、銷售及宣傳煙草產品便逐漸受法律約束。

The Smoking (Public Health) Ordinance (Cap. 371) ("the Ordinance"), which forms the major part of the legal framework for tobacco control in Hong Kong, was first enacted in 1982. This signified the landmark step in our tobacco control history. Since then, tobacco use in public places has been gradually restricted under the law, as well as the sales and marketing of tobacco products.



# 《吸煙(公眾衞生)條例》 (1982年至2000年)

所有公共升降機、公共交通工具、戲院、劇院、音樂廳、遊戲機中心、超級市場、銀行、百貨公司及購物商場也禁止吸煙。所有食肆也必須劃定禁煙區,並按指定方式展示「禁止吸煙」標誌。教育機構及機場亦獲准劃定禁煙區。

除持牌小販及小型煙草零售場所外,電視、電台、 戲院、互聯網、所有展示的廣告及印刷媒體均禁 止展示煙草廣告及贊助。推廣香煙的促銷策略也 一律禁止,例如放置煙草產品的銷售機或隨煙草 產品附送贈品。

香煙封包頂部必須以白底黑字展示健康忠告、焦油量及尼古丁含量。獲准銷售的香煙每支最多可含17毫克的焦油。

#### 向未成年人士銷售香煙

任何人都不得將香煙售予18歲以下人士。零售商 須展示標誌知會公眾。

#### 無煙煙草產品

根據《無煙煙草產品(禁止) 規例》(第132BW章),自 1987年起禁止所有進口、 生產、銷售及擁有無煙煙 草產品。



# SMOKING (PUBLIC HEALTH) ORDINANCE (1982 – 2000)

Smoking was banned in public lifts, public transport carriers, cinemas, theatres, concert halls, amusement game centres, supermarkets, banks, department stores and shopping malls. Restaurants were required to designate no smoking areas. "No smoking" signs should be displayed in a prescribed manner. Educational institutes and the airport were allowed to designate no smoking areas.

Tobacco Advertisement and Sponsorship was banned on TV, radio, cinema, internet, all display advertisement and printed media except for licensed hawkers and small tobacco retail premises. Marketing strategies promoting cigarette use were prohibited e.g. vending machines carrying tobacco products or attachment of gifts to tobacco products.

Health Warnings must be present on the top of cigarette pack, black lettering on white background, in rotation together with tar and nicotine yield. The maximum level of tar content in cigarette allowed for sale was set at 17mg.

#### Sales to Mino

Sale of tobacco to people under age 18 was prohibited and retailers were required to display a sign informing the public.

#### Smokeless Tobacco

According to Smokeless Tobacco Products (Prohibition) Regulations (Cap. 132 BW), the import, manufacture, sale and possession of smokeless tobacco has been banned since 1987.





# 公眾參與 PUBLIC ENGAGEMENT

吸煙(公眾衞生)條例第371章

諮詢文件 Consultation Document

Smoking (Public Health) Ordinance Cap.371

控煙辦成立時,條例自1997年修訂後已四年未有更新。為收緊控煙法例,控煙辦的早期工作主要為收集公眾意見、評估當時的控煙政策、諮詢持份者意見及增強控煙能力。

At the time TCO was established, the Ordinance was last amended 4 years back in 1997. In order to gain momentum to tighten tobacco control laws, much of TCO's early work concentrated in the collection of public opinion, evaluation of existing tobacco control policies, consultations of stakeholders and capacity building.



闹生者者长带银本地控煙專家到訪美國。 Director of Health led local tobacco control experts on a visit to USA.

# 公眾意見及社會聲音 PUBLIC OPINION AND VOICES FROM THE COMMUNITY

政府在2001年6月就多項建議進行諮詢,收集公 眾意見。雖然飲食業及煙草業以影響生意為理由 反對部分建議,但諮詢結果顯示大部分措施均獲 得社會廣泛支持。

The Government launched a consultation exercise in June 2001 to gauge public opinions on a basket of proposals. The outcome of the public consultation exercise reflected broad-based community support for most of the initiatives, although the catering and tobacco trades were against some of the proposals on the grounds that they would adversely affect their business.





# 《吸煙(公眾衞生)條例》的重大修訂 MAJOR AMENDMENT TO THE SMOKING (PUBLIC HEALTH) ORDINANCE

2001年中完成諮詢後,在控煙辦的倡導下,醫護界及大部分市民也促請政府在室內工作間、食肆及公眾場所實施禁煙。 2004年,立法會提出動議修訂條例,以擴大禁煙區,保障市民免受二手煙之害。修訂動議最終獲得超過90%議員同意 通過。

Following the consultation exercise in mid-2001, tobacco control advocates, the healthcare sector and the majority of the public urged the Government to implement a smoking ban in indoor workplaces, restaurants and public areas. In 2004, a motion to amend the Ordinance was moved at the Legislative Council (LegCo) meeting to expand no smoking areas with a view to protecting citizens from secondhand smoke. The amendment motion was passed and agreed by more than 90% of LegCo members at the meeting.

# 法案委員會

政府於2005年成立法案委員會,負責研究《2005年吸煙(公眾衞生)(修訂)條例草案》。法案委員會與政府官員進行會議,接見各組織代表,包括食肆的僱員及僱主,以了解其運作及意見。此外,委員會成員亦前往泰國、挪威及愛爾蘭考察,借鑑當地推行控煙措施的經驗。委員會更參考多個海外司法管轄區有關室內工作間及公眾場所實施禁煙的相關法例。

作為政府的控煙健康顧問,控煙辦於衛生事務委員會及法案委員會會議上,積極讓持份者了解擴大禁煙範圍的科學理據、需要評估和對吸煙室的意見。各方經過深入討論後,最終在2006年10月19日誦過修訂草案。

### THE BILLS COMMITTEE

A Bills Committee was formed to study the Smoking (Public Health) (Amendment) Bill 2005. The Bills Committee held meetings with Government officials, met with representatives of various organizations including employees and employers of hospitality establishments to obtain a better understanding of their operation and to listen to their concerns. In addition, members participated in a duty visit to study the experience of Thailand, Norway and Ireland in the implementation of anti-smoking measures. References were made to the relevant legislation in various overseas jurisdictions which have imposed a smoking ban in enclosed workplaces and public places.

As the Government's health advisor on tobacco control, TCO engaged stakeholders in understanding the scientific basis for extension of smoking bans, needs assessments and our views on smoking rooms during the course of discussions at the Panel on Health Services and Bills Committee. After vigorous discussions with parties concerned, the amendment bill was subsequently enacted on 19 October 2006.



# 政治承諾

法案委員會在討論草案期間,遇上煙草業、飲食業及娛樂業界的強烈反對。政府在2005年4月將《吸煙(公眾衞生)(修訂)條例草案》刊憲後,飲食業及娛樂業界分別在2005年5月1日及6日舉行「集體熄燈」及「上街吸煙」遊行,以示不滿。儘管障礙重重,但政府仍然致力遵守政治承諾。在反吸煙團體和醫護人員的同心協力下,加上有充份證據顯示禁煙會帶來好處,條例修訂經歷兩年的爭議後最終獲得通過。





### POLITICAL COMMITMENT

Resistance from the tobacco, catering and entertainment industries was encountered throughout the course of Bills Committee discussion. Following the gazette of the "Smoking (Public Health) (Amendment) Bill" in April 2005 by the Government, the catering and entertainment industries showed their discontentment by calling for a "Collective Light-off" action as well as a "Smoke-out in the street" demonstration on 1 and 6 May 2005 respectively.





Despite all these barriers, the political commitment from the Government was strong. Together with the coordinated force from anti-smoking advocates, healthcare providers and sound evidences on the positive effect smoking ban can bring, the Ordinance amendment was enacted after 2 years of battle.

# 《煙草控制框架公約》加快控煙步伐 THE CATALYST – FRAMEWORK CONVENTION ON TOBACCO CONTROL

隨著公眾更加了解煙草及二手煙的禍害,市民對公眾場所及工作間實施禁煙的訴求在2000年後急增。

於2003年5月21日假瑞士日內瓦舉行的第56屆世界衞生大會上,中華 人民共和國採納了世界衞生組織的《煙草控制框架公約》。2005年 10月11日,中國正式簽署世界衞生組織的《煙草控制框架公約》。 在中國的支持下,香港特別行政區政府亦致力落實此公約。

With increased public awareness on hazards of tobacco smoke and secondhand smoke, the demand for smoke-free public places and workplaces rocketed in the 2000's.

On 21 May 2003, at the 56<sup>th</sup> World Health Assembly held in Geneva, Switzerland, the People's Republic of China (PRC) adopted the WHO Framework Convention on Tobacco Control (FCTC). On 11 October, 2005, PRC ratified the WHO FCTC. With the blessings from PRC, the Hong Kong Special Administrative Region's Government committed itself to implementation of the treaty.



# 《煙草控制框架公約》 第8條:防止接觸煙草煙霧

# 擴大禁煙區

科學已明確證實,接觸煙草煙霧會引致死亡、疾 病及殘障。

政府在2005年的立法會參考資料摘要中,建議擴大禁煙區範圍至室內工作間及公眾場所,例如食肆、酒吧及其他款待場所。年輕人及患病人士經常到訪的地方,包括學校及醫療院舍,亦納入初步建議的禁煙區內。法案委員會的立法會議員了解煙草產品的禍害後,均認同必須盡快擴大禁煙區至室內場所及室外範圍,加強保障市民健康。

# FCTC ARTICLE 8: PROTECTION FROM EXPOSURE TO SECONDHAND SMOKE

## EXTENSION OF NO SMOKING AREAS

The scientific evidence has unequivocally established that exposure to tobacco smoke causes death, disease and disability.

In the brief to Legislative Council in 2005, the Government recommended extending no smoking areas to indoor workplace and public places such as restaurants, bars and other hospitality premises. Places most visited by youngsters and the diseased including schools and health care institutions were also included in the initial proposal. Having understood the hazards of tobacco products, legislative councillors at the Bills Committee saw the urgency in extending the smoking ban to more indoor premises and outdoor areas to better protect our people's health.

#### 下表載列2006年制定的《吸煙(公眾衞生) (修訂)條例》重點:

#### 《吸煙(公眾衞生)條例》(1997年)

#### 禁煙的室內公眾場所:

- 升降機
- 公共交通工具

• 銀行

- 戲院、劇院、音樂廳
- 超級市場、百貨公司、購物商場
- 遊戲機中心

#### 設指定禁煙區的室內公眾場所:

食肆

- 教育院校
- 香港國際機場

# THE TABLE BELOW HIGHLIGHTS THE SALIENT FEATURES OF THE ENACTED SMOKING (AMENDMENT) ORDINANCE 2006.

#### SMOKING (PUBLIC HEALTH) ORDINANCE (1997)

#### Smoking ban in public indoor areas:

lifts

- public transport carriers
- cinemas, theatres, concert halls banks
- supermarkets, department stores, shopping malls
- amusement game centres

#### Designate No smoking areas:

restaurants

- educational institutes
- Hong Kong International Airport

















#### 修訂條例(2006年)

#### 擴大室內公眾場所的禁煙區

- 食肆、酒吧 工作間
- 4市
  - 卡拉OK場所
- 麻將房、夜總會\*、按摩院\*、商營浴室、 麻將天九耍樂處所

#### 擴大室內及室外公眾地方的禁煙區

- 幼兒中心、學校及指明教育機構,包括專上學 院及大學\*
- 醫院、留產所、安老院、治療中心及任何共用 宿舍
- 公眾遊樂場地(指定為吸煙區範圍除外)
- 泳灘的水域及沙地、燒烤場及公眾泳池的水域、行人通道、跳水板及觀眾看台\*
- 球場,包括跑道及觀眾看台\*
- 公共運輸交匯處及巴士總站\*
- 香港濕地公園\*
- 自動扶手電梯\*

## ENACTED AMENDMENT ORDINANCE (2006)

#### Extension of smoking ban in public indoor areas:

- restaurants, bars
- workplaces
- markets
- karaoke establishments
- mahjong rooms, nightclubs\*, massage establishments\*, commercial bathhouses, mahjong-tin kau premises

#### Extension of smoking ban in public indoor and outdoor areas:

- child care centres, schools and specified educational establishments including post secondary colleges and universities\*
- hospitals, maternity homes, residential care homes, treatment centres and any communal quarters
- public pleasure grounds (but not those areas designated as smoking areas),
- bathing beaches and the vicinities including adjacent barbecue areas, swimming pools and the vicinities including sidewalks, diving boards and spectator stands\*
- stadiums including running track and spectator stands\*
- public transport interchanges and bus termini\*
- The Hong Kong Wetland Park\*
- escalators\*

















# 合資格場所

鑑於香港不少酒吧均設於高層商廈,而麻將館、商營浴室、按摩院、麻將會所及夜總會的經營模式獨特,政府同意部分行業需要更靈活的安排,以配合規例變更、改變經營模式及協助吸煙的顧客逐漸適應法例規定。因此,酒吧、麻將天九耍樂處所、商營浴室、按摩院、合資格會所內的麻將房及夜總會的禁煙實施日期可暫緩30個月,為這些場所提供更長時間的適應期,以在室內工作間全面禁煙及配合經營者需要兩者之間取得平衡。

## **QUALIFIED ESTABLISHMENTS**

Taking into consideration that many bars in Hong Kong operate in high-rise commercial buildings and the unique mode of operation of mahjong parlours, commercial bathhouses, massage parlours, mahjong clubs and nightclubs, the Government accepted that certain industries might need more flexible arrangements to help them tide over the regulatory changes, transform their mode of operation, as well as to facilitate their smoker-customers to gradually adjust to the legislative requirements. Therefore the implementation date of the smoking ban for bars, mahjong-tin kau premises, commercial bathhouses, massage establishments, designated mahjong rooms in qualified clubs, and nightclubs was deferred by 30 months in order to allow a longer adaptation period for such establishments so as to help strike a balance between achieving its ultimate goal of a comprehensive ban on smoking in indoor workplaces and addressing the needs of operators.

<sup>\*</sup>立法會議員建議項目 \*Items suggested by LegCo members

### 公共運輸設施

是次修訂的重點之一,是將巴士總站等有蓋或露 天的公共交通設施納入禁煙區範圍。由於公共運 輸交匯處數量眾多(當時有100個有蓋及159個 露天公共運輸交匯處),劃分每個交匯處禁煙區 範圍的工作量估計非常龐大。

在有蓋公共運輸交匯處實施禁煙後,控煙辦進行 調查以評估有關地點的二手煙情況。詳情請參閱 第79頁。

#### PUBLIC TRANSPORT FACILITIES

One of the remarkable achievements in this amendment was the inclusion of public transport facilities such as bus termini, be it covered or open-air, in the extension of no smoking areas. The large number of transport interchanges (100 covered and 159 open-air at the time) and the drawing of boundary of no smoking area in each of them was estimated to be a project of mega scale.

Following the smoking ban in covered transport interchanges, a survey was conducted to evaluate the change in perceived exposure to secondhand smoke at these spots. Refer to page 79 for details.



# 有關吸煙室的討論

曾有建議促請政府批准室內場所設立「吸煙室」,分隔吸煙及非吸煙顧客。然而,醫學研究證實香煙的有毒物質會殘留在室內一段長時間,而現時尚未有國際認可的通風系統,可完全抽走吸煙室內的剩餘煙霧。由於世界衞生組織等國際組織未有為室內吸煙場所的空氣質量制定「安全標準」,故香港不能在沒有科學理據下任意為「吸煙室」及「非吸煙室」草擬「健康」或「安全」的空氣質量標準,此做法是得到醫學界及國際社會的認同。

# BEHIND THE SCENE - SMOKING ROOM

There were proposals urging the Government to allow indoor establishments to set up "smoking rooms" to segregate smoking and non-smoking customers. However, medical evidence has proven that toxic substance in cigarettes would remain in the rooms for a prolonged period of time and there is yet to be an internationally approved ventilation system capable of completely extracting residual smoke from smoking rooms. As international organizations, including the WHO, have yet to develop a so-called "safety standard" for air quality in indoor smoking locations, it was decided that Hong Kong was not in a position to arbitrarily draw up "healthy" or "safe" air quality for "smoking rooms" and "non-smoking rooms" with scientific basis, which was acceptable to the medical sector and the international community.



《煙草控制框架公約》

第11條:煙草產品的包裝及標籤

# FCTC ARTICLE 11: PACKAGING AND LABELLING OF TOBACCO PRODUCTS

# 煙草產品的圖象忠告及誤導描述 PICTORIAL WARNING AND MISLEADING DESCRIPTIONS

根據條例,煙草產品包裝上須以指定大小及字句展示健康忠告及尼 古丁含量。為加強忠告的視覺效果及阻嚇作用,煙草產品的封包或 零售盛器須展示圖象健康忠告。

為配合國際慣例,健康忠告的中英文版本及焦油量和尼古丁含量的標示須最少覆蓋任何煙草產品封包或盛器主要表面面 積的50%。

煙草產品嚴禁包含任何引致誤導的描述、商標、形容或其他標誌,令人以為該產品比其他煙草產品對健康造成較少損害。

Under the Ordinance, health warnings in prescribed size and wording as well as the amount of nicotine yields are required to be shown on the package of tobacco products. To enhance the visual impact and deterrent impact of the warnings, packets or retail containers of tobacco products should bear graphic health warnings.

In conformity with international practices, the Chinese and English version of the health warning and indication of the tar and nicotine yields are required to be of a size that covers at least 50% of the principal surface areas of the packet/container of any tobacco product.

Misleading descriptions trademark, figurative or any other sign that is likely to create an erroneous impression that the product is less harmful to health than other tobacco products were also banned.



# 《煙草控制框架公約》 第13條:煙草廣告、促銷及贊助

# 撤銷持牌小販攤檔及聘用兩名僱員或以下零售商的豁免

在2007年前,除持牌小販攤檔及聘用不超過兩名僱員的零售商外,任何人一律禁止展示煙草廣告。然而,我們發現有關豁免被濫用,小型零售攤檔往往展示多個煙草廣告,而本港各區小型商店也設置大量大型煙草廣告燈箱。為堵塞漏洞,政府建議撤銷持牌小販攤檔及聘用兩名僱員或以下零售商展示煙草廣告的豁免。

# FCTC ARTICLE 13: TOBACCO ADVERTISING, PROMOTION AND SPONSORSHIP

# REVOCATION OF EXEMPTIONS FOR LICENSED HAWKER STALLS AND RETAIL OUTLETS WITH TWO EMPLOYEES OR LESS

Before 2007, the display of tobacco advertisement was prohibited except at licensed hawker stalls and retail outlets employing not more than two employees. It was noticed that such exemptions have become a source of abuse. Numerous tobacco advertisements were displayed at small retail stalls and many large light-boxes displaying tobacco advertisements could be found in small shop premises throughout the territory. To plug the loophole, the Government proposed revoking the exemptions applicable to licensed hawker stalls and retail outlets with two employees or less.





2007年前 Before 2007

2007年後 After 2007

政府將建議修訂的適應期,由條例刊憲起一年延 長至三年。持牌報販將有足夠時間適應新法例, 尋求其他收入來源。此外,即使煙草公司不再為 小販提供硬件贊助,例如替其搭建報攤,持牌小 販仍有足夠時間物色其他廣告商,提供類似的贊 助。

The Government extended the adaptation period from the proposed one year to three years from the date the Ordinance was published in the Gazette. With this longer adaptation period, licensed newspaper hawkers would have sufficient time to adjust to the new legislative framework and look for alternative revenue sources. In addition, even if tobacco companies stop supporting the hardware needs of hawkers such as their stall structures, licensed hawkers would still have sufficient time to look for alternative advertisement that provide similar support.

# 《煙草控制框架公約》 第5.3條:避免與煙草行業 發生利益衝突的清晰指引

香港衞生署致全體員工的指引中清楚表明,員工不 得接受任何煙草業的贊助或參與任何煙草業的合夥 業務。民政事務總署亦就運動、旅遊、文化及藝術 的相關社區活動之撥款申請發出類似的指引。

# FCTC ARTICLE 5.3: CLEAR GUIDANCE ON AVOIDING CONFLICTS OF INTEREST WITH TOBACCO INDUSTRY

The Hong Kong Department of Health has clearly articulated in a guideline to all staff that sponsorships or partnerships with the tobacco industry should not be accepted. Similar guidelines are also issued by Home Affairs Department for funding application for community-based activities related to sports, tourism, culture and arts.

#### 衞生署有關接受捐贈及贊助的指引

一般準則 4 (c):無論如何不應接受煙草…公司的直接或間接捐贈或贊助。

Department of Health Guidelines on Acceptance of Donations and Sponsorships "General Principle 4(c) - In no circumstances should direct or indirect donations or sponsorships from tobacco ... companies be accepted."

#### 一般準則

- 4. 如接受捐贈及贊助,所有人員應遵從下列準則:
  - (a) 有關捐贈/贊助應主要是為了公眾的利益。有關利益的價值必須切合捐贈/贊助的目的,並與有關目的相稱。
  - (b) 遇上病人或其家屬為答謝提供服務的人員而向其饋贈禮物時,應盡量加 以數四。
  - (c) 應小心謹慎,以確保接受捐贈或贊助不會有損本署聲譽。無論如何不應 按照價質或母別代用品公司的直接或間接捐贈或贊助。
  - (d) 應讓捐贈者及贊助者知道,如本署接受他們的捐贈/贊助,不會有利於 他們與本署的事務往來,本署亦不會因而對捐贈者/贊助者負上任何明 示/隱含的義務。

#### **General Principle**

- The following principles should be observed when accepting donations and sponsorships:
- (a) Donations/sponsorships should predominantly be for or of benefit to members of the public. The value of the benefit must be appropriate for, and commensurate with the purposes of the donation/sponsorship.
- (b) Donations made from patients or their families for the benefit of staff in appreciation of their service should be discouraged.
- c) Care should be taken to ensure that acceptance of donation or sponsorship does not adversely affect the reputation of the Department. In no circumstances should direct or indirect donations or sponsorships from tobacco or breastmilk substitutes companies be accepted.
- (d) Donors and sponsors should be made aware that acceptance of donations/sponsorships will not convey any advantage in their dealings with the Department and will not give rise to any express/implied obligation towards the donor/sponsor.

# 性別與平等 GENDER AND EQUITY

香港政府實施性別觀點主流化,這是聯合國為實現性別平等而提倡 的全球策略。為確保男女同樣獲得及受惠於控煙資源及機會,控煙 辦在策劃及實施控煙計劃時,採用勞工及福利局提供的性別觀點主 流化檢視清單。

在控煙立法、政策及戒煙計劃的設計、實施、監察及評估階段,我們根據年齡、性別、教育、社會經濟地位和種族劃分作考慮,並按此制訂健康教育素材、推廣渠道及訊息,和戒煙計劃內容,以配合不同人士的需要。

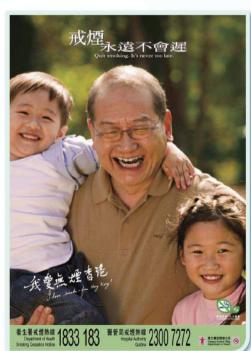
The Hong Kong Government adopted Gender Mainstreaming, a global strategy advocated by the United Nations to achieve gender equity. To ensure that women and men have equitable access to, and benefit from tobacco control resources and opportunities, TCO applies the Gender Mainstreaming Checklist, which is a tool provided by the Labour and Welfare Bureau of the Hong Kong Government when planning and implementing tobacco control programmes.

During the design, implementation, monitoring and evaluation stages of legislation, policies and cessation programmes, data were segregated and considered according to age, gender, education, socio-economic status and their ethnicity. With this information, tailored health education materials, publicity channels and messages, cessation programme contents were prepared to better meet the needs of different parties.









# 國際控煙交流

為緊貼國際控煙標準及有效措施,政府官員及本 地社會領袖均積極參與世界衛生組織《煙草控制 框架公約》的締約方大會。

另外,控煙辦代表在過去十年亦曾出席多個會 議、大會及研討會,學習專家們介紹的有效控 煙措施。

# WHERE EAST MEETS WEST, NORTH MEETS SOUTH

In order to keep abreast of international standards and good practices, Government officials and local community leaders participated actively in the WHO FCTC process and activities of the Conference of Parties.

Over the past decade, TCO representatives have attended numerous meetings, conferences and seminars to learn from experts effective tobacco control measures.







# 本地執法 LOCAL ENFORCEMENT

## 執法部門

政府於1982年制定《吸煙(公眾衞生)條例》(下稱「條例」),由香港警務處及香港海關負責執法。

由於禁煙區範圍大幅擴大(由1997年約10類場所增至2005年草議的40多類場所),前衛生福利及食物局(現為食物及衛生局)在2005年5月提交的修訂條例中,除草議進一步擴大禁止吸煙的範圍、限制煙草產品的廣告及推廣、規範煙草產品的包裝和標籤外,亦提出授權控煙辦的督察一般執法權力。條例於2006年10月通過,衛生署的控煙督察則獲委派於2007年1月1日開始對違例吸煙、展示或刊登煙草廣告等罪行作出檢控。

控煙督察的一般權力及職責包括:

- 進入任何已經發生或正在發生違反有關條例的地方;
- 進入及巡查公眾地方內的禁止吸煙區;
- 檢取任何與罪行有關的證據及物件;
- 要求違反有關條例的任何人提供姓名、地址及出示身分證明文件:
- 為取得證據而拍照、進行錄音或錄影;
- 為執行有關條例,可要求任何人出示文件或紀錄以供 查閱,並複製該文件或紀錄;
- 要求任何人提供合理的協助或資料,以執行有關條例。

條例亦訂明,任何人故意妨礙控煙督察執行職務、不遵 從督察要求提供其姓名及地址或出示身分證明文件, 又或提供虛假或誤導性的姓名或地址,即屬違法,最高 可被罰款港幣10,000元。











### **ENFORCEMENT UNIT**

Since its enactment in 1982, the Smoking (Public Health) Ordinance ("the Ordinance") was enforced by the Hong Kong Police Force and the Customs and Excise Department.

In view of the major extension of no smoking areas (from around 10 types of venue in 1997 to more than 40 in 2005), the Health, Welfare and Food Bureau (now known as the Food and Health Bureau) introduced amendments to the Ordinance in May 2005 and appointed Tobacco Control Inspectors (TCIs) working in the Department of Health to exercise the powers conferred by the Ordinance - to initiate prosecution against offences including smoking, displaying or publishing of tobacco advertisements.

The general powers and duties of the TCIs include:

- Enter any place in which a relevant offence has been or is being committed;
- Enter and inspect a no smoking area of a public place;
- · Seize anything that appears to be evidence of any relevant offence;
- Require any person to give his name and address and to produce proof of identity if the person has committed a relevant offence;
- Take photographs, make sound and video recording for the purpose of obtaining evidence;
- Require any person to produce documents or records and make copies of such documentor records for the purpose of enforcing relevant provisions;
- Require any person to provide assistance or information as is reasonably necessary to enforce the relevant provisions.

The Ordinance also stipulates that any person, who wilfully obstructs a TCI in the performance of his duty, or who fails to give his name and address or to produce proof of identity, or who gives a false or misleading name or address, commits an offence and is liable on summary conviction to a maximum fine of \$10,000.

# 專責執法人員小組 DEDICATED TEAM OF ENFORCEMENT OFFICERS

# 控煙督察的執法培訓 ENFORCEMENT TRAINING FOR TOBACCO CONTROL INSPECTORS

控煙辦早期的工作主要是向公眾進行健康推廣。隨著政府在2007年將禁煙區擴大至住宅處所,控煙辦亦加強人手,並授予控煙督察更大權力,按修訂條例執法。有關權力包括進入處所、檢取證物及要求違例者提供個人資料及出示身分證明文件,以及其他有助檢控的行動。然而,當時的控煙督察卻缺乏前線的執法經驗及相關知識。

應衞生署的要求,1名香港警務處警司於2005年4月借調到控煙辦,負責制定行動守則和培訓素材。 2006年4月再有4名警長加入控煙辦,並成立警察訓練隊,進一步加強控煙督察的培訓,為前線工作者提供技術性的指導。借調到控煙辦的警長人數在2007年4月曾增至6名,而2008年11月起至今則為4名。 2008年,培訓模式趨成熟後,警察訓練隊改由1名總督察領導。

Much of TCO's early work concentrated on health promotion to the general public. When no smoking areas were extended to include domestic premises in 2007, the manpower of TCO was substantially increased and our TCIs were vested with greater authority to perform enforcement duties under the amended Ordinance. Such powers were related to the entry of premises, seizure of exhibits, requesting offenders to provide personal details and produce proof of identity and other actions facilitating prosecutions. Nonetheless, they generally lack front line experience and relevant knowledge in mounting enforcement operations.

Upon the request of the Department of Health, a Superintendent of Police was seconded to TCO in April 2005 to set up the operational protocol and develop training packages. In April 2006, another 4 Sergeants of Police were seconded to TCO to form the Police Training Team to further strengthen our training activities and provide tactical advice to our inspectors on the operational front. The number of Sergeants was further increased to 6 in April 2007 and finally returned to the current level of 4 in November 2008. With the maturation of training protocol, a Chief Inspector of Police, instead of a Superintendent of Police, led the Police Training Team from December 2008 onwards.



# 警察訓練隊 THE POLICE TRAINING TEAM

警察訓練隊負責為控煙督察進行及安排下列培訓:

a) 基礎訓練課程; b) 季度訓練;

c) 特別訓練; d) 轉介專業訓練

The Police Training Team is responsible for conducting or arranging the following types of training for TCIs:

- a) Foundation Training; b) Quarterly Training;
- c) Ad-hoc training and d) Specialized training.



# A. 基礎訓練課程 FOUNDATION TRAINING



內容全面的基礎訓練課程為期五天,旨在讓學員掌握執法時必要的知識及技巧。所有新入職的控煙督察均須修畢課程,而現任控煙督察則可旁聽,溫故知新。除控煙辦的職員外,來自澳門及內地的控煙人員亦曾參與培訓課程及經驗分享環節。

基礎培訓課程涵蓋以下主題

- 煙草相關法例;
- 其他相關法例;
- 執法程序;
- 執法行動
- 調查;
- 行政及其他相關事項;及
- 實習。



The Foundation Training Course is a comprehensive 5-day course which aims to equip trainees with the necessary knowledge and tactical skill to deal with smoking related enforcement duties. All newly recruited TCIs are required to attend the whole course while existing staff may also sit in to refresh their knowledge. Apart from our own staff, tobacco control officers from Macau and mainland China have also benefited from these training courses and experience sharing sessions.

The Foundation Training Course consists of the following modules:

- · Tobacco related legislations;
- · Other relevant legislations:
- · Enforcement procedures;
- · Operation;
- · Investigation;
- · Administration and other related issues; and
- · Practical exercises.

## B. 季度訓練 QUARTERLY TRAINING







所有在職控煙督察須接受每3個月一次的全日培訓,藉以了解最新資訊或複雜事宜,同時提升控煙辦同事的內部溝通及團隊精神。為了讓學員在輕鬆的環境下專心學習,培訓活動通常在郊外舉行。

季度訓練涵蓋以下範疇:

- 演講及實習;
- 客席講者的演講
- 團隊建立活動;及
- 公開論壇

A full day training is arranged for all serving TCIs every 3 months. This quarterly training aims to update the knowledge of staff on new or complicated issues. It also serves as a good opportunity to enhance internal communication and teamwork within TCO. To avoid distraction and provide a relaxing environment, these training activities were often held in the suburbs outside TCO offices.

The quarterly training covers the following aspects:

- · Lecturing and practical exercises;
- · Lectures by guest speakers;
- · Team building activities; and
- Open forum

# C. 特別訓練 AD-HOC TRAINING

警察訓練隊亦會按照行動及培訓的需要為控煙督察提供專題培訓,以補充在定期培訓中學到的知識及技巧。在2010年底,警察訓練隊發現建例吸煙獲判無罪釋放的個案有上升趨勢,認為控煙督察有需要對法庭程序有更深入的了解。事實上,控煙督察在2009年9月實施定額罰款通知書制度後出庭作供的機會很少,因此,警察訓練隊在2011年第一季舉辦了5個半天的「出庭作證」課程,讓控煙督察認識法律程序、出庭前的準備及作供時要注意的事項。衛生署轄下的中醫藥事務部及藥劑事務部等亦派員參加課程。學員認為豐富的資訊和實用的提示,令他們知悉在陪審團面前應有的專業表現。

Subject to the prevailing operational and training needs, the Police Training Team will conduct ad-hoc training to supplement knowledge and operational skills acquired from regular training sessions. When a rising trend of acquittal case was observed in late 2010, the Training Team considered that TCIs required more thorough understanding on court procedures as they had few chances of giving evidence in court, especially after the implementation of the Fixed Penalty Notice system in September 2009. Five half-day courses on "Giving Evidence in Court" was thus convened in the first quarter of 2011 so that TCIs got familiarized with court procedures, preparation before attending courts and areas of concern whilst giving evidence. This course was also attended by staff of other Department of Health Services e.g. Chinese Medicine Division and Pharmaceutical Service. These courses were highly praised by the participants who found them informative and useful in providing practical tips to perform professionally before the jury.





# D. 轉介專業訓練 REFERRAL TO SPECIALIZED TRAINING

警察訓練隊偶爾會安排控煙督察參加其他專業機構舉辦的專業訓練,例如香港警察學院的基本調查課程。此外,由於執行前線工作時可能會被違例者襲擊,警察訓練隊亦安排控煙督察參加葵涌醫院舉辦的處理暴力事件課程及中國香港柔道總會舉辦的自我防衛課程。

Occasionally, there are situations where the Training Team will arrange TCIs to attend specialized training conducted by other professional organizations, such as the Basic Investigations Course of the Police College. Arrangements have also been made to arrange TCIs to attend courses on management of violence and aggression organized by the Kwai Chung Hospital and self-defence courses organized by the Judo Association of Hong Kong in response to aggressive offenders faced by our frontline staff.







# 隊伍特點及挑戰 TEAM STRENGTHS AND CHALLENGES

# 團隊精神 TEAM SPIRIT

控煙督察在執行任務前,會周詳計劃組員的分工,以確保有效地執法, 更顧及組員的安全及互相照應。為維護大眾市民享用無煙空間的權利 ,控煙督察在顧及行動安全的同時,不會放棄追蹤任何一宗違例吸煙 個案。控煙督察不惜用上半小時,跑上三個足球場的路程,目的是要 違例者明白他們吸煙和其二手煙對旁人的影響。控煙督察對「一個都不 能少」的堅持和服務市民的使命感可見一斑。

The role of each TCI is well defined in every enforcement operation to ensure efficiency and safety. In order to protect our smoke-free environment, TCIs spare no effort in detecting and preventing smoking in no smoking areas. Our TCI once even tracked an offender for half an hour in hope of making him realize the hazard of smoking and impact of passive smoking on others, demonstrating TCO's commitment to a smoke-free environment and serving the public.





### 員工培訓及溝通 STAFF TRAINING AND COMMUNICATION

控煙辦十分重視團隊的內部溝通,例如進行行動前訓示及行動後總結 檢討、每週舉行主管級會議、每月舉行員工大會以討論個案、分享經 驗及檢討執法策略。

TCO recognizes the importance of internal communication. In order to enhance exchange of information and opinion, measures such as pre-operation briefings, post-operation reviews, weekly supervisor meetings, monthly staff meetings for experience sharing and enforcement tactic review were organized.



# 持續改善、精益求精 CONTINUOUS IMPROVEMENT FOR EXCELLENCE

執法隊伍透過各種渠道收集意見及提議,從而適當地調整運作模式。 例如控煙辦會因應違例場所的性質進行通宵巡查及接納市民的建議。 同時,控煙辦亦委託學術機構研究擴大禁煙區的成效。

The enforcement team also actively adjusts the operation model based on feedback and comments collected through various channels. For example, TCO will arrange overnight inspections according to the nature of premises contravening the laws and seriously consider citizens' opinions. TCO also commissions academic institutions to study the effectiveness of the extension of no smoking areas.



# 跨部門合作 INTER-DEPARTMENTAL COLLABORATION

除控煙督察及警務人員外,康樂及文化事務署、食物環境衞生署及房屋署的指定人員亦獲授權在其轄下的法定禁煙區發出定額罰款通知書。有關的政府部門及法定禁煙區的例子如下:

Apart from TCIs and the Police, specified officers of the Leisure and Cultural Services Department, the Food and Environmental Hygiene Department and the Housing Department are also empowered to issue Fixed Penalty Notice in public venues under their management. The Government departments concerned and examples of their relevant statutory no smoking areas are:

	部門 DEPARTMENT	相關的法定禁煙區 RELEVANT STATUTORY NO SMOKING AREA
	食物環境衞生署 Food and Environmental Hygiene Department	公眾街市 Public markets
	房屋署 Housing Department	公共屋邨 Public housing estates
	康樂及文化事務署 Leisure and Cultural Services Department	康樂及文化場所,例如公園、 公眾游泳池及公眾泳灘 Leisure and cultural venues such as parks, public swimming pools, public bathing beaches



# 泰然處變,無懼挑戰 EMBRACE CHALLENGES WITH PASSION

執法隊伍面對最大的困難,在於吸煙過程十分短暫,故此在接報後即時到場執法,未必 是最有效的策略。此外,在執法時有機會遇到不合作的管理人,甚或向吸煙人士作出 提示。在訓練上我們着重溝通技巧的培訓,使同事於執勤時能有效向場地負責人和違例 者解釋他們的法律責任和保持無煙空間的重要性,從而增加市民對控煙工作的支持。

另一方面,政府亦在控煙工作上推出相應的政策,例如大幅增加煙草税並加强提供戒煙服務,藉社區戒煙計劃以減低吸煙者的數目。

Enforcing smoke-free laws is no easy task. Smoking is a very brief action. TCIs may not arrive at the scene instantly upon receiving a complaint. Not all venue managers are cooperative and some even help the offenders evade prosecution. Training for TCIs therefore focuses on communication skills so that they can clearly explain to the venue managers and offenders their responsibilities and the importance of maintaining a smoke-free environment, strengthening the public support for tobacco control effort.

On the other hand, tobacco control policies are being constantly reviewed. Measures such as raising the tobacco duty and enhancing quitting services are advocated to decrease the number of smokers.



# 屢獲肯定,備受讚賞 RECOGNITION AND APPRECIATION

市民對控煙辦的肯定,是推動我們不斷提升工作質量的主要動力,簡單的一個微笑、點頭,或一封讚揚電郵,已令我們深感鼓舞,更著力維持無煙環境。控煙辦在2011年榮獲衞生署署長嘉許,傑出的執法服務更獲公務員事務局頒發優異獎。

Community recognition is the strongest force to drive us in making continuous improvements in the standard and quality of our work. Small gestures from the public such as a smile, a nod or an email of appreciation kept our spirit high in safeguarding our smoke-free environment. In 2011, TCO received commendation from the Director of Health as well as a Meritorious Award from the Civil Service Bureau for our outstanding enforcement service.



■控煙辦人員在接獲投訴後,須到各類型場所進行調查。

# 中年漢囚兩月

【新報訊】一名中年煙民涉嫌在遊戲機中心 內,強例吸煙被票控,竟然大勞雷霆,襲擊衛生 署控煙督察、妨礙公職人員執行職務及在禁煙區 吸煙,他昨日在觀球裁判法院被判罪名成立,即 時判監兩個月及罰款1,500元。

可判無鬥四月及副級1,500元。 據案情透露、於今年2月20日,控煙督察隊 伍在探水埗大埔道「新世界遊戲機中心」進行返 查期間,發現44歲被告違例吸煙,於是作出票 控,期間他情緒激動,襲擊一名挖煙督察。

#### 罰款 1500 元

其後他被警方拘捕及客案控告襲擊,妨礙公 職人員執行職務及在禁煙區吸煙。案件昨日在觀 塘裁判法院審理,被告被裁定罪名成立,被判即 時入载及罰款。

衛生署發言人呼籲市民遵守禁煙規定,並與 執法人員合作,並警告「恐嚇執法人員或向他們 使用暴力是嚴重罪行,會帶來嚴重的法律後果。」

資料由新報提供

Provide by Hong Kong Daily News



#### 《煙草控制框架公約》第8條:防止接觸煙草煙霧

# FCTC ARTICLE 8: PROTECTION FROM EXPOSURE TO TOBACCO SMOKE

# 在禁煙區處理違例吸煙 HANDLING OF SMOKING OFFENCES IN NO SMOKING AREAS

《吸煙(公眾衞生)條例》(第371章)第二部:

任何人不得於禁煙區內吸煙或者攜帶燃點着的 香煙、雪茄或煙斗。

禁止吸煙區的管理人可…要求…吸煙者…將燃 著的香煙、雪茄或煙斗弄熄…提供姓名…及出 示身份證明文件…及離開禁止吸煙區…或在有 需要時使用合理武力將該人逐出禁止吸煙區…

Part II of Smoking (Public Health) Ordinance Cap. 371-

No person shall smoke or carry a lighted cigarette, cigar or pipe in a no smoking area.

The manager of a no smoking area may...require...the person...to extinguish the lighted cigarette...to give his name... and proof of identity...and leave the no smoking area...or remove him from the no smoking area by use of reasonable force if necessary...



## 執法模式 ENFORCEMENT TACTICS

有見於禁煙區數目不斷增加,其中包括食肆、工作間、學校、醫院及公眾場所內的室內地方(2007年1月起),以及室內公共運輸交匯處(2009年9月起)和露天公共運輸交匯處(2010年12月起),控煙督察的人數亦由2006年的30名增至2010年約99名。

市民可透過24小時查詢及投訴熱線、電郵、網上舉報表格或郵遞方式, 舉報違例吸煙個案。控煙辦會處理所有收到的投訴,安排突擊巡查涉案 地點,並向違法的人士發出定額罰款通知書。大部分的場所管理人及違 例吸煙者都十分合作。除了處理投訴外,控煙辦也會在違例黑點進行突 擊巡查及針對性執法行動,以達到最佳的阻嚇效果。在執法的同時,他 們亦會教育場所管理人及推廣戒煙服務。

控煙辦一直與其他政府部門及私人場所管理處緊密合作,共同締造無煙環境。我們亦會邀請場所管理人參加講座,了解禁煙法例及管理人的法律責任。影視及娛樂事務處亦致函網吧及遊戲機中心的持牌人,提醒他們遵守條例。各政府部門更會不時進行聯合巡查行動,加強執法。

In view of the growing number of no smoking area, which includes restaurants, workplaces, schools, hospitals and indoor public areas (effective in January 2007), indoor public transport interchanges (effective in September 2009) and open-air public transport interchanges (effective in December 2010), the number of TCIs was increased from 30 (in 2006) to around 99 staff (in 2010).

All members of the public are welcome to report any smoking offence to TCO through a 24-hour Enquiry and Complaint Hotline, email, internet report form or by post. TCO addresses all complaints received and arranges unannounced inspections to the locations concerned, as well as issues fixed penalty notice to any person who are found to have contravened the smoking ban. Most of the venue management of no smoking areas and offenders are cooperative. Besides acting on complaints, TCO also makes unannounced inspections and targeted enforcement actions against black-spots to achieve the best deterrent effect.

TCO has been working closely with other government departments and private management offices to protect our smoke-free environment. Venue managers were invited to attend seminars introducing the legislation and their legal responsibilities. The Television and Entertainment Licensing Authority has issued letters to the licensees of Internet cafes and amusement game centres to remind them of their need to comply with the Ordinance. Joint inspections were also conducted from time to time for effective enforcement. In addition to enforcement, TCO also educates venue managers and promotes the smoking cessation service.









# 違例吸煙的罰款制度 法庭傳票(2009年9月前) PENALTY SYSTEM FOR SMOKING VIOLATION SUMMONS (BEFORE SEPTEMBER 2009)

在2009年9月前,任何人士於法定禁煙區(如食肆、遊戲機中心)或公共 交通工具內(例如巴士、的士)吸煙或攜帶燃點著的香煙、雪茄或煙斗, 一經簡易程序定罪,最高可被罰款港幣5,000元。

在2007年1月1日至2009年8月31日期間,控煙辦就違例吸煙的投訴進行35,000多次巡查,就違例吸煙發出超過15,000張法庭傳票,當中逾95%個案被定罪,平均罰款約港幣870元。大部分法庭傳票也在遊戲機中心發出,佔法庭傳票總數的3成,其次是購物商場及商店,佔總數的17%。

法定禁煙區的種類在過去幾年從10多個增加到超過40個,所佔的場所數目超過50,000個。隨市民對控煙條例意識提高,公眾主動舉報違例吸煙事件以及對控煙辦檢控工作的期望亦大幅提升。

以法庭傳票方式檢控違例吸煙者涉及大量人力及工序,可能需時數月才 完成。控煙督察需為每個檢控個案花上數十小時,包括撰寫調查報告、 通過裁判法院案件及傳票處理系統申請傳票、編制呈上法庭的案情摘要 及相關的證人口供,以及出席法庭聆訊。

Any person who smoked or carried a lighted cigarette, pipe or cigar in statutory no smoking areas (such as restaurants, amusement game centres) or public transport carriers (such as public buses, taxis) was liable on summary conviction to a maximum fine of HK\$5,000 before September 2009.

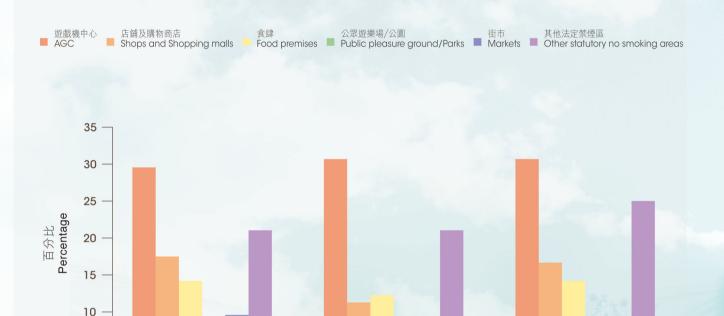
From 1 January 2007 to 31 August 2009, TCO conducted more than 35,000 inspections in response to complaints lodged. Over 15,000 summonses were issued against smoking offences and more than 95% of the cases have been convicted, with an average fine of about HK\$870. Majority of the summonses were issued in amusement game centres, accounting for 30% of the total number of summonses issued, followed by shopping malls and shops which accounted for 17% of the total number of summonses issued.

The types of statutory no smoking areas increased from a dozen to over 40 in the past few years, covering over 50,000 venues. With higher public awareness of tobacco control legislations, the public now reports illegal smoking more actively and has higher expectation on TCO.

Prosecution using summons was found to be extremely labour intensive and may take months to complete. For each case of prosecution, it took our inspectors tenths of hours to prepare investigation reports, apply for summons through the Case and Summons Management System for Magistracies, prepare brief facts of the case as well as relevant witness statements for submission to court and attend court proceedings.

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# 2007年1月至2009年8月期間 違例吸煙法庭傳票的比例 PROPORTION OF SUMMONSES RELATED TO SMOKING OFFENCE ISSUED FROM IANUARY 2007 TO AUGUST 2009





2007

5



香港市民對定額罰款制度並不陌生,因為此制度亦適用於其他輕微罪行,例如受《定額罰款(交通違例事項)條例》(第237章)規管的違例泊車,以及受《定額罰款(公眾地方潔淨罪行)條例》)第570章)規管的亂拋垃圾罪行。事實證明定額罰款制度奏效,亦獲公眾接受。由於法例規定所有成年香港市民在公眾地方必須攜帶身分證,所以執法人員可要求違例者出示身分證明文件及發出定額罰款通知。

2008

2009 (一月至八月 Jan-Aug)

Fixed Penalty System was not new to Hong Kong people. The system, which was applied to other minor offences such as parking offence under the Fixed Penalty (Traffic Contraventions) Ordinance (Cap. 237) and littering offence under the Fixed Penalty (Public Cleanliness Offences) Ordinance (Cap. 570), was proven to be effective and widely accepted by the public. Identification of the offender and the issuing of fixed penalty notice is feasible as all adult Hong Kong residences are required by law to carry their identity card in public places.

# 定額罰款制度 (2009年9月1日至今) FIXED PENALTY SYSTEM (1 SEPTEMBER 2009 – PRESENT)

在有限的人力資源下,控煙辦積極提升工作效率以發揮最大的執法力量。為提高執法效率及增加違例吸煙罰款的阻嚇性,衛生署於2009年9月1日引入定額罰款制度,劃一對違例吸煙者罰款港幣1,500元。對比以往以法庭傳票檢控違例吸煙者(罰款港幣0-3,500元),定額罰款制度更能善用資源和方便環保。

TCO has been proactively enhancing its efficiency to optimize the enforcement result of its team. To enhance the deterrent effect of the penalty, the Department of Health introduced the Fixed Penalty System on 1 September 2009 and anyone contravening the smoking ban are subject to a \$1,500 fixed penalty. Compared with court summons (with penalty ranging from HK\$0 to HK\$3,500), this system utilises resources better, is more convenient and eco-friendly.





# 《吸煙(公眾衞生)條例》(第600章) SMOKING (PUBLIC HEALTH) ORDINANCE CAP.600

根據《定額罰款(吸煙罪行)條例》,任何人在法定禁止吸煙區或公共交通工具內吸煙或攜帶燃著的香煙、雪茄或煙斗,執法人員有權向 他們發出定額罰款通知書,罰款港幣1,500元。

Under the "Fixed Penalty (Smoking Offences) Ordinance", anyone who smokes or carries a lighted cigarette, cigar or pipe in statutory no smoking areas or on public transport carries, will be issued with a \$1,500 fixed penalty notice by enforcement officers.



2008年2月 February 2008 立法會引入定額罰款制度 Introduction of Fixed Penalty System into Legislative Council

2008年7月 July 2008 立法會通過《定額罰款(吸煙罪行)條例》(第600章)

Enactment of the Fixed Penalty(Smoking Offences) Ordinance(Cap. 600) by the Legislative Council

2009年9月 September2009 《定額罰款(吸煙罪行)條例》 (第600章)生效

The Fixed Penalty (Smoking offences) Ordinance( Cap. 600) come into effect

### 定額罰款系統特點 FEATURES OF FIXED PENALTY SYSTEM

# 善用資源、提高效率

以往處理一張法庭傳票,需時最少三個月。轉為定額罰款以後,百分之九十以上的違例者會於收到定額罰款通知書後21天內繳交罰款。違反罰款規定的人將被判處更高罰款,甚至監禁。如違例者希望就罪行提出抗辯,須以書面通知有關部門,而有關部門將會循法庭傳票的方式處理。現在無論法庭、控煙辦或違例者花的時間或人手都得以大大減少。亦因為大部分記錄以電子方式記錄,方便了部門分析數據,更有效調配資源到有需要的地方。

# 支持環保

採用定額罰款制度後,部門可減省法庭處理時間, 也可以減輕大量文書工作例如證供記錄和編製法院 檔案等。

# 資料及統計數字

在2009年9月1日至2010年12月31日期間,共發出10,529張定額罰款通知書。違例者的年齡介乎11歲至95歲,大部分為年屆20歲至39歲的成年人(46%)。性別分析結果顯示,違例者以男性居多,佔總數86%。最新的吸煙相關數據顯示,八成的每日吸煙人士為男性,與違例吸煙的統計數字相符。大部分定額罰款通知書在遊戲機中心(27%)發出,其次是店舗及購物商場(15%)及麻將天九耍樂處所(9%)。

如罪行並非違例吸煙,而是涉及向18歲以下人士銷售煙草產品或展示煙草廣告,則不會經由定額罰款制度處理。

# BETTER RESOURCE UTILIZATION AND HIGHER EFFICIENCY

It took at least three months to process a summons before the Fixed Penalty System was introduced. At present, over 90% of those who have received a fixed penalty (FPN) settled the penalty within 21 days. Those who fail to comply will face heavier penalty or even imprisonment. If the person wishes to dispute liability for the offence, he/she should notify the Authority in writing, and summons will be applied. The system helps the court, TCO or offenders to save time and manpower. The electronic records also facilitate data analysis and ensure better resource allocation.

#### **ENVIRONMENTAL FRIENDLY**

The Fixed Penalty System shortens the court processing time and significantly alleviates the workload involving paper work, such as keeping statements and preparing court files.

## **FACTS AND STATISTICS**

A total of 10,529 FPNs were issued from 1 September 2009 to 31 December 2010. The age of offenders ranged from 11 to 95 year, with majority being adults of 20 to 39 years old (46%). Analysis by gender showed that male offender was the dominant group, accounting for 86% of the total number of FPNs issued. The figures matched with the male to female ratio of the latest smoking-related data in which 4/5 of the daily cigarette smokers are male. Most of the FPNs were issued at amusement game centres (27%), followed by shops and shopping malls (15%) and mahjong-tin kau premises (9%).

Other offences that are not as straight forward as smoking violation, such as the sale of tobacco products to persons under 18 years of age or the display of tobacco advertisement would not be handled through the Fixed Penalty System.



# 《煙草控制框架公約》第9條:煙草製品成分管制

# FCTC ARTICLE 9: REGULATION OF THE CONTENTS OF TOBACCO PRODUCTS

在香煙檢測計劃下,香港政府化驗所會定期監測香港市面上約100種不同牌子香煙的焦油量及尼古丁含量。有關計劃根據《吸煙(公眾衞生條例》制定,向執法機關及公眾提供在香港市面發售香煙的焦油含量及尼古丁含量的最新資料。

Tar and nicotine yields of about a hundred brands of cigarettes marketed in Hong Kong are routinely monitored by the Government Laboratory for implementation of a cigarette testing programme, which is devised in accordance with Smoking (Public Health) Ordinance to provide enforcement authority and the public with updated information on tar and nicotine yields of cigarettes on sale in Hong Kong.

## 《煙草控制框架公約》第11條:煙草製品的包裝和標籤

# FCTC ARTICLE 11: ENFORCEMENT ON PACKAGING AND LABELLING OF TOBACCO PRODUCTS

香港海關確保…健康忠告及焦油量和尼古丁含量説明須展示在封包 及零售盛器最大的兩個表面上。

其中一面須載有健康忠告及焦油量和尼古丁含量説明的中文版本,而另一面須載有同一健康忠告及焦油量及尼古丁含量説明的英文版本···

The Customs and Exercise Department ensures that... the health warning and indication of tar and nicotine yields shall appear on the 2 largest surfaces of the packet and of the retail container.

One of those surfaces shall bear the Chinese version of the health warning and indication of tar and nicotine yields and the other surface shall bear the English version...







## 《煙草控制框架公約》第13條:煙草廣告、促銷和贊助

# FCTC ARTICLE 13: TOBACCO ADVERTISING, PROMOTION AND SPONSORSHIP

### 禁止煙草廣告的執法行動

任何人不得在印刷刊物、公眾地方、電影及互聯網展示煙草廣告。煙草廣告是指:

- 1)任何廣告如以明示或暗示的方式誘使、建議或促請任何人購買或吸食煙草產品,包括香煙、雪茄、煙斗或香煙煙草;
- 2) 並及吸煙, 而所用的詞句刻意以明示或默示的方式推廣或鼓勵使用煙草產品; 或
- 3) 闡述或提及吸煙、煙草產品、其包裝或品質的任何廣告。

另外,任何廣告或物品如包含煙草商的名稱或商號名稱,或煙草產品的標誌或品牌名稱,又或一般相關的圖像,均屬煙草廣告。

任何人違反以上任何一項規定即屬犯法,一經簡易程序定罪,最高可被罰款港幣50,000元。如屬持續罪行,則在罪行持續期間,每日另加罰款港幣1,500元。

控煙督察接獲有關零售商、印刷商、出版商、媒體或互聯網服務供應商的非法煙草廣告投訴,便會展開調查。如有違例,控煙 督察將通知違例者所違反的條例第4部份條文,以及要求移除有關廣告,並向違例者發出警告信或法庭傳票。

控煙督察亦會定期巡查零售商及抽查出版刊物,確保並無違反規例。

# ENFORCEMENT OF TOBACCO ADVERTISING BAN

Exhibition of tobacco advertisement is prohibited in printed publications, public places, by film, or on the Internet. The meaning of tobacco advertisement refers to,

- 1) any advertisement contains any express or implied inducement, suggestion, or request to purchase or smoke cigarettes, cigars, pipe tobacco, or cigarette tobacco;
- 2) any advertisement relates to smoking in terms which are calculated, expressly or impliedly, to promote or to encourage the use of tobacco products; or
- 3) any advertisement illustrates or mentions smoking or tobacco products or their packages or qualities.

Besides, any advertisement or object that contains the name or trade name of a tobacco trader, or mark or brand name of a tobacco product, or their commonly associated pictorial device shall be deemed to be a tobacco advertisement.

Any person who contravenes the regulations commits an offence and is liable on summary conviction to a maximum fine of HK\$50,000 and, in the case of a continuing offence, to a further penalty of HK\$1,500 for each day during which the offence continues.

Upon receipt of complaints relating to illegal tobacco advertisement against retailers, printer, publisher, the media or Internet service provider, TCIs shall initiate an investigation. Should there be evidence of contraventions, TCIs will inform the party concerned of the contravention under Part IV of the Ordinance and demand the removal of the advertisement. Warning letter or summons will be issued to the offender.

Regular inspections of retailers and publication screening are also conducted to identify any contravention against the regulations.





# 《煙草控制框架公約》第16條:向18歲以下的未成年人士銷售煙草產品 FCTC ARTICLE 16: ENFORCEMENT OF SALE OF TOBACCO PRODUCT TO PERSONS UNDER 18 YEARS



根據《吸煙(公眾衞生)條例》第15A(1)條,任何人都不得將香煙、香煙煙草、雪茄或煙斗煙草售予18歲以下人士。條例亦規定任何人在出售煙草產品時,必須於其處所的當眼處,設置一個中英文標誌,表示禁止將煙草產品售予18歲以下人士或給予任何人士。標誌格式規定簡介如下:

- 1)標誌須為長方形,長度最少38厘米,寬度最少20厘米;及
- 2) 須寫上「特區政府諭:禁止售賣煙草產品予十八歲以下人士或派贈煙草產品予任何人士」的中英文版本

處理有關零售商銷售煙草產品的投訴時,控煙督察會進行現場偵察及調查。任何人如違反以上規定即屬犯法,一經簡易程序 定罪,最高可被罰款港幣25,000元。

Pursuant to section 15A(1) of the Ordinance, no person shall sell any cigarette, cigarette tobacco, cigar or pipe tobacco to any person under the age of 18 years. The Ordinance also requires that any person offering for sale of tobacco products shall place in a prominent position at his premises a sign in English and Chinese to indicate that no tobacco product may be sold to any person under the age of 18 years or given to any person. The prescribed format of the sign shall

1)be rectangular in shape with sides of at least 38 centimetres in length and 20 centimetres in width; and

2)read in Chinese and English as follows: "BY ORDER OF HKSAR GOVERNMENT: NO TOBACCO PRODUCT SHALL BE SOLD TO PERSON UNDER 18 OR GIVEN FOR PROMOTION TO ANY PERSON".

In response to complaint against selling tobacco products by retailers, TCIs will conduct reconnaissance and investigation at the spot. Any person who contravenes the above regulations commits an offence and is liable on summary conviction to a maximum fine of HK\$25,000.

# 戒煙服務 TOBACCO DEPENDENCE MANAGEMENT

# 《煙草控制框架公約》第14條:

與煙草依賴及戒煙有關的降低煙草需求的措施

約半數(44.3%)香港的每日吸煙人士曾嘗試或希望戒煙。(2010年主題性住戶統計調查)

### **FCTC ARTICLE 14:**

# DEMAND REDUCTION MEASURES CONCERNING TOBACCO DEPENDENCE AND CESSATION

Nearly half (44.3%) of Hong Kong's daily cigarette smokers had tried or wanted to give up smoking. (Thematic Household Survey, 2010)



提供戒煙服務是降低煙草需求的主要方法之一,不同形式的戒煙療程,為吸煙人士提供方便廉宜的戒煙服務。現時衞生署設有多間戒煙診所,並與醫院管理局及東華三院和博愛醫院等社區伙伴合作,加強本地的戒煙服務。

Provision of smoking cessation service is one of the key pillars in reducing the demand for tobacco use. Different modalities of treatment were engaged to make cessation services available, affordable, accessible and acceptable.

The Department of Health runs a number of smoking cessation clinics and has been enhancing local cessation services through collaboration with the Hospital Authority and community partners such as Tung Wah Group of Hospitals and Pok Oi Hospital.

# 衞生署 - 戒煙診所

衛生署的專業發展及質素保證服務在2003年9月 設立四間戒煙診所,至今共有五間診所提供戒煙 服務:

- 家庭醫學深造培訓中心
- 柴灣公務員診所
- 香港公務員診所
- 九龍公務員診所
- 新界公務員診所

# 治療特點

戒煙療程為期8至12星期,包括輔導及戒煙輔助藥物。在療程開始前,除戒煙者的身體狀況外,醫生及護士亦會先評估其吸煙習慣、對尼古丁的依賴程度、戒煙意向及原因,以及是否需要使用戒煙輔助藥物等。

療程會以個人或小組形式為戒煙者提供四次輔導, 主要針對戒煙者生理與心理方面的適應,行為、 生活模式及環境的轉變等,作出指導及分享。完 成療程後,診所會於其後一年內定期聯絡戒煙人 士跟進其戒煙情況,提供所需的支援,預防他們 再次吸煙。

# DEPARTMENT OF HEALTH - SMOKING CESSATION CLINICS

In September 2003, four smoking cessation clinics were set up by the Professional Development & Quality Assurance of the Department of Health. Until now, there are altogether five family clinics providing smoking cessation services:

- Education & Training Centre in Family Medicine,
- · Chai Wan Families Clinic,
- · Hong Kong Families Clinic,
- · Kowloon Families Clinic, and
- · New Territories Families Clinic.

### **CHARACTERISTICS**

The 8-12-week treatment programme includes counselling and pharmacotherapy. Apart from medical history, clients' smoking habit, nicotine dependence, motivation of quitting smoking and the need of pharmacotherapy are assessed by doctors and nurses before the treatment

Four counselling sessions in either individual or group format are offered to clients. Sharing and guidance on physiological and psychological adaptation, behavioural and lifestyle modification and environmental adjustments will be taught. Regular post-treatment follow-up is provided to quitters up to 1 year in order to prevent relapse and provide necessary support.



戒煙人士小組輔導 Group counselling for quitters

# 東華三院綜合戒煙服務中心 -戒煙輔導及戒煙輔助藥物 TUNG WAH GROUP OF HOSPITALS INTEGRATED CENTRE ON SMOKING CESSATION COUNSELLING AND PHARMACOTHERAPY

為使戒煙服務更方便和廉宜,衞牛署在2009年1月起與東華三院合作,提供戒煙輔導及藥物治療。

東華三院綜合戒煙服務中心旨在為吸煙人士提供社區為本及一站式的免費戒煙服務。服務由醫生、護士、心理學家、社工及輔導員等專業人士組成的隊伍提供。中心在辦公時間外,於平日傍晚及週六上午時段也提供服務。

中心會在治療前初步評估吸煙者對尼古丁的依賴程度。專業醫護人員在藥物治療階段會為戒煙者提供適當的戒煙輔助藥物。此外,醫護人員會採用認知行為療法幫助戒煙者培養健康的生活習慣,也會教授解難及放鬆技巧,預防戒煙者煙癮復發。除個別輔導外,中心亦提供小組治療,加強吸煙人士的戒煙決心,並組織一系列互助小組,包括戒煙小組、預防煙癮復發小組及無煙俱樂部。



To further enhance the accessibility, availability and affordability of smoking cessation services in the community, the Department of Health started collaborating with TWGHs in January 2009 to provide counselling and drug therapy.

Their Integrated Centre on Smoking Cessation (ICSC) aims to provide community-based and one-stop quitting service

to smokers for free. Their service is delivered by a multi-disciplinary team comprising doctors, nurses, clinical psychologists, social workers and counsellors. Quitters can access their services even after normal office hours including late evenings of weekdays and Saturday mornings.

An initial assessment is conducted to evaluate the severity of the smokers' nicotine dependence. At the medical treatment phase, health care professionals will introduce pharmacotherapies to smokers if appropriate. In addition, cognitive behavioural therapy will be used to assist the quitters to modify their health behaviours. In order to prevent relapse, problem solving and relaxation skills are taught. Apart from individual counselling, the ICSC offers group therapy to reinforce smokers' motivation to quit and organizes a



series of mutual support groups to help smokers which includes smoking cessation group, relapse prevention group and smoke-free club.

# 博愛醫院 - 輔導及針灸 POK OI HOSPITAL - COUNSELLING AND ACUPUNCTURE

衛生署與博愛醫院推出以輔導配合針灸的戒煙服務。治療方案根據中華人民共和國國家中醫藥管理局及中國中醫科學院針灸研究院的專業指引釐訂。

療程包括身體和耳穴針灸及面談輔導,診所會於其後一年內定期聯絡戒煙人士跟進其戒煙情況。現時博愛醫院在香港超過90個地點以流動醫療車提供服務。

The Department of Health collaborates with Pok Oi Hospital to provide a programme on smoking cessation service using acupuncture and counselling. The treatment protocol is developed under the professional guidance of the State of Administration of Traditional Chinese Medicine of the People's Republic of China and the Institute of Acupuncture and Moxibustion, China Academy of Chinese Medical Sciences.

The treatment is composed of body and ear acupuncture as well as face-to-face counselling. Telephone follow-up service is provided up to 1 year during post-treatment period. The service is provided via mobile clinics reaching more than 90 different spots in Hong Kong.







# 醫院管理局 - 無煙新天地(戒煙診所) HOSPITAL AUTHORITY SMOKING COUNSELLING & CESSATION SERVICE (SCCS) CENTRES

醫管局透過轄下的無煙新天地(戒煙診所)提供戒煙及輔導服務,協助吸煙人士戒煙,尤其是罹患慢性病的病人。服務由來自不同專業的團隊提供,包括受特別培訓的輔導員,並由醫生從旁協助。吸煙人士會接受個別或小組輔導,輔導員會協助他們訂下適當的療程時間表,定期跟進,並在需要情況下提供尼古丁替補療法或其他藥物。

The Hospital Authority provides smoking cessation and counselling services via its SCCS centres. It helps smokers, especially patients with chronic disease, to quit smoking. The services are provided in a multi-disciplinary approach, by specially trained professional counsellors who are supported by doctors. Smokers would be counselled either individually or by group, during which their counsellors will help them by developing suitable treatment plans with regular follow up, offering nicotine replacement therapy or medication if indicated.

# 網上互動戒煙中心 INTERACTIVE ONLINE CESSATION CENTRE

虚擬的網上互動戒煙中心在2009年3月推出。中心以網絡為本,提供戒煙資訊、網上戒煙計劃、戒煙貼士及遊戲天地。互動的網絡遊戲可提高年輕人對煙草禍害的認識。戒煙者可在網上登記並定期透過電郵接收戒煙建議。此外,中心會提供度身訂造的戒煙時間表及戒煙貼士,以支持及提醒戒煙者戒煙。

A web-based virtual smoking cessation centre – Interactive Online Cessation Centre has been launched since March 2009. It is an interactive web-based platform providing information on smoking cessation, online quit plan, tips to quit smoking and a game zone. The interactive flash games enhance youth's knowledge on the harmful effects of tobacco. Quitters can register online and receive scheduled e-mail advices. Besides, a tailor-made quit calendar with quitting tips will be given to smokers as a means of support and reminder.



# 戒煙熱線 SMOKING CESSATION HOTLINE

衛生署於2001年9月設立戒煙熱線,並在2005年引入電腦來電處理系統。 互動語音回應系統24小時提供廣東話、普通話及英語的戒煙貼士、戒煙 診所資訊及其他有用資訊。使用者可致電1833 183,聯絡各戒煙服務機 構。經培訓的註冊護士會處理一般戒煙查詢,並為不願親身到訪戒煙診 所的吸煙人士提供電話輔導。

The Department of Health's smoking cessation hotline service was established in September 2001 and upgraded in 2005 to incorporate a computerized call handling system – Interactive Voice Response System to provide quitting tips, information on smoking cessation clinics and useful resources in Cantonese, Putonghua and English round the clock. A centralized number – 1833 183 is a one-stop number that coordinates various smoking cessation service providers. Trained registered nurses tackle general enquiries on quitting and offer phone counselling services to clients who prefer not to visit cessation centres.



# 戒煙熱線的來電總數 TOTAL NO. OF CALLS RECEIVED BY SMOKING CESSATION HOTLINE



## 戒煙傳真 FAX-TO-QUIT

戒煙傳真計劃自2009年4月推出以來,一直為前線醫護人員提供快捷有效的途徑,把有意戒煙者轉介至戒煙服務。有意戒煙者同意接受控煙辦的電話跟進後,衞生署戒煙熱線的護士輔導員會聯絡他們,並提供適當的建議及治療。

A "Fax-to-quit" programme has been launched since April 2009 to offer healthcare professionals a quick and efficient way to refer clients to smoking cessation services. Frontline healthcare workers were invited to identify and seek their smoker clients' consent to receive calls from TCO for follow up. Counsellors of the Department of Health's smoking cessation hotline will contact these clients and offer appropriate advice and treatment.



# 電話輔導服務 PROACTIVE PHONE COUNSELLING SERVICE

電話輔導服務在2009年11月推出,服務對象為經戒煙傳真服務轉介但不願前往戒煙診所的吸煙者。護士輔導員會按預定的時間 表致電吸煙者十次,提供跟進輔導及心理行為輔導。

Since November 2009, a proactive phone counselling service has been launched. Clients who are referred to the Fax-to-Quit service but refuse to attend smoking cessation clinics are recruited. Nurse counsellors will make ten follow-up phone calls to each eligible client according to a pre-determined schedule to provide counselling and psychobehavioural intervention.

# 煙草依賴治療的專業發展 PROFESSIONAL DEVELOPMENT ON TOBACCO DEPENDENCE TREATMENT





# 培訓醫護人員 TRAINING FOR HEALTH CARE PROFESSIONALS

衛生署會派員參加煙草依賴治療的海外培訓課程。為培育更多本地戒煙治療的專業人才,衛生署在2010年聯同美國Mayo Clinic及東華三院在香港舉辦煙草依賴治療專家證書培訓課程,讓參加者學習所需的技能及知識,掌握以實證為基礎的有效療法。

The Department of Health has been sending staff to attend various overseas training courses on tobacco dependence treatment. In order to build a significant pool of treatment specialist locally, a Tobacco Treatment Specialist Certification training programme was organized in Hong Kong in 2010 in collaboration with the Mayo Clinic of USA and Tung Wah Group of Hospitals. Participants were equipped with skills and knowledge to provide effective and evidence-based interventions.





# 「控煙約章」 CHARTER FOR PROMOTING MANAGEMENT OF TOBACCO DEPENDENCE

2010年,香港醫學專科學院在衞生署全力支持下,連同15個分科學院簽署「控煙約章」。根據約章,醫護人員承諾身體力行實踐無煙目標,加強控煙工作,締造無煙香港。此外,香港醫學專科學院亦舉辦培訓課程,教導年輕醫生協助病人戒煙,讓他們更投入參與控煙工作。

In 2010, the Hong Kong Academy of Medicine in conjunction with the Academy's 15 Colleges jointly adopted the "Charter for Promoting Management of Tobacco Dependence" with the support from the Department of Health. The Charter is a commitment from all health professionals to act towards anti-smoking and to strengthen the control of tobacco use to create a smoke-free environment in Hong Kong. Subsequent to this Charter, training courses on how to help patients quit smoking were organized so that more young doctors can participate in the work of tobacco control.









# 控煙資訊研討會 SEMINARS ON UPDATED TOBACCO CONTROL KNOWLEDGE

國際煙草依賴治理研討會於2009年2月舉辦,主題包括世界各地的戒煙概況和尼古丁依賴者的臨床治理方法,目的是向與會者報導最新的控煙研究成果。研討會邀請了國際知名學者及成就卓越的專家交流意見及進行討論,分享彼此的經驗。參與研討會的人士來自不同專業界別,包括醫生、牙醫、藥劑師、護士、心理學家、社工及其他有關的控煙工作者。研討會為與會者提供和拓展控煙工作網絡的優良平台。

此外,在2010年2月舉辦的控煙研討會上,來自美國、英國及芬蘭的著名控煙專家獲邀分享他們的戒煙工作經驗。

An international symposium on tobacco dependence treatment was organized in February 2009. It aimed to present knowledge from the leading edge of tobacco control research with the theme on smoking cessation worldwide, as well as the clinical management of nicotine-dependent smokers. Internationally renowned and outstanding experts were invited to share their insights and experience with participants. The participants included professionals in different disciplines including doctors, dentists, pharmacists, nurses, psychologists, social workers and related stakeholders. It had provided a very good networking platform for colleagues from far and wide in the field of tobacco control.

In February 2010, a seminar on tobacco control was organized in which experts from USA, England and Finland in the field of tobacco control had shared their experience in the context of smoking cessation.





# 戒煙資源 RESOURCES ON SMOKING CESSATION

控煙辦為醫護人員提供各種資源,協助他們提供戒煙服務。2009年, 我們制訂全面的戒煙指引「戒煙資料冊」,派發予全港的醫生;並為 醫護人員印製小冊子及戒煙熱線卡,以提供有關吸煙的資料及協助他 們轉介合適的應診者至戒煙服務。

TCO provides resources for healthcare professionals to facilitate their provision of smoking cessation services. In 2009, a comprehensive guide, "Smoking Cessation Information Kit", was developed and distributed to all doctors in the territory. Besides, pamphlets and smoking cessation hotline cards were produced for healthcare professionals to provide factual information on smoking and to refer suitable clients to the smoking cessation services.



# 煙草稅 TOBACCO TAXATION

# 《煙草控制框架公約》第6條: 減少煙草需求的價格和稅收措施 香港徵收的煙草稅

根據世界衞生組織的《煙草控制框架公約》,調高煙草價格及稅收是減少各階層人口的煙草使用量,尤其是青少年及貧窮階層的有效和重要方法。提高煙草產品的稅收會令煙草產品價格上升,繼而令吸煙人數減少,降低因疾病及死亡引致的醫療負擔。世界衛生組織建議調高煙草稅至煙草零售價格七成或以上。世界銀行的數據顯示,調高煙草稅一成,即可減少高收入國家的煙草需求4%,而中等收入及低收入國家的需求則減少8%1。此外,研究顯示年輕人及社會經濟地位較低的社群對煙草價格變動,相對於較年長及社會經濟地位較高的階層更加敏感。

過去二十年,香港不斷調高煙草税。自1980年代初起,煙草税曾多次上調,幅度介乎100%至300%。配合多管齊下的控煙措施,吸煙人口比例逐漸由1982年初的23.3%,下降至2010年底的11.1%。根據主題性住戶統計調查,煙草產品價格上升10%,吸煙人口便下降2.5%²。圖3.4.1顯示自1982年起的吸煙人口比例及煙草税增幅。香港政府最近在2011年2月增加煙草税41.5%,約相等於煙包香煙零售價的69%。



# FCTC ARTICLE 6: PRICE AND TAX MEASURES TO REDUCE THE DEMAND FOR TOBACCO TOBACCO DUTY IN HONG KONG

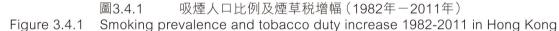
According to the WHO FCTC, price and tax measures are an effective and important means of reducing tobacco consumption by various segments of population, particularly the young and the poor. Higher taxes on tobacco products will lead to higher prices which will in turn reduce tobacco use and lower the health burden caused by morbidity and mortality. The WHO advises raising tobacco taxes so that they account for at least 70% of retail prices. Data from World Bank suggest increasing tobacco tax by 10% will reduce demand of tobacco use by 4% in high-income economy and by 8% in middle- and low-income economies. Besides, studies showed young people and the subgroups with lower socioeconomic status were more responsive to changes in price than older ones and those with higher socioeconomic status.

Over the past two decades, tobacco duty in Hong Kong has been increased progressively. Since the early 1980s, tobacco duty has been increased many times at rate as high as 100% to 300%. Together with the multi-pronged tobacco control measures, the smoking prevalence has gradually declined from 23.3% in early 1982 to 11.1% in 2010. It has been demonstrated by the Thematic Household Survey that a 10% increase in price leads to a 2.5% decrease in smoking prevalence. The population smoking prevalence and tobacco duty increase rate since 1982 are shown in the graph 3.4.1. Tobacco duty was last increased by 41.5% in February 2011, which amounted to about 69% of the retail price of cigarette packs.

School of Public Health, the University of Hong Kong. http://sph.hku.hk/upload/news/067656929525.pdf (accessed on 21 September 2011).



2011年3月發起「無煙香港綠絲帶行動」,支持增加煙草税 Supporting raise of tobacco tax-"Smoke-free Hong Kong Green Ribbon Action" in March 2011





<sup>&</sup>lt;sup>1</sup> The World Bank (1999) Curbing the Epidemic: Governments and the Economics of Tobacco Control.

<sup>&</sup>lt;sup>2</sup> 香港大學公共衞生學院·http://sph.hku.hk/upload/news/067656929525.pdf (2011年9月21日)。



香港政府在2010年取消入境旅客可攜帶免税煙草產品的優惠。由2010年8月1日起,凡年滿18歲以上的入境旅客,可免税攜帶19支香煙或1支雪茄,又或25克雪茄或其他製成煙草進入香港,供其個人使用。入境旅客如未有就其管有而超逾免税優惠數量的應課税品向海關人員作出申報,或者作出虛假申報或不完整申報,可遭檢控。此措施減少免税或廉價煙草產品的供應,從而降低煙草用量及禍害。

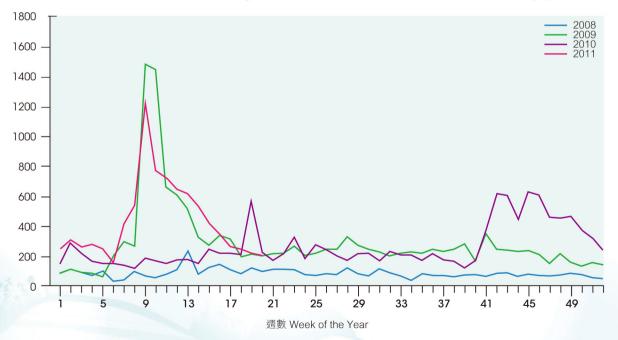
The duty concession for tobacco products for incoming travelers at border entry has also been abolished in 2010. From 1 August 2010 onwards, incoming passengers aged 18 or above are allowed to bring a maximum of 19 cigarettes, or 1 cigar, or 25 grams of cigars or other manufactured tobacco, into Hong Kong for his own use and exempted from duty. Incoming passengers, who fail to declare or make a false or incomplete declaration to a Customs officer on the quantity of dutiable goods in their possession which are in excess of the duty-free concessions are liable to prosecution. This measure reduces the supply of duty free or low-price tobacco products and hence reduces the consumption and harm of tobacco.

# 對未成年人士吸煙情況及戒煙服務需求的影響 EFFECT ON CONSUMPTION OF TOBACCO USE BY YOUTH AND DEMAND FOR SMOKING CESSATION SERVICE

香港政府在2009年調高煙草税後,政府統計處在2009年11月至2010年2月期間進行的主題性住戶統計調查顯示,15歲至19歲及20歲至29歲的每日吸煙人士比例均大幅下降逾10%。此外,戒煙服務的需求在2009年和2011年調高煙草税後大幅上升,致電衞生署綜合戒煙熱線的人數分別錄得718%和193%的增幅,並於3月初(即緊隨增加煙草稅的宣佈後)達到高峰。

After the tobacco duty was raised in 2009, the Thematic Household Survey conducted by the Census and Statistics Department in November 2009 to February 2010 showed a substantial drop by more than 10% for daily cigarettes smokers among those aged 15-19 and 20-29. Furthermore, an upsurge of demand for smoking cessation service was recorded after tobacco tax increase in both 2009 and 2011. The number of calls to the integrated smoking cessation hotline of the Department of Health increased by 718% and 193% in the post-taxation period of 2009 and 2011 respectively. The number of calls peaked in early March after the announcement of tobacco increase in late February for both years.

#### 增加煙草税後戒煙熱線的使用量(%) Number of calls to smoking cessation hotline after Tobacco tax increase(%)



# 健康推廣 HEALTH PROMOTION

《煙草控制框架公約》第12條:

教育、交流、培訓和公眾意識實施準則

**FCTC ARTICLE 12:** 

EDUCATION, COMMUNICATION, TRAINING AND PUBLIC AWARENESS

# 公眾關注及教育

控煙辦致力透過不同方式增加市民對控煙的認識,曾舉辦全港性的活動來教育市民有關煙草的禍害。

# 宣傳及資源

過去十年,控煙辦製作了一系列宣傳短片,透過電視、電台及戶外多媒體平台播放。除針對普羅大眾外, 控煙辦亦會因應吸煙群組的變化趨勢,針對女士及 長者等特定社群推出宣傳短片,同時配合戶外廣告 加強宣傳效果。

### PUBLIC AWARENESS AND EDUCATION

TCO strives to increase public awareness of tobacco control issues through various approaches. Territory-wide campaigns have been launched to educate public on hazards of tobacco.

#### PUBLICITY AND RESOURCES

During these 10 years, TCO has produced a series of Announcement of Public Interests (API) through TV, radio and outdoor multimedia platforms. Apart from the general public, some APIs were targeted at general public and specific audience such as female and elderly smokers in view of the changing smoking trend. Outdoor advertisements were used to maximize the message exposure.



宣傳廣告 Announcements of Public Interest







戶外廣告 Outdoor advertisement

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According to the september 200

Accord

控煙辦為禁煙區管理人及公眾印製宣傳單張及海報, 宣傳吸煙及二手煙的禍害,同時提供戒煙服務及控煙 法例的資訊;並製作日曆和便條座等紀念品,以加深 市民對戒煙服務的認識。

當新修訂的《吸煙(公眾衞生)條例》於2007年正式 生效時,控煙辦製作了一套實施指引,協助法定禁 煙區管理人按照法例規定實施無煙政策。

Pamphlets and posters on the hazards of smoking and secondhand smoke, smoking cessation information and tobacco control legislation were produced for managers of no smoking areas and the public. Various promotional materials such as calendars and memo holders were produced in order to increase the awareness of smoking cessation services.

When the amended Smoking (Public Health) Ordinance came into effect in 2007, a set of implementation guidelines were prepared for managers of various statutory no smoking areas to implement smoke-free policy. The guidelines assisted managers to implement the smoke-free policy and comply with the requirements stipulated by the law.











此外,為協助禁煙 區管理人實施無煙 政策及推廣無煙文 化,控煙辦亦舉辦 有關《吸煙(公眾 衞生)條例》和戒 煙服務的講座,以

及巡迴展覽及嘉年華,向市民推廣無煙訊息。

控煙資源中心收藏各類有關控煙的參考資料,包括中 英文刊物、醫學期刊、文章、研究報告及視聽資料、歡 迎市民參觀。此外,中心亦會用作舉辦控煙講座及培 訓的場地。

Moreover, in order to help managers of no smoking areas adopt a smoke-free policy and to promote a smoke-free culture, seminars on the Smoking (Public Health) Ordinance and smoking cessation were organized by TCO. Roving exhibitions and carnivals were organized as a



means to promote smoke-free message in the community.

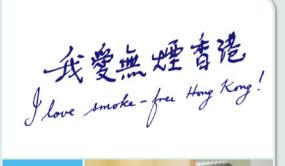
The Tobacco Control Resource Centre holds a rich collection of information related to tobacco control, including Chinese and English publications, medical journals, articles, research reports, audio-visual materials. Members of the public are welcome to visit the centre. The resource centre also serves as a venue for holding tobacco control seminars and trainings.







# 控煙推廣活動 **PUBLICITY CAMPAIGN**



# 「我愛無煙香港 |

為增加市民對新修訂《吸煙(公眾衛 生)條例》的認識及支持,控煙辦於 2005年展開「我愛無煙香港」宣傳 活動,並在2008年製作十集短片, 透過大眾媒體傳播「我愛無煙香港」 的訊息。



#### I LOVE SMOKE-FREE HONG KONG

Since 2005, a publicity campaign entitled "I love smoke-free Hong Kong" has been started to raise the public awareness and support on the newly amended Smoking (Public Health) Ordinance. In 2008, a series of 10 chapters of videos were produced and the message of 'I love smoke-free Hong Kong' was disseminated through the mass media.



**SMOKING KILLS** 

TAR: NICOTINE: mg

mg

# 「最具阻嚇性圖象健康忠告」選舉 THE MOST DETERRING PICTORIAL HEALTH WARNINGS ELECTION

在煙包印上圖象健康忠告的措施生效兩年後,控煙辦舉辦「最具阻嚇性 圖象健康忠告 | 選舉,市民反應踴躍,左圖是市民認為最具阻嚇性的圖象 健康忠告。

After the posting of pictorial health warnings on the package of tobacco products has been effected for 2 years, "The Most Deterring Pictorial Health Warnings" election was held. The response was overwhelming and most people voted the left as the most deterring pictorial health warnings.

# 「最具創意及最感人戒煙短訊」比賽 THE MOST INNOVATIVE AND THE MOST TOUCHING QUITTING SMS COMPETITION

為鼓勵中小學生發揮創意及推廣校園無煙文化,控煙辦舉辦「最具創意及最感人戒煙短訊」比賽。學生反應熱烈,合共收到超過一萬份參賽作品。

To encourage primary and secondary students to tap their talents and to promote smoke-free culture in schools, TCO launched "The Most Innovative and The Most Touching Quitting SMS Competition". Students showed enthusiastic responses to the competition. More than 10,000 applications were received.



# 部分獲獎作品: SOME OF THE WINNING MESSAGES:



