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Cover Story

Tobacco Duty Increase



To curb the global tobacco epidemic, the World Health Organization (WHO) has been calling for all member states to raise tobacco duty as the most direct and effective means of reducing tobacco consumption. It is well established internationally and empirically that tobacco price has a strong inverse correlation with tobacco consumption. World Bank's findings indicated that, on average, a price rise of 10% on a pack of cigarette is expected to reduce demand for cigarette by about 4% in high-income countries.

In Hong Kong, tobacco duty increase is long established and recognised as an integral part of our tobacco control measures. Over the years, tobacco duty has been increased progressively in tandem with the strengthening of overall tobacco control. As one of the key measures to control tobacco use, the increase of tobacco duty is imposed as a complement to other tobacco control measures, and often interleaving with such other measures. Since the early 1980s, tobacco duty has been increased many times at rate as high as

300%. Through successive tobacco duty increase, together with progressive tobacco control efforts on various fronts, cigarette consumption has been on a general trend of decline and smoking prevalence has gradually declined from 23.3% in early 1982 to 10.7% in 2012.

Tobacco duty was last increased by about 41.5% in February 2011, with a view to further strengthening the effectiveness of duty as a tobacco control measure. To protect public health and echo the theme for WHO World No Tobacco Day 2014 – raise taxes on tobacco, the Financial Secretary announced in his 2014-15 Budget in February 2014 that the duty on cigarettes was further increased by 11.7%. The duty on each stick was increased from \$1.7 to about \$1.9. Apart from the increase in tobacco duty, the Government will also continue to implement comprehensive tobacco control measures, including enforcement of the statutory smoking ban, public health education and smoking cessation promotion, as well as provision of smoking cessation services.

Words from Editor

Tobacco duty increase is an integral part of the tobacco control measures taken by the Administration, in accordance with the Government's established policy to implement tobacco control progressively through a multi-pronged approach. The Cover Story of this issue will report matters concerning tobacco duty increase in 2014. On the other hand, according to the latest Thematic Household Survey, male aged 40-49, who are the working population, had the highest daily cigarette smoking prevalence. In this regard, TCO has collaborated with Lok Sin Tong to develop an outreaching smoking cessation programme at workplace, so as to address the specific needs of smoking workers. The Thematic Report of this issue is a brief summary of the programme.



Lok Sin Tong “Smoking Cessation Programme in Workplace”

To safeguard public health, the Government has attached great importance to tobacco control. Since the enactment of the tobacco control legislation, namely the Smoking (Public Health) Ordinance in 1982, the Government has adopted a progressive and multi-pronged approach to address the problem of smoking. With effect from 1 January 2007, statutory no smoking areas have been extended to indoor workplaces which protects the health of non-smokers and has greatly improved the working environment.

According to the latest Thematic Household Survey, the daily cigarette smoking prevalence has dropped to 10.7% in 2012. Male aged 40-49, who are the working population, had the highest daily cigarette smoking prevalence. Smoking is harmful, not only to the “first-hand” smoker, but also to the non-smoker who breathes “second-hand” side-stream smoke. From the employers’ perspective, it also decreases productivity, builds a negative corporate image, and affects the health of the customers. A supportive workplace can help smoking employees kick the habit which improves the health and efficiency of the employees.

To address the specific needs of smoking workers, the Tobacco Control Office of the Department of Health has collaborated with The Lok Sin Tong Benevolent Society, Kowloon (Lok Sin Tong) to develop an outreaching smoking cessation programme at workplace in 2012. “Smoking Cessation Programme in Workplace” is the first free outreaching smoking cessation programme which is specially designed to target smokers in the working population. This project aims to raise awareness of workers and their employers of the importance of maintaining a smoke-free environment as well as encourage and help smoking employees to quit. It also helps to establish a smoke-free workplace for employers.

The programme covers a comprehensive range of activities and services, including outreach counselling services in workplace, setting-up of internal policies that helped smokers quit and provide free health talks. The outreach

team comprises of professional healthcare workers including registered nurse, social workers and health promoters. They will contact the company and employer to discuss with them the best strategies and methods to assist smokers to quit.

Promoting smoke-free company culture:

This project applied a top-down approach driving from employer to employee. The outreach team approaches the managerial staff of the company to help develop their own smoke-free internal policies, with reference to their company profiles, working environment and culture. This would help to design the most appropriate internal smoke-free policies and smoking cessation activities. In order to increase the incentive for smoking employees to quit, advice will be offered to companies which include rewarding the quitters with extra bonus or holidays and setting up “Smoke-free Buddy” programme in which non-smoking employees can support and encourage smokers to quit. In recognition of the companies’ efforts and commitment in promoting a smoke-free environment in the workplace, “Smoke-free Enterprise Logo” will be awarded which can be used in their promotion product. This can help the companies to create a positive corporate image and encourage more companies in the industry to join this programme.

Outreach smoking cessation service:

The outreach team provides health talk in the company targeting both smokers and non-smokers. After the talk, the team will provide brief counselling to the smokers. They will also increase the smokers’ awareness to quit by offering the carbon monoxide breath test. Smokers will be invited to join the cognitive behavioural workshop.

Cognitive behaviour counselling for smoking cessation:

Collaborating with the Department of Psychology of the University of Hong Kong, a training kit has been designed and developed to help smokers understand their own smoking habits and their reasons to quit. The kit adopts the approach using cognitive behaviour counselling for smoking cessation and aims to help smokers break their addiction cycle. The 4-hour workshop allows them to identify their dysfunctional thoughts related to their smoking behaviour and provides them with smoking cessation tips and relaxation exercise. Quitters can also share and support each other in the workshop. Participants will receive follow-up phone calls and interval text messages with cessation tips for 1 year.

If employers or employees are interested in the “Smoking Cessation Programme in Workplace” organised by Lok Sin Tong, please visit

www.loksintong.org

or call 2272 9877 for enquiry.



Lok Sin Tong's healthcare professionals help companies set up the internal policies for smoking cessation





The Latest Pattern of Smoking in Hong Kong

The Census and Statistics Department published the report of a new round of Thematic Household Survey on 8 November 2013.¹ The survey was conducted between September and November 2012 to monitor the number of smokers in Hong Kong and their smoking pattern. It is encouraging to note that there has been a generally decreasing trend of smoking prevalence in Hong Kong since 1982. In 2012, the daily cigarette smoking prevalence among Hong Kong population (aged 15 and over) has further dropped to 10.7%, accounting for 645,000 persons.

The percentage of male smokers has been decreasing steadily from 39.7% in 1982 to 19.1% in 2012, while that of female smokers has been decreasing from 5.6% in 1982 to 3.1% in the year when the latest survey was conducted. Of the 645,000 daily smokers, males accounted for 85.0% (about 548,200 persons) and females accounted for 15.0% (about 96,800 persons). The average daily consumption of cigarettes by smokers also showed a decreasing trend which is consistent with the overall smoking prevalence. The daily cigarette smokers consumed an average of 13.0 cigarettes in a day, dropped when compared to 13.4 in the 2010 survey. Over half (54.6%) of the daily smokers consumed 1-10 cigarettes in a day; 42.1% consumed 11-20 cigarettes and only 3.3% consumed more than 20 cigarettes in a day.

The declining trend in smoking prevalence is a useful indicator on the effectiveness of the progressive and multi-pronged approach in tobacco control and the sustained efforts by the community as a whole. We will continue to step up tobacco control measures across various areas. Meanwhile, we will work closely with our community partners to raise awareness of the hazards of smoking, second-hand and third-hand smoke; and to promote smoking cessation services provided by the Government and non-governmental organisations, so as to further reduce the smoking prevalence of Hong Kong population.



Representatives from community partners and non-governmental organisations join the Under Secretary for Food and Health, Professor Sophia CHAN (centre), and the Head of Tobacco Control Office, Dr. Christine WONG (fourth left), at the press briefing on smoking situation in Hong Kong to show support to the Government's tobacco control efforts.

¹ Census and Statistics Department, Hong Kong Special Administrative Region. Thematic Household Survey Report No. 53, 2013.



Publicity Campaign for Tobacco Control

In February 2013, the Tobacco Control Office (TCO) launched a series of promotional activities through advertisements in the Mass Transit Railway, buses, trams, billboards and the Internet to enhance the awareness of the public on the harms of tobacco and to encourage smokers to quit smoking (Photos 1).

To echo the World No Tobacco Day (May 31), TCO produced a television programme on smoking cessation and two new Announcements in the Public Interest on television and radio, and launched another series of advertisements through various channels starting from May 2013 (Photos 2).

In the wake of both publicity campaigns, the integrated Smoking Cessation Hotline (1833 183) of the Department of Health registered a respective rise of 73% and 65%* in the number of calls for advice on smoking cessation. The number of downloads of TCO's Quit Smoking Mobile App also increased approximately by 230% from February to March 2013 and 150% from May to June 2013. This demonstrates that publicity programme is an effective measure to encourage smokers to quit smoking.



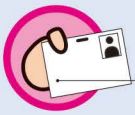
Photos 1



Photos 2



* The numbers of phone calls received 4 weeks before and after the commencement of the publicity campaigns are compared.



Enforcement Strategy for Smoking Ban

The Tobacco Control Office (TCO) of the Department of Health is the principal enforcement agency of the Smoking (Public Health) Ordinance (Cap.371) (the Ordinance). To facilitate the management of complaints on smoking offence, TCO collaborates with the 1823 Call Centre of the Efficiency Unit to run a 24-hour complaint hotline. TCO follows up and carries out investigation on every case, and arranges Tobacco Control Inspectors (TCIs) to inspect and take enforcement action on the premises concerned.

In black-spots or premises where smoking offences are prevalent, TCO takes vigorous enforcement actions and initiates more frequent “surprise” inspections. To enhance deterrent effect against smoking offenders, TCO often conducts joint inspections and enforcement actions with other law enforcement agencies including the Hong Kong

Police Force, Food and Environmental Hygiene Department, Housing Department and Leisure and Cultural Services Department. Besides, when smoking offences occur in amusement game centres and bars, TCO would notify their respective licensing authority (the Home Affairs Department and the Liquor Licensing Board).

Concerning the enforcement of smoking ban in 2012, TCO received about 18,000 complaints, conducted more than 26,000 inspections and prosecuted more than 8,000 smoking offenders. Many of the smoking offences occurred in amusement game centres and shops/ shopping mall (e.g. at the backstairs) (Figure 1). The TCIs work on shift, and about one-fourth of the fixed penalty notices were issued from evening to early morning.

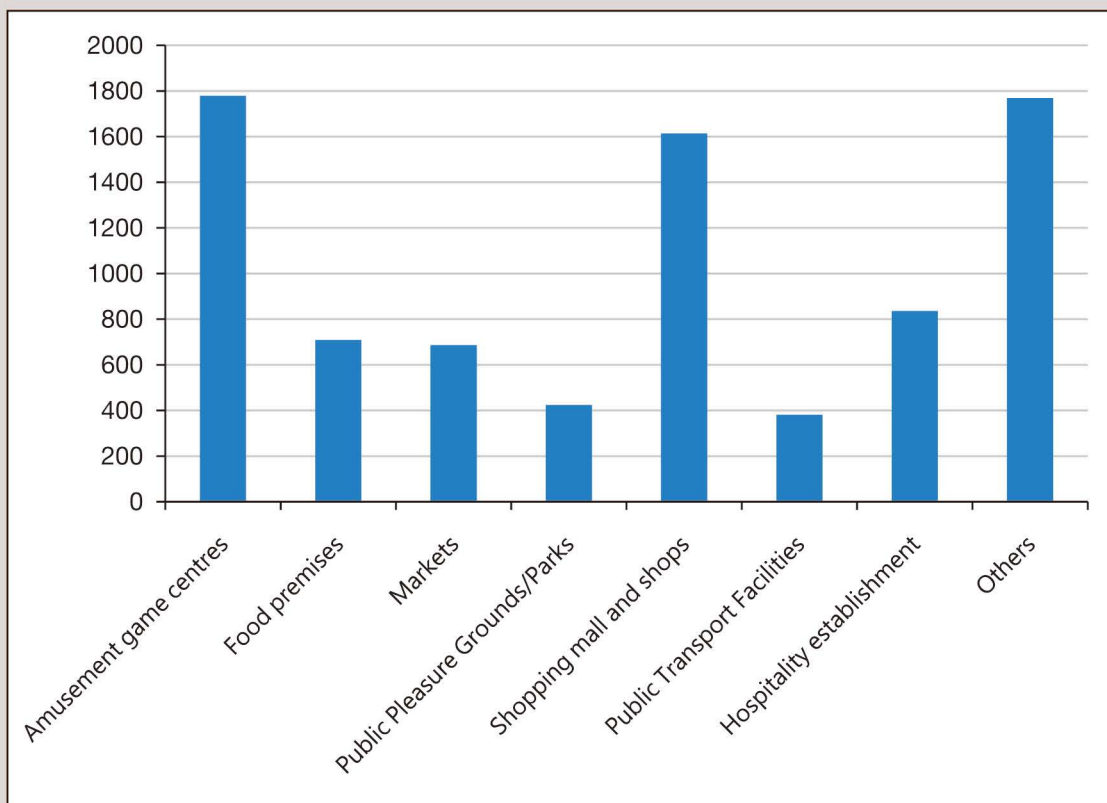


Figure 1 Number of prosecutions on smoking offence in 2012

The Ordinance also empowers the manager of no smoking areas to enforce the relevant law to ensure that no person smokes in the premises he manages. The manager may call for police assistance if necessary. To enhance venue managers' knowledge of tobacco control legislation and to provide them with procedures and practical tips on implementing smoke-free policy, TCO has drawn up a series of guidelines on implementing smoke-free policy and organised regular talks on tobacco control legislation. Moreover, TCIs disseminate these messages to venue managers when conducting inspections.



Tobacco Control Inspectors conducting inspection at a bar



Tobacco Control Inspectors conducting inspection at cooked food centre in a market

Notwithstanding some isolated incidents, enforcement of smoking ban has largely been smooth. Most venue managers and smokers are cooperative. However, about 1% of the offenders fail to provide personal particulars or proof of identity. A few offenders even willfully obstruct TCIs in the exercise of their duties. The maximum penalty for the former offence is a fine of \$10,000, while for willful obstruction the offender is liable to a fine of \$ 25,000 and imprisonment for 6 months. To enhance the effectiveness of enforcing smoking ban, a small team of police officers have been seconded to TCO to provide training and assistance on enforcement since 2005. The public is also urged to observe the smoking ban requirements and to co-operate with law enforcement officers.



After the opening of the World Health Organization Collaborating Centre (WHO CC) for Smoking Cessation and Treatment of Tobacco Dependence in April 2012, the Tobacco Control Office (TCO) has received a number of local and overseas government officials, medical and nursing professionals as well as scholars from various cities of China, and countries of the Western Pacific Region including Australia, Singapore, Vietnam, Cambodia and Macao.

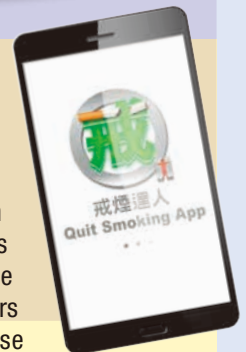


Head of the TCO, Dr. Christine WONG (fourth left) introduced the tobacco control measures in Hong Kong including enforcement, smoking cessation service, publicity and education.



On 11 October 2012, delegates from Cambodia visited the Department of Health and the WHO CC. The Director of Health, Dr Constance CHAN (left) is joined by the representative of Cambodian delegates for a photograph.

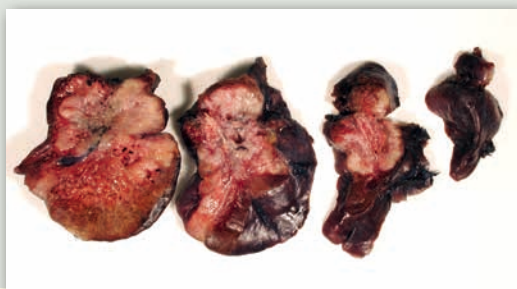
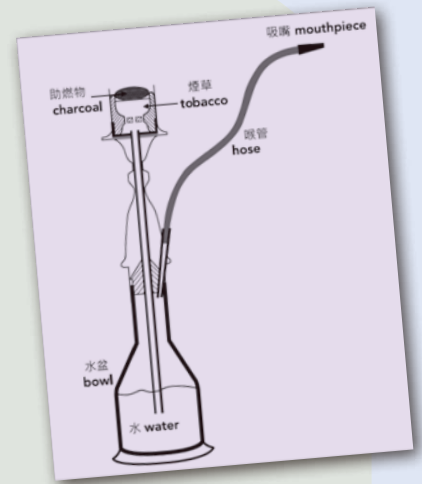
TCO has launched the Quit Smoking App to assist smokers to overcome tobacco dependence since August 2011. It is well received by users and up till now, there are more than 28,000 download. The new version is now available and provides knowledge of smoking cessation and helps smokers to quit in an interactive way. Please download and update !



Waterpipe Smoking

Waterpipe is a tobacco-smoking device that originated from India and the Middle East. Its use is increasing in some parts of the world. Waterpipe tobacco comes in different flavours. The tobacco is heated to give off smoke which passes through a water bowl and is inhaled by the smoker through the hose of the waterpipe. This smoke not only contains the combustion products of tobacco, but also that of the charcoal or other heating substances.

Contrary to the belief of many waterpipe smokers, waterpipe smoking is not safer than smoking cigarettes. Even after the smoke has passed through water, it contains numerous toxicants including tar, carbon monoxide, heavy metals and cancer-causing chemicals. Waterpipe smokers are at risk for the same kind of diseases as are caused by cigarette smoking, including oral cancer, lung cancer, stomach cancer, cancer of the oesophagus, reduced lung function, heart disease and decreased fertility.



According to the Smoking (Public Health) Ordinance, no person shall smoke or carry a lighted cigarette, cigar or pipe in statutory no smoking areas. Offenders will be subject to a fixed penalty of HK\$1,500. Waterpipe is a type of pipe and its use is prohibited in all statutory no smoking areas. From January 2012 to September 2013, TCO had issued 12 fixed penalty notices and 3 summonses to waterpipe smoking offenders.