Together we bring health solutions.
APCAT as an organization believes that subnational leaders can have a direct and positive impact on the lives of millions through good city-level governance. From our experiences, it has been seen that tobacco control policies introduced and well-enforced at city level can become a powerful force to change national policy. This shows that together we can bring health solutions.

We came together in 2016 believing that subnational leaders can play a leading role to curb the rampant growth of tobacco use and in-turn, reducing rates of non-communicable disease by ensuring public services are managed with protection of public health as a priority. Several examples have been presented in the booklet showing that subnational political is the key to bring change.

It is truly an honour to lead the APCAT. From our humble beginnings of 12 cites we are over 40 cities in 2018 and no doubt in 2019 we will continue to grow. We cannot wait to see what the future brings.
MESSAGE FROM THE MINISTER OF HEALTH, REPUBLIC OF INDONESIA

Prof. Dr. dr. Nila Farid Moeloek

Tobacco consumption is a fast-growing threat to the health and lives of people in our region. Tobacco consumption also poses a threat not only to the health of individuals but to the social development of many countries. Scarce resources are being wasted on cigarettes instead of being used to pay for food, medicines or education. Therefore, there is a real need to position tobacco control into health and development agenda.

The burden of tobacco cannot be overstated. Tobacco use is responsible for more than five million deaths globally each year, with many of these deaths occurring prematurely. Over 200,000 people die from tobacco-related diseases each year in Indonesia. Tobacco kills more than tuberculosis, human immunodeficiency virus/acquired immune deficiency syndrome (HIV/AIDS) and malaria combined. We need to join our hands together to work against eliminating the scourge of tobacco with policies and programmes that are appropriate to the local context for them to be effective.

APCAT aims to build a stronger political commitments, new partnership opportunities, sustainable and effective utilization of the resources. We sincerely believe that the more we are together, the more it will be possible to build confidence and support for a bold and ambitious tobacco control agenda. Our commitments and contribution to tobacco control achievement and acceleration will be reflected in saving millions of lives.

Recognizing the key roles of subnational leaders in development and implementation of tobacco control law at subnational level, Ministry of Health in collaboration with The Union, has joined hands with Mayors and Regents in 2011. The Mayors’ and Regents Alliance was established with 12 Mayors, now it has been expanded to more than 100 cities and districts in Indonesia.

I see, this is an exciting time to be working on tobacco control acceleration at country and regional level. Thank you for all the passion, ideas, and experience you bring to this work. Let’s aim high and think bigger; act now together to achieve more. We appreciate the roles of The Union it plays.

I wish a successful 4th APCAT Summit.
MESSAGE FROM EXECUTIVE DIRECTOR OF THE UNION

José Luis Castro

Tobacco use is a leading risk factor for non-communicable diseases such as chronic lung and cardiovascular disease, cancers and diabetes. The debilitating effects of tobacco-related illness cause suffering and poverty to adults and children worldwide.

The Union has been fighting tobacco and its devastating impacts on public health. Under the Bloomberg Initiative to Reduce Tobacco Use, we have been working with governments and civil society across the globe to develop comprehensive tobacco control laws, and the infrastructure needed to implement them.

The 4th Asia Pacific Cities Alliance for Tobacco Control and Non-Communicable Disease Prevention (APCAT) Summit will be held in Bogor, Indonesia. Bogor is the first city in Indonesia to implement a smoking ban in public places, a ban on tobacco product displays at point-of-sale, and other tobacco products such as e-cigarettes. The city is a pioneering example of how strong leadership can pave the way for a world free from tobacco-related disease.

In many countries in the Western Pacific, however, tobacco control laws are poorly enforced. The public health community battles constantly with a tobacco industry who targets young people and actively attempts to weaken public health policy in order to protect its commercial interests. This is where strong political leadership and alliances like APCAT are so critical. Leaders champion public health and stand up to the tobacco industry.

The Union is committed to working with and supporting APCAT to improve the health and reduce tobacco use. This hard work and demonstrable progress is reflected in these pages. I have no doubt that if we continue this vital work, we will achieve our goal to reduce tobacco use; and the needless disease, poverty and premature death it causes.
PURPOSE
Recognizing that subnational leaders’ play a key role in the subnational and national heath and development agenda, the goal of APCAT is to build stronger political commitments, new partnership opportunities, sustainable and effective utilisation of resources and stronger health system performance & outcomes.

OBJECTIVES- ACT
ACT to implement a comprehensive tobacco control policy with effective use of resources
CREATE innovative solutions to prevent noncommunicable diseases
TACKLE Industry’s interferences in policy development and implementation by establishing rules and regulations

HOW APCAT WORKS
1. Country to country: share best practices while implementing tobacco control and NCDs prevention.
2. City to city: Mayors visit within the country and region to motivate their peer and share lessons learnt.
3. Policy to practice: widen program coverage and gain political will to translate policies into practice.
4. Subnational to national: leaders work with national policy makers to improve NCD and tobacco control implementation.
5. Mayors to Media: Mayors disseminate data and policy outcomes regularly with the media to help reiterate their efforts and showcase the policy impact in their city.
Tobacco kills 7 million people each year.

80% of the world’s 1.1 billion smokers live in low and middle income countries.

890,000 Deaths from Second Hand Smoke

Current Tobacco Smoking Prevalence (15+)

Legend
- Male
- Female

Source: Figures taken from WHO on the global tobacco epidemic, 2019
* cigarette smoking prevalence data only

Source: http://www.who.int/en/news-room/fact-sheets/detail/tobacco
WHO BEST BUYS FOR TACKLING NONCOMMUNICABLE DISEASES

- Manage Chronic Respiratory Disease
- Manage Cancer
- Manage cardiovascular disease and diabetes
- Reduce tobacco use
- Reduce harmful use of alcohol
- Reduce unhealthy diet
- Reduce physical inactivity
1. Create a smokefree city: Develop and implement a 100% smokefree policy in all public places and work places – Cleaning air and preventing exposure to secondhand smoke

2. Ban tobacco advertising, promotion and sponsorship: Develop and implement a regulation that bans tobacco advertising, promotion and sponsorship – Preventing children and youth from picking up smoking

3. Increase size of Pictorial Health Warning (PHW): Work with Ministry of Health to enhance policy communication increasing the size of PHW on tobacco packs and establish a provision of PHW on alcohol products – Preventing people from consuming harmful products and building public awareness

4. Raise Taxes: Build policy advocacy to raise taxes and prices on tobacco, alcohol and other harmful products – Saving lives and saving money

5. Stopping tobacco organizations and products – Safe guarding peoples’ health from tobacco industry

6. Establish NCD prevention program: Incorporate NCD prevention program into primary health care services and integrate tobacco control into the national agenda – Reducing NCD related deaths and diseases

7. Create tobacco free generation (TFG): Initiate the birth year based tobacco free generation, tobacco prevention program – Put an end to tobacco use

8. Establish country level alliances: Fostering partnerships at the country level – Expanding APCAT

9. Monitor and evaluate: Monitor progress so that interventions are implemented and progress can be measured – Do what we commit
The 3rd APCAT Summit, 2018, Singapore saw over 150 participants from 12 countries. A special session was conducted for Member of Parliament (MP) with aim to establish a bridge between national and subnational policy makers. Picture on right, MPs from Bangladesh, Nepal, Cambodia, Vietnam as well as the Executive Director of The Union engaged in a lively panel session chaired by the CEO of Singapore’s Health Promotion Board.

Guest of Honour of the summit was Mr Edwin Tong, Senior Minister of State, Ministry of Law and Ministry of Health Singapore. He said, “I am encouraged by the many officials and healthcare experts present this evening, and would like to thank the International Union Against Tuberculosis and Lung Disease for bringing together this wealth of experience in regional tobacco control. This Summit is a good opportunity for everyone to share their insights and perspectives on our common fight against tobacco use, and bring about a reduction in the non-communicable disease burden in our respective countries. I am confident that together, we will stand united to improve the health of our people.”

Dr Cut Putri Arianie, Director, Noncommunicable Disease Control, Ministry of Health Indonesia delivering an opening speech.

Subnational leaders took turns to showcase their innovative approaches to improving the health of their people. Mayor Bima of Bogor City Indonesia demonstrated a physical exercise dancing to the “Baby Shark Song”. Which was made in a bid to get the people of Bogor to engage in activities such as dancing to prevent NCDs. The Mayor Bima then led whole panel and audience in the dance.
A program of WALK THE TALK to beat NCDs was organized in Botanical Garden, Singapore. This program aimed to build policy awareness for a need of safe and clean public place such as park, where people can access for physical exercise.

An International panel of experts showcased their work and gave insights of NCDs and tobacco Control. These experts were Dr. Prakash Gupta, Haelis, Lee Trinette, WHO FCTC, Dr Thomas Abraham, SATAcommhealth Singapore, Martin Bratschi, Vital Strategies and Dr Heng Nung Koong Tobacco Free Generation International.

Media plays a critical role to enhance policy pressures and countering tobacco industry interferences. A session of media’s role to accelerate engagement was organized, Senior journalist from many countries expressed their commitments to fight against tobacco.

At the end of the summit, each city developed strategic goals and plans. Left, Mayor Francis Garcia briefs participants how to present their action plans.

After 2 full days of learning and sharing, planning and strategizing, leaders share the work and answer questions from the media. Singapore declaration was released.

“We can make tobacco free homes, places, cities, countries. We can do. We can change.” Khagraj Adhikari, Member of Parliament, Nepal (left) addresses participants and journalist questions.
Mayor’s Alliance for Healthy Cities

“ I will apply what I have learnt in this Summit to my municipality. It is our duty to protect people from the harms of tobacco smoke and prevent Noncommunicable diseases.”

MOSTAFIZUR RAHMAN MOSTAFA, Mayor, Rangpur City Corporation, Bangladesh at the 3rd APCAT Summit, 2018

To strengthen tobacco control at the sub-national level on June 2019 a group of enthusiastic Mayor was come forward and established the Mayor’s Alliance for Healthy Cities in Bangladesh (MACH). Key objectives of the MACH as follows;

- Create an opportunity to exchange experiences among the Mayors to protect public health and the environment.
- Implement of Tobacco Control Laws, controlling tobacco use through licensing.
- Ensure open spaces, conserving water bodies and set up parks to protect the environment and protect mental health.
- Operating mobile court in accordance with the law of the environment to protect the environment.

Licensing: As part of the implementation of Tobacco control law and control of random selling of tobacco, several municipalities have initiated to introduce licensing for vendors.

Manikganj municipality started licensing system to control the selling. Pictured above is a shop keeper being issued a license to sell tobacco products.

Eight cities joined the MACH; Rangpur, Manikganj, Savar, Dhamrai, Haragacha, Badorganj, Peerganj and Singair from the Mayor alliance for Healthy Cities, Bangladesh (MACH)

Savar Municipality is also working towards licensing for all sellers of tobacco products. Pictured below is to show various stakeholders and local government representatives declaring their commitments to the initiative.

Lessons learnt: subnational leaders are the key to implement national law and bring the health solutions for their people. A provision of licensing to sell tobacco is one of the innovative approaches to control tobacco and denormalize tobacco in the community.
The alliance was established in 2017 with the aim to create local innovations and local solutions for effective implementation of tobacco control and NCDs interventions at subnational level by consolidating local political will and sharing resources in partnership with national government.

**National policy makers’ engagement:**
Mdm Lork Kheng, Chair of Parliamentary Committee on Health and Social Welfare Initiated a reflection forum inviting national Assembly Members, senior officials from various ministries sub-national leaders and all related agencies.

The forum aimed at presenting the current situations of health of the people that are affected by tobacco, encouraging and promoting tobacco control, and emphasizing the stronger implementations of the laws and policies on tobacco control.

490 inspectors were trained on smokefree policy enforcement. These inspector would help to check the implementation of smokefree at subnational level.

Subnational efforts are being made to enhance implementation of tobacco control law. Pictured right officials from Kampong Cham educate cigarette sellers.
Indonesian Mayors and Regent Alliance for Tobacco Control and NCD Prevention

MOH and The Union worked together to enhance subnational political will for tobacco control. As the results, Indonesian Mayor and Regent Alliance was established in 2011 with 12 Mayors. The Alliance has now grown to more than 100 cities. Key objectives of the alliance are to i) develop and implement local regulations for 100% smokefree, ban tobacco advertising and promotion; ii) expand its membership to other cities and districts by sharing best practice models; iii) reciprocate the support of the MOH by backing its initiatives to consolidate tobacco control and implementation, NCD best-buys; and iv) advocate for FCTC accession, and adoption of other tobacco control provisions through legislation and regulation.

The Alliance has been the main driver of subnational progress in smokefree, ban tobacco advertising and preventing industry interferences. In 2018, The Alliance reached out to 270 cities and districts and built policy awareness.

Lessons learnt:
The Alliance played a key role to gain subnational political will for tobacco control. Mayors have shown CHANGE!!

MAP PRESENTS 187 CITIES AND DISTRICTS ARE WITH 100% SMOKEFREE POLICY PROTECTING 118 MILLION POPULATION IN 2018
INDONESIA

Bogor

Bogor City (1.5 million pop.), is a pioneer in Tobacco Control in Indonesia. It was the first city to implement a smoking ban in public places in 2009. In 2014, the city decided to tackle tobacco advertising more aggressively, and Mayoral Regulation No. 3 of 2014 was born. In 2017 this was expanded to a ban on the display of tobacco products at the point-of-sale.

In 2018, Bogor city became again a fist city to introduce a new law No. 10, 2018 that bans electronic cigarettes, shisha and other similar products.

Within three months of being introduced, compliance with the tobacco display ban in retail outlets reached over 90%. Of the 269 retailers interviewed, 96.4% of them support ban display of tobacco products at POS.

In October 2018, the Indonesian Light Cigarette Producers Association (Gaprindo) and the Indonesian Retailers Association (Aprindo) filed a formal objection with the Ministry of Home Affairs and Ministry of Law and Human Rights about the bylaws issued by Bogor. However, the city government defended its decision and has stood by the ban on tobacco displays inside stores as an important part of protecting the city’s youth from being manipulated by tobacco advertising.

Lessons learnt: Mayor’s commitments, engagement of all government departments, civil society and religious organization, random inspection, enforcement, monitoring of compliance by No Tobacco Community and countering industry interferences are the key factors to success.
Depok

**Smoke Free**
Depok City issued a Local Law No. 3 Year 2014 on Smoke Free in 2014 followed by Depok Mayoral regulations number 126 year 2016 on enforcement and implementation of smokefree law.

In September 2018, the Mayor of Depok issued announcement letter to enforce Depok City’s smokefree law with especial focus to ban tobacco product at the point-of-sale (POS). This resulted a successful implementation of ban at POS. Pictures below show before and after.

In December 2018, just 3 months after the announcement to ban tobacco products at POS, compliance rates were found satisfactory at the level of 80.5% of the 400 retailers monitored.

Depok city is committed to enhance enforcement to smokefree, ban tobacco ads and ban display of tobacco products at POS. Several stakeholders including Depok Civil Policy (Satpol PP) have been actively engaged to show the difference. Picture below shows the orientation on enforcement to the Satpol PP.

Depok City Government targets to create a healthy city by achieving at least 85% compliance rates with smokefree law by 2020.
Denpasar City is the Capital of Bali Province with a population approximately 1 million. Denpasar was the first city awarded in 2019 for being one of the most liveable cities for children. Various efforts have been made by Denpasar City to create a healthy society. These efforts began with protecting the people from tobacco. Local regulation on smokefree No. 14 in 2013 and Mayor’s regulation number 7 2015 to ban outdoor tobacco advertising have been adopted. City government pays attention to make effective enforcement of the regulations. City Health Office in coordination with City Civil Police conducted inspection to check implementation. Below the pictures present enforcement activities.

A total of 1849 tobacco bill boards were removed in Denpasar by 2014. A total revenue from tobacco ads from 2009 to 2013 was rp 0.005 trillion that was 0.27% contribution to the total revenue of rp 2.06 trillion during that period in Denpasar city. Despite zero tobacco advertising since 2014, city revenue continues to increase. It indicates that revenue from tobacco ads would not have any contribution to city’s revenue.

More than 250 venues were assessed in each survey by the Undayana Central. Compliance with smokefree is improving. Compliance was defined with a set of indicators (observed no-smoking signage, no active smoking, no cigarette butts and astray, no smoking room/area).

Lessons learnt: sustained Mayor’s commitments with active engagement of City Health Office, City Civil Police; technical assistance from The Union and Udayana Central in policy development, implementation and monitoring are the key success factors.

Kelly Larson from Bloomberg Philanthropies, Tara S Bam from The Union, and team from Udayana Central meeting with Mayor of Denpasar city in 2019
Jakarta

Jakarta has adopted the 100% smoke-free area regulation since 2010 following the amendment of the partial smoke-free area regulation in 2005. Public places including offices, malls, hotels, restaurants, schools, health facilities, worship places, entertainment venues, children playground, public transport, etc. must be smoke free. The regulation aims to protect people from tobacco smoke.

Jakarta also has regulated tobacco tax for health promotion that ensures sustainable funding for tobacco control (Law Number 2 Year 2014) and performance benefits for civil servant (Governor Regulation Number 149 Year 2017), which includes provision on disciplinary sanction and cuts in benefits for government employees who are found smoking in public places. A total of 11,500 public places monitored for smokefree.

A remarkable step has been taken by the Jakarta government to ban outdoor tobacco advertising and enforce the regulation (Law Number 9 Year 2014, Governor Regulation Number 1 Year 2015, Governor Regulation Number 244 Year 2015 and Governor Regulation Number 148 Year 2017). A total of 27,470 tobacco billboards were removed. Today, Jakarta is a 100% outdoor tobacco billboards free and continue to remove the indoor tobacco ads and aim display ban at point of sales.

Picture shows inspection team with hotel during the feedback session

INCREASING TREND OF GOVERNMENT REVENUE AFTER BANNED THE TOBACCO ADS SINCE 2016

Jakarta joined the Partnership for Healthy Cities with aim to achieve 100% tobacco free city
Klungkung

The city is led by I Nyoman Suwirta who is committed to creating a healthy city. In 2014 Klungkung introduced its first smokefree law, (Regulation No.1 of 2014) followed by a ban on advertising promotion and sponsorship in 2016. (Regent Regulation No.5 of 2016). All types of tobacco ads including 176 big tobacco bill-board were banned.

In 2018 Klungkung successfully introduced a ban of display of tobacco products at the point-of-sale. (Regent issued Circular No. 510/242/Diskop). Government ensured the enforcement. Mayor Suwirta in the field to check compliance. Mayor Suwirta rejected the tobacco industry - PT HM Sampoerna’s protest related to a ban on display of tobacco packs and a ban of tobacco ads..

To enhance the youth participation in tobacco control, Klungkung puts great hopes in the young generation of Klungkung to be able to become a prime mover in voicing the dangers of smoking. An empowerment program for youth called GEBRAK (Joint Anti-Smoking Youth Movement) and the Tobacco Control Student Ambassadors (KSPBR) have been launched in 2019. Picture at the right.

Tobacco free initiative was started with technical support from Udayana University with regular monitoring of smokefree and TAPS ban. The results show that compliance has been maintained and improved over time. More than 200 venues monitored in each survey.

Lessons learnt: decentralized enforcement at village level by engaging village heads, youth, and regular monitoring with strong support from Mayor and district government are the key learning.
Kulon Progo

Tobacco Control in Kulon Progo started in 2014 with a smokefree regulation no. 5 year 2014 and then followed up and reinforced with a mayoral regulation. It also bans the use and promotion of e-cigarettes and shisha in the city.

In 2018, 1000 volunteers were trained from 88 villages and 12 sub-districts. To enforce smokefree in their own jurisdictions. Majority of the public places are now smokefree in the district. Kulon Progo has already been declared a tobacco free city.

Mayor Dr Hasto Wardoyo with volunteers showing his commitments

Over 1500 Scouts members marked the Scout Day with a procession of the destruction of a tobacco and declared the Scouting Pioneer of the Anti-Tobacco Generation. Chairman of the local parliament and Deputy Mayor expanded the partnership with Youth as part of creating healthy environments.

In 2018, Kulon Progo implemented a ban of display of tobacco products at the point-of-sale. Before shown left. Unveiling of covered display pictured right with Mayor Hasto present.

The Union, MTCC Yogyakarta, and Ministry of Health provides technical, legal, monitoring and evaluation supports.

Lessons learnt: Sustained political leadership, networking and engagement with Scouts, religious leaders, village volunteers, all sectors of the government, regular inspections and monitoring are the key to success in Kulon Progo.
Yogyakarta city enacted a local law number 02 year 2017 about smoke-free and a subsequent mayoral regulation number 22 year 2017 has been released to make effective enforcement and implementation. Implementation has been started in second half of 2018.

A total of 790 venues were monitored to assess the compliance with smoke-free policy by the Udayana University in collaboration with Johns Hopkins University and The Union in early 2019. When observing evidence of smoking, the majority of places of worship (62%) were 100% smoke-free however less than one third (28%) of all hospitality venues were 100% smoke-free. The majority of government buildings (85%) had smoke-free signage posted; approximately one quarter of hospitality venues (24%) and places of worship (24%) had smoke-free signage posted. To enhance enforcement, city government has increased its activities such as distribution of no smoking signage, random check of the venues and provide the feedback to the building mangers.

Satgas ktr monitoring smoke-free implementation in public places

In early 2018 the local government of Yogyakarta city established a supervisory team for smokefree called satgas ktr. The team is responsible for monitoring smokefree and building awareness on laws and regulation at subdistrict and village level.

Yogyakarta city government announced to make the city free from tobacco advertising and promotion, achieve at least 85% compliance rates with smokefree implementation by 2020.
Bengaluru

To support the national law COPTA- cigarette & order tobacco products act, Bengaluru has taken several initiatives. Some highlights include the formation of a task force consisting of policy makers, local police, tobacco control experts and civil societies. Task force will work closely with the mayor and Municipality commissioner to implement lessons learnt:

- Strong comprehensive policies, data and evidence needed to support change

A recent survey showed a 21% increase in the compliance to display of “No smoking signage in public places in Bengaluru as well as a 7.85% reduction in public places.

In 2018, Bengaluru Municipality issued a circular to remove the designated smoking areas in all public places, therefore making these places truly smokefree.

Lessons learnt: strong comprehensive policies, data and evidence needed to support change
MALAYSIA

Kuala Lumpur

In Malaysia, about 20,000 people die annually due to tobacco related diseases. It has been estimated that more than 15% of the total hospitalisations in Malaysia are due to smoking-related illnesses. According to the National Health Morbidity Survey 2015, the overall prevalence of smoking in Malaysia is 22.9% and in Kuala Lumpur, it is about 19.1%.

Smokefree enforcement has been accelerated by engaging all sectors of the community.

Kuala Lumpur City Hall (DBKL) has taken an initiative to reduce the prevalence of smoking and to educate non-smokers on the risks associated with second-hand smoke. The Kuala Lumpur city participated in the Partnership for Healthy Cities in February 2018 with aim to enhance of smokefree enforcement achieving at least 85% compliance rates. DBKL has pledged to make Kuala Lumpur a smoke-free city by 2025 - an initiative towards Smoke-Free Kuala Lumpur or Kuala Lumpur Bebas Asap Rokok (KLBAR).

KL city holds frequent awareness programs for youth and adults

KL city’s tobacco control activities aim to engage all sectors of the community. The Working class are particularly vulnerable population. Left is an awareness event catered specifically for construction workers in KL.

DBKL leads to change. DBKL officials met Honourable Minister of Health for strong smokefree enforcement drive in Malaysia

A total of 400 venues were assessed to check the compliance to smokefree in KL. Active smoking was not observed in majority of the venues.

Vital Strategies and The Union provide technical assistance in framing and designing the program.
**BURDEN:** 64,000 Myanmar citizens die every year due to tobacco-related diseases and 28% of those deaths are among the poorest income quintile. Every year, tobacco costs Myanmar 2.6 trillion MMK, which is equivalent to 3.3% of GDP in 2016.

**POLICIES:** “The Control of Smoking and Consumption of Tobacco Product Law” was enacted in May 2006 with subsequent regulation in 2014 and 2016. Smoking is prohibited in indoor public places, workplaces, and public transportation. All forms of tobacco advertising and promotion are prohibited, especially through the mass media and other means of wide distribution, including outdoor advertising. In Myanmar, health warnings need to cover 75 percent of the front and back of the tobacco packages. Example of a cigarette pack above.

**POLITICAL WILL:** Myanmar committed to establish the Myanmar Subnational Government Alliance for Tobacco Control and Prevention of Noncommunicable Diseases (NCDs), with the time bound action plan to implement tobacco control and NCD prevention programmes at the subnational level.

**SMOKEFREE:** Ministry of Health and Sports works together with respective State and Regional NCD teams and partner organizations for developing smoke-free areas. Moreover, MOHS also collaborates with Ministry of Education and organizes the capacity building workshops for creating smoke-free universities. Almost all medical universities in Myanmar have become smoke-free. By working together with local governments and partner organizations, MOHS also initiates smoke-free Heritage sites and Tourist attractions in Bagan, Inlay, Mawlamyaing, Bago and Mandalay cities.
PHILIPPINES

Balanga

Balanga City is 100% smoke-free. The city achieved this status in a variety of ways. Accompanying the many signs in the city that remind its residents and visitors not to smoke, are groups of counsellors who engage smokers and convince them to stop. This is reinforced with heavy fines and penalties for smoking, including the closure of business or revocation of business licences.

The City Government of Balanga renewed its commitment to eliminate tobacco use. Clad in bright red shirts, city government employees led by Mayor Francis Anthony S. Garcia paraded along the streets on February 28 2017.

In line with the National No Smoking Month, the City of Balanga conducted a month-long educational and information campaign to raise awareness on the hazards and debilitating effects of tobacco and vape and to counter Tobacco industry’s tactics to lure the youth to become the replacement smokers.

Youth Health Ambassadors discussed the Smoke Free City Initiative. They urged every student to be part of the Tobacco Free Generation or the generation who are committed never to smoke in their life. Weight and nutritional status of students were also monitored for in line with an overall healthy lifestyle.

Lessons learnt: Eliminating tobacco and beating NCDs are possible by strictly enforcing policies and programs and engaging public in general.
Mayor Antonio Joseph R. Inton, fully committed to the implementation of the Philippines Tobacco Control Ordinance. The City won 2 consecutive Red Orchid Awards in 2017 and 2019.

**Beating NCDs**
Zumba and Fun Run, March 2019: The City of Hermosa aims to encourage its citizens to live an active life for a healthy body. This advocacy run is spearheaded by the office of the Bataan 2nd District Representative Jose Enrique “Joet” S. Garcia III to institutionalize learning a healthy and family-oriented lifestyle throughout the municipality as well as to educate and encourage youths in schools and in the community to be part of Tobacco Free Generation thus lowering and preventing the cases of Non-Communicable Diseases.

**Lessons learnt:** eliminating tobacco and beating NCDs are possible by strictly enforcing policies and programs and engaging public in general.

Mayor Inton and Cong. Jose Enrique S. Garcia III together with other Participants
SINGAPORE

Standardised packaging:
Singapore will implement standardised packaging for cigarettes pack by July 2020

All logos, colours, brand images and promotional information will be removed from the retail packaging of tobacco products. All permitted information such as brand and product names have to be displayed in a standard colour and font style.

Minimum 75% Graphic health Warning. The import, distribution, sale, offer for sale or possession for sale of non-compliant tobacco products in Singapore is an offence.

Increasing the minimum sale age for tobacco products
Singapore is gradually raising the legal age for smoking. On 1 January 2019 the legal age will be raised to 19, and will increase by an additional year in 2020 and 2021.

Because many smokers take up the habit before the age of 21 – and because the tobacco industry aggressively targets young adults – increasing the minimum sale age for tobacco products will complement proven strategies for reducing tobacco use.

SAFEGUARDING SINGAPOREANS FROM E-CIGARETTES

To protect the health and ensure the safety of all Singaporeans, from 1 February 2018. Under the Tobacco (Control of Advertisements and Sale) Act, a person must not import into Singapore, or distribute, sell, offer for sale or possess for sale in Singapore, any confectionery or other food product, or any toy, device or article -

i. that resembles, or is designed to resemble, a tobacco product;

ii. that is capable of being smoked;

iii. that may be used in such a way as to mimic the act of smoking; or

iv. the packaging of which resembles, or is designed to resemble, the packaging commonly associated with tobacco products

Any persons caught purchasing, using or having in their possession of emerging and imitation tobacco products in Singapore, are liable on conviction to a fine not exceeding $2,000.

SINGAPORE BANS SMOKING IN PUBLIC PARKS:
Singapore is committed to enhance healthy environments in public parks. Smoking in parks can carry fines of up to 2000 SGD.
Ermera

Municipal government bans smoking in all public places and work places including; education facilities, health facilities, hotels, restaurants, government offices, and public transport.

Municipal government fosters partnership with youth leaders, community based organizations, students, teachers, international partners and media to promote tobacco control and prevention of NCDs.

The President of Ermera Municipality took a lead role in supporting Ministry of Health Timor-Leste in adoption and implementation of the world largest pictorial health warning (92.5%) on tobacco packs in 2018.

The Union together with ANCT-TL provide technical support, skill development and monitoring and evaluation of the smokefree program in Ermera city. The support have been acknowledged by the Mayor of the city.

National Alliance for Tobacco Control Timor-Leste (ANCT-TL) conducted field activities such as awareness activities for youth, surveillance and retailers training workshop on law compliance in four municipals such as, Dili, Liquica, Ermera and Aileu. The retailer project started with monitoring and surveillance to the shops and kiosks in each municipal, the retailers who breaches tobacco law up to 3 were invited to participate in this program. A total of 95 retailers were trained and they have received a copy of the retailer tobacco law guidebook.

GOAL: Creating tobacco free healthy environments with achieving more than 90% compliance rates with smokefree in Ermera city.

Lessons learnt: subnational leadership can play an important role to improve national policies and programs.
Lessons learnt: Creative and unique solutions, engagement of the whole community are effective ways to tackle public health issues.

VIETNAM

Vietnam Provincial Alliance for Tobacco Control

The alliance was established in 2017 with aim to protect health of the people. The alliance works in implementation and enforcement of tobacco control laws and NCD prevention policies, capacity building and increase cooperation to transform social norms.

VPHA provides technical assistance to the alliance in Vietnam. To enhance the implementation of tobacco control, four new Senior Public Health Volunteer (SPHV) clubs in Thai Binh and Dong Thap have been established. Consultations with the members of the National Assembly from Thai Binh and Dong Thap help to strengthen implementation. Four training courses for trainers from provincial Medical colleges with 80 core lectures, 2 interdisciplinary inspector training courses and 4 SPHV training courses on TC have been conducted. For taking evidence related to TC law violations, a component of taking good photos of those violated the law have also been inserted into courses. This is considered as a first step in enhancing community participation in monitoring and supervision of tobacco control law implementation in Vietnam.

BEATING NCDS:
Senior Public Health Volunteer (SPHV) Clubs, a novel initiative

Pictures (above right) are volunteers in training. Public relations training prepare volunteers for addressing the public directly and through the local media. Volunteers also create smokefree signage (above left) and advise their respective communities on the laws. This initiative is an excellent way to keep the retired and elderly engaged in the community as well as active and healthy.
ACKNOWLEDGEMENTS

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We would also like to extend our gratitude for the support of the media, civil societies and NGOs that are passionate in their cause to protect people from the harms of tobacco and the prevention of non-communicable diseases.

APCAT IS SUPPORTED BY
ABOUT THE UNION

THE FIRST GLOBAL HEALTH ORGANISATION

The Union is a global scientific organisation with the mission to improve health among people living in poverty. We do that by conducting scientific research, working with governments and other agencies to translate research into better health for people around the world, and delivering projects directly in the field. The Union is made up of a global membership body of people who help to advance our mission, and scientific institute that implements public health projects within countries. For close to 100 years, we have been leaders in the fight against some of the world’s biggest killers including tuberculosis, lung diseases and tobacco use.

KNOW

We conduct research to provide evidence for public health policy and practice.

SHARE

We disseminate scientific knowledge to strengthen public health programmes.

ACT

We deliver services and conduct advocacy to safeguard people’s health.