

Meeting Report

WORKSHOP ON TOURISM AND SMOKE-FREE ENVIRONMENTS IN THE WESTERN PACIFIC



28–29 July 2016
Yokohama, Japan

WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR THE WESTERN PACIFIC

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MEETING REPORT

WORKSHOP ON TOURISM AND SMOKE-FREE ENVIRONMENTS IN THE
WESTERN PACIFIC

Convened by:

WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR THE WESTERN PACIFIC

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NOTE

The views expressed in this report are those of the participants of the Workshop on Tourism and Smoke-Free Environments in the Western Pacific and do not necessarily reflect the policies of the conveners.

This report has been prepared by the World Health Organization Regional Office for the Western Pacific for Member States in the Region and for those who participated in the Workshop on Tourism and Smoke-Free Environments in the Western Pacific in Yokohama, Japan, from 28 to 29 July 2016.

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Keywords:

Health promotion / Smoking cessation / Tourism
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SUMMARY

The Workshop on Tourism and Smoke-Free Environments in the Western Pacific was held from 28 to 29 July 2016 in Yokohama, Japan, during which representatives from the health and tourism sectors were invited to explore and discuss potential collaboration in working towards smoke-free environments.

The objectives of the workshop were:

- 1) to share experiences on collaborative approaches to promoting smoke-free tourism;
- 2) to discuss challenges and opportunities in promoting smoke-free environments at tourism sites; and
- 3) to identify collaborative action plans for the health and tourism sectors to work together towards smoke-free environments.

The promotion of smoke-free environments in collaboration with the tourism sector is still a new initiative; however, where it exists, collaboration between the health and tourism sectors has been shown to be effective, especially in enforcing smoke-free laws. A common misunderstanding in the tourism sector is that smoke-free legislation may drive away tourism. However, experiences in countries and cities with strong smoke-free policies show that these policies do not harm hospitality businesses, including bars, restaurants and other establishments. Mega events such as the Olympic Games and international sporting and cultural events that attract both domestic and international tourists present key opportunities for strengthening smoke-free laws and their enforcement.

Tobacco industry interference remains one of the biggest challenges in expanding smoke-free environments. Non-health agencies are often unaware of how their engagement with the tobacco industry is detrimental to the promotion of health policy.

Participants identified different areas on which to work, such as communication strategies or evidence and research, and outlined the activities, objectives, expected outcomes, other partners, timeline and the responsible person or agency to lead the activities.

Action plans specific to countries are listed below.

- 1) Australia – Share research and education campaigns on smoke-free tourism with WHO to help develop a regional knowledge base; issue a guidance note on Article 5.3 to government agencies.
- 2) Brunei Darussalam – Raise awareness among tourists to increase compliance and strengthen enforcement of smoke-free policies.
- 3) Cambodia – Raise awareness of smoke-free policies among business owners and tourists; build capacity among enforcement officers of the Ministry of Tourism; conduct research on tourist perceptions of smoke-free environments.
- 4) Fiji – Establish a working committee involving health and tourism sectors; conduct research to identify opportunities; develop a memorandum of understanding between ministries of tourism and health to strengthen the partnership for future activities.
- 5) Lao People's Democratic Republic – Strengthen collaboration between health and tourism sectors; provide training to tour guides to familiarize them with existing smoke-free policies; carry out a smoke-free boat racing festival.
- 6) Malaysia – Conduct research to assess potential impact of smoke-free initiatives on tourism; increase knowledge and awareness around benefits of smoke-free environment across ministries.

- 7) Mongolia – Convene a task force consisting of tourism and health ministries; make the new airport smoke-free; conduct campaigns, workshops and training with tourism sector to promote smoke-free environments; lobby for 100% smoke-free law.
- 8) New Zealand – Raise awareness among tourists and promote a smoke-free New Zealand in collaboration with the tourism sector; establish smoke-free conservation sites; conduct a poll on expansion of smoke-free environments.
- 9) Palau – Build connections with key stakeholders; conduct surveys with tourists to identify opportunities; place signage on tobacco-free tourism sites.
- 10) Republic of Korea – Raise awareness at international airports and through the tourism bureau using local evidence collected from research on smoke-free tourism.
- 11) Viet Nam – Build a partnership between the health and tourism ministries; collaborate with travel agencies, tourism schools and hotels to raise awareness among tourism workers and to reduce second-hand smoke in tourism sites.

Recommendations for Member States:

- 1) Member States are encouraged to strengthen their smoke-free policies for indoor public places and, where possible, to extend the smoking ban to outdoor public places and tourist sites. Particular attention should be paid to ensuring that effective enforcement measures are in place to increase effectiveness of the laws.
- 2) Member States are encouraged to increase synergies and collaboration between the health and tourism sectors on the issue of smoke-free policies.
- 3) Member States are encouraged to capitalize on future mega events to promote smoke-free policies and, if possible, other tobacco control policies.
- 4) Member States are encouraged to remain vigilant to tobacco industry interference with regard to tobacco control policies.
- 5) Member States are encouraged to pursue their action plans developed at the workshop.

Recommendations for WHO:

- 1) WHO is requested to create a database or portal, or link up with existing ones, to collate smoke-free policies from around the world, including research and evidence on the policy impact of smoke-free laws.
- 2) WHO should update the guide on smoke-free mega events, incorporating some of the discussion outputs arising from this workshop.

1. INTRODUCTION

1.1 Meeting organization

The sixty-fifth session of the WHO Regional Committee for the Western Pacific endorsed the *Regional Action Plan for the Tobacco Free Initiative in the Western Pacific (2015–2019)* to guide Member States in strengthening national policies, programmes and actions to accelerate implementation of the WHO Framework Convention on Tobacco Control (FCTC). The Meeting on Implementation of the Regional Action Plan was convened at the WHO Regional Office for the Western Pacific in Manila, Philippines, from 19 to 21 August 2015. The meeting highlighted the importance of engagement with local leaders and the tourism sector in strengthening tobacco control.

The Workshop on Tourism and Smoke-Free Environments in the Western Pacific was held from 28 to 29 July 2016 in Yokohama, Japan, during which representatives from the health and tourism sectors were invited to explore and discuss potential collaboration in working towards smoke-free environments.

1.2 Meeting objectives

The objectives of the workshop were:

- 1) to share experiences on collaborative approaches to promoting smoke-free tourism;
- 2) to discuss challenges and opportunities in promoting smoke-free environments at tourism sites; and
- 3) to identify collaborative action plans for the health and tourism sectors to work together towards smoke-free environments.

2. PROCEEDINGS

2.1 Opening session

Dr Itsuro Yoshimi from the Ministry of Health, Labour and Welfare of Japan welcomed participants to Yokohama, and Mr Kelvin Khoo opened the workshop. Yokohama is the capital of Kanagawa Prefecture, the first subnational jurisdiction in Japan to adopt a subnational ordinance on indoor public smoking, marking the beginning of a new stage of public smoking bans. As the host of the Olympic Games in 2020, Japan has an opportunity to develop a smoke-free policy for this mega event. The success of smoke-free initiatives requires collaboration between the health and tourism sectors. These initiatives do not harm the tourism industry. Instead, the positive image of smoke-free environments attracts tourists and enhances tourism. Dr Shin Young-soo, WHO Regional Director for the Western Pacific Region, sent his regards to workshop participants.

Participants introduced themselves. The list of participants is available at Annex 1. The programme of activities is available at Annex 2.

Ms Mina Kashiwabara, Technical Officer, Tobacco Free Initiative, WHO Regional Office for the Western Pacific, highlighted the importance of “followers” to the success of a movement. Effective interventions require collaboration. With so many participants being ministry employees, it is important to identify “followers” who can help to spread the ideas within each country.

2.2 Panel Discussion I: Smoke-free policy

Tobacco is the leading preventable cause of death in the world. Even non-smokers, such as children, are harmed due to second-hand smoke. Article 8 of the WHO FCTC requests Parties to protect their people from smoking in public places. This Article includes some key principles:

- 1) Effective protection means the elimination of tobacco smoke.
- 2) Protection means complete elimination.
- 3) Protection needs to be legislated.
- 4) Protection should be universal.

Complete elimination of tobacco smoke cannot be achieved unless there are laws against smoking indoors. Studies have shown that ventilation is not effective; therefore, designated smoking areas are not effective in protecting people. These laws should be universal so that non-smokers are not exposed to second-hand smoke in any indoor public place, including workplaces.

Tobacco companies have become big funders of designated smoking areas as a way to maintain their business. The industry also lobbies heavily and disputes the evidence on the harms of tobacco. Countries with weak tobacco control are especially vulnerable to these tactics (see www.tobaccotactics.org for more information).

The tobacco industry claims that smoke-free initiatives have a negative impact on economics. However, a major review of 97 studies concluded that the best-designed studies reported either no impact or a positive impact of smoke-free laws on restaurants and bars. In the case of Hong Kong SAR (China), most indoor places are already smoke-free, but this has not affected tourism at all. In New Zealand, 90% of the public supported a smoking ban in restaurants.

The main risks for countries are the following:

- 1) When drafting legislation, the definition of an outdoor area should be made clear to achieve full protection and enforcement. Businesses such as restaurants should be consulted so that public support can be generated.
- 2) Evidence should be reviewed to counter the claims made that smoke-free policies hurt the economy.
- 3) Businesses may request designated smoking areas or phasing in of the policies, but they should be advised that the cost of establishing and maintaining these areas is high.

2.3 Panel Discussion II: Public health in tourism

Pacific Islands

Ms Alisi Lutu, Marketing Manager and Acting Research and Statistics Manager, presented on the South Pacific Tourism Organization (SPTO), an intergovernmental body for tourism marketing and development in the Pacific islands, consisting of 17 Pacific island government members and China. In the Pacific, smokeless tobacco and mixing tobacco with betel nut are quite common, leading to an unattractive and unhygienic environment that negatively affects the tourism sector. Some countries, such as Cook Islands, Fiji, Palau, Papua New Guinea, Solomon Islands, Tonga, Tuvalu, and Vanuatu, have made strides in tobacco taxation policies and advertisement of health warnings related to tobacco use. In total, 14 Pacific island countries have ratified the FCTC. Research on tobacco control in the

Pacific island countries is as yet limited.

A common argument among countries against comprehensive smoke-free legislation is that it will drive away tourism. However, four of the top five tourism destinations according to the World Tourism Organization have strong or comprehensive smoke-free laws. It is important for national tourism organizations to work together with the ministries of health in their respective countries to increase awareness of the health risks of tobacco use. SPTO would like to have a discussion with WHO on a possible memorandum of understanding to promote healthy workplaces in the tourism industry, to promote physical activity, and to control noncommunicable diseases among tourism workers.

Cambodia

Mr Doung Panhavuth, Deputy Director, Tourism Industry Department, Ministry of Tourism, presented on smoking and tourism in Cambodia. In June 2011, the Ministry of Tourism banned smoking in workplaces and tourism-related businesses in all cities and provinces in the country. A National Workshop on Smoke-Free Environments in the Tourism Sector was also held on 20 July 2016.

Mr Panhavuth shared some of the challenges faced, including lack of awareness about the responsibility of tourism-related business owners and managers, lack of cooperation in implementing the ordinance, and inadequate budget to conduct workshops to increase awareness. To facilitate compliance with the smoke-free policy within the tourism sector, the ministry plans:

- 1) to cooperate with relevant ministries, the private sector, nongovernmental organizations, and development partners and citizens;
- 2) to include some smoke-free-related conditions in the application form for tourism licenses; and
- 3) to conduct workshops to increase awareness of the ordinance on smoke-free environments in the tourism sector.

The Ministry of Tourism also developed implementation guidelines detailing the responsibilities of business owners in tourism to help them comply with the smoke-free policy. By working together, tourism and health ministries can share their mutual concerns and issues.

During the discussion, issues regarding tobacco industry interference at the subnational level were raised. The tobacco industry in Japan has developed partnerships with the Government for the creation of designated smoking rooms and areas. Implementation of any smoke-free laws would have to be careful to take these tactics into consideration.

2.4 Group Exercise I: Burning issues and expectations

This group exercise was led by Ms Mina Kashiwabara. Participants were divided into three groups (Mt. Fuji, Sakura and Sushi) and asked to share their responses to the following questions:

- 1) What are the urgent issues related to tourism and tobacco control/smoke-free initiatives in your country?
- 2) What would you like to get out of this workshop?
- 3) What additional information would be useful to your work?

Expectations shared by both the health and tourism sectors included enhanced collaboration, implementation of existing policies, learning about best practices that encourage the tourism and health sectors to collaborate in creating smoke-free environments, and stronger enforcement of laws.

Expectations specific to each sector were also raised. For instance, the health sectors wished to learn about practical ways to work with the tourism sector to expand smoke-free areas, and the tourism sector was particularly interested in learning how smoke-free environments would benefit tourism growth.

Common issues identified included those related to enforcement, educating the public, raising community awareness, agreement and collaboration among different sectors, communicating and disseminating information, and interference from the tobacco industry.

2.5 Panel Discussion III (part 1): Smoke-free jurisdictions and sites, special facilities and outdoor areas

Hong Kong SAR (China)

Dr Jeff Lee, Head, Tobacco Control Office, Department of Health, presented on smoke-free laws in Hong Kong SAR (China), which include bans on advertisements and sponsorship in the media, and smoke-free public transportation. The economic impact of smoke-free laws on the tourism and hospitality industries has been positive, with increases in tourist arrivals and expenditure, and decreases in levels of tobacco chemicals in restaurants. However, there are still some challenges. Outdoor areas of restaurants and bars are not smoke-free, and smokers are not penalized. Furthermore, there are still smoking rooms in the airport and at hotels. The tourism sector has been involved in promoting a smoke-free environment by advertising the harms of second-hand smoke. Some shopping centres try to promote a smoke-free atmosphere by organizing family-friendly activities.

Australia

Ms Jackie Davis, Assistant Secretary, Tobacco Control Branch, Department of Health, described the efforts of the Australian Government to reduce tobacco use in the last two decades, leading to a reduction of smoking from 24% in 1991 to 12.5% in 2015. Under Australia's previous *National Tobacco Strategy*, subnational governments across the country progressively implemented smoke-free legislation covering many indoor and outdoor public places. Parks, beaches and commercial outdoor dining areas are largely under the jurisdiction of subnational governments, and smoking restrictions vary. Australia's current *National Tobacco Strategy 2012–2018* sets out its current priorities in tobacco control, which include reduction of exemptions to smoke-free workplaces, public places and other areas. Based on findings from approximately 170 000 survey respondents to Australia's International Visitor Survey over the last four years, smoking bans and restrictions in Australia do not appear to be a common concern for international visitors. Recommendations for future smoke-free environments include:

- 1) undertaking extensive stakeholder consultation;
- 2) using public education campaigns to increase community support;
- 3) considering a suitable lead time to ensure a smooth transition to new smoking bans; and
- 4) supplementing new smoking bans with appropriate compliance and enforcement activities.

2.6 Panel Discussion IV: From mega events to smoke-free environments

China

In 2008, the Government of the People's Republic of China used the Beijing Olympics as a platform to expand smoke-free initiatives. Various campaigns were launched to educate the public about the harms of second-hand smoke. Unfortunately, because there were no penalties for noncompliance, some restaurants went back to allowing smoking after the Olympics. In 2014, the law was amended to

make all public areas smoke-free. Congress passed a 100% smoke-free law, thus creating a fair environment where businesses do not have to worry that their customers will choose a smoking venue over a smoke-free venue.

Lao People's Democratic Republic

The Lao People's Democratic Republic made the 25th Southeast Asian (SEA) Games in 2009 smoke-free by adopting the following strategy: developing the policy; holding meetings with the key stakeholders and SEA Games Committee to mobilize support and participation; conducting public education on smoke-free environments; and monitoring the implementation of the regulation. The tourism sector participated by making hotels, guesthouses, restaurants and tourist sites smoke-free, and by posting "No smoking" signs in places of business. The public was educated through the media. Fifty volunteers were trained to visit and monitor smoking compliance at various sites and to issue verbal warnings to smokers. Daily reports were made to the Ministry of Health SEA Games task force and to the SEA Games Committee.

As a result of the smoke-free SEA Games, all national games in the country became smoke-free as well. Furthermore, more provincial governors issued and implemented smoke-free regulations; the Government issued the Prime Minister's decree banning tobacco advertising, promotion and sponsorship in 2010; and the Ministry of Education and Sports issued 100% smoke-free regulation in 2012. Mega events are good opportunities to champion smoke-free initiatives.

In terms of challenges, there were no penalties for violations of the smoke-free laws, smoking rooms were still allowed in workplaces; there were not enough volunteers; and there was lack of cooperation in the private sector, especially with restaurants.

2.7 Panel Discussion III (part 2): Smoke-free jurisdictions and sites, special facilities and outdoor areas

Dr Domilyn Villarreiz, FCTC Programme Manager, discussed some of the elements that apply to creating smoke-free environments. The South East Asian Tobacco Control Alliance (SEATCA) has held workshops in 2011, 2014 and 2015, working to make heritage sites smoke-free. Organizationally, governments can work with task forces or nongovernmental organizations, and there needs to be political will to stop the use of tobacco. Strategies can differ from city to city, but media promoting a smoke-free culture can help. Advertisements by the tobacco industry could be regulated. Implementation and enforcement are other key elements. There are now a number of smoke-free heritage sites; however, at the moment, being smoke-free is not a criterion for becoming a world heritage site.

2.8 Panel Discussion V: Challenges faced

ASEAN countries

Dr Villarreiz described the biggest challenge to creating smoke-free environments as interference by the tobacco industry, which can be both domestic and international. The tobacco industry lobbies against regulations because these reduce their consumer base and their profits. While tobacco companies may be overtly represented by law firms, public relations agencies and lobbyists, some associations or groups may not appear to be connected to the industry but are funded by them and represent their interests; one challenge is identification of these organizations. The tobacco industry wishes to dilute or weaken tobacco control policies and to delay enactment or implementation of laws.

Some of the strategies used are: manoeuvring to hijack the political and legislative process; exaggerating the economic importance of the tobacco industry; manipulating public opinion to gain the appearance of respectability; fabricating support through front groups; discrediting proven science; and intimidating governments through litigation or threats of litigation.

Article 5.3 of the FCTC states, “In setting and implementing their public health policies with respect to tobacco control, Parties shall act to protect these policies from commercial and other vested interests of the tobacco industry in accordance with national law.” One critical strategy to protect these policies is to de-normalize the tobacco industry and to mobilize social support. However, when tobacco control organizations are transparent about their meetings with the tobacco industry, the latter may create the impression that they are being consulted about tobacco control laws and may misuse the information to suggest that they are being engaged positively. They may also attempt to spread misinformation, such as the claim that tourism will be negatively impacted by smoke-free laws. One strategy is to keep releasing evidence that refutes these claims. Continued advocacy is also a key to success. Another challenge is that agencies may not have the resources to conduct their own research; as such, there is a need to facilitate a policy-driven research agenda. All stakeholders should be brought together to discuss the research gaps that need to be filled.

Malaysia

In Malaysia, the smoke-free implementation strategy utilizes both top-down and bottom-up approaches. Regulation 11 prohibits smoking in 21 different kinds of locations such as sports and shopping complexes, public transportation and air-conditioned restaurants. Under Regulation 22, communities themselves can start smoke-free initiatives. Some success stories include Malacca, Johor, Penang, Terengganu and Kelantan. The challenges faced are in the following areas:

- 1) Policy and regulations
- 2) Gaps in the current regulations
- 3) Stand-alone tobacco act still in draft form
- 4) Enforcement
- 5) Lack of human resources to handle smoke-free issues
- 6) Low buy-in levels from people or the local communities
- 7) Industry players’ engagement
- 8) Lack of cooperation from industry players
- 9) Need to cater to both smoking and non-smoking customers
- 10) Empowerment
- 11) Lack of cooperation from the public
- 12) Low level of awareness about non-smokers’ rights
- 13) Reluctance of smokers to obey the orders

2.9 Group Exercise II: Identifying challenges and ways to counteract

The groups were asked to discuss and share their responses to the following questions:

- 1) What types of challenges related to tourism and tobacco control have you encountered in your country related to specific issues?
- 2) Are there challenges that are more dominant or problematic than others?
- 3) What would help to overcome those challenges?

Some of the challenges mentioned were lack of funding and human resources, not having enough governmental support, fake evidence disseminated by the tobacco industry using front groups, and messages not being strong enough or well-understood by the public/tourists. Some countermeasures brought up included earmarking funds for tobacco control, raising permit fees, using mass media to educate the public and to disseminate evidence-based research, and using globally recognized symbols so that the message can be easily understood by tourists.

See Annex 3 for a table summarizing the issues, challenges and countermeasures that were identified.

2.10 Panel Discussion VI: Ensuring compliance

Fiji

Compliance is the degree to which a law is being obeyed or followed. Enforcement of smoke-free laws can be performed by policy-makers, police officers and sanitation inspectors, and enforcement mechanisms can vary from country to country. Penalties can be in the form of fines or other monetary penalties.

In Fiji, the Tobacco Control and Enforcement Unit (TCEU) was formed in 2004 after ratification of the FCTC. Currently, there are eight staff members in charge of surveillance inspections, compliance and enforcement of tobacco control legislation. Besides enforcement, TCEU is also tasked with the following:

- 1) community education/awareness on tobacco-related issues;
- 2) expansion and conversion of public places to become smoke-free settings;
- 3) smoking cessation programmes for those wanting to quit; and
- 4) regulation of manufacturers, importers, wholesalers, distributors and retailers through the Registration and Licensing System to eliminate incidences of illicit trade.

Different monetary penalties apply to different violations of the tobacco control laws. Offenders are issued a tobacco control fixed penalty notice (FPN), which automatically becomes a summons 21 days from the date of booking. The case disposal rate, which includes booking to prosecution to conviction, is at 95%. Smoking prevalence decreased from 38% in 1999 to 30.8% in 2011.

The challenges faced by the TCEU are staff shortages—eight officers cover a population of approximately 900 000 people in terms of both awareness and enforcement—and lack of full-time transportation. The lessons that can be learnt from Fiji's experience are as follows:

- 1) Establishment of a unit for tobacco control enforcement and dedicated officers are recommended.
- 2) FPNs help make the enforcement process more efficient and powerful.
- 3) Collaboration with local police and other agencies is pivotal.
- 4) Enabling enforcement officers to prosecute enhances efficiency.
- 5) Enforcement can lead to greater awareness.

New Zealand

In 2011, the Government of New Zealand adopted an aspirational goal of being smoke-free by 2025, interpreted to mean an adult smoking rate of less than 5%, to be achieved equally across all major ethnicities. The Smoke-free Environments Amendment Act of 2003 resulted in a full indoor workplace smoking ban. Approximately 50 smoke-free enforcement officers (SFEOs) around the country are responsible for compliance and follow-up on complaints. One of the challenges of

enforcement is that an “internal” area is defined as an area that is “substantially enclosed”; however, what constitutes “substantially enclosed” is not defined in the legislation. Reasonable practicable steps that the duty holder (that is, licensee or employer) must undertake include removing ashtrays, having smoke-free signage, and having staff monitor the area. However, there are no offenses in the legislation related to the actual act of smoking, and few prosecutions have been made since 2004. Recommendations include increasing communication, developing public awareness campaigns using mass and social media and signage, and talking with hospitality groups and employers and using their networks to pass on information. Public opinion polls show increasing support for restrictions on smoking indoors in workplaces and public spaces, which can lead to more community-led initiatives and a stronger role for local government.

2.11 Group Exercise III: Coordination

Participants were asked to share countermeasures or proposed solutions, activities for collaboration between the health and tourism sectors, and expected outcomes of these activities. See Annex 4 for a summary of these suggestions.

2.12 Group Exercise IV: Action plan development

Participants identified different areas on which to work, such as communication strategies or evidence and research, and outlined the activities, objectives, expected outcomes, other partners, timeline and the responsible person or agency to lead the activities.

Action plans specific to countries are listed below.

- 1) Australia – Share research and education campaigns on smoke-free tourism with WHO to help develop a regional knowledge base; issue a guidance note on Article 5.3 to government agencies.
- 2) Brunei Darussalam – Raise awareness among tourists to increase compliance and strengthen enforcement of smoke-free policies.
- 3) Cambodia – Raise awareness of smoke-free policies among business owners and tourists; build capacity among enforcement officers of the Ministry of Tourism; conduct research on tourist perceptions of smoke-free environments.
- 4) Fiji – Establish a working committee involving health and tourism sectors; conduct research to identify opportunities; develop a memorandum of understanding between ministries of tourism and health to strengthen the partnership for future activities.
- 5) Lao People’s Democratic Republic – Strengthen collaboration between health and tourism sectors; provide training to tour guides to familiarize them with existing smoke-free policies; carry out a smoke-free boat racing festival.
- 6) Malaysia – Conduct research to assess potential impact of smoke-free initiatives on tourism; increase knowledge and awareness around benefits of smoke-free environment across ministries.
- 7) Mongolia – Convene a task force consisting of tourism and health ministries; make the new airport smoke-free; conduct campaigns, workshops and training with tourism sector to promote smoke-free environments; lobby for 100% smoke-free law.
- 8) New Zealand – Raise awareness among tourists and promote a smoke-free New Zealand in collaboration with the tourism sector; establish smoke-free conservation sites; conduct a poll on expansion of smoke-free environments.
- 9) Palau – Build connections with key stakeholders; conduct surveys with tourists to identify opportunities; place signage on tobacco-free tourism sites.

- 10) Republic of Korea – Raise awareness at international airports and through the tourism bureau using local evidence collected from research on smoke-free tourism.
- 11) Viet Nam – Build a partnership between the health and tourism ministries; collaborate with travel agencies, tourism schools and hotels to raise awareness among tourism workers and to reduce second-hand smoke in tourism sites.

Country-specific action plans are available in Annex 5.

3. CONCLUSIONS AND RECOMMENDATIONS

3.1 Conclusions

Conclusions that were drawn from the workshop include the following:

- 1) Promoting smoke-free environments in collaboration with the tourism sector is still a new initiative, yet where it exists, collaboration between health and tourism sectors has been effective, especially in enforcing smoke-free laws. The health sector must first gain buy-in from the tourism sector. Compliance can be enhanced by education targeting stakeholders.
- 2) A common misunderstanding among the tourism sector is that smoke-free legislation may drive away tourists. However, experiences in countries and cities with strong smoke-free policies show that smoke-free policies do not harm hospitality businesses, including bars, restaurants and other establishments.
- 3) Mega events such as the Olympic Games and international sporting and cultural events that affect movements of domestic and international tourists present key opportunities for strengthening smoke-free laws and their enforcement.
- 4) Tobacco industry interference remains one of the biggest challenges in expanding smoke-free environments. Non-health agencies are often unaware of how their engagement with the tobacco industry is detrimental to health policy.

3.2 Recommendations

3.2.1 Recommendations for Member States

- 1) Member States are encouraged to strengthen their smoke-free policies for indoor public places and, where possible, to extend the smoking ban to outdoor public places and tourist sites. Particular attention should be paid to ensuring that effective enforcement measures are in place to increase the effectiveness of the laws.
- 2) Member States are encouraged to increase synergies and collaboration between the health and tourism sectors on the issue of smoke-free policies.
- 3) Member States are encouraged to capitalize on future mega events to promote smoke-free policies and, if possible, other tobacco control policies.
- 4) Member States are encouraged to remain vigilant to tobacco industry interference with regard to tobacco control policies.
- 5) Member States are encouraged to pursue their action plans developed at the workshop (see Annex 3).

3.2.2 Recommendations for WHO

- 1) WHO is requested to create a database or portal, or link up with existing ones, to collate smoke-free policies from around the world, including research and evidence on the policy impact of smoke-free laws.

- 2) WHO should update the guide on smoke-free mega events, incorporating some of the discussion outputs arising from this workshop.

ANNEXES

Annex 1. List of participants

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Annex 2. Programme of activities

Day 1, Thursday 28 July

08:40–09:00	Registration	
09:00–09:15	Welcome address	<i>Mr Kelvin Khow</i>
09:15–09:35	Introduction of participants and overview of the workshop	<i>Mr Kelvin Khow</i>
09:35–10:00	Group photo and healthy break	
10:00–10:10	Tourism and tobacco control: why work together?	<i>Ms Mina Kashiwabara</i>
10:10–11:00	Panel discussion I: Smoke-free policy <ul style="list-style-type: none">– Updates on the WHO Framework Convention on Tobacco Control (FCTC) Article 8: Smoke-free environments– The global business case and evidence base for smoke-free environments	<i>Ms Mina Kashiwabara</i>
11:00–12:00	Panel discussion II: Public health in tourism <ul style="list-style-type: none">– Pacific Islands– Cambodia	<i>Moderator: Mr Kelvin Khow</i>
12:00–13:00	Lunch	
13:00–13:40	Group exercise I: Burning issues and expectations	<i>Moderator: Ms Mina Kashiwabara</i>
13:40–14:00	Sharing of outcomes	
14:00–15:30	Panel discussion III (part 1): Smoke-free jurisdictions and sites, special facilities and outdoor areas (part 1) <ul style="list-style-type: none">– Hong Kong Special Administrative Region (China)– Australia	<i>Moderator: Dr Luminita Hayes</i>
15:30–16:00	Poster session and healthy break	
16:00–16:50	Panel discussion IV: From mega events to smoke-free environments <ul style="list-style-type: none">– Olympic Games, Beijing, China– Southeast Asian Games (SEA) Games, Lao People's Democratic Republic	<i>Moderator: Dr Anne Jones</i>
16:50–17:00	Wrap-up	<i>Mr Kelvin Khow</i>
18:00–20:00	Welcome Reception	

Day 2, Friday 29 July

09:00–09:05	Recap of Day 1	<i>Ms Mina Kashiwabara</i>
09:05–09:20	Panel discussion III (part 2): Smoke-free jurisdictions and sites, special facilities and outdoor areas (part 2) <ul style="list-style-type: none">– Smoke-free cities and world heritage sites	<i>Moderator: Mr Kelvin Khow</i> <i>Dr Domilyn Villarreiz</i>
09:20–10:10	Panel discussion V: Challenges faced <ul style="list-style-type: none">– Industry interferences– Challenges and strategies: from Malaysian perspective	<i>Moderator: Professor Sophia Chan</i> <i>Dr Domilyn Villarreiz</i> <i>Dr Norma Sabtu</i>
10:10–10:30	Group exercise II: Identifying challenges and ways to counteract	<i>Ms Mina Kashiwabara</i>
10:30–10:45	Healthy break	
10:45–11:00	Group exercise II: Identifying challenges and ways to counteract (continued)	
11:00–11:20	Sharing of outcomes	
11:20–12:00	Panel discussion VI: Ensuring compliance <ul style="list-style-type: none">– Fiji– New Zealand	<i>Moderator: Dr Domilyn Villarreiz</i>
12:00–13:00	Lunch	
13:00–14:00	Group exercise III: Coordination	<i>Ms Mina Kashiwabara</i>
14:00–15:00	Group exercise IV: Action plan development	<i>Ms Mina Kashiwabara</i>
15:00–15:15	Healthy break	
15:15–16:00	Sharing of outcomes	
16:00–16:15	Synthesis and the way forward	<i>Dr Luminita Hayes</i>
16:15–16:30	Closing remarks	<i>Mr Kelvin Khow</i>

Annex 3. Group Exercise II

The issues, challenges and countermeasures that each group identified are presented in the table below.

Team Mt. Fuji
<p>Issues:</p> <ul style="list-style-type: none"> • Strong tobacco control law with enough funds • Enforcement in law and legislation • Concept of “healthy tourism” • Community buy-in • Strong national support • Health is not categorized under visitor satisfaction • Tobacco industry interference
<p>Challenges:</p> <ul style="list-style-type: none"> • Not enough money—need a sustainable funding mechanism • Low political commitment • Competing priorities of tobacco control enforcers • Low public awareness • Not enough strong support from government • Lack of funding for public awareness campaign • Legislation is not comprehensive • Lack of tobacco control fund • Shortage of tobacco control staff • Health comes after safety and satisfaction in terms of priority in tourism • Multisectoral collaboration weak
<p>Countermeasures:</p> <ul style="list-style-type: none"> • Alliance for tobacco control • Public outreach • Earmarked funding source to support enforcement efforts (for example, staffing, training) • Mass media support • Raise the permit fees extremely high • Strong community mobilization • Improve task force team • Stronger partnership between health and tourism • Improve inter-section system (for example, health, tourism and others)

Team Sakura
<p>Issues:</p> <ul style="list-style-type: none"> • Lack of consumer research (impact of smoke-free initiatives on tourist behaviour) • Lack of stakeholder involvement (tourism) • Educational approach for tourism sector • Tobacco industry interference • Translating health messages for public in ways that resonate with public • Community support through public education • National/subnational jurisdiction have different views/priorities • Agreement amongst all agencies
<p>Challenges:</p> <ul style="list-style-type: none"> • Meeting tourists’ expectations • More research to prove the acceptance of smoke-free initiatives • Buy-in/collaboration from industry players

- Rewards and recognition for best practices
- Understanding the context for smoke-free regulations
- Regulation fatigue (industry + consumer?)—is this an issue/how do we prevent it?
- Lack of knowledge and education about smoke-free initiatives
- State-owned tobacco companies
- Non-transparent lobbying by tobacco industry
- Fake evidence that looks legitimate
- Resource intensive
- Front groups
- Corporate social responsibility
- Effectiveness of programs
- Money/funding/costs
- Different governments/departments have different priorities and interests
- Lack of community support

Countermeasures:

- Identify and/or enhance collection of research on tourist consumer behaviour in smoke-free environment
- Inclusion of tourism sector as part of the smoke-free campaigns being led by health organizations—are these opportunities for collaboration?
- Information on why smoke-free initiative is supported
- Triple bottom line of tourism: social, environmental, financial (for example, case studies/recognition/information sharing)
- Awareness in key government stakeholders
- Firewalls
- Using evidence-based research
- WHO resources
- Sharing of education campaign
- Tapping nationally interested support from NGOs/civic/social/global partners/social media
- Database of effective education resource/campaign (WHO)
- Identify the key person to involve for smoke-free initiatives
- Needs assessment
- Public consultation
- Mass media education

Team Sushi

Issues:

- Lack of resources for enforcement
- Lack of support from business
- Less connection between Ministry of Tourism sector with private sector on smoke-free environment
- Business owners afraid of losing customers
- Officials in charge of tourism licences still do not understand tobacco products enough to protect smoke-free initiatives in their places
- Urgent issues: lack of information to promote smoke-free environment en masse to private sector; do not have money to promote smoke-free environment in mass media or through information, education and communication materials; lack of human resources
- Rise of significant numbers of smokers who are not aware of various problems
- Communicating messages/amendments, etc.
- Raising awareness and promoting compliance with the smoke-free law in foreign tourists who visit the country
- Local/traditional ambience ruined by many smokers at designated outside smoking areas

Challenges:

- Priority issues and/or weaker political will
- Tobacco industry engaging private sector in general
- Funding for communication/promotion
- Media attention (story too boring?)
- Too many target audiences
- Complexity of messages costs money
- Messages are not strong enough or are not understood by tourists

Countermeasures:

- Strong evidence to convince decision-makers (international and local)
- Community-based campaigns with civil society
- Corporate sponsorship as corporate social responsibility
- Globally recognizable signs covering novel products (for example, e-cigarette)
- Need a globally accepted community strategy
- Work with local authorities to put out movie “smoke-free” information

Annex 4. Group Exercise III

Examples of countermeasures, collaboration solutions and desired outcomes were shared and are listed in the table below.

Group	Countermeasures	Collaboration	Outcome
Mt. Fuji	Stronger partnership between tourism and health sectors	Convene a task force	Multisectoral collaboration and integration
	Healthy tourism campaign	Consistent workshops Common strategy on communication	Strong community buy-in and mobilization
	100% smoke-free law with enforcement mechanism	Internal staff training for tourism self-management Monitoring and evaluation	Protect tourism from tobacco industry interference—zero collaboration
Sakura		Communication	
		Evidence-based research	
		Collaboration	
Sushi	Stronger evidence to convince policy-makers	Tourist survey on tobacco use/control	Understanding situation for better policy advocacy
	Communication strategy		

Annex 5. Country-specific action plans

COUNTRY: AUSTRALIA

Area 1: International capacity-building

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Share research with WHO WPRO	Developing/ growing evidence base	Demonstrate correlation between smoking regulation and impact on tourism	WHO Regional Office for the Western Pacific	3–6 months	HEALTH/ AUSTRADE Tourism Research Australia

Area 2:

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Consider feasibility of sharing education campaigns with WHO for central database	Leverage evidence-based practices	Shared learning	WHO Regional Office for the Western Pacific	6–12 months (or as negotiated with WHO)	HEALTH

Area 3: Internal capacity

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Guidance note on Article 5.3	Improved understanding across government about Article 5.3	Shared learning and commonality of approach	National governmental agencies	By end of 2016	HEALTH

COUNTRY: BRUNEI DARUSSALAM

Area 1:

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Communication	Raise awareness of tourists	Compliance to regulations	Civil aviation Tourist operator Ministry of Foreign Affairs and Trade Immigration	Q3–Q4 2016	Ministry of Health

Area 2:

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Consolidation of enrolment unit	Enhance manpower Increase efficiency	Greater coverage	Enforcement from Food Quality and Safety Division and Pharmacy Customs Department and police Surveillance: Tourist operators and business community Prosecutions: Attorney-General's Chambers	Q3–Q4 2016	Ministry of Health

COUNTRY: KINGDOM OF CAMBODIA

Area 1: Communication

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Raise awareness of private sector on ordinance	Disseminate ordinance to business owners	Business owners implement the ordinance	WHO, UNION, NGOs; local authorities; tourism association	September 2016 onward	Ministry of Tourism/Ministry of Health
Mass media campaign on sub-decree on smoke-free environment	Raise awareness of public/tourists/ private sector	Public/tourists/ private sector implement sub-decree	WHO, UNION, NGOs; local authorities	August/ September	Ministry of Tourism/Ministry of Health
Include smoke-free areas (sign) in tourist brochures	Raise awareness of tourist smoke-free areas	Tourists will comply with government legislation on smoke-free environment	WHO, UNION, NGOs	January 2017	Ministry of Tourism/Ministry of Health

Area 2: Mechanism for enforcement

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Capacity building for enforcement officer of Ministry of Tourism	Provide technical skills and knowledge on inspection of smoke-free environment	Officer conducts enforcement effectively	WHO, UNION, NGOs	December 2016	Ministry of Tourism/Ministry of Health

Area 3: Evidence for advocacy

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Conduct research on perceptions of tourists (local and international) on smoke-free legislation	Identify awareness and perceptions of tourists on smoke-free policy	Evidence to advocate for implementation of smoke-free environment	WHO, UNION, NGOs; tourism association	June 2017	Ministry of Tourism/Ministry of Health/ Universities

COUNTRY: REPUBLIC OF FIJI**Area 1: Communication**

Activities	Objectives	Expected Outcome	Other Partners	Timeline	Person responsible/ Lead agency
Establish a working committee	To strengthen communication between health and tourism industries		Tourism / Health	6 months (January 2017)	Manager, Tobacco Control Unit (Ministry of Health)

Area 2: Research (evidence-based)

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Sharing of research	Enhance knowledge of smoke-free initiative	Available needs identified	Tourism / Health	3 months (November 2016)	Manager, Tobacco Control Unit; Marketing Manager of SPTO (Ministry of Health)

Area 3: Collaboration (key stakeholders)

Activities	Objectives	Expected Outcome	Other Partners	Timeline	Person responsible/ lead agency
Develop a memorandum of understanding between Ministries of Tourism and Health	To strengthen the partnership between the two ministries	Memorandum of understanding signed	Tourism / Health	6 months	Manager, Tobacco Control Unit (Ministry of Health)

COUNTRY: LAO PEOPLE'S DEMOCRATIC REPUBLIC

Area 1: Stronger partnership between Health, Tourism and Heritage Tobacco Control Committee (TCC)

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
TCC meeting	Improve knowledge Improve collaboration systems	Tourism plan		August 2016	Secretary of TCC
Train tour guides	To understand provision of the law	Tour guide trained	Tourist officer	August 2016	

Area 2: Community mobilization

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Smoke-free boat racing festival	To promote smoke-free festival	Smoke-free event	Cultural and tourist sector	September 2016	

COUNTRY: MALAYSIA

Area 1:

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Research impact of smoke-free initiative on tourism	Tourist perception of smoke-free initiative	Smoke-free initiative will not affect the tourism sector	Ministry of Health and Ministry of Tourism	One year	Jointly led by Ministry of Health, Ministry of Tourism and Culture, and Ministry of Environment and Natural Resources; include states

Area 2:

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Platform for sharing	Jointly advocating and promoting smoke-free initiative (e.g. link smoke-free initiative websites)	Increase knowledge and awareness of smoke-free initiative benefits	All ministries	6 months	Ministry of Communication and Multimedia Malaysia Healthcare Travel Council

COUNTRY: MONGOLIA

Area 1: Stronger partnership between tourism and health

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Workshop report	Reflect in the report the outcomes of multisectoral collaboration			1 month	Ministry of Tourism
Convene a task force within the two ministries			Inspection agency	3 months	Ministry of Health and Ministry of Tourism

Area 2: Health tourism campaign

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/lead agency
Carry on “Heathy Tourism” campaign	To promote smoke-free environment	Strong community buy-in	Local authorities; media channels	2017	Ministry of Tourism, Mongolian Tourism Association
Organize a workshop	To share information		Tour operators		
Staff training for tourism			Tour operators and tour guides		

Area 3:

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Lobbying the lawmakers	The lawmakers will have better understanding	Amendment for tobacco law to become 100% smoke-free		2018–2020	Ministry of Health Ministry of Justice
More research and survey					
Healthy town		Public parks will become smoke-free	City Council		City Governor’s Office
Advocacy meeting on Healthy City					

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
campaign					

COUNTRY: NEW ZEALAND

Area 1: Liaise/work with tourism sector/Ministry of Tourism

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Provision of information to tourists on smoke-free New Zealand	Alert tourists to the New Zealand smoke-free environment before / on arrival	Clarity about New Zealand's attitude / laws towards smoke-free environment / what is to be suspected	New Zealand customs service	End of 2016	Brendan Baker
Support New Zealand's "100% pure" tagline as a component of the marketing approach	Promoting clean/smoke-free air	Continuing support for smoke-free environments		End of 2016	

Area 2: Liaise/work with Department of Conservation

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Discuss supporting a smoke-free conservation estate	All land managed by conservation becoming smoke-free	Less risk of fire/litter, etc.	Forest + bird Green party	End of 2017	Conservation, Brendan Baker

Area 3: Work with Wellington WREDA (Wellington Regional Economic Development Agency)

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Survey public opinion on extending smoke-free environment (Reporting to Wellington City Council)	Gain public support for these measures		Health Promotion Agency Regional Public Health Minister of Health	Ongoing	Counsellor Paul Eagle
	Keep this issue fresh in the minds of counsellors			Ongoing	

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
	Continue to assess and potentially expand the action plan in the future				

COUNTRY: REPUBLIC OF PALAU

Area 1: Tourism and Health collaboration effort

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Debriefing session to key stakeholders	To initiate collaboration between the two sectors	Make relevant collaboration effort	Industry partners Office of the President	By fall	Palau Visitors Authority
Exit survey	To collect evidence data	Understand where there are opportunities for tourism	Bureau of Tourism / min.net / tri.org	As soon as possible to change the questions	Palau Visitors Authority

Area 2: Better signage for tourism

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Signage / harvest education	To develop visitor-friendly signage	Tourists are advised of tobacco-free environment	Ministry of Health	By fall	Palau Visitors Authority / Belau Tourism Association / tri.org
		Especially at world heritage sites	Koror state	To be discussed	

COUNTRY: REPUBLIC OF KOREA

Area 1: Communication strategy

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/lead agency
Television ads at airport	Provide information to tourists	Raise awareness and compliance	International airport corporate	3 months	Ministry of Health
Leaflet available in various languages	Provide information to tourists	Raise awareness and compliance	Tourism bureau	3 months	Ministry of Health

Area 2: Evidence and analysis

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/lead agency
Research on smoke-free tourism (local)	Promote evidence-based policy	Better advocacy with strong local evidence	Academic experts, especially economists	1 year +	Ministry of Health, Ministry of Statistics

COUNTRY: SOCIALIST REPUBLIC OF VIET NAM

Area 1: Stronger partnership between Health and Tourism

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Workshop report with recommendations	Update leaders on content and outcome of the workshop	Leaders gain insight into what other countries are doing	Departments with tourism boards	First week of August	Participants of the workshop
Contact Viet Nam Tobacco Control Office	Update and exchange information	Bring out more solutions and activities in tobacco control	Viet Nam Tobacco Control Office	Third week of August	Viet Nam Administration of Tourism Viet Nam Tobacco Control Office

Area 2: Tourism community outreach

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Collaborate with travel agencies	Raise awareness and give more information about tobacco control to tourists	Reduce indoor smoking and public smoking from tourists	Travel agencies	Fourth quarter of 2016	Travel industry department Viet Nam Tobacco Control Office
Collaborate with tourism students	Raise awareness and give more information about tobacco control to tourists	Let the young seeds have a strong awareness about tobacco control in tourism	Tourist departments in universities	2017	Universities Viet Nam Tobacco Control Office
Collaborate with hoteliers	Make employers in hotel industry understand about tobacco control	Hoteliers will have more solutions to inform guests	Hotel owners GMs	Second quarter of 2017	Hotel department Viet Nam Tobacco Control Office

Area 3: Encourage eco-friendly tourism (homestays, sightseeing/attractions)

Activities	Objectives	Expected outcome	Other partners	Timeline	Person responsible/ lead agency
Work with Ministry of Land to reduce the land tax	Make tourism environment more healthy	More investors turn eco-friendly	Investors Ministry of Land	2017	Hotel department

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