

EMBRACE A SMOKE-FREE  
LIFESTYLE TOGETHER  
共創無煙新角度



香港吸煙與健康委員會  
Hong Kong Council on Smoking and Health  
Annual Report 2019-2020 年報

無煙香港

SMOKE-FREE HONG KONG



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# 共創無煙新角度

Embrace a Smoke-free  
Lifestyle Together





# 委員會憲章 Charter of COSH



委員會成立於1987年，屬一法定團體。《香港吸煙與健康委員會條例》（第389章）賦予以下職權，專責保障市民健康，以及提高公眾對煙草禍害之認識：

1. 提高及教育市民有關吸煙與健康之知識；
2. 進行或委託專人進行與吸煙有關的研究；
3. 向政府、社區衛生組織以及社會服務團體等提供有關吸煙與健康之意見。

根據憲章，委員會就本港各項有關煙草之問題，擔當主導角色，並時刻關注各項可影響煙草產品推廣及煙草蔓延的環境變異，於憲章賦予之職權範圍內，因時制宜，採取適度應變措施。

COSH was first established in 1987. It is a statutory body vested with functions, as set out in the "Hong Kong Council on Smoking and Health Ordinance" (Cap. 389), to protect and improve the health of the community by:

1. Informing and educating the public on the harm of smoking and its adverse effects on health;
2. Conducting and coordinating research into the cause, prevention and cure of tobacco dependence;
3. Advising the Government, community health organizations or any public body on matters relating to smoking and health.

Under such a charter, COSH has taken up the role as an active player and commentator on all issues relating to tobacco control. We aim to act within our charter in response to the changing local environment as it affects the promotion of tobacco and the epidemic caused by smoking.

# 委員會組織架構 Organization of COSH





**委員會成員 Members of COSH**

<b>主席</b>	鄭祖盛先生 MH	<b>Chairman</b>	Mr Antonio KWONG Cho-shing, MH
<b>副主席</b>	伍婉婷女士 MH	<b>Vice-chairman</b>	Ms Yolanda NG Yuen-ting, MH
<b>委員</b>	夏敬恒醫生	<b>Member</b>	Dr Tony HA King-hang
	何靜瑩女士		Ms Ada HO Ching-ying
	何世賢博士		Dr Daniel HO Sai-yin
	徐小曼女士		Ms HSU Siu-man
	林哲玄醫生		Dr David LAM Tzit-yuen
	廖偉明醫生		Dr Haston LIU Wai-ming
	蘇潔瑩醫生		Dr Loletta SO Kit-ying
	鄧振強先生 MH 太平紳士		Mr Teddy TANG Chun-keung, MH, JP
	湯修齊先生 MH 太平紳士		Mr Henry TONG Sau-chai, MH, JP
	曾立基先生		Mr Richard TSANG Lap-ki
	董煜醫生太平紳士		Dr Stewart TUNG Yuk, JP
	王文炳博士		Dr Kelvin WANG Man-ping
	黃幸怡女士太平紳士		Ms Sandy WONG Hang-yee, JP
	黃仰山教授		Prof Samuel WONG Yeung-shan
<b>當然委員</b>	趙佩燕醫生太平紳士	<b>Ex-officio Member</b>	Dr Amy CHIU Pui-yin, JP

**行政委員會 Executive Committee**

<b>主席</b>	伍婉婷女士 MH	<b>Chairman</b>	Ms Yolanda NG Yuen-ting, MH
<b>委員</b>	鄭祖盛先生 MH	<b>Member</b>	Mr Antonio KWONG Cho-shing, MH
	曾立基先生		Mr Richard TSANG Lap-ki

**教育及宣傳委員會 Education & Publicity Committee**

<b>主席</b>	曾立基先生	<b>Chairman</b>	Mr Richard TSANG Lap-ki
<b>委員</b>	鄺祖盛先生 MH	<b>Member</b>	Mr Antonio KWONG Cho-shing, MH
	何靜瑩女士		Ms Ada HO Ching-ying
	何世賢博士		Dr Daniel HO Sai-yin
	徐小曼女士		Ms HSU Siu-man
	廖偉明醫生		Dr Haston LIU Wai-ming
	伍婉婷女士 MH		Ms Yolanda NG Yuen-ting, MH
	蘇潔瑩醫生		Dr Loletta SO Kit-ying
	鄧振強先生 MH 太平紳士		Mr Teddy TANG Chun-keung, MH, JP
	湯修齊先生 MH 太平紳士		Mr Henry TONG Sau-chai, MH, JP
	董煜醫生 太平紳士		Dr Stewart TUNG Yuk, JP
	黃幸怡女士 太平紳士		Ms Sandy WONG Hang-ye, JP
<b>增選委員</b>	陳玉玲女士	<b>Co-opted Member</b>	Ms Kelly CHAN Yuk-ling
	周海傑先生		Mr CHAU Hoi-kit
	譚家強博士		Dr Andy TAM Ka-keung

**社區聯絡委員會 Community Liaison Committee**

<b>主席</b>	伍婉婷女士 MH	<b>Chairman</b>	Ms Yolanda NG Yuen-ting, MH
<b>委員</b>	鄺祖盛先生 MH	<b>Member</b>	Mr Antonio KWONG Cho-shing, MH
	何世賢博士		Dr Daniel HO Sai-yin
	林哲玄醫生		Dr David LAM Tzit-yuen
<b>增選委員</b>	陳志球教授 BBS 太平紳士	<b>Co-opted Member</b>	Prof Johnnie CHAN Chi-kau, BBS, JP
	張勇邦先生 MH		Mr Langton CHEUNG Yung-pong, MH
	周奕希先生 BBS 太平紳士		Mr CHOW Yick-hay, BBS, JP
	李銒發先生 MH		Mr Herman LEE Yuk-fat, MH



**資訊及研究委員會 Information & Research Committee**

<b>主席</b>	鄭祖盛先生 MH	<b>Chairman</b>	Mr Antonio KWONG Cho-shing, MH
<b>委員</b>	何世賢博士	<b>Member</b>	Dr Daniel HO Sai-yin
	伍婉婷女士 MH		Ms Yolanda NG Yuen-ting, MH
	蘇潔瑩醫生		Dr Loletta SO Kit-ying
	湯修齊先生 MH 太平紳士		Mr Henry TONG Sau-chai, MH, JP
	王文炳博士		Dr Kelvin WANG Man-ping
	黃仰山教授		Prof Samuel WONG Yeung-shan
<b>增選委員</b>	林大慶教授 BBS 太平紳士	<b>Co-opted Member</b>	Prof LAM Tai-hing, BBS, JP
	巫潔嫻教授		Prof Phoenix MO Kit-han
	吳文達醫生		Dr Alexander NG Man-tat

**法例委員會 Legislation Committee**

<b>主席</b>	鄭祖盛先生 MH	<b>Chairman</b>	Mr Antonio KWONG Cho-shing, MH
<b>委員</b>	何世賢博士	<b>Member</b>	Dr Daniel HO Sai-yin
	伍婉婷女士 MH		Ms Yolanda NG Yuen-ting, MH
	黃幸怡女士 太平紳士		Ms Sandy WONG Hang-yee, JP
<b>增選委員</b>	封螢醫生	<b>Co-opted Member</b>	Dr FUNG Ying
	林大慶教授 BBS 太平紳士		Prof LAM Tai-hing, BBS, JP
	劉文文女士 BBS, MH 太平紳士		Ms Lisa LAU Man-man, BBS, MH, JP
	李詠梅教授		Prof Anne LEE Wing-mui
	麥龍詩迪教授 OBE, SBS 太平紳士		Prof Judith MACKAY, OBE, SBS, JP
	左偉國醫生 SBS, BBS 太平紳士		Dr Homer TSO Wei-kwok, SBS, BBS, JP

## 委員介紹 Members of COSH



主席 Chairman

**鄭祖盛律師 MH**

**Mr Antonio KWONG Cho-shing, MH**

鄭祖盛律師現職商人，於2009年加入委員會，並於2014年獲委任為委員會主席。鄭律師現為資訊及研究委員會和法例委員會主席，行政委員會、社區聯絡委員會和教育及宣傳委員會委員。

Mr Antonio KWONG, a qualified solicitor, is a businessman. He joined COSH in 2009 and was appointed as COSH Chairman in 2014. He is the Chairman of the Information & Research Committee and Legislation Committee, and also a member of the Executive Committee, Community Liaison Committee and Education & Publicity Committee.



副主席 Vice-chairman

**伍婉婷女士 MH**

**Ms Yolanda NG Yuen-ting, MH**

伍婉婷女士現職電子商務總監，並積極參與公共事務與文化工作，於2008年獲委任為委員。伍女士現為行政委員會和社區聯絡委員會主席、教育及宣傳委員會、資訊及研究委員會和法例委員會委員。

Ms Yolanda NG is currently an eCommerce Director and actively involved in public services and community cultural groups. She joined COSH in 2008 and is the Chairman of the Executive Committee and Community Liaison Committee, and also a member of the Education & Publicity Committee, Information & Research Committee and Legislation Committee.





委員 Member

**趙佩燕醫生太平紳士**  
**Dr Amy CHIU Pui-yin, JP**

趙佩燕醫生現為衛生署規管事務總監，於2018年加入委員會。

Dr Amy CHIU is the Controller, Regulatory Affairs of Department of Health. She joined COSH as an ex-officio member in 2018.



委員 Member

**夏敬恒醫生**  
**Dr Tony HA King-hang**

夏敬恒醫生現為醫院管理局基層及社區醫療服務總行政經理，於2019年加入委員會。

Dr Tony HA is the Chief Manager of Primary and Community Services, Hospital Authority. He joined COSH in 2019.



委員 Member

**何靜瑩女士**  
**Ms Ada HO Ching-ying**

何靜瑩女士現職科網企業行政總裁，曾創辦社會企業及非牟利機構。何女士於2014年加入委員會，現為教育及宣傳委員會委員。

Ms Ada HO is an entrepreneur, she founded a social enterprise and non-profit organization. She joined COSH in 2014 and is a member of the Education & Publicity Committee.



委員 Member

**何世賢博士**  
**Dr Daniel HO Sai-yin**

何世賢博士為香港大學公共衛生學院副教授，於2017年加入委員會，現為教育及宣傳委員會、社區聯絡委員會、資訊及研究委員會及法例委員會委員。

Dr Daniel HO is an Associate Professor in the School of Public Health, The University of Hong Kong. He joined COSH in 2017 and is a member of the Education & Publicity Committee, Community Liaison Committee, Information & Research Committee and Legislation Committee.



委員 Member

**徐小曼女士**  
**Ms HSU Siu-man**

徐小曼女士為青年服務機構業務總監，同時亦是註冊社工，於2014年加入委員會，現為教育及宣傳委員會委員。

Ms HSU Siu-man is the Coordinator (Services) and a registered social worker in youth organization. She joined COSH in 2014 and is a member of the Education & Publicity Committee.



委員 Member

**林哲玄醫生**  
**Dr David LAM Tzit-yuen**

林哲玄醫生為外科醫生，亦擔任香港醫學會副會長，於2018年加入委員會，現為社區聯絡委員會委員。

Dr David LAM is a surgeon and the Vice President of The Hong Kong Medical Association. He joined COSH in 2018 and is a member of the Community Liaison Committee.





委員 Member

**廖偉明醫生**

**Dr Haston LIU Wai-ming**

廖偉明醫生為牙科醫生，並為香港牙醫學會卸任會長，於2018年加入委員會，現為教育及宣傳委員會委員。

Dr Haston LIU is a dentist and also the Immediate Past President of Hong Kong Dental Association. He joined COSH in 2018 and is a member of the Education & Publicity Committee.

委員 Member

**蘇潔瑩醫生**

**Dr Loletta SO Kit-ying**

蘇潔瑩醫生現為東區尤德夫人那打素醫院顧問醫生，於2018年加入委員會，現為教育及宣傳委員會和資訊及研究委員會委員。

Dr Loletta SO is a Consultant in Pamela Youde Nethersole Eastern Hospital. She joined COSH in 2018 and is a member of the Education & Publicity Committee and Information & Research Committee.

委員 Member

**鄧振強先生 MH 太平紳士**

**Mr Teddy TANG  
Chun-keung, MH, JP**

鄧振強先生為中學校長，同時擔任香港中學校長會主席，於2018年加入委員會，現為教育及宣傳委員會委員。

Mr Teddy TANG is a secondary school principal and the Chairman of The Hong Kong Association of the Heads of Secondary Schools. He joined COSH in 2018 and is a member of the Education & Publicity Committee.



委員 Member

**湯修齊先生 MH 太平紳士**  
**Mr Henry TONG**  
**Sau-chai, MH, JP**

湯修齊先生現職為企業董事總經理，亦為家庭與學校合作事宜委員會主席，於2018年加入委員會，現為教育及宣傳委員會和資訊及研究委員會委員。

Mr Henry TONG is the Managing Director of an enterprise and the Chairman of Committee on Home-School Co-operation. He joined COSH in 2018 and is a member of the Education & Publicity Committee and Information & Research Committee.



委員 Member

**曾立基先生**  
**Mr Richard TSANG Lap-ki**

曾立基先生現為公共關係顧問集團主席，於2016年加入委員會，現為教育及宣傳委員會主席和行政委員會委員。

Mr Richard TSANG is the Chairman of a public relations consultancy group. He joined COSH in 2016 and is the Chairman of the Education & Publicity Committee and also a member of the Executive Committee.



委員 Member

**董煜醫生 太平紳士**  
**Dr Stewart TUNG Yuk, JP**

董煜醫生現為屯門醫院顧問醫生，於2018年加入委員會，現為教育及宣傳委員會委員。

Dr Stewart TUNG is a Consultant in Tuen Mun Hospital. He joined COSH in 2018 and is a member of the Education & Publicity Committee.





委員 Member

**王文炳博士**

**Dr Kelvin WANG Man-ping**

王文炳博士為香港大學護理學院副教授，於2018年加入委員會，現為資訊及研究委員會委員。

Dr Kelvin WANG is the Associate Professor in the School of Nursing, The University of Hong Kong. He joined COSH in 2018 and is a member of the Information & Research Committee.

委員 Member

**黃幸怡女士太平紳士**

**Ms Sandy WONG  
Hang-ye, JP**

黃幸怡女士為律師行顧問律師及香港女律師協會前會長，亦擔任多項公職。黃女士於2017年加入委員會，現為教育及宣傳委員會和法例委員會委員。

Ms Sandy WONG is Consultant Solicitor at a law firm and the Past President of Hong Kong Federation of Women Lawyers. Ms Wong is actively involved in public service. She joined COSH in 2017 and is a member of the Education & Publicity Committee and Legislation Committee.

委員 Member

**黃仰山教授**

**Prof Samuel WONG  
Yeung-shan**

黃仰山教授為香港中文大學醫學院賽馬會公共衛生及基層醫療學院院長，同時擔任醫學院副院長（教育），於2014年加入委員會，現為資訊及研究委員會委員。

Prof Samuel WONG is the Director of The Jockey Club School of Public Health and Primary Care, and also the Associate Dean (Education) of Faculty of Medicine of The Chinese University of Hong Kong. He joined COSH in 2014 and is a member of the Information & Research Committee.









# 秘書處 Secretariat

## 秘書處編制及職員名單 Secretariat

<b>總幹事</b>	黎慧賢女士	<b>Executive Director</b>	Ms Vienna LAI Wai-yin
<b>項目籌劃高級經理</b>	朱偉康先生	<b>Senior Project Manager</b>	Mr Lawrence CHU Wai-hong
	梁可欣女士		Ms Jacqueline LEUNG Ho-yan
	黃靖玢女士 (至2019年12月)		Ms Shelby WONG Ching-bun (up to December 2019)
<b>項目籌劃經理</b>	謝結齡女士	<b>Project Manager</b>	Ms Jacqueline TSE Kit-ling
	王志峰先生		Mr Fung WONG Chi-fung
	陳紫研女士 (至2019年6月)		Ms Purple CHAN Tsz-yin (up to June 2019)
	李娜女士 (至2019年6月)		Ms Maggie LI Na (up to June 2019)
	黃梓瑤女士 (至2019年10月)		Ms Katherine WONG Tze-yiu (up to October 2019)
	嚴碧芳女士 (至2019年10月)		Ms Jessica YIM Pik-fong (up to October 2019)
	謝婕怡女士 (2019年4月履職)		Ms Irene TSE Tsit-yi (from April 2019)
	黃翠儀女士 (2019年6月履職)		Ms Tracy WONG Chui-yee (from June 2019)
	梁詠珊女士 (2019年7月履職)		Ms Alison LEUNG Wing-shan (from July 2019)
	麥梓駿先生 (2020年1月履職)		Mr Davy MAK Tsz-chun (from January 2020)
<b>行政主任</b>	李碧雲女士	<b>Executive Officer</b>	Ms Jessica LEE Pik-wan
<b>資訊科技經理</b>	潘志聰先生	<b>Information and Technology Manager</b>	Mr Lancelot POON Chi-chung
<b>研究經理</b>	梁樂彤女士 (2019年9月履職)	<b>Research Manager</b>	Ms Christie LEUNG Lok-tung (from September 2019)
<b>項目主任</b>	黃沛衡女士	<b>Project Officer</b>	Ms Esther WONG Pui-hang
	何燕穎女士 (至2019年6月)		Ms Christy HO Yin-wing (up to June 2019)
	黃翠儀女士 (至2019年6月)		Ms Tracy WONG Chui-yee (up to June 2019)
	伍蔚瑩女士 (至2019年9月)		Ms Ruby NG Wai-ying (up to September 2019)
	譚雅雯女士 (2019年6月履職)		Ms Carmen TAM Nga-man (from June 2019)
	張釗文先生 (2019年7月履職)		Mr Kavin CHEUNG Chiu-man (from July 2019)
	譚善茵女士 (2019年7月履職)		Ms Sean TAM Sen-ann (from July 2019)
	周朗宜女士 (2019年10月履職)		Ms Kate CHOW Long-yi (from October 2019)
<b>項目籌劃主任</b>	譚雅雯女士 (至2019年6月)	<b>Project Executive</b>	Ms Carmen TAM Nga-man (up to June 2019)
	何子瑩女士 (2019年7月履職)		Ms Eunis HO Tze-ying (from July 2019)
<b>教育幹事</b>	鍾翠媛女士	<b>Educator</b>	Ms Irene CHUNG Tsui-woon
	黎雪芳女士		Ms Heidi LAI Shuet-fong
	曾文燕女士		Ms Alison TSANG Man-yin
	黃穎怡女士		Ms Gladys WONG Wing-yee
	吳麗明女士 (至2019年11月)		Ms NG Lai-ming (up to November 2019)
<b>行政助理</b>	關頌衡女士	<b>Executive Assistant</b>	Ms Hannah KWAN Chung-hang
	陳明珠女士 (至2019年4月)		Ms Charmaine CHAN Ming-chu (up to April 2019)
	蘇秀芳女士 (2019年5月履職)		Ms Amber SO Sau-fong (from May 2019)
<b>項目籌劃助理</b>	嚴永嫦女士 (至2019年8月)	<b>Project Assistant</b>	Ms Ella YIM Wing-sheung (up to August 2019)
	何雋謙先生 (2019年11月履職)		Mr Ivan HO Chun-him (from November 2019)





黎慧賢  
Vienna LAI Wai-yin  
總幹事 **Executive Director**





# 主席報告 Chairman's Report

香港吸煙與健康委員會30多年來一直秉承保障公眾健康的宗旨，透過不同的宣傳及教育活動深入社會各階層，宣揚煙草的禍害及鼓勵吸煙人士戒煙。委員會於過去一年承先啟後，有見另類吸煙產品於世界各地迅速興起，故進一步加強相關的宣傳及教育工作，並積極向政府及立法會倡議加強控煙措施，爭取及聯繫社會各界支持全面禁止另類吸煙產品，防止煙禍蔓延。今年，2019冠狀病毒病於全球肆虐，對公共衛生構成重大威脅，委員會致力為公眾健康把關，加強推廣使用各類煙草產品之風險及提高市民防疫意識，推動更多吸煙人士戒煙，以減低患上任何疾病的機會，與香港市民並肩對抗疫情，攜手共建無煙健康城市。

Protecting public health has topped the priority list of Hong Kong Council on Smoking and Health ("COSH") over the past three decades. Targeting different sectors of the society, we publicized the hazards of tobacco and encouraged smokers to quit smoking through publicity and education programmes. Following the achievements of last year, COSH continued our unremitting efforts on promotion of harms of alternative smoking products in view of their rapid global growth. COSH also collaborated with various sectors to advocate the Government and the Legislative Council for strengthening the tobacco control policies including a total ban on alternative smoking products to avoid the epidemic. This year, the global pandemic of Coronavirus Disease 2019 (COVID-19) posed serious threats on public health. COSH stepped up the publicity works on health risks of using tobacco products to raise public awareness on virus prevention and encourage smoking cessation. We worked together to fight against the virus and build a smoke-free city.

主席 鄭祖盛 MH  
Antonio KWONG Cho-shing, MH  
Chairman

香港吸煙率自80年代初一直持續下降，成為全球吸煙率最低的地區之一，實有賴政府及社會各界多年努力推動控煙工作。惟面對煙草業界不斷以推陳出新的手法力阻控煙工作的推展，我們必須提高警覺及加快控煙步伐，凝聚各界的無煙力量，以抑制各類煙草產品的廣泛使用，保障公眾健康。

根據政府統計處最新公佈的《主題性住戶統計調查第70號報告書》，2019年香港每日吸煙人數佔全港15歲及以上人口的10.2%，相當於約637,900人，比2017年的10.0%輕微上升。調查亦發現習慣每日吸食電子煙及加熱非燃燒煙草製品(加熱煙)的人數急速倍增，而香港大學公共衛生學院的學校統計調查發現有從不吸煙的小學生及中學生透過另類吸煙產品開始吸煙行為，可見香港控煙工作正面臨重大威脅。有見及此，委員會絕不鬆懈，於過去一年針對不同年齡及界別展開一系列嶄新的宣傳推廣活動，並透過不同媒體及方式傳遞無煙信息。

Hong Kong is one of the regions with the lowest smoking rate in the world. The gradual decrease in the smoking rate since the early 1980s is the result of effective tobacco control measures and great efforts of various sectors of the society over the years. However, we must be united, remain vigilant and speed up tobacco control development to encounter the emerging threats posed by the tobacco industry, in order to contain the proliferation of tobacco use and safeguard public health.

According to the latest Thematic Household Survey Report No. 70 of the Census and Statistics Department, the prevalence of daily cigarette smokers aged 15 or above in 2019 was 10.2% which is equivalent to around 637,900 persons, a slight increase from 10.0% in 2017. Besides, the survey also revealed that the numbers of people using electronic cigarettes (e-cigarettes) and heat-not-burn (HNB) tobacco products increased significantly. It was alarming that a school-based survey on smoking conducted by the School of Public Health of The University of Hong Kong revealed some primary and secondary school students who have never smoked had ever used these products and started smoking. In this regard, the efforts in curbing the tobacco epidemic must continue to be strengthened. In the previous year, COSH launched various innovative programmes via multiple channels to spread smoke-free messages to all walks of life.



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為提升大眾對另類吸煙產品禍害的關注，委員會於2019年展開「煙害2.0另類煙害你要知」健康教育宣傳，舉辦近20場地區巡迴教育展覽，並走訪中學、大學、社區團體及公共衛生機構舉行八場「另類煙害」專題健康講座，與逾7,000名市民分享有關電子煙及加熱煙禍害的最新資訊，揭穿煙草商的誤導宣稱及宣傳伎倆，爭取市民支持全面禁止另類吸煙產品。委員會亦與時並進，透過設立「煙害2.0」Facebook專頁向公眾人士講解使用另類吸煙產品的健康風險和釐清相關的謬誤，促進與市民的網上互動交流。

此外，委員會亦推出兩輯全新宣傳短片「吸煙實有害 唔好中計」及「戒煙斷·捨·離」，前者旨在揭露煙草商以宣傳伎倆誘使吸煙人士及非吸煙人士吸食另類吸煙產品的圈套，後者希望鼓勵市民「斷絕」、「捨棄」及「遠離」任何形式的煙草產品，重建健康新生活。

承繼上年度以運動代替吸煙的重點宣傳推廣，委員會於2019至2020年度鼓勵建立健康的興趣以取代吸煙習慣，並以「無煙新頻道」為主題，舉辦一連串的宣傳推廣活動包括宣傳街站、短片、網上平台、學校推廣及機構的宣傳活動，提醒市民拒絕所有煙草產品，並鼓勵非吸煙人士透過網上平台分享無煙生活心得，推動身邊的吸煙人士戒煙，齊齊活出無煙「新角度」。活動獲得超過50間公司、非政府組織、醫院、學校及團體等成為合作夥伴，共吸引了逾1,500名市民加入成為「無煙新頻道」會員，其中「一人一個無煙心Duck」活動更獲得全港70間小學踴躍參與，收到超過15,000份參賽作品，將無煙信息傳遞至全港每一個角落。

To enhance public awareness on the hazards of alternative smoking products, COSH introduced "Smoking Hazards 2.0" Health Education and Publicity Programme in 2019. Around 20 roving health promotion exhibitions were held and eight sessions of health seminars were conducted for secondary schools, universities, social centres and public health organizations. The latest information on the hazards, misleading claims and marketing strategies of e-cigarettes and HNB tobacco products were shared among some 7,000 citizens to solicit their support for a total ban. A designated Facebook page "Smoking Hazards 2.0" was set up to inform public on the risks and myths, as well as to enhance the online interaction with mass public.

Besides, two new Announcements in the Public Interest (APIs) were launched. "Smoking Harms. Don't be Cheated!" revealed the promotional tactics of tobacco industry targeting both smokers and non-smokers on using alternative smoking products. Another API "Quit and Go for a New Life" reminded public that all forms of smoking products are hazardous to health and encouraged citizens to "cut off", "let go" and "break up" with tobacco to live smoke-free.

Following the success of the publicity campaign on replacing smoking by doing exercises last year, COSH launched a publicity programme with the theme of "Smoke-free Channel" in 2019-2020. The programme aimed to encourage people developing healthy hobbies to replace smoking behavior and remind them to stay away from all forms of tobacco. The public could share smoke-free messages with family and friends as well as support smokers to kick the habit through various activities such as street promotion, short videos, online platform and promotional events organized by different schools and organizations. More than 50 companies, non-governmental organizations, hospitals, schools and organizations supported the programme and over 1,500 people joined the "Smoke-free Channel". "Share Smoke-free Messages Together with B.Duck" Activity received overwhelming response and attracted more than 15,000 entries from 70 primary schools.



為凝聚支持戒煙的社會氛圍及加強社區人士對無煙生活的關注，委員會聯同香港大學護理學院及公共衛生學院舉辦第十屆「戒煙大贏家」無煙社區計劃，獲18區區議會及地區合作夥伴的全力支持。透過在全港各區進行近140場社區招募活動及無煙展覽宣傳活動，委員會成功招募逾1,000名吸煙人士參與戒煙比賽，下定決心戒煙，並將無煙信息傳遞予全港約55,000名市民。「戒煙大贏家」得主更接棒成為宣傳大使，透過短片、訪問及推廣活動，分享成功戒煙的經驗及鼓勵更多吸煙人士戒煙。

同時，委員會與職業安全健康局及香港電台第一台合辦「香港無煙領先企業大獎2019」(大獎)，獲逾80間來自不同行業的商界及業界組織成為支持機構，鼓勵各行各業一同持續推動無煙企業文化，為吸煙僱員與市民提供戒煙支援平台，鞏固商界在推動控煙工作方面的角色。今年大獎再創高峰，吸引超過530間來自不同行業的企業及機構踴躍參加，包括銀行、物業管理、零售、物流、運輸、建築及政府部門等，受惠員工人數超過13萬人，為歷年之冠。

To enhance social awareness and create a supporting atmosphere for smoking cessation, COSH collaborated with the School of Nursing and School of Public Health, The University of Hong Kong to launch the 10<sup>th</sup> "Quit to Win" Smoke-free Community Campaign. With the support of the 18 District Councils and district organizations, around 140 community-based recruitment and promotional activities were held across the territory, reached about 55,000 citizens and recruited more than 1,000 smokers to join the smoking cessation contest. Winners of the contest shared their successful quit stories in videos, interviews and events as ambassadors and inspired smokers to strengthen their quit will.

Meanwhile, COSH organized the "Hong Kong Smoke-free Leading Company Awards 2019" (the Awards), together with the Occupational Safety and Health Council and Radio 1 of Radio Television Hong Kong. Over 80 major commerce chambers and associations supported and encouraged corporates to strengthen their roles in promoting a smoke-free culture and assisting their employees and members of the public to live smoke-free. The Awards scaled a new height with more than 530 companies participating, over 130,000 employees from a wide variety of industries were benefited, including banking, property management, retail, logistics, transportation, construction and government departments, etc.



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要有效減低香港的吸煙人口，除推動不同年齡的吸煙人士戒煙外，防止兒童及青少年開始吸煙同樣重要，委員會一直積極發展無煙教育工作，以教導兒童及青少年拒絕吸食第一口煙。「學校互動教育巡迴劇場」於過去20多年來已先後於全港小學舉辦逾2,000場表演，接近57萬名學生及教師觀賞及參與。委員會於2019至2020學年得到教育局協辦及香港海洋公園的支持，與iStage劇團合作推出全新劇目「無煙大搜查」。因應學校基於2019冠狀病毒病疫情而停課，為配合「停課不停學」，委員會首次推出網上版劇場及互動學習專區，讓學生可安在家中參與劇場及延伸學習活動，以鞏固無煙知識及學習拒絕吸煙，並鼓勵他們將無煙信息推廣至家人，一同建立無煙家庭。

此外，「無煙Teens計劃」2019-2020吸引接近200名來自不同中學及制服團體的青少年參與，透過領袖訓練營、工作坊及暑期實習等，提升他們的領導及活動籌劃才能，加深對煙害的認知及培育他們成為控煙專才。完成訓練後，他們於校園及社區籌辦近60項極具創意的無煙宣傳活動，在社區每個角落推廣無煙生活。另一方面，委員會亦於幼稚園及中小學舉辦「無煙新世代」健康講座，年內到訪超過80間學校，逾15,000名學生參與。

為配合年長人士的需要，委員會延續「無煙老友記」計劃。2019-2020計劃透過不同渠道，包括舉辦健康講座、工作坊、媒體宣傳及「無煙老友大使」等，向約2,000名長者宣揚吸煙的禍害和戒煙的重要性，鼓勵他們與親友分享無煙信息，建立無煙健康生活。

To further reduce the smoking rate in Hong Kong, preventing smoking uptake among children and teenagers is as critical as encouraging current smokers to quit. COSH was devoted in smoke-free education for children and teenagers to reject the first cigarette. Over the past two decades, the "School Interactive Education Theatre Programme" had delivered over 2,000 performances reaching about 570,000 students and teachers. In the school year of 2019 to 2020, the programme was co-organized by the Education Bureau and supported by Ocean Park Hong Kong. COSH introduced a brand-new drama "Smoke-free Detective Adventure" in collaboration with iStage Theatre. During the school suspension due to the epidemic of COVID-19, COSH echoed "Suspending Classes without Suspending Learning" by launching an online version of the drama performance with an interactive learning platform which allowed primary students to enrich their smoke-free knowledge and motivated them to share the messages with their families.

With about 200 teenagers enrolled, the "Smoke-free Teens Programme" 2019-2020 provided trainings on tobacco control, the harms of smoking, leadership and project management skills for teenagers through workshops, training camps and summer internship. Afterwards, the trained Smoke-free Teens organized about 60 innovative activities in schools and community to spread smoke-free messages. In addition, "Smoke-free New Generation" health talks were conducted in more than 80 kindergartens, primary schools and secondary schools during the school year of 2019 to 2020 and attended by over 15,000 students.

To accommodate the needs of senior citizens, COSH continued the "Elderly Smoking Cessation Promotion Project" in 2019-2020. Through health talks, workshops, media promotion and "Smoke-free Elderly Ambassadors", the importance of living smoke-free was disseminated to some 2,000 elderlies. They were encouraged to share the messages with family and friends.



關注另類吸煙產品近年入侵市場，委員會欣見政府提出《2019年吸煙（公眾衛生）（修訂）條例草案》（條例草案），以全面禁止另類吸煙產品。委員會於本年度亦積極向立法會及社會各界進行倡議工作，包括與多名本地及海外的控煙專家舉行記者會、號召各界團體進行集會，並聯同多個醫學團體、控煙組織、學術團體及非政府組織發起簽名行動，收集逾11萬名市民、公司及機構的簽名，爭取更多市民支持立法通過條例草案，以杜絕另類吸煙產品的流行。惟立法會因會期不足而終止審議條例草案，委員會對此表示非常失望及遺憾，但相關工作及報導已引起大眾的關注，委員會將繼續加強宣傳教育及團結各界支持，積極為政府重提條例草案作好準備。

縱然香港的控煙工作正面臨重大挑戰，香港必須加強控煙力度及採取果斷的措施，並為全面禁煙訂下日期及發展藍圖，使吸煙率進一步降低至單位數字，儘快實現無煙香港的願景。最後，本人藉此機會衷心感謝委員會各委員的熱心參與及秘書處職員過往一年辛勞的工作，亦特別鳴謝一直支持控煙工作的政府、公共機構、學術及教育組織、地區及非政府組織、傳播媒體以及每一位市民，我們期望繼續凝聚各界力量，攜手向全面禁煙的目標進發，並祝願所有香港市民身體健康！

COSH had serious concerns on the alternative smoking products available in the market in recent years and welcomed the Government's proposal of the Smoking (Public Health) (Amendment) Bill 2019 (the Bill) for a total ban on these products. COSH had been actively lobbying the Legislative Council and different sectors of the community for support by hosting press conference with local and international tobacco control experts, organizing a joint rally, and also initiating a signatory campaign with various medical associations, tobacco control organizations, academia and non-governmental organizations. Over 110,000 signatures were collected in supporting the Bill. COSH expressed deep regret and disappointment at the decision of the Bills Committee to discontinue its scrutiny work on the Bill. However, the related advocacy works and media coverage aroused public awareness on the issue. COSH would continue to strengthen publicity and education as well as solicit public support until the Government resumes the legislation work.

Notwithstanding the challenges ahead, Hong Kong must take a bold step in tobacco control and carry out decisive measures to further reduce the smoking prevalence to a single digit. A blueprint and time schedule should be set for the Tobacco Endgame goal. At last, I would like to express my deepest gratitude to COSH Council members for their active involvement and the Secretariat staff for their hard work throughout the year. I would also like to thank the Government, public organizations, academia and education institutes, district and non-governmental organizations, media and the mass public for their usual support in tobacco control. We will continue our efforts and unite every sector in the community to ban smoking completely and strive for a smoke-free Hong Kong. We wish everyone good health in Hong Kong.



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# 預防另類煙害蔓延 由宣傳教育開始

Prevent Hazards of Alternative Smoking  
Products via Education and Publicity



## 專題 Highlights



為防止另類吸煙產品於香港迅速蔓延流行，委員會於2015年已開始倡議政府全面禁止電子煙。2019年政府提出修訂《吸煙(公眾衛生)條例》，以禁止進口、製造、售賣、分發和宣傳另類吸煙產品，包括電子煙、加熱非燃燒煙草製品(加熱煙)及草本煙，展示保障公眾健康的決心。委員會透過多管齊下的措施，加強市民對另類吸煙產品禍害的關注及認識，以團結社會各界支持立法。在2019至2020年，委員會重點加強有關的宣傳及教育工作，包括開展一系列「煙害2.0另類煙害你要知」健康教育宣傳及新設「煙害2.0」Facebook專頁，並透過多項的教育推廣計劃，分享另類煙害的最新資訊，教育市民尤其青少年認清煙草商的誤導宣稱及宣傳伎倆，拒絕任何形式的煙草，並爭取市民及社會各界支持全面禁止另類吸煙產品。

To curb the spread of alternative smoking products in Hong Kong, COSH had been advocating for a total ban on electronic cigarettes (e-cigarettes) since 2015. The Government put forward the Smoking (Public Health) (Amendment) Bill 2019 (the Bill) to prohibit the import, manufacture, sale, distribution and advertisement of alternative smoking products including e-cigarettes, heat-not-burn (HNB) tobacco products and herbal cigarettes, which demonstrated the Government's determination to safeguard public health. Through multi-pronged measures, COSH raised public awareness on alternative smoking products and united different sectors to support the legislation. In 2019 to 2020, COSH stepped up efforts on education and promotion to publicize the harms of alternative smoking products in the community. The "Smoking Hazards 2.0" Health Education and Publicity Programme was launched and a designated Facebook page "Smoking Hazards 2.0" was set up. While the latest information on the hazards of alternative smoking products, misleading claims and marketing strategy of tobacco industry were shared, COSH targeted to educate the public especially the youth and keep them away from all kinds of tobacco products, as well as solicit their support for a total ban on alternative smoking products.



## 教育兒童及青少年 遠離變種煙害

政府統計處最新公佈的《主題性住戶統計調查第70號報告書》，發現香港有超過二萬人習慣每日吸食電子煙及加熱煙，約佔習慣每日吸煙人士的3.2%，較2017年急增2.5倍。此外，香港大學公共衛生學院於2018年10月至2019年7月期間，進行一項有關學生吸煙情況的學校統計調查，發現曾經吸食加熱煙的小學生及中學生比率為0.8%及2.3%，更有分別1.4%及7.7%曾經使用電子煙。以上調查結果均顯示另類吸煙產品正在迅速滲透香港市場，委員會擔心另類吸煙產品會荼毒兒童及青少年，造成吸煙的門戶效應，令吸煙行為重新「正常化」，並提供更多選擇予吸煙人士及減低他們戒煙意欲，對公共衛生構成重大威脅。



另類吸煙產品設計新穎、包裝時尚，以電子煙為例，標榜過萬種不同口味，例如糖果味、各種水果味及薄荷味等，這些香味不但能掩蓋傳統捲煙帶來的嗆喉感和苦澀味，亦製造能「減害」的假象，對於追求新鮮感的青少年吸引力甚大。銷售方面，電子煙及加熱煙常見於受青少年歡迎的商場店鋪、「格仔鋪」及社交媒體平台，而賣家亦以「可調較濃淡」、「較健康」、「口味眾多」、「無尼古丁不會上癮」作招徠。煙草商亦透過贊助年輕的網絡明星，於不同社交媒體上載有關吸食電子煙及加熱煙的影片、相片及文字，將其吸食行為塑造為潮流。由此可見，其宣傳營銷策略多以青少年為推廣對象，企圖誘使從不吸煙人士尤其青少年嘗試。

## Educate the Children and Youth to Stay Away from Mutated Tobacco Harms

According to the Thematic Household Survey Report No. 70 released by Census and Statistics Department, there were more than 20,000 daily users of e-cigarettes and HNB tobacco products, which is equivalent to 3.2% of daily smokers and a 2.5-fold increase as compared to 2017. Besides, a school-based survey on smoking was conducted by the School of Public Health of The University of Hong Kong during October 2018 to July 2019. It was found that the ever use rates of HNB tobacco products among primary school students and secondary school students were 0.8% and 2.3% respectively, while the ever use rates of e-cigarettes were 1.4% and 7.7%. The above figures reflected the alarming situation of market penetration by the alternative smoking products in Hong Kong. COSH worried that these products would renormalize smoking behaviour and become a gateway to smoking for children and youth. Smokers are also exposed to a wider range of choices instead of considering smoking cessation which is a major setback in public health.

Alternative smoking products have novel designs and trendy packaging. For instance, e-cigarettes are marketed with over 10,000 flavours like candy, fruits and mint which create an illusion of harm reduction that appeal to curious teenagers as these flavours dilute the bitterness of conventional cigarettes. Sellers are selling e-cigarettes and HNB tobacco products in popular places among youth such as shopping malls, consignment stores and social media platforms. They are labelled as “adjustable intensity”, “healthier choice”, “multiple flavors”, and “no nicotine and non-addictive”. By sponsoring young influencers or celebrities and creating a buzz on social media with videos, photos and messages using e-cigarettes and HNB tobacco products, tobacco industry markets these products as trendy items to attract non-smokers especially teenagers for the first attempt.



青少年的吸煙行為一旦成為習慣，或當他們對尼古丁產生依賴，他們很可能會開始吸食傳統捲煙。研究顯示曾經使用電子煙的青少年吸食傳統捲煙的機會是從沒使用電子煙之青少年的四倍，反映成為吸煙的入門途徑。而且部分產品外型模仿文具或高科技玩意，容易收藏或煙味較少，家長及老師難以察覺學生使用，亦是青少年使用另類吸煙產品的一大誘因。

故此，委員會推出一系列的重點教育活動，針對性地揭示另類吸煙產品對兒童及青少年的禍害。當中包括走訪中學及大學，舉辦「煙害2.0另類煙害你要知」專題健康講座，向學生講解電子煙及加熱煙的禍害和全球使用趨勢，以及煙草商的誤導宣稱及銷售伎倆，以加強學生對另類吸煙產品的認識。講座亦歡迎社工、家長及其他社區團體參加，提高社會的關注，同時預防和教導青少年遠離任何形式的煙禍。委員會亦為學校設計另類吸煙產品專題教育網上資源，包括教學大綱、專題簡報、課堂活動工作紙、遊戲單張及小冊子資料，為教育工作者提供相關的資訊，以教導大眾尤其青少年認識使用另類吸煙產品的風險及禍害。

除此之外，委員會亦將另類吸煙產品禍害的資訊滲透於各教育推廣活動，例如「無煙新世代」健康講座、「學校互動教育巡迴劇場」及「無煙Teens計劃」，讓幼稚園、小學及中學的學生認識電子煙和加熱煙等對身體的危害，以防止他們吸食第一口煙，並教育他們將無煙知識傳播予家人、朋友及社會大眾，進一步提升市民對另類吸煙產品的關注。



If the youth starts the smoking habit, or being dependent on nicotine, they would be more likely to smoke conventional cigarettes. Researches showed that if teenagers had ever used e-cigarettes, their possibility of smoking conventional cigarettes would be four times higher than never smokers of e-cigarettes, becoming a gateway to smoking. Some of the alternative smoking products look like stationery or high-tech gadgets which are easy to hide or have less smoke, parents and teachers may not be aware of usage among students which tempted them to try.

Therefore, COSH launched a series of education programmes to reveal the hazards of alternative smoking products on children and youth. Health seminars of "Smoking Hazards 2.0" Health Education and Publicity Programme were conducted for secondary schools and universities to introduce the harms and global prevalence of using e-cigarettes and HNB tobacco products. The seminars also informed students on the deceptive tactics deployed by tobacco industry and welcomed social workers, parents and community organizations to join in order to raise their awareness and prevent the youth from uptaking. A set of online teaching kit, including a teaching plan, PowerPoint, worksheets and game sheets are available for download. This set of resources is specially designed for educators to provide useful information on the health risks of alternative smoking products for the public, especially among the young generation.



Meanwhile, COSH also penetrated the related information into different education and publicity programmes, such as the health talks for "Smoke-free New Generation", the "School Interactive Education Theatre Programme" and the "Smoke-free Teens Programme". Students from kindergartens, primary schools and secondary schools were equipped with knowledge on the health risks associated with e-cigarettes and HNB tobacco products to deter them from lighting the first cigarette. They were also encouraged to spread the smoke-free messages among their families, peers and mass public to raise awareness in the community.



## 宣傳另類煙禍 認清誤導伎倆

世界衛生組織強調，世界上並沒有無害的煙草產品。煙草商宣稱另類吸煙產品「較健康」、「較少害處」或「無害」，意圖淡化吸煙對身體的傷害。事實上，另類吸煙產品一樣含有有害物質和致癌物，而且越來越多獨立研究發現電子煙和加熱煙含有與傳統捲煙相同或傳統捲煙以外的有害物質，某些有害物質的濃度甚至比傳統捲煙中的更高，可引致嚴重的疾病，例如心血管疾病和呼吸系統疾病。

青少年腦部仍未發展完成，較容易對尼古丁產生依賴，引致上癮及影響他們腦部發展。而在美國，電子煙禍於青少年群組肆虐，已經錄得數千宗與使用電子煙相關的肺炎個案，更有數十人因此而死亡，其危害絕對不能低估。不少醫學組織強調，電子煙及加熱煙含有的致癌物及部分有害物質根本沒有安全水平，另類吸煙產品只是變種的煙害。

為揭穿煙草商的誤導宣稱及宣傳伎倆，委員會於全港各區及多個商場舉行「煙害2.0另類煙害你要知」地區巡迴教育展覽，並與廣大市民分享有關電子煙及加熱煙禍害的最新資訊，爭取市民支持全面禁止另類吸煙產品。此外，市民可於展覽上參與多媒體互動繪畫遊戲，親手繪出無煙畫作，上載至社交媒體，並鼓勵家人和朋友一同向所有吸煙產品說不，投入無煙健康生活。



## Promotion on the Mutation of Smoking Hazards to Debunk Misleading Claims

World Health Organization emphasizes that there is no safe and harmless tobacco product in the world. To downplay the health risks and re-normalize smoking behavior, alternative smoking products are marketed as “healthier”, “less harmful” or “harmless”. In fact, these products release detrimental chemicals and carcinogenic substances. Compare to conventional cigarettes, an increasing number of researches found similar or even more detrimental chemicals in alternative smoking products and contain higher levels for certain chemicals that cause serious health consequences, such as cardiovascular and respiratory diseases.

As teenagers’ brain development is yet to be completed, they are at higher risk of nicotine dependence that hinders their brain development. In the US, where surge of e-cigarette use among the youth, more than several thousands people had suffered from e-cigarette or vaping product use associated lung injury, a few tens of deaths also reported. Harms of alternative smoking products should not be underrated. The medical profession reaffirms that there is no safety level for exposure to carcinogenic and harmful substances. Alternative smoking products are just the mutation and continuation of conventional cigarettes.



In order to clarify the misleading claims and marketing strategy of tobacco industry, as well as share the latest information about the smoking hazards of e-cigarettes and HNB tobacco products with the mass public, roving health promotion exhibitions of “Smoking Hazards 2.0” Health Education and Publicity Programme were held in shopping malls and the community. Public was invited to color the smoke-free drawing and share on social media as a pledge to say no to all forms of tobacco products through digital interactive paper drawing game. They were encouraged to motivate family and friends to live tobacco free.



同時，委員會特設「煙害2.0」Facebook專頁，以互動的手法及輕鬆有趣的角，分享與另類吸煙產品禍害相關的新聞或資訊，釐清大眾對這些有害產品的謬誤，並揭示煙草業干預公共衛生及控煙政策的伎倆，促進與市民大眾的網上互動交流。



委員會於年內亦拍攝兩條全新宣傳短片「吸煙實有害 唔好中計」及「戒煙斷·捨·離」，目的為揭露煙草商以營銷手法誘使吸煙人士和非吸煙人士吸食另類吸煙產品的圈套，以及鼓勵市民要「斷絕」、「捨棄」及「遠離」任何形式的煙草產品。

## 推廣正確戒煙方法 活出無煙新角度

目前沒有足夠證據證明另類吸煙產品可以幫助戒煙。相反，愈來愈多數據顯示，不少另類吸煙產品使用者同時吸食傳統捲煙，即「雙重使用者」。日本和韓國的數據證實以上趨勢，在2017年，日本有4.7%的成年人為電子煙或加熱煙的使用者，當中超過七成(72%)同時有吸食傳統捲煙；在2018年，韓國有2.8%的青少年曾經使用加熱煙，當中有超過七成半同時吸食傳統捲煙。另外，有不少研究指出「雙重使用者」戒食傳統捲煙的機會較低，以韓國為例，研究顯示成年人使用加熱煙與戒食傳統捲煙的意向之間沒有關係；更甚的是，對比從不使用另類吸煙產品的人，曾經使用加熱煙的吸煙人士戒煙機會低八成，可見吸煙者只是於不方便吸食傳統捲煙時才使用另類吸煙產品，而非真正希望戒煙。

A designated Facebook page “Smoking Hazards 2.0” was created to share the latest news and facts on alternative smoking products, clarify the misconception, and reveal the tobacco industry’s interference on public health and tobacco control policies in an interactive and humorous way. The page also fostered communications and interaction with the general public.

Two new Announcements in Public Interest (APIs) titled “Smoking Harms. Don’t be Cheated!” and “Quit and Go for a New Life” were also launched by COSH in 2019 to raise public awareness on the industry’s promotional tactics of alternative smoking products targeting both smokers and non-smokers. The APIs also encouraged people to “cut off”, “let go” and “break up” with any means of tobacco products.



## Use Proper Smoking Cessation Methods to Embrace a Smoke-free Lifestyle

Evidence of alternative smoking products on smoking cessation is limited and not conclusive at the moment. On the contrary, it is found that users of alternative smoking products would become dual users of both conventional cigarettes and alternative smoking products. Data collected in Japan and South Korea have confirmed the above trend. In 2017, 4.7% of adults in Japan were e-cigarette or HNB tobacco product users, 72% of them smoked conventional cigarettes at the same time. In 2018, 2.8% of young people in South Korea had ever used HNB tobacco products, and 75.5% of them smoked conventional cigarettes at the same time. In addition, many studies also pointed out that dual users have a lower possibility of quitting conventional cigarettes. Taking South Korea as an example, studies have shown that no correlation is found between use of HNB tobacco products and their intention to quit among adults. Also, the chance of quitting among alternative smoking product users is 80% lower than those who have never used alternative smoking products, which proved that people are using alternative smoking products whenever it is inconvenient to use conventional cigarettes, but not for smoking cessation.

戒煙需要使用正確及適切的戒煙方法，徹底遠離所有吸煙產品，而非利用電子煙或加熱煙等其他產品作替代。委員會的「戒煙大贏家」無煙社區計劃結合戒煙比賽、媒體宣傳、戒煙輔導和科學研究等元素推動吸煙人士戒煙。第十屆「戒煙大贏家」的冠軍得主柯文武，曾經嘗試以電子煙及加熱煙戒煙，但這些產品未能協助他戒掉煙癮，反而令他吸煙次數有所增加，更同時吸食多種吸煙產品。柯先生透過比賽明白其他形式的煙草產品並非有效的戒煙工具，而且會影響健康。他接受了適當的戒煙輔導及中醫針灸之後，成功戒掉煙癮，重拾健康生活。委員會將他的戒煙經歷和分享拍攝成宣傳短片，於電視、網上平台及社交媒體宣傳另類吸煙產品無助戒煙，並鼓勵吸煙人士使用正確的戒煙方法及服務。

另外，委員會以「無煙新頻道」為主題作世界無煙日之宣傳推廣計劃，提醒市民拒絕傳統煙草及另類吸煙產品，推動非吸煙人士透過網上平台分享無煙生活心得，鼓勵吸煙人士建立健康的嗜好代替吸煙，如做運動、聽音樂、畫畫、跳舞等，活出無煙健康生活。計劃中的「一人一個無煙心 Duck」活動，透過邀請小學生填色及承諾向任何形式的煙草產品說不，向身邊的家人、朋友、市民、政府及立法會議員表達無煙願望，亦鼓勵同學展示作品予身邊家人欣賞及一同簽署支持全禁另類吸煙產品，將信息傳遞至全港每一個角落。

致：我的家人、香港市民、香港特區政府、立法會議員：



Smokers should look for proper and effective methods of smoking cessation for a complete stop on smoking instead of using e-cigarettes and HNB tobacco products as an alternative. The “Quit to Win” Smoke-free Community Campaign introduced by COSH combined the features of smoking cessation contest, media promotion, smoking cessation counseling and scientific research to encourage smokers kicking the habit. OR Man-mo, the champion of the 10<sup>th</sup> “Quit to Win” Contest, shared that he tried to stop smoking by using e-cigarettes and HNB tobacco products but the quit attempt failed. He even smoked more frequently and used different tobacco products at the same time. Since he joined the contest, he realized that all forms of tobacco products increase health risks and are not effective smoking cessation tools. After he received proper smoking cessation advices and used Chinese acupuncture to cope with the withdrawal symptoms, he quitted successfully. Mr Or’s experience and sharing were videotaped and broadcast at television, online promotion and social media platforms to urge smokers quit smoking by proper ways and services.



Besides, COSH launched a publicity programme with the theme of “Smoke-free Channel” to echo the World No Tobacco Day. The programme aimed to remind people to say no to all forms of tobacco products, motivate smokers to replace the habit by healthy hobbies like doing exercise, listening to music, drawing and dancing, as well as share smoke-free messages via the online platforms. COSH also invited primary students to join the “Share Smoke-free Messages Together with B.Duck” Activity to stay smoke-free and deliver their wishes to their family and friends, citizens, the Government and members of the Legislative Council. They were encouraged to show their entries and urge family’s support for a total ban on alternative smoking products.





## 防患於未然 從速全禁另類煙

《2019年吸煙(公眾衛生)(修訂)條例草案》(條例草案)獲得社會各界包括醫學界、學術界、家長及教育界、青少年及社會服務團體、病人組織等的支持。根據青少年服務團體、家長及教師組織等的調查，分別有七至九成市民支持全面禁止另類吸煙產品，可見社會上對支持條例草案存有普遍共識。雖然修例草案最終因立法會會期不足而終止審議，委員會相關的宣傳、教育及倡議的工作，以及傳媒報導已引起市民大眾的關注及支持。

無論對吸煙或非吸煙人士，另類吸煙產品的健康風險是無庸置疑的。為防患於未然，委員會將繼續加強相關的宣傳及教育，以增強市民對煙害的認識，並集結社會各界一同支持全面禁止另類吸煙產品，為日後重啟修例工作打好基礎。

## Impose a Total Ban on Alternative Smoking Products Promptly to Nip it in the Bud

Majority of the public supported the Smoking (Public Health) (Amendment) Bill 2019 (the Bill) for a total ban, including medical and healthcare professionals, academia, parents and education sector, youth and social service organizations, patient groups, etc. According to the surveys conducted by youth service groups, parents and teachers associations, 70%-90% of the respondents agreed to ban alternative smoking products completely, which reflected common consensus for the Bill. Despite the Bills Committee discontinued its scrutiny work on the Bill, the related publicity, education and advocacy works of COSH with wide media coverage strengthened public awareness and support for the total ban.

The health risks of alternative smoking products are crystal clear to both smokers or non-smokers. To nip it in the bud, COSH would continue to strengthen the publicity and education to disseminate the hazards and solicit public support to lay the foundation for the resumption of the legislation work in the future.



# 共創無煙新角度

Embrace a Smoke-free  
Lifestyle Together





# 活動 Events



宣傳及社區推廣活動

Publicity & Community Involvement Projects

教育及青少年活動

Education & Youth Programmes

與傳播媒介之聯繫

Working with the Mass Media

會議及考察

Conferences & Visits

資訊及研究項目計劃

Information & Research Projects

# 活動紀要 2019-2020

## Highlights of Events 2019-2020



### 宣傳及社區推廣活動

### Publicity and Community Involvement Projects

#### 推廣活動 Publicity Projects

2019/4 – 2020/3	支持「全面禁止電子煙及其他新煙草產品」簽名行動	“Support to Enact a Total Ban on E-cigarettes and Other New Tobacco Products” Signatory Campaign
2019/4/13	「支持全面禁止另類吸煙產品」集會	Rally on “Support to Enact a Total Ban on Alternative Smoking Products”
2019/4/13, 4/25, & 4/27	《2019年吸煙(公眾衛生)(修訂)條例草案》公聽會	Deputation Meetings on Smoking (Public Health) (Amendment) Bill 2019
2019/5 – 2019/6	香港浸會大學傳理學院無煙宣傳短片	Smoke-free Videos from the School of Communication, Hong Kong Baptist University
2019/5 – 2020/3	「無煙新頻道」宣傳推廣計劃	“Smoke-free Channel” Publicity Campaign
2019/5/23	「促請儘快全禁另類吸煙產品」記者會	“Enact a Total Ban on Alternative Smoking Products Promptly” Press Conference
2019/5/31	世界無煙日啟動禮	Kick-off Event of Smoke-free Publicity Programme for World No Tobacco Day
2019/5/31	「無煙生活」主題曲及音樂短片推廣	“Smoke-free Life” Theme Song and Music Video Promotion
2019/6 – 2020/3	第十屆「戒煙大贏家」無煙社區計劃	The 10 <sup>th</sup> “Quit to Win” Smoke-free Community Campaign
2019/6 – 2020/3	香港無煙領先企業大獎2019	Hong Kong Smoke-free Leading Company Awards 2019
2019/8/3-4	「戒煙服務大募集」活動	“Smoking Cessation Services Assemble” Event
2019/9 – 2020/3	「煙害2.0 另類煙害你要知」健康教育宣傳	“Smoking Hazards 2.0” Health Education and Publicity Programme
2019/12/16	全新宣傳短片「吸煙實有害 唔好中計」及「戒煙斷·捨·離」	New APIs “Smoking Harms. Don't be Cheated!” and “Quit and Go for a New Life”
2020/1 – 2020/2	倡議增加煙草稅	Advocacy on Raising Tobacco Tax
2020/1/14	「大幅增加煙草稅從速實現全面禁煙」記者會	“Raising Tobacco Tax Substantially to Achieve Tobacco Endgame” Press Conference
2020/2 – 2020/3	宣傳吸煙與2019冠狀病毒病的關係	Promotion on the Correlation between Smoking and Coronavirus Disease 2019



## 社區聯繫及推廣 Community Involvement and Promotion

2019/4 – 2020/1	「無煙老友記」計劃 2019-2020	Elderly Smoking Cessation Promotion Project 2019-2020
2019/4/21	「無煙健康人生更美好」嘉年華	Smoke-free Carnival in Sha Tin
2019/4/28	香港新聲會「有你在旁同聲同樂」 周日嘉年華暨無喉者中心開放日	"Togetherness, We are the Voice that Shine" Sunday Carnival cum Open Day of the New Voice Club of Hong Kong
2019/5/1	「家校合作顯關愛」嘉年華	Home-School Co-operation Carnival
2019/7/8, 2019/11/7	香港鐵路有限公司無煙推廣活動	Smoke-free Promotion Programmes of MTR Corporation Limited
2019/7/14	香港賽馬會無煙推廣活動	Smoke-free Promotion Campaign of The Hong Kong Jockey Club
2019/8/2-4	香港國際牙科博覽暨研討會 2019	Hong Kong International Dental Expo and Symposium 2019
2019/8/17	「愛·營動」家庭健康體驗日	Health Family Day of Christian Family Service Centre
2019/9/1	癌症資訊網慈善基金「越跑越友慈善賽」	"Run For Passion" of the Cancerinformation.com.hk Charity Foundation
2019/9/7-8	2019/2020 年度中西區健康節	Central and Western District Health Festival 2019/2020
2020/1/7	「無煙老友大使」嘉許典禮	"Smoke-free Elderly Ambassadors" Appreciation Ceremony
2020/1/18	中華電力安全健康環保日 2019	CLPP Safety, Health & Environment (SHE) Day 2019

## 教育及青少年活動 Education and Youth Programmes

### 青少年教育活動 Youth Education Programmes

2019/4 – 2020/3	「無煙新世代」健康教育講座	Health Talks for "Smoke-free New Generation"
2019/7 – 2020/3	「無煙Teens計劃」2019-2020	"Smoke-free Teens Programme" 2019-2020
2019/10 – 2020/3	學校互動教育巡迴劇場「無煙大搜查」	School Interactive Education Theatre "Smoke-free Detective Adventure"

### 與學界及社區聯繫 Liaison with Academia and Community

2019/4/1, 2020/3/30	香港大學護理學院課程	HKU School of Nursing – Nursing Programme
2019/4/26, 2019/5/27	救世軍新界西綜合服務 – 聯校學生領袖訓練計劃	New Territories West Integrated Service, The Salvation Army – Joint School Student Leadership Training Scheme
2019/5/14 -15	2019年醫院管理局研討大會	Hospital Authority Convention 2019
2019/9/21	香港大學青少年戒煙熱線 – 戒煙輔導員培訓課程	HKU Youth Quitline – Smoking Cessation Counselor Training Workshop





## 會議及考察

## Conferences and Visits

## 會議 Conferences

2019/11/11-15	控煙專才培訓計劃 2019	Fellowship Programme on Tobacco Control 2019
2019/11/17-19	第 20 屆全國控煙學術研討會暨第十屆海峽兩岸及香港澳門地區煙害防治研討會	The 20 <sup>th</sup> National Symposium on Tobacco Control cum the 10 <sup>th</sup> Cross-strait, Hong Kong and Macau Tobacco Control Conference

## 考察活動 Visits

2019/5/24	2019 世界無煙日暨無煙澳門健康生活協會成立十週年	World No Tobacco Day 2019 cum the 10 <sup>th</sup> Anniversary of Smoke-free & Healthy Life Association of Macau
2019/10/9	衛生署健康促進處	Health Promotion Branch, Department of Health

# 宣傳及社區推廣活動

## Publicity and Community Involvement Projects



推廣活動

Publicity Projects

### 倡議全面禁止另類吸煙產品

鑑於另類吸煙產品近年於全球迅速蔓延盛行，為抑制此類產品於香港廣泛流行，委員會積極倡議全面禁止另類吸煙產品。委員會欣見政府於2019年初提出《2019年吸煙(公眾衛生)(修訂)條例草案》(條例草案)，同時於憲報上刊登條例草案內容，以禁止進口、製造、售賣、分發和宣傳另類吸煙產品，包括電子煙、加熱非燃燒煙草製品(加熱煙)及草本煙。立法會隨即成立法案委員會，亦就有關條例草案進行審議及舉行多次公聽會。

委員會於年間透過多管齊下的宣傳、教育、研究及倡議的工作，包括聯絡各界支持人士參與公聽會、團結不同組織舉行集會、邀請專家舉辦記者會、發起簽名行動及籌劃「煙害2.0另類煙害你要知」健康教育宣傳等，以爭取廣大市民支持條例草案。

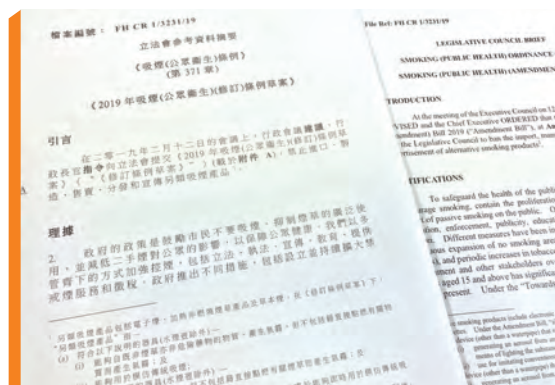
委員會於2018年委託香港大學護理學院進行的「控煙政策調查」發現，大部分市民(60%)支持全面禁止另類吸煙產品，而近三分之二(約65%)提交法案委員會之意見均支持條例草案，包括來自不同界別的重要團體和人士；更有團體調查指出七成半的家長贊成「全禁」，當中超過一半(56%)吸煙的家長亦表示支持，可見普遍市民均支持全面禁止另類吸煙產品。

### Advocacy on a Total Ban on Alternative Smoking Products

Use of alternative smoking products surged exponentially around the globe and became an epidemic. COSH urged the Government for a total ban to nip in the bud the proliferation of alternative smoking products before they become popular to safeguard public health. The Government proposed the Smoking (Public Health) (Amendment) Bill 2019 (the Bill) to prohibit the import, manufacture, sale, distribution and advertisement of alternative smoking products in early 2019 including electronic cigarettes (e-cigarettes), heat-not-burn (HNB) tobacco products and herbal cigarettes, which was published in Government Gazette. Legislative Council formed a Bills Committee to review the Bill and several deputation meetings were held.

COSH proactively solicited public support for the Bill through publicity, education, research and advocacy works including lined up supporters to attend the deputation meetings, held a joint rally with different sectors, invited experts to host press conference, organized a signatory campaign, as well as launched the "Smoking Hazards 2.0" Health Education and Publicity Programme.

COSH commissioned the School of Nursing of The University of Hong Kong to conduct the Tobacco Control Policy-related Survey in 2018 and revealed that 60% of citizens supported the total ban. Also, about two-thirds (around 65%) of submissions to the Bills Committee from different social sectors supported the Bill. Other survey showed that 75% of responded parents agreed a total ban on alternative smoking products while over half of the smoking parents (56%) also supported.





惟立法會最終因會期不足而終止審議條例草案，委員會對此表示非常失望及遺憾，認為錯失立法良機，但相關工作及報導已引起大眾的關注，委員會將繼續加強宣傳教育及團結各界支持，並期望政府及立法會於下屆立法年度儘快重啟有關立法工作，以有效抑制另類吸煙產品的蔓延流行。

### 《2019年吸煙(公眾衛生)(修訂)條例草案》公聽會

立法會法案委員會就條例草案召開會議，並分別於2019年4月13、25及27日舉行公聽會，邀請公眾發表意見。超過125位來自社會各界的市民及團體代表出席會議，包括醫學界、學術界、家長及教育界、青少年及社會服務團體、病人組織等均發表意見支持全禁另類吸煙產品。

委員會主席鄭祖盛亦出席會議陳述委員會的立場，並展示近年關於另類吸煙產品危害的研究報告，闡述煙草商就此類產品的誤導宣稱，促請政府及立法會儘快通過條例草案，保障公眾衛生。另外，亦有超過4,000份的書面意見，表達對全禁另類吸煙產品的訴求。

COSH expressed deep regret and disappointment at the decision of the Bills Committee to discontinue its scrutiny work on the Bill. However, the related advocacy works and media coverage aroused public awareness on the issue. COSH would continue to strengthen publicity, education and solicit public support. COSH also urged the Government and Legislative Council to resume the legislation work as soon as possible in the next Legislative Year to stop the wide spread of alternative smoking products.

### Deputation Meetings on Smoking (Public Health) (Amendment) Bill 2019

Legislative Council had formed a Bills Committee to review the Bill and held deputation meetings on 13, 25 and 27 April 2019 to invite public opinion on the Bill. Over 125 individuals and representatives of organizations from different sectors, including medical and healthcare professionals, academia, parents and education sector, youth and social service organizations, patient groups, etc., attended the meetings and expressed positive views on the Bill.

Antonio KWONG, COSH Chairman also attended the meeting to emphasize the stance of COSH, submit the latest evidences on the hazards of alternative smoking products, clarify the misleading claims made by tobacco industry, and urge the Government and Legislative Council to pass the Bill as soon as possible to safeguard public health. Furthermore, among the written submissions received by the Legislative Council, over 4,000 supported the enactment of the total ban on alternative smoking products.



### 「支持全面禁止另類吸煙產品」集會

委員會於2019年4月13日聯同逾百位來自不同界別的團體代表於立法會門外舉行集會，支持全面禁止另類吸煙產品，並向政府及立法會議員遞交請願信以反映市民的期望，促請儘快完成審議及通過條例草案，以防患於未然。

委員會主席鄭祖盛表示，「委員會重申世界上並沒有安全無害的煙草產品，倘若讓另類吸煙產品合法流入香港市場，將會為市民帶來更大的健康損害和風險，因此促請立法會儘快全面禁止另類吸煙產品，以保障市民健康，並防止此類產品像疫情般於香港蔓延，禍及下一代。」



參與集會之團體及機構名單：

#### 控煙團體

- 香港吸煙與健康委員會
- 香港大學女性戒煙計劃
- 香港大學青少年戒煙熱線
- 東華三院戒煙綜合服務中心
- 基督教聯合那打素社康服務

#### 學術界

- 香港大學護理學院
- 香港大學公共衛生學院

#### 學生組織

- 香港亞洲醫學生學生會
- 香港大學學生會醫學會
- 香港中文大學學生會醫學院院會
- 香港醫學會青年委員會醫學生附屬委員會

#### 醫護界

- 香港護理專科學院有限公司

### Rally on “Support to Enact a Total Ban on Alternative Smoking Products”

COSH organized a rally outside the Legislative Council, together with over 100 representatives from different sectors, to reflect the public support to enact a total ban on alternative smoking products promptly. Petition letters were submitted to the Government and members of the Legislative Council in order to urge the passage of the Bill in order to prevent these products from becoming popular.

Antonio KWONG, COSH Chairman remarked, “We have to emphasize that there is no safe and harmless tobacco product in the world. It would be hazardous if alternative smoking products are introduced in the market. To protect the health of the public, especially the next generation, the Legislative Council should pass the Bill to enact a total ban promptly, in order to prevent its epidemic in Hong Kong.”

Participated Organizations:

#### Tobacco Control Groups

- Hong Kong Council on Smoking and Health
- HKU Women Quit
- HKU Youth Quitline
- Tung Wah Group of Hospitals Integrated Centre on Smoking Cessation
- United Christian Nethersole Community Health Service

#### Academia

- School of Nursing, The University of Hong Kong
- School of Public Health, The University of Hong Kong

#### Student Groups

- Asian Medical Students' Association Hong Kong
- Medical Society, The Hong Kong University Students' Union
- Medical Society, The Student Union of The Chinese University of Hong Kong
- Medical Students' Subcommittee, Youth Committee, The Hong Kong Medical Association

#### Medical and Healthcare Professionals

- The Hong Kong Academy of Nursing Limited

**教育界**

- 香港中學校長會
- 嶺南鍾榮光博士紀念中學

**青少年及社會服務團體**

- 香港遊樂場協會
- 香港小童群益會

**病人組織**

- 香港病人組織聯盟有限公司
- 香港病人政策連線

**地區組織及商會**

- 金紫荊女企業家協會
- 香港九龍潮州公會
- 香港潮州商會
- 香港新興科技教育協會
- 中區扶輪社
- 海外潮人企業家協會
- 油尖區賢毅社

**支持「全面禁止電子煙及其他新煙草產品」  
簽名行動**

為向政府及立法會反映市民對全面禁止另類吸煙產品的訴求，儘快通過條例草案，並為全面禁煙訂立時間表，委員會聯同多個醫學團體、控煙組織、學術團體及非政府組織發起支持「全面禁止電子煙及其他新煙草產品」簽名行動，透過地區宣傳活動及網上專頁收集公眾支持，同時教育市民向所有吸煙產品說不。截至2020年3月，共有逾11萬名市民、機構及企業簽名支持，可見社會不同界別均支持全面禁止另類吸煙產品，而委員會亦向立法會提交簽名，以支持從速通過條例草案。

**Education Sector**

- The Hong Kong Association of the Heads of Secondary Schools
- Lingnan Dr Chung Wing Kwong Memorial Secondary School

**Youth Service Organizations**

- Hong Kong Playground Association
- The Boys' & Girls' Clubs Association of Hong Kong

**Patient Groups**

- Hong Kong Alliance of Patients' Organization Limited
- Hong Kong Patients' Voices

**District Organizations and Chambers**

- Golden Bauhinia Women Entrepreneur Association
- Hong Kong and Kowloon Chiu Chow Public Association
- Hong Kong Chiu Chow Chamber of Commerce
- Hong Kong New Emerging Technology Education Association
- Rotary Club of Central
- The Overseas Teo Chew Entrepreneurs Association
- Yau Tsim District Yin Ngai Society

**“Support to Enact a Total Ban on E-cigarettes and Other  
New Tobacco Products” Signatory Campaign**

To gather public support and reflect the social aspiration for a total ban on alternative smoking products, COSH co-organized the “Support to Enact a Total Ban on E-cigarettes and Other New Tobacco Products” Signatory Campaign with various medical associations, tobacco control organizations, academia and non-governmental organizations. Through community promotion and signatory webpage, the campaign gathered support from the public and educated them to say no to all smoking products. As of March 2020, over 110,000 signatures were collected from the members of public, organizations and companies which showed the support of different sectors of the society for the total ban. The signatories were submitted to the Legislative Council to urge the Government and Legislative Council to enact the Bill promptly and formulate a timeline for total ban of smoking.





#### 「促請儘快全禁另類吸煙產品」記者會

委員會於2019年5月23日舉行記者會，邀請控煙專家分享另類吸煙產品於全球市場的發展趨勢，及發表對香港全面禁止此類產品的建議，以促請立法會從速通過條例草案。記者會講者包括亞洲反吸煙諮詢所總監及世界衛生組織（世衛）資深政策顧問麥龍詩迪教授、新加坡國立大學蘇瑞福公共衛生學院謝繼成教授、香港大學公共衛生學院社會醫學講座教授暨羅旭龢基金教授（公共衛生學）林大慶教授、香港大學公共衛生學院副教授何世賢博士及委員會主席鄭祖盛。

鄭祖盛表示，「鑑於另類吸煙產品於香港的使用率正迅速以倍數增長，香港應趕及相關產品於市場萌芽之際，及早立法全面禁止其蔓延流行。而大部分（約65%）提交法案委員會之意見均支持條例草案，包括來自不同界別的重要團體和人士，可見普遍市民均支持全面禁止另類吸煙產品，委員會促請立法會從速通過條例草案，切勿錯失立法良機，以保障市民健康。」

#### “Enact a Total Ban on Alternative Smoking Products Promptly” Press Conference

COSH hosted a press conference on 23 May 2019 and invited tobacco control experts to share the global trend and suggestions for a total ban on alternative smoking products in Hong Kong in order to urge the Legislative Council to pass the Bill promptly. Speakers included Prof Judith MACKAY, Director, Asian Consultancy on Tobacco Control and Senior Policy Advisor, World Health Organization (WHO), Prof CHIA Kee-seng, Professor, Saw Swee Hock School of Public Health, National University of Singapore, Prof LAM Tai-hing, Chair Professor of Community Medicine & Sir Robert Kotewall Professor in Public Health, School of Public Health, The University of Hong Kong, Dr Daniel HO, Associate Professor, School of Public Health, The University of Hong Kong and Antonio KWONG, COSH Chairman.

Antonio KWONG remarked, “In view of the prevalence of using alternative smoking products is still low but in a rapid growth, Hong Kong should enact a total ban as soon as possible to nip it in the bud. Majority of the public supported the total ban of alternative smoking products, around 65% of submissions to the Bills Committee from different social sectors supported the Bill. Opportunity knocks but once, COSH urges the Legislative Council to pass the Bill with no further delay to protect public health.”

講者在記者會上指出煙草商於全球各地塑造吸煙行為為時尚生活品味，更贊助各類型活動如演唱會及賽車，恍如早年傳統捲煙的宣傳推廣手法，更重新包裝使吸煙行為正常化，嚴重威脅全球公共衛生健康，因此世衛亦建議各國可根據情況考慮禁止及管制加熱煙。根據新加坡的研究發現，即使這些另類吸煙產品可能令吸煙率在初期略有回落，但最後仍會再次上升。

根據委員會委託香港大學護理學院進行的「控煙政策調查2018」，顯示電子煙及加熱煙在香港的使用情況短時間迅速以倍數上升，曾使用加熱煙的比率由2017年的0.9%急增至2018年的2.1%，而受訪者中約0.7%現時（即過去30天）有使用電子煙，比2017年的0.2%增幅達兩倍，而且曾經使用加熱煙及現時有使用電子煙的受訪者當中，年輕組別（15-29歲）的比率較高，情況令人擔憂。

委員會促請政府及立法會以維護公眾健康為首要依歸，從速通過條例草案。同時，委員會亦倡議政府訂立長遠的控煙政策，確實全面禁煙的目標及時間表，令香港的吸煙率進一步降低，以達致無煙香港。

## 香港浸會大學傳理學院無煙宣傳短片

為提高大眾了解吸煙禍害及推廣無煙生活，委員會與香港浸會大學傳理學院合作邀請學院學生拍攝一系列無煙宣傳短片，九段短片自2019年5月起於大學校園、不同的網上平台及無煙大家庭Facebook專頁內播放，藉此讓同學發揮創意、實踐專業拍攝技巧之餘，亦透過短片喚起公眾關注吸煙的壞處，鼓勵吸煙人士儘早戒煙以保障自己、家人及朋友的健康。

Speakers indicated that smoking behaviour is marketed as a trendy lifestyle globally. Similar to the promotion tactics of conventional cigarettes in the past, tobacco industry sponsors public events such as concert and auto racing around the world, which is renormalizing smoking behaviour. Thus, WHO also recommended that HNB tobacco products should be banned or at minimum be subject to the same regulatory measures applied to all other tobacco products. According to the modeling analysis done in Singapore, alternative smoking products use may lead to an initial decline in smoking prevalence but it will be reversed, making the smoking prevalence increase finally.

COSH commissioned the School of Nursing of The University of Hong Kong to conduct the Tobacco Control Policy-related Survey in 2018 and revealed that the prevalence of e-cigarettes and HNB tobacco products surged significantly in Hong Kong. The prevalence of HNB tobacco product ever use surged from 0.9% in 2017 to 2.1% in 2018 and prevalence of current e-cigarette use (in past 30 days) had increased by two times from 0.2% in 2017 to 0.7% in 2018. It is alarming that the rates are higher among the youngsters (aged 15-29).

COSH urged the Government and Legislative Council to pass the Bill with no further delay to safeguard public health. COSH also advocated the Government to develop long-term tobacco control policies to formulate a bold goal and timeline for a total ban on smoking, in order to further lower the smoking prevalence for a smoke-free Hong Kong.

## Smoke-free Videos from the School of Communication, Hong Kong Baptist University

COSH collaborated with the School of Communication of The Hong Kong Baptist University to invite students to produce nine smoke-free videos featuring the harm of smoking and promotion on smoke-free lifestyle. Since May 2019, videos had been broadcast on campus, multiple online platforms and Smoke-free Family Facebook page. The students could fully unleash their potential and practice their filming knowledge in the production of the videos as well as to raise awareness of tobacco hazards with an aim to encourage smoking cessation for the well-being of smokers and their family and friends.

## 「無煙新頻道」宣傳推廣計劃

世界衛生組織以「煙草和肺部健康」為2019年「世界無煙日」(5月31日)的主題，旨在提醒世界各地人士關注煙草禍害，尤其影響肺部健康，並希望不同界別的持分者能夠攜手參與控煙工作。委員會以「無煙新頻道」為主題舉辦推廣活動，透過宣傳街站、網上平台以及不同組織和機構的網絡，鼓勵市民拒絕任何形式的煙草產品，推動非吸煙人士與身邊的吸煙人士分享無煙生活心得，藉此幫助他們建立健康正面的興趣以取代吸煙習慣，齊齊活出無煙「新角度」。

### 啟動禮

委員會聯同香港電台第一台於2019年5月31日假尖沙咀香港文化中心露天廣場舉行「無煙新頻道 Strive For Life 音樂會」啟動禮。主禮嘉賓包括食物及衛生局局長陳肇始教授、衛生署署長陳漢儀醫生、香港電台總監(電台)周國豐、香港電台中文台台長何重恩、委員會主席鄭祖盛及總幹事黎慧賢。

## “Smoke-free Channel” Publicity Campaign

World Health Organization has designated “Tobacco and Lung Health” as the theme of World No Tobacco Day (31 May) in 2019 with the aims to draw global attention on smoking hazards and lung health, also join hands with stakeholders across multiple sectors to beat the tobacco epidemic. COSH launched a publicity programme with the theme of “Smoke-free Channel”. Variety of promotional activities were held to encourage the mass public to say no to all forms of tobacco products and share smoke-free messages via the street promotion activities, online platform and networks of different organizations. Smokers were urged to develop healthy hobbies for replacing smoking to live smoke-free.

### Kick-off Event

COSH, in collaboration with Radio 1 of Radio Television Hong Kong (RTHK) organized a kick-off event on 31 May 2019 at Piazza, Hong Kong Cultural Centre, Tsim Sha Tsui. Officiating guests included Prof Sophia CHAN, Secretary for Food and Health, Dr Constance CHAN, Director of Health, Brian CHOW, Controller (Radio), RTHK, David HO, Head of Chinese Programme Service, RTHK, Antonio KWONG, COSH Chairman and Vienna LAI, COSH Executive Director.





來自不同年齡階層的表演團體及一眾藝人出席支持，並透過音樂及藝術表演發放無煙正能量，包括醫生無伴奏樂隊Medipella、東華三院E大調合奏團、兒童癌病基金樂隊Miracle及香港明愛「兒」動藝術館。歌手鄭融、洪卓立與林欣彤亦到場獻唱，並分享他們的無煙心得。香港大學公共衛生學院社會醫學講座教授暨羅旭龢基金教授(公共衛生學)林大慶教授與成功戒煙人士分享利用「零時間運動」對抗煙癮及成功戒煙之秘訣。

活動上首播由委員會與香港電台合作製作的三段宣傳短片，分別由三位不同處境人士包括截肢跑手馮錦雄、克服讀寫障礙的滾軸溜冰港隊成員莫境霖，以及成功戒煙的單車導賞員周影鋒之經歷，引證以堅毅不屈的精神克服重重困難，並寄語吸煙人士要堅持戒煙信念。



### 「無煙新頻道」

為了加強市民對世界無煙日的關注，委員會廣發邀請並獲得超過50間企業、非政府組織、醫院、學校及機構支持成為是次活動的合作夥伴，並於2019年5月至6月期間在港、九、新界各區舉辦不同的宣傳推廣活動，鼓勵持分者和公眾支持世界無煙日，將無煙信息傳遞至全港每一個角落。藉著他們的滲透力，活動共吸引了逾1,500名市民加入成為「無煙新頻道」會員，承諾拒絕任何形式的煙草產品，並與身邊的家人尤其吸煙人士分享無煙生活心得，鼓勵他們透過培養不同類型的健康興趣來取代吸煙習慣。

Performers and artists joined hands to promote the benefits of a smoke-free lifestyle through live music and art performances. Performers included "Medipella", an acapella group formed by doctors, "E Major Ensemble", a band of Tung Wah Group of Hospitals, "Miracle", band of Children's Cancer Foundation and Artkids Studio, Caritas Hong Kong. Artists Stephanie CHENG, Ken HUNG and Mag LAM also spread smoke-free messages through singing performances. Prof LAM Tai-hing, Chair Professor of Community Medicine & Sir Robert Kotewall Professor in Public Health, School of Public Health, The University of Hong Kong and quitters were also invited to demonstrate "Zero Time Exercise" for reducing tobacco cravings and share quit tips.

Moreover, three promotional videos produced by COSH and RTHK were premiered at the kick-off event, featuring the life stories of FUNG Kam Hung, an amputee runner, Kenus MOK, a member of Hong Kong roller sports team who had dyslexia, and Ernest CHAU, a bike tour guide who successfully quit smoking, which brought to the audience the importance of perseverance when facing difficult situations and encouraged the smokers never give up quitting.

### "Smoke-free Channel"

To enhance public awareness on World No Tobacco Day, COSH sent invitations and over 50 companies, non-governmental organizations, hospitals, schools and organizations supported and promoted the programme across the territory during May to June 2019. Over 1,500 people joined the "Smoke-free Channel" and said no to all forms of tobacco products, shared the smoke-free messages among their families and friends in order to encourage them to quit smoking by adopting healthy habits as replacement.



### Facebook 抽獎活動及 WhatsApp 無煙貼圖

為鼓勵更多市民加入「無煙新頻道」，委員會於2019年5月31日至6月30日期間舉辦Facebook抽獎活動，鼓勵市民與「無煙大使」B.Duck一起分享無煙心得，並透過社交媒體平台向身邊人推廣無煙文化，齊齊活出「無煙新角度」。「無煙大使」B.Duck亦為活動設計一系列以健康新嗜好為主題的WhatsApp無煙貼圖，由可愛趣緻的B.Duck與同伴們介紹活出「無煙新角度」的好主意，讓市民下載使用及分享無煙信息。



### 商場及街站推廣

委員會於2019年5月至8月期間於港、九、新界舉行了四場「無煙新頻道」商場及街站推廣和招募活動，邀請市民即時加入成為「無煙新頻道」會員，B.Duck亦親身到現場為市民打氣，鼓勵大家培養健康生活習慣。



### Facebook Lucky Draw and Smoke-free WhatsApp Stickers

A lucky draw promotion was held from 31 May to 30 June 2019 to encourage more people to join the "Smoke-free Channel" and spread smoke-free messages with their families and friends via social media for promoting a smoke-free lifestyle. A set of smoke-free WhatsApp stickers featuring different healthy hobbies were jointly designed by COSH and the Smoke-free Ambassador, B.Duck to disseminate the idea of smoke-free lifestyle through daily mobile or online chit-chat.

### Shopping Mall and Street Promotion

Four sessions of shopping mall and street promotion activities were organized from May to August 2019 across the territory to encourage the public to join as a member of the "Smoke-free Channel". B.Duck also attended to support and encourage the citizens to develop healthy lifestyle.



## 「一人一個無煙心 Duck」活動

此外，委員會邀請全港小學生一同參與「一人一個無煙心 Duck」活動。參與的同學為 B. Duck 添加色彩，並寫上自己的無煙願望及心得，告訴身邊的家人朋友、市民、香港特區政府及立法會議員，承諾遠離煙草禍害。同時，活動亦鼓勵同學展示作品予身邊家人和朋友欣賞及簽署支持，將無煙心得傳遞予他們。是次活動獲得全港 70 間小學踴躍參與，收到超過 15,000 份參賽作品，成功將無煙信息傳遞至約 57,000 名學生及家人。



活動網頁: [www.smokefree.hk/channel](http://www.smokefree.hk/channel)

## 「無煙生活」主題曲及音樂短片推廣

由八位專科醫生組成的無伴奏樂隊 Medipella 與委員會合作推出主題曲「無煙生活」，以無伴奏合唱的演繹方式配以輕快旋律及琅琅上口的歌詞，帶出無煙生活的重要性。歌曲道出吸煙不能幫助減壓，並提醒大眾吸煙危害健康，呼籲吸煙人士儘快停止吸煙，其音樂宣傳短片亦於各社交媒體上廣泛傳播。

## “Share Smoke-free Messages Together with B.Duck” Activity

In addition, COSH invited all local primary schools students to join the “Share Smoke-free Messages Together with B.Duck” Activity. Students could design and colour a B.Duck worksheet and pledge to stay away from cigarettes. They also wrote their smoke-free wishes and messages for their families, friends, citizens, the Government and members of the Legislative Council. Students were encouraged to show their entries to families and friends to promote the importance of a smoke-free family and motivate smokers to kick the habit. The activity received overwhelming response and attracted more than 15,000 entries from 70 primary schools, reached around 57,000 students and their families.

Activity Website: [www.smokefree.hk/channel](http://www.smokefree.hk/channel)

## “Smoke-free Life” Theme Song and Music Video Promotion

“Medipella”, an acapella group formed by eight medical specialists, produced a theme song titled “Smoke-free Life” in collaboration with COSH. Acappella rendition of the song carrying memorable melody and lyrics delivered the messages about the importance of a smoke-free lifestyle. The song highlighted the smoking hazards and reminded the audience to stop smoking immediately since it could not help relieve stress. The music video of the song was also broadcast on multiple social media channels.





## 第十屆「戒煙大贏家」 無煙社區計劃



委員會自2009年起舉辦「戒煙大贏家」比賽，為吸煙人士提供一個戒煙診所以外的平台，鼓勵及協助他們戒煙，每年均成功招募逾千名市民參與，決心戒煙，重拾無煙健康生活。

為了營造有利戒煙的社會氛圍及加強社區人士對控煙工作的關注，委員會自2012年開始推出「戒煙大贏家」無煙社區計劃，多年來得到區議會、地區合作夥伴和其他機構的支持，舉辦一連串具地區特色的無煙推廣活動，配合媒體宣傳、戒煙輔導和科學研究等元素推動戒煙，宣揚無煙健康生活。

第十屆「戒煙大贏家」無煙社區計劃再次得到18區區議會及地區合作夥伴的支持，在全港舉辦近140場招募及宣傳活動，並與懲教署、香港賽馬會、領展資產管理有限公司、中華電力有限公司、餐飲業、建造業及運輸業的商會及機構合作，將無煙信息推廣至不同界別，營造有利的社會氛圍，建立無煙環境。

### 無煙大使戒煙輔導訓練課程

委員會與香港大學護理學院及公共衛生學院邀請了近70名地區合作夥伴及支持機構的職員、義工及大學生，參與於2019年6月3日及19日舉辦的「無煙大使戒煙輔導訓練課程」，以提升他們對控煙工作及戒煙輔導的知識，協助他們日後在區內舉辦招募及無煙宣傳活動。

## The 10<sup>th</sup> “Quit to Win” Smoke-free Community Campaign

COSH has been organizing the “Quit to Win” Contest since 2009 to motivate smokers to kick the habit. The contest provides an alternative platform to assist smokers to combat the tobacco cravings, in addition to cessation clinics, which mobilizes over 1,000 smokers to kick the habit every year.

To create a favorable social atmosphere for smoking cessation and increase public awareness on tobacco control, COSH has launched the “Quit to Win” Smoke-free Community Campaign with the support from the District Councils, community organizations and other supporting organizations since 2012. The Campaign motivates smokers to quit and promotes the smoke-free lifestyle through a series of district-based smoke-free promotion activities, media promotion, counseling and scientific research on smoking cessation.

With the continuous support from the 18 District Councils and district working partners, COSH launched the 10<sup>th</sup> “Quit to Win” Smoke-free Community Campaign and organized around 140 recruitment and promotion activities across the territory. Together with the support from Correctional Services Department (CSD), The Hong Kong Jockey Club, Link Asset Management Limited, CLP Power Hong Kong Limited, trade associations from catering, construction and transportation industries, the Campaign promoted smoke-free messages to a wide spectrum of the society.

### Smoking Cessation Counseling Trainings

Two sessions of Smoking Cessation Counseling Training were held on 3 and 19 June 2019 in collaboration with the School of Nursing and School of Public Health of The University of Hong Kong. Nearly 70 staff members, volunteers and university students from district working partners and supporting organizations joined the trainings. The participants enhanced their tobacco control knowledge, smoking cessation skills and acquired the know-how in organizing recruitment sessions and smoke-free promotion activities.

課程由香港大學公共衛生學院社會醫學講座教授暨羅旭龢基金教授(公共衛生學)林大慶教授、委員會總幹事黎慧賢及項目籌劃高級經理朱偉康、戒煙輔導資深護士陳弄年、戒煙輔導護士陸子璉及香港大學護理學院戒煙治療研究組劉正彥主講，第九屆「戒煙大贏家」比賽冠軍劉偉明亦獲邀出席分享其成功戒煙心得。課程以講座、小組討論及理論實踐的形式進行，內容包括「戒煙大贏家」無煙社區計劃簡介、吸煙、二手煙及三手煙的禍害、香港控煙工作的現況、戒煙輔導技巧及動機性訪談法等。



### 「戒煙服務大募集」活動

「戒煙大贏家」無煙社區計劃於2019-2020年度踏入十周年，委員會聯同戒煙服務機構，包括博愛醫院、九龍樂善堂、東華三院戒煙綜合服務中心、基督教聯合那打素社康服務及香港大學青少年戒煙熱線，於2019年8月3日及4日假淘大商場舉行「戒煙服務大募集」活動，向市民介紹戒煙輔導服務及提倡無煙健康生活，有意戒煙的人士更可即場登記免費戒煙服務。

食物及衛生局局長陳肇始教授及委員會主席鄭祖盛亦出席支持活動，與戒煙服務機構分享控煙心得。此外，「無煙大使」B.Duck擔任活動的神秘嘉賓，呼籲大眾投入無煙生活，並主動提醒身邊親友早日遠離所有煙草產品。



Speakers included Prof LAM Tai-hing, Chair Professor of Community Medicine & Sir Robert Kotewall Professor in Public Health, School of Public Health, The University of Hong Kong, Vienna LAI, COSH Executive Director, Lawrence CHU, COSH Senior Project Manager, Anita CHAN, experienced smoking cessation nurse, Kevin LUK, smoking cessation nurse and Matthew LAU, Smoking Cessation Research Team, School of Nursing of The University of Hong Kong. Champion of the 9<sup>th</sup> "Quit to Win" Contest, LAU Wai-ming was also invited to share his successful quit story and tips. Through seminar, group discussion and case studies, details of "Quit to Win" Smoke-free Community Campaign, hazards of smoking, secondhand and third-hand smoke, tobacco control in Hong Kong, skills in smoking cessation counseling and motivational interviewing were introduced to the participants.

### “Smoking Cessation Services Assemble” Event

To mark the 10<sup>th</sup> anniversary of “Quit to Win” Smoke-free Community Campaign in 2019-2020 and promote the cessation services, COSH organized the “Smoking Cessation Services Assemble” Event on 3 and 4 August 2019 at Amoy Plaza. The event was collaborated with smoking cessation service providers, including Pok Oi Hospital, The Lok Sin Tong Benevolent Society, Kowloon, Tung Wah Group of Hospitals Integrated Centre on Smoking Cessation, United Christian Nethersole Community Health Service and Youth Quitline of The University of Hong Kong. Information on smoking cessation services and smoke-free healthy lifestyle was shared. Smokers could register for the free smoking cessation services on site.

Prof Sophia CHAN, Secretary for Food and Health and Antonio KWONG, COSH Chairman also supported the event and exchanged experiences in tobacco control with the smoking cessation service providers. Smoke-free Ambassador, B. Duck appeared and called upon public support to live smoke-free and remind family and friends to stay away from all tobacco products.



透過即場的健康測試、展覽及有趣的攤位遊戲，委員會與近2,000名市民分享有關吸煙禍害及戒煙好處的資訊，並成功鼓勵約50名吸煙人士即場登記戒煙服務及參與「戒煙大贏家」比賽，踏出戒煙第一步。



### 地區招募及無煙宣傳活動

委員會於2019年6月至9月期間，在全港18區進行了逾80場招募活動，並聯同地區合作夥伴及支持機構舉辦約60場地區無煙展覽宣傳活動，成功招募超過1,000名吸煙人士參加戒煙比賽，並將無煙信息傳遞予約55,000名市民。約500名地區合作夥伴的職員及義工協助於區內舉辦無煙展覽及不同類型的宣傳活動，如健康講座、社區宣傳、嘉年華、繪畫比賽、街站及外展宣傳等，推廣戒煙及宣傳煙草禍害，並加強市民對控煙工作的支持。



Health check, exhibition and interesting game booths were held at the event reaching about 2,000 citizens. Around 50 smokers signed up for smoking cessation services and enrolled in the "Quit to Win" Contest.

### District Recruitment and Smoke-free Promotion Activities

From June to September 2019, COSH conducted over 80 recruitment sessions across the 18 districts in Hong Kong. With the support from district working partners and supporting organizations, around 60 smoke-free exhibitions and promotion activities were also organized. The Campaign successfully recruited over 1,000 smokers to join the smoking cessation contest and disseminated smoke-free messages to around 55,000 members of public. Around 500 staff and volunteers of the district working partners participated in organizing different smoke-free exhibitions and promotion activities across the territory, including health talks, district promotion, carnivals, drawing competition, roadshow and outreach promotions to increase public awareness on smoking hazards and tobacco control.





## 地區合作夥伴

## District Working Partners

中西區 Central & Western	明愛莫張瑞勤社區中心 Caritas Mok Cheung Sui Kun Community Centre
東區 Eastern	香港耆康老人福利會 – 柴灣長者地區中心 The Hong Kong Society for Aged – Chai Wan District Elderly Community Centre
離島 Islands	離島婦聯有限公司 Hong Kong Outlying Islands Women's Association Limited
九龍城 Kowloon City	九龍樂善堂 The Lok Sin Tong Benevolent Society, Kowloon
葵青 Kwai Tsing	葵青安全社區及健康城市協會 Kwai Tsing Safe Community and Healthy City Association
觀塘 Kwun Tong	觀塘健康城市督導委員會 Kwun Tong Healthy City Steering Committee 宏施慈善基金社會服務處 Windshield Charitable Foundation Social Services
北區 North	香港青年協會賽馬會祥華青年空間 The Hongkong Federation of Youth Groups Jockey Club Cheung Wah Youth SPOT
西貢 Sai Kung	基督教靈實協會 Haven of Hope Christian Service 科大侍學行 HKUST Connect
沙田 Sha Tin	香港青少年服務處馬鞍山青少年外展社會工作隊 Hong Kong Children and Youth Services Ma On Shan Youth Outreaching Social Work Team
深水埗 Sham Shui Po	宏施慈善基金深水埗社會服務處 Windshield Charitable Foundation Sham Shui Po Social Services
南區 Southern	香港南區婦女會 Hong Kong Southern District Women's Association 南區健康安全協會有限公司 Southern District Healthy and Safe Association Limited
大埔 Tai Po	大埔青年協會 Tai Po Youths Association
荃灣 Tsuen Wan	荃灣安全健康社區督導委員會 Tsuen Wan Safe and Healthy Community Steering Committee
屯門 Tuen Mun	基督復臨安息日會山景綜合青少年服務中心 Shan King Integrated Children and Youth Services Centre of Seventh-day Adventists

灣仔 Wan Chai	鄰舍輔導會東區／灣仔外展社會工作隊 The Neighbourhood Advice-Action Council Eastern/Wanchai District Youth Outreaching Social Work Team
黃大仙 Wong Tai Sin	聖母醫院 Our Lady of Maryknoll Hospital 黃大仙區健康安全城市 Wong Tai Sin District Healthy and Safe City
油尖旺 Yau Tsim Mong	基督教聯合那打素社康服務 United Christian Nethersole Community Health Service
元朗 Yuen Long	天水圍婦聯有限公司 Tin Shui Wai Women Association Limited

「戒煙大贏家」地區招募及無煙宣傳活動

“Quit to Win” District Recruitment and Smoke-free Promotion Activities

日期 Date	地區 District	地點 Venue
2019/6/15	荃灣 Tsuen Wan	荃新天地 Citywalk
2019/6/16	西貢 Sai Kung	新都城一期 MCP One
2019/6/22	九龍城 Kowloon City	晴朗商場 Ching Long Shopping Centre
2019/6/22	屯門 Tuen Mun	屯門市廣場 Tmtplaza
2019/6/23	黃大仙 Wong Tai Sin	黃大仙上邨 Upper Wong Tai Sin Estate
2019/6/23	元朗 Yuen Long	天澤商場 Tin Chak Shopping Centre
2019/6/27 & 8/4	葵青 Kwai Tsing	葵涌廣場 Kwai Chung Plaza
2019/6/29	沙田 Sha Tin	禾輦廣場 Wo Che Plaza
2019/6/29-30	觀塘 Kwun Tong	大本型 Domain Mall
2019/6/30	屯門 Tuen Mun	建生商場 Kin Sang Shopping Centre
2019/7/5	元朗 Yuen Long	天恩商場 Tin Yan Shopping Centre
2019/7/6	離島 Islands	富東邨 Fu Tung Estate

2019/7/6 & 8/11	西貢 Sai Kung	尚德廣場 Sheung Tak Plaza
2019/7/7	九龍城 Kowloon City	何文田廣場 Homantin Plaza
2019/7/7	油尖旺 Yau Tsim Mong	旺角中心 Argyle Centre
2019/7/8	觀塘 Kwun Tong	港鐵九龍灣車廠 MTR Kowloon Bay Depot
2019/7/9	葵青 Kwai Tsing	青衣市場 Maritime Market
2019/7/13	屯門 Tuen Mun	良景廣場 Leung King Plaza
2019/7/13 & 8/14	油尖旺 Yau Tsim Mong	尖沙咀海防道 Haiphong Road, Tsim Sha Tsui
2019/7/14	北區 North	彩園廣場 Choi Yuen Plaza
2019/7/14	深水埗 Sham Shui Po	海麗商場 Hoi Lai Shopping Centre
2019/7/15	中西區 Central & Western	中環皇后大道中 Queen's Road Central, Central
2019/7/20	沙田 Sha Tin	馬鞍山廣場 Ma On Shan Plaza
2019/7/20	黃大仙 Wong Tai Sin	鳳德商場 Fung Tak Shopping Centre 東頭社區中心 Tung Tau Community Centre
2019/7/21	北區 North	港鐵粉嶺站出口 Exit of Fanling MTR Station
2019/7/21	大埔 Tai Po	港鐵大埔墟站出口 Exit of Tai Po Market MTR Station
2019/7/25	灣仔 Wan Chai	合和中心 Hopewell Centre
2019/7/27	深水埗 Sham Shui Po	香港賽馬會深水埗桂林街投注站 HKJC Sham Shui Po Kweilin Street Off-course Betting Branch
2019/7/28	深水埗 Sham Shui Po	香港賽馬會美孚荔灣道投注站 HKJC Mei Foo Lai Wan Road Off-course Betting Branch
2019/7/28-29	東區 Eastern	康怡廣場 Kornhill Plaza



2019/8/1	荃灣 Tsuen Wan	香港賽馬會荃灣青山道投注站 HKJC Tsuen Wan Castle Peak Road Off-course Betting Branch
2019/8/3	沙田 Sha Tin	恆安商場 Heng On Commercial Centre
2019/8/3-4	觀塘 Kwun Tong	淘大商場 Amoy Plaza
2019/8/6	觀塘 Kwun Tong	香港賽馬會觀塘廣場投注站 HKJC Kwun Tong Plaza Off-course Betting Branch
2019/8/10	離島 Islands	香港街市 - 逸東邨 Hong Kong Market - Yat Tung
2019/8/10	葵青 Kwai Tsing	香港賽馬會青衣城投注站 HKJC Maritime Square Off-course Betting Branch
2019/8/11	南區 Southern	香港仔海濱公園 Aberdeen Promenade
2019/8/13	沙田 Sha Tin	大圍新世界發展有限公司工地 Construction site of New World Development Company Limited, Tai Wai 港鐵大圍站出口 Exit of Tai Wai MTR Station
2019/8/17	屯門 Tuen Mun	愛定商場 H.A.N.D.S
2019/8/18	大埔 Tai Po	大埔墟街市 Tai Po Hui Market
2019/8/21	九龍城 Kowloon City	九龍城新世界發展有限公司工地 Construction site of New World Development Company Limited, Kowloon City
2019/8/23	中西區 Central & Western	上環文咸東街 Bonham Strand, Sheung Wan
2019/8/24	北區 North	香港賽馬會粉嶺名都投注站 HKJC Fanling Town Centre Off-course Betting Branch
2019/8/24	西貢 Sai Kung	保良局甲子何玉清中學 Po Leung Kuk Ho Yuk Ching (1984) College

2019/8/24	黃大仙 Wong Tai Sin	慈雲山中心 Tsz Wan Shan Shopping Centre
2019/8/25	東區 Eastern	港鐵筲箕灣站出口 Exit of Shau Kei Wan MTR Station
2019/8/25	離島 Islands	馬灣鄉事委員會 Ma Wan Rural Committee
2019/8/25	深水埗 Sham Shui Po	富昌廣場 Fu Cheong Estate
2019/8/28 & 9/3	葵青 Kwai Tsing	香港賽馬會葵芳葵義路投注站 HKJC Kwai Fong Kwai Yi Road Off-course Betting Branch
2019/9/1	南區 Southern	香港仔海珠閣 Hoi Chu Court, Aberdeen
2019/9/7	大埔 Tai Po	香港賽馬會大埔廣場投注站 HKJC Tai Po Plaza Off-course Betting Branch
2019/9/8	灣仔 Wan Chai	灣仔茂蘿街 Mallory Street, Wan Chai 銅鑼灣百德新街 Paterson Street, Causeway Bay
2019/9/10	沙田 Sha Tin	香港賽馬會沙田沙角街投注站 HKJC Sha Tin Sha Kok Street Off-course Betting Branch
2019/9/10 & 9/22	油尖旺 Yau Tsim Mong	佐敦白加士街 Parkes Street, Jordan
2019/9/14	黃大仙 Wong Tai Sin	香港賽馬會新蒲崗崇齡街投注站 HKJC San Po Kong Shung Ling Street Off-course Betting Branch
2019/9/15	中西區 Central & Western	香港賽馬會西區屈地街投注站 HKJC Western Whitty Street Off-course Betting Branch
2019/9/15	東區 Eastern	筲箕灣東大街 Main Street East, Shau Kei Wan
2019/9/17	葵青 Kwai Tsing	荃灣大窩口邨 Tai Wo Hau Estate, Tsuen Wan
2019/9/17	黃大仙 Wong Tai Sin	香港賽馬會彩雲投注站 HKJC Choi Wan Off-course Betting Branch
2019/9/19	屯門 Tuen Mun	中華電力有限公司 - 龍鼓灘電廠 CLP Power Hong Kong Limited - Black Point Power Station

2019/9/20	觀塘 Kwun Tong	南豐商業中心 Nan Fung Commercial Centre
2019/9/21	離島 Islands	逸東邨黎淑儀廣場 Lai Shuk Ying Memorial Plaza, Yat Tung Estate
2019/9/21	九龍城 Kowloon City	愛民廣場 Oi Man Plaza
2019/9/21	元朗 Yuen Long	天悅邨露天廣場 Piazza, Tin Yuet Estate
2019/9/23	深水埗 Sham Shui Po	中華電力有限公司 - 深水埗 CLP Power Hong Kong Limited - Sham Shui Po
2019/9/24	九龍城 Kowloon City	中華電力有限公司 - 紅磡海逸道 CLP Power Hong Kong Limited - Laguna Verde Ave, Hung Hom
2019/9/25	沙田 Sha Tin	中華電力有限公司 - 沙田安麗街 CLP Power Hong Kong Limited - On Lai Street, Sha Tin
2019/9/28	東區 Eastern	香港耆康老人福利會柴灣長者地區中心 The Hong Kong Society for the Aged - Chai Wan District Elderly Community Centre
2019/9/28	葵青 Kwai Tsing	香港賽馬會葵涌榮芳街投注站 HKJC Kwai Chung Wing Fong Road Off-course Betting Branch
2019/9/29	觀塘 Kwun Tong	坪石廣場 Ping Shek Shopping Centre
2019/9/29	南區 Southern	華富(一)邨商場 Wah Fu (I) Shopping Centre



## 「戒煙大贏家」比賽

第十屆「戒煙大贏家」比賽透過豐富獎品鼓勵吸煙人士戒煙，成功招募超過1,000名吸煙人士參加。參賽者於招募現場即場接受戒煙輔導員的初步吸煙狀況評估，以及簡短的戒煙輔導，並由香港大學護理學院及公共衛生學院已受訓的戒煙輔導員於一個月、兩個月、三個月及六個月以電話形式跟進他們的戒煙情況。參賽者亦會定期收到鼓勵及提醒戒煙的電話短訊，配合不同的戒煙干預方法，如額外電話輔導、多媒體短訊、邀請朋友協助戒煙、提供尼古丁替代療法及鼓勵使用現有戒煙服務，以增加對參賽者的戒煙支援。

同時，戒煙輔導員亦會按他們的意願轉介至戒煙服務機構。在三個月跟進時，自我報告成功戒煙的參賽者會獲邀參與戒煙核實測試，成功通過者可參加大抽獎或經「戒煙大使」甄選面試，贏取豐富獎品。



## “Quit to Win” Contest

The 10<sup>th</sup> “Quit to Win” Contest successfully encouraged over 1,000 smokers to quit smoking through contest and prizes. Eligible participants received smoking status assessment and brief smoking cessation advice from counselors at the recruitment sessions. The smoking cessation counselors from the School of Nursing and School of Public Health of The University of Hong Kong would follow up the quit status of the participants, and assist them to quit by telephone interview at one month, two months, three months and six months. To enhance the support in quitting, participants received regular instant messages from the counselors as well as other optional interventions, such as phone counseling, multi-media messages, assistance from friends, nicotine replacement therapy and incentive of using existing cessation services.



The participants would also be referred to their preferred smoking cessation service providers. Participants who quit successfully were invited to undertake a biochemical validation at the 3-month follow-up. Validated participants were eligible to join the lucky draw or invited to an interview to win fabulous prizes.

為鼓勵在囚人士戒煙，委員會繼續與懲教署攜手合作，將「戒煙大贏家」比賽推廣至轄下的羅湖懲教所、赤柱監獄、大欖懲教所及塘福懲教所，共招募54位有意戒煙的在囚人士參加比賽，促使更多在囚人士投入無煙健康生活。

而香港大學護理學院及公共衛生學院於比賽期間進行科學研究，收集數據檢討戒煙輔導及計劃的整體成效，以了解戒煙人士的需要。根據初步結果，三個月及六個月跟進的自我報告成功戒煙率分別為22.7%及24.7%。

### 第十屆「戒煙大贏家」比賽得獎者：

冠軍得主柯文武自小學五年級開始吸煙，每天更平均吸食高達25支捲煙，為了個人及兒子健康著想而決心戒煙。柯先生曾經嘗試以電子煙及加熱非燃燒煙草製品（加熱煙）戒煙，但這些產品未能協助他戒掉煙癮，反而令他吸煙次數有所增加，更同時吸食多種吸煙產品。除傳統捲煙外，他每天更吸高達20支加熱煙。柯先生參加了「戒煙大贏家」比賽後，明白其他形式的煙草產品並不是有效的戒煙工具，並會影響健康。他接受了適當的戒煙輔導及中醫針灸，有效舒緩退癮徵狀的不適。在成功戒煙後，柯先生的身體狀況及情緒均有顯著改善，並因此培養了晚飯後與家人一起緩步跑的健康習慣。



To encourage persons in custody to quit smoking, COSH collaborated with CSD and extended the “Quit to Win” Contest to Lo Wu Correctional Institution, Stanley Prison, Tai Lam Correctional Institution and Tong Fuk Correctional Institution. A total of 54 smoking inmates joined the “Quit to Win” Contest and determined to quit for a smoke-free lifestyle.

To understand the needs of quitters, the School of Nursing and School of Public Health of The University of Hong Kong conducted a research study to evaluate the effectiveness of the smoking cessation intervention as well as the Campaign. According to the preliminary results, the self-reported quit rate was 22.7% at 3-month follow-up and 24.7% at 6-month follow-up.

### Winners of the 10<sup>th</sup> “Quit to Win” Contest:

Champion, OR Man-mo had smoked since he was primary five and used to smoke 25 sticks of cigarette per day on average. For the health of himself and his son, he determined to cut off. He had tried to quit smoking by using electronic cigarettes and heat-not-burn (HNB) tobacco products but failed. Both products neither helped him quit smoking nor reduced tobacco consumption. He even smoked more frequently and the worst scenerio was that he smoked over 20 sticks of HNB tobacco products per day, in addition to conventional cigarettes. Since he joined the “Quit to Win” Contest, he received proper smoking cessation advices and Chinese acupuncture which helped ease the withdrawal symptoms. Having quitted smoking, Mr Or’s health condition and temper were apparently improved. He had also developed a healthy habit of jogging with his family after dinner.



亞軍得主鄭智聰於18歲時，獨自前往外國讀書，因年少和壓力嘗試了第一口煙。當他回流香港時，發現香港的控煙措施十分嚴謹而公眾普遍認同無煙生活，因此他向家人隱瞞吸煙習慣，更產生戒煙念頭。但鄭先生受到朋輩影響，仍然視吸煙為社交手段。由於他認為愛惜自己的健康是愛惜家人的第一步，他相信戒煙可確保自己擁有強健體魄，減少父母的憂慮。最後，在「戒煙大贏家」工作人員的熱誠打動下，鄭先生於招募攤位下定戒煙的決心。他表示，得到一班熱心工作人員的定期關心和鼓勵，是他成功戒掉煙癮的關鍵因素。

季軍得主鍾健欣的煙齡達13年，她戒煙的決心來自寵物的健康。鍾女士共養了兩隻狗及兩隻貓，其中一隻狗年紀老邁，身體機能開始衰退並患上疾病，因此獸醫建議鍾女士戒煙，以免令牠的健康惡化。鍾女士視寵物如家人般，有一次準備吸煙時，發現煙包被其中一隻狗搶走及收藏，令她意識到寵物正在投訴她吸煙，繼而產生戒煙念頭，並參加第十屆「戒煙大贏家」比賽。鍾女士成功戒煙後，皮膚質素有所改善，身體的氣味亦較以前清新，亦跟男朋友和寵物培養了散步的習慣。

計劃網頁：[www.quittowin.hk](http://www.quittowin.hk)



First runner-up, CHENG Chi-chung picked up smoking at 18 years old when he studied abroad alone. After returning to Hong Kong, he realized the tobacco control measures are stringent and there is a strong social atmosphere for being smoke-free. He tried to hide his smoking habit from his family and considered quitting. However, Mr Cheng was still a social smoker until he realized that his parents always worried about his health. To ease their worries and maintain a healthy body, he determined to join the contest particularly after an inspiring dialogue with “Quit to Win” helpers at the recruitment booth. He commented that passionate care and encouragement from helpers and the regular follow-up were his key success factors for quitting.

Second runner-up, CHUNG Kin-yan has smoked for 13 years. Ms Chung has two dogs and two cats, she determined to quit for the concern of pets' health. One of her dogs was getting old and encountered health problems. The veterinarian advised her to stop smoking to protect its health. One day, one of her dogs grabbed her cigarette pack away when she was about to smoke. She believed it was a sign of her pets' complaint on her smoking behaviour. This triggered her joining the 10<sup>th</sup> “Quit to Win” Contest. She found her skin quality improved and had a better body ascent after quitting. She also developed a habit of taking walks together with her boyfriend and pets.

Campaign Website: [www.quittowin.hk](http://www.quittowin.hk)



## 香港無煙領先企業大獎 2019



為鼓勵企業及機構向員工、客戶和社會大眾等不同持分者推動無煙文化，以保障公眾健康，委員會自2011年起舉辦「香港無煙領先企業大獎」(大獎)，鼓勵商界持續推行無煙措施，同時嘉許各行各業有傑出無煙政策表現的企業，締造員工、企業及社會皆贏的局面。

委員會於2019年第四度舉辦大獎，與職業安全健康局及香港電台第一台合辦，並獲逾80間不同業界的商會及組織全力支持，動員旗下會員參與，期望透過匯聚大小企業及機構的力量，於社區內如齒輪般環環相扣，將無煙信息予更多員工、客戶及社會大眾，攜手推動無煙香港。

委員會與多個戒煙服務機構合作，提供不同的戒煙服務、講座及無煙宣傳品等，協助企業建立無煙工作環境及訂定無煙政策，為吸煙僱員及持分者舉辦多元化的無煙活動。此外，委員會亦與香港電台第一台合辦兩場對抗煙癮工作坊予參與企業的前線員工，透過街頭健身及靜觀冥想擊退煙草誘惑，並拍攝宣傳短片，以鼓勵更多吸煙人士儘早戒煙，實踐健康生活。



## Hong Kong Smoke-free Leading Company Awards 2019

To encourage businesses to promote smoke-free messages to their stakeholders on a continuous basis, including employees, customers and the general public, COSH has organized the "Hong Kong Smoke-free Leading Company Awards" (the Awards) since 2011 to commemorate the leading companies and organizations from different sectors that have implemented outstanding smoke-free policies to protect the health of employees and the general public in fostering an all-win situation for employees, business sectors and the society.

In 2019, the fourth Awards was co-organized by COSH, Occupational Safety and Health Council and Radio 1 of Radio Television Hong Kong (RTHK), together with the support of over 80 major commerce chambers and associations across sectors in Hong Kong. By uniting the enterprises and organizations, the Awards aimed to encourage businesses to support smoking cessation and spread smoke-free messages among employees, customers and people from all walks of life, in order to strive for a smoke-free Hong Kong.

Partnering with various smoking cessation service providers, COSH provided smoking cessation services, health talks and promotional collaterals to assist businesses in setting up smoke-free workplaces and policies and organizing diverse activities in order to encourage smokers to live smoke-free. Besides, two workshops featuring street workout and mindfulness, were co-organized by COSH and Radio 1 of RTHK to motivate smoking employees to curb their tobacco cravings and videos were produced for promotion.





大獎獲得食物及衛生局局長陳肇始教授擔任榮譽贊助人，委員會亦特別邀請政府、業界及學術界的專業人士組成獨立評審團，成員包括職業安全健康局總幹事游雯、香港電台中文台台長何重恩、衛生署控煙酒辦公室主管封螢醫生、香港大學公共衛生學院社會醫學講座教授暨羅旭龢基金教授(公共衛生學)林大慶教授、清新健康人協會主席黃龍德教授、香港中文大學醫學院賽馬會公共衛生及基層醫療學院院長及醫學院副院長(教育)黃仰山教授及委員會主席鄭祖盛。

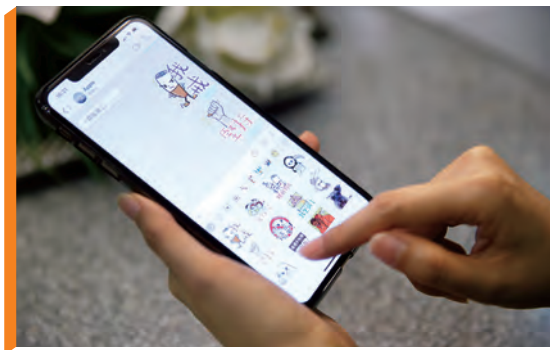
2019年大獎成績再創高峰，吸引超過530間來自不同行業的企業及機構踴躍參加，較2016年上升一成，受惠員工人數超過13萬人，為歷年之冠。行業的分佈亦更為廣泛，包括銀行、物業管理、零售、物流、運輸、建築及政府部門等。經過評估及獨立評審團於2019年12月16日進行的最後評審，最終兩間企業獲頒「三年卓越金獎」，以表揚其持續推行無煙措施的貢獻；14間企業獲頒「金獎」，其中兩間企業在社區推廣無煙文化的表現出眾，同時奪得「傑出無煙社區參與大獎」；16間企業獲頒「銀獎」；以及逾490間企業獲頒「優異獎」，以嘉許其推動無煙文化的傑出表現。(得獎名單見第160頁至第177頁。)

Prof Sophia CHAN, Secretary for Food and Health was the Honourable Patron of the Awards. An independent Judging Panel comprising of representatives from the Government, industry and academia was formed, including Bonnie YAU, Executive Director of Occupational Safety and Health Council, David HO, Head of Chinese Programme Service, RTHK, Dr FUNG Ying, Head of Tobacco and Alcohol Control Office, Department of Health, Prof LAM Tai-hing, Chair Professor of Community Medicine & Sir Robert Kotewall Professor in Public Health, School of Public Health, The University of Hong Kong, Prof Patrick WONG, Chairman of Quit-Winners Club, Prof Samuel WONG, Associate Dean (Education) of Faculty of Medicine & Professor and Director of The Jockey Club School of Public Health and Primary Care, The Chinese University of Hong Kong and Antonio KWONG, COSH Chairman.

The Awards in 2019 scaled a new height with more than 530 companies participating, a 10% increase as compared with the Awards in 2016. Over 130,000 employees from a wide variety of industries were benefited, including banking, property management, retail, logistics, transportation, construction and government departments, etc. After rounds of assessment and meeting by the independent Judging Panel on 16 December 2019, two companies received the Triple Gold Awards for their continuous commitment; 14 companies received the Gold Awards, and two of them also received the Outstanding Smoke-free Community Involvement Awards for recognition of remarkable contribution in spreading smoke-free messages in the community; 16 companies received the Silver Awards and over 490 companies were awarded the Certificates of Merit in recognition of their support to smoke-free culture. (Please refer to page 160 to page 177 for the Awards list.)



參與的企業採取多元化及軟性的無煙措施，例如推出戒煙獎勵計劃、設計創意無煙插圖及舉辦具趣味性的無煙教育活動等。同時，企業亦推動非吸煙員工及家人給予戒煙人士支持，營造鼓勵戒煙的氛圍。綜合得獎企業的傑出政策，若然在推行過程中獲得管理層的支持，身體力行之餘，亦投入更多資源宣揚無煙信息，並主動與不同戒煙服務機構合作，自然會令無煙政策的成效事半功倍。



同時，委員會透過大獎網頁及多個網上平台發佈大獎名單，並以短片、傳媒宣傳及出版大獎特刊以表揚各得獎企業，與市民分享他們持續推廣無煙措施的經驗及成功鼓勵社會不同持分者戒煙的成果。



大獎網頁：[www.smokefreeleadingcompany.hk](http://www.smokefreeleadingcompany.hk)

A wide variety of smoke-free measures had been adopted, such as smoking cessation reward schemes, creative smoke-free graphic designs and interactive education events. Besides, the businesses empowered non-smoking employees and their family to encourage smokers to quit and create a supportive atmosphere for smoking cessation. To conclude, management support, substantial resources allocation and collaboration with smoking cessation service providers were proven to be critical in effective implementation of smoke-free policies.



The Awards list and awardees' successful experiences of smoke-free policy implementation were announced and promoted with short videos, media coverage and an Awards booklet through the Awards website and different online platforms.

Awards Website: [www.smokefreeleadingcompany.hk](http://www.smokefreeleadingcompany.hk)





## 「煙害 2.0 另類煙害你要知」健康教育宣傳

電子煙及加熱非燃燒煙草製品(加熱煙)等另類吸煙產品近年於各地逐漸流行，煙草商一方面宣稱這些吸煙產品「較少害處」、「較健康」或甚至「無害」以圖淡化吸煙對身體的傷害，重塑吸煙行為；另一方面以精美產品包裝、多種口味選擇及針對性的市場營銷策略，誘使大眾尤其青少年嘗試電子煙和加熱煙，作為吸煙入門途徑。

事實上，愈來愈多研究證實另類吸煙產品同樣會釋放多種有害物質，可引致嚴重疾病，例如心血管疾病和呼吸系統疾病等。不少醫學組織強調，電子煙及加熱煙與傳統捲煙一樣損害健康，致癌物及部分有害物質更沒有安全水平。正如世界衛生組織指出，世界上並沒有安全無害的煙草產品，這些另類吸煙產品只是變種的煙害。



為遏止另類吸煙產品流行及提升大眾對其禍害的關注，委員會自2019年9月起舉辦了多場地區巡迴教育展覽和專題健康講座，並特別設立Facebook專頁向公眾講解使用另類吸煙產品的健康風險和釐清相關的謬誤。

## “Smoking Hazards 2.0” Health Education and Publicity Programme

Alternative smoking products, such as electronic cigarettes (e-cigarettes) and heat-not-burn (HNB) tobacco products gained popularity across the globe in recent years. These products are claimed as “less harmful”, “healthier” or even “harmless” products by tobacco companies to downplay the health risks and re-normalize the smoking behavior. They are also marketed in novel designs with multiple flavours to lure the general public especially youngsters to try and hence as a gateway to smoking.

In fact, an increasing number of researches found that alternative smoking products could release detrimental chemicals and cause serious health consequences, such as cardiovascular and respiratory diseases. The medical professions stress that there is no safety level for exposure to harmful and carcinogenic substances, and e-cigarettes and HNB tobacco products are as harmful as conventional cigarettes. World Health Organization also emphasizes that there is no safe and harmless tobacco product in the world. Therefore, alternative smoking products are just the mutation and continuation of smoking hazards.

To reverse the rising trend of the alternative smoking products and enhance public awareness, COSH organized roving health promotion exhibitions, health seminars and set up a Facebook Page to inform the public on the harms and hazards and clear the misconception on these products since September 2019.



## 地區巡迴教育展覽

為向公眾宣揚關於另類吸煙產品的正確資訊，委員會於2019年9月至2020年3月期間在中學、大學、全港多個商場及社區舉辦了近20場地區巡迴教育展覽，向7,000多名市民分享有關電子煙及加熱煙禍害的最新資訊，揭穿煙草商的誤導宣稱及宣傳伎倆，讓他們了解及支持全面禁止另類吸煙產品的立法進程。地區巡迴展覽設有多媒體互動繪畫遊戲，市民可以親手繪畫無煙畫作，並上載至社交媒體，鼓勵家人和朋友一同向所有煙草產品說不，投入無煙健康生活。



## Roving Health Promotion Exhibitions

To disseminate the correct information on alternative smoking products, around 20 sessions of roving health promotion exhibitions were organized in secondary schools, university, shopping malls and community during September 2019 to March 2020. Through the exhibitions, over 7,000 number of public were shared with the latest information about the smoking hazards of e-cigarettes and HNB tobacco products, misleading claims and marketing strategy of tobacco industry, so as to enhance public understanding and support toward the legislation of a total ban on alternative smoking products. Digital interactive paper drawing game was set up at the exhibitions. The public colored the smoke-free drawings and shared through social media as a pledge to say no to all forms of tobacco products, and an appeal to encourage family and friends to live a smoke-free lifestyle.



日期 Date	地區 District	地點 Venue
2019/9/28-29	西貢 Sai Kung	新都城一期 MCP One
2019/11/9-10	元朗 Yuen Long	+WOO 嘉湖 +WOO
2019/11/18-22	南區 Southern	香港大學護理學院 School of Nursing, HKU
2019/12/9-13	屯門 Tuen Mun	佛教沈香林紀念中學 Buddhist Sum Heung Lam Memorial College
2019/12/21-22	觀塘 Kwun Tong	大本型 Domain Mall
2020/1/11-12	沙田 Sha Tin	沙田大會堂廣場 Sha Tin Town Hall Plaza
2020/2/1-2	東區 Eastern	愛東商場 Oi Tung Shopping Mall
2020/2/28 -3/1	北區 North	上水中心購物商場 Sheung Shui Centre Shopping Arcade
2020/3/7-8	油尖旺 Yau Tsim Mong	奧海城一期 Olympian City 1
2020/3/28-29	深水埗 Sham Shui Po	海麗商場 Hoi Lai Shopping Centre

## 專題健康講座

委員會於2019年11月至2020年1月期間在中學、大學、社區團體及公共衛生機構舉辦了八場「另類煙害」專題健康講座，接觸約450名學生、市民及公共衛生工作者，以加強教育界及社會對另類吸煙產品流行的關注。講座內容涵蓋另類吸煙產品的全球使用趨勢與禍害、煙草商的誤導宣稱及銷售伎倆等。

此外，委員會亦特別為學校設計一套有關「另類煙害」的網上教學資源，包括教學專題簡報、活動工作紙、遊戲單張及小冊子等，以便青少年於課餘時間學習有關使用另類吸煙產品的風險及禍害。

## Facebook 專頁宣傳

委員會特設「煙害2.0」Facebook專頁，促進與市民的線上互動交流，尤其針對容易受煙草商網上營銷策略影響的青少年群體。專頁以互動手法及輕鬆有趣的角度的，分享與另類吸煙產品禍害相關的新聞或資訊，釐清大眾對這些有害產品的謬誤，並揭示煙草業干預公共衛生及控煙政策的策略。



## Health Seminars

In order to strengthen awareness on alternative smoking products in schools and the community, eight sessions of health seminars were conducted at secondary schools, universities, social centres, public health organizations from November 2019 to January 2020, reaching about 450 students, mass public and public health practitioners. The health seminars introduced the trends of use, the hazardous effects on using of alternative smoking products and the deceptive tactics deployed by tobacco companies to target the young generations.

In addition, a set of digital education resources including teaching presentations, activity worksheets, game sheets and learning materials was also developed for students to enhance their e-learning on health risks associated with alternative smoking products.

## Facebook Page Promotion

A designated Facebook page “Smoking Hazards 2.0” was created to foster communications with the general public, especially the youngsters who were easily influenced by the online marketing tactics of tobacco companies. Through interactive ways and interesting perspectives, the Page shared the latest news and information on alternative smoking products, debunked the misconception on the use of these harmful products, and revealed the tobacco industry’s interference on public health and tobacco control policies.





## 全新宣傳短片「吸煙實有害 唔好中計」及「戒煙斷·捨·離」

委員會每年製作宣傳短片，以提高市民對吸煙禍害的認知及鼓勵戒煙。有見近年另類吸煙產品逐漸流行，更被宣傳為潮流玩意，吸引非吸煙人士尤其青少年使用，情況令人關注。委員會於2019年12月推出兩輯全新宣傳短片「吸煙實有害 唔好中計」及「戒煙斷·捨·離」，希望透過宣傳短片提醒市民拒絕使用所有形式的吸煙產品並推廣戒煙，宣傳短片深受大眾歡迎。

宣傳短片「吸煙實有害 唔好中計」旨在揭露煙草商不停推出新產品，以宣傳伎倆誘使吸煙人士及非吸煙人士使用，並提示市民電子煙及加熱非燃燒煙草製品(加熱煙)與捲煙一樣，均含有致癌物質，切勿墮入煙草商宣傳詭計的圈套。而宣傳短片「戒煙斷·捨·離」希望帶出無論捲煙、電子煙或加熱煙，都一樣損害健康，並鼓勵市民「斷絕」、「捨棄」及「遠離」任何吸煙產品，重建健康新生活。

## New APIs "Smoking Harms. Don't be Cheated!" and "Quit and Go for a New Life"

COSH produces Announcements in the Public Interest (APIs) every year to promote the tobacco hazards and smoking cessation. In view of the growing trend of alternative smoking products being marketed as trendy products and targeted non-smokers, particularly the youngsters in recent years, COSH launched two new APIs titled "Smoking Harms. Don't be Cheated!" and "Quit and Go for a New Life" in December 2019 and received wide public support. The two APIs aimed to remind public not to try any forms of smoking products and promote smoking cessation.

API "Smoking Harms. Don't be Cheated!" revealed the promotional tactics of tobacco industry to tease both smokers and non-smokers for trying new smoking products. It reminded the public to stay alert as electronic cigarettes (e-cigarettes) and heat-not-burn (HNB) tobacco products also contained carcinogens like conventional cigarettes. The other API "Quit and Go for a New Life" targeted to raise public awareness on the health risks of cigarettes, e-cigarettes and HNB tobacco products. It also encouraged people to "cut off", "let go" and "break up" with any means of smoking products to rebuild a healthy lifestyle.



## 倡議增加煙草稅

世界衛生組織(世衛)一直強調，增加煙草稅是最有效減低煙草使用的單一控煙措施。此舉不但能夠推動戒煙，同時亦有助預防青少年吸煙。世衛建議各國將煙草稅增加至佔捲煙零售價格75%或以上，現時全球已有近40個國家達到此水平，及接近60個國家定於佔捲煙零售價格70%或以上。

香港政府於2018年制訂的《邁向2025：香港非傳染病防控策略及行動計劃》中訂下目標，計劃於2025年前將吸煙率降至7.8%。然而香港的煙草稅政策停滯不前，煙草稅已連續五年被凍結，而十年之間亦有八年沒有任何增幅，2019年香港的煙草稅只佔零售價格約64%，低於世衛建議水平。另一方面，香港的吸煙率下降速度在過去十年已經開始減慢，而2019的吸煙率更輕微上升，可見強力的控煙措施特別是增加煙草稅，對降低吸煙率是不可或缺的。

根據委員會於2018年9月至2019年3月期間進行的「控煙政策調查」顯示，近八成受訪者(79.6%)支持於翌年增加煙草稅，支持此項措施的現時吸煙人士亦有三分之一(34.6%)。調查亦顯示，超過八成(84.5%)的現時吸煙人士會因煙價上升而減少吸煙或戒煙，他們認為有效推動他們戒煙的煙草價格中位數為每包港幣100元。(詳細調查結果請參閱第102頁。)

### 「大幅增加煙草稅從速實現全面禁煙」記者會

委員會於2020年1月14日聯同控煙團體、學術界、醫護界、家長及教育界、病人及戒煙者組織舉行聯合記者會，促請政府大幅增加煙草稅百分之一百，打破煙草稅凍結僵局，並隨後按年增加稅率，以加快減低吸煙率，保障市民免受煙草危害。

## Advocacy on Raising Tobacco Tax

According to World Health Organization (WHO), raising tobacco tax is the single most effective tobacco control measure which can motivate smokers to quit smoking and prevent smoking uptake in adolescents. WHO recommended to raise tobacco tax to at least 75% of the retail price of tobacco products. Nearly 40 countries reached the suggested tobacco tax rate, and close to 60 countries reached 70% or above.

The Government announced "Towards 2025: Strategy and Action Plan to Prevent and Control Non-communicable Diseases" in 2018. Further reducing the smoking prevalence to 7.8% by 2025 is one of the targets. However, the policy on tobacco tax remained at a standstill in Hong Kong. The tobacco tax has been frozen for the past five consecutive years and eight years of the last ten years. Currently, tobacco tax in Hong Kong accounted for only around 64% of the retail price, which was below WHO's recommendation. In addition, the decline in Hong Kong's smoking prevalence has been slowed down in the last decade especially there was a slight increase in 2019. It is necessary to step up tobacco control efforts, particularly on raising tax, to reduce smoking prevalence.

According to COSH's Tobacco Control Policy-related Survey conducted from September 2018 to March 2019, 79.6% of all respondents supported raising tobacco tax next year, including 34.6% of current smokers. The survey also revealed that 84.5% current smokers would reduce daily consumption or quit if the retail price of cigarettes increases. They also suggested that the cigarette retail price per pack should be set at a median price of HK\$100 to effectively motivate them to quit. (For details of survey results, please refer to page 102.)

### "Raising Tobacco Tax Substantially to Achieve Tobacco Endgame" Press Conference

COSH, tobacco control groups, academia, medical and healthcare professionals, parents and education sector, patient and quitter groups jointly held a press conference on 14 January 2020 to urge the Government to raise tobacco tax by 100% and also impose subsequent annual tax hikes, in order to accelerate the reduction in tobacco consumption to protect public health.

委員會主席鄭祖盛表示，「煙草稅在過去十年間大多數時間被凍結，上次大幅增加煙草稅已是2011年，現時煙稅佔煙草零售價格僅約64%，遠低於世衛建議之75%或以上。委員會倡議政府於2020至2021財政年度大幅增加煙草稅百分之一百，並制定按年增加稅率的長遠政策，使吸煙率儘早降低至5%或以下，加快實現全面禁煙的步伐。」

現時，本港主要品牌的捲煙價格為每包約港幣60元，較其他已發展地區的價格為低。若不增加煙草稅，通貨膨脹和收入增長會隨時間蠶食煙草稅的成效。香港過往的經驗均證實大幅增加煙草稅能有效鼓勵戒煙、加強吸煙人士戒煙的決心及防止青少年開始吸煙。不少國家已就全面禁煙訂下限期及時間表，例如新西蘭及馬來西亞計劃於2025年及2045年前將其吸煙率降至5%。

一眾講者促請政府於2020至2021財政年度大幅增加煙草稅百分之一百，隨後按年增加稅率，並全方位加強控煙措施及訂下「全面禁煙」的時間表，以進一步令吸煙率於2027年降至5%或以下，從速實施全面禁煙，保障公眾健康。

Antonio KWONG, COSH Chairman said, "Tobacco tax has been frozen in most years over the past decade. The last substantial tobacco tax increment was made far back in 2011. Despite the WHO's recommendation that tobacco tax should be increased to at least 75% of the retail price, the tax of major cigarette brands in Hong Kong accounts for only around 64% of the retail price. We advocate the Government to raise tobacco tax substantially by 100% in FY2020-2021, as well as to formulate the policy for annual tax increase to reduce the smoking prevalence to 5% and achieve Tobacco Endgame as soon as possible."

Currently, the retail price of a pack of major cigarette brands is about HK\$60, which is much lower than other developed regions. Inflation and income growth can erode the effectiveness of tax measures over time if the tax level does not increase. Local evidence has shown that substantial tobacco tax increases can significantly motivate smokers to refrain from smoking, enhance their determination to quit and deter smoking uptake in adolescents. Many countries have set a Tobacco Endgame plan with schedule. For instance, New Zealand and Malaysia aim to reduce the smoking prevalence to 5% by 2025 and 2045 respectively.

Speakers advocated the Government to raise tobacco tax by 100% in FY2020-2021 and impose subsequent annual tax hike. They also urged the Government to strengthen the multi-pronged tobacco control measures with defined schedules, in order to lower the smoking prevalence to 5% or below in 2027 and achieve the Tobacco Endgame goal in Hong Kong.





記者會由以下團體聯合召開：

#### 控煙團體

- 香港吸煙與健康委員會
- 亞洲反吸煙諮詢所
- 仁濟醫院
- 博愛醫院
- 九龍樂善堂
- 東華三院
- 基督教聯合那打素社康服務
- 基督教家庭服務中心
- 爭氣行動
- 保良局

#### 學術界

- 香港大學李嘉誠醫學院
- 香港大學公共衛生學院
- 香港中文大學賽馬會公共衛生及基層醫療學院
- 香港大學護理學院
- 東華學院護理學院
- 香港中文大學那打素護理學院

#### 醫護界

- 香港醫學專科學院
- 香港醫學會
- 香港醫學組織聯會
- 香港西醫工會
- 香港牙醫學會
- 香港心臟專科學院
- 香港藥學會
- 香港護理專科學院有限公司
- 香港醫院藥劑師學會
- 醫院管理局

The press conference was jointly hosted by:

#### Tobacco Control Groups

- Hong Kong Council on Smoking and Health
- Asian Consultancy on Tobacco Control
- Yan Chai Hospital
- Pok Oi Hospital
- The Lok Sin Tong Benevolent Society, Kowloon
- Tung Wah Group of Hospitals
- United Christian Nethersole Community Health Service
- Christian Family Service Centre
- Clear the Air
- Po Leung Kuk

#### Academia

- Li Ka Shing Faculty of Medicine, The University of Hong Kong
- School of Public Health, The University of Hong Kong
- JC School of Public Health and Primary Care, The Chinese University of Hong Kong
- School of Nursing, The University of Hong Kong
- School of Nursing, Tung Wah College
- The Nethersole School of Nursing, The Chinese University of Hong Kong

#### Medical and Healthcare Professionals

- Hong Kong Academy of Medicine
- The Hong Kong Medical Association
- The Federation of Medical Societies of Hong Kong
- Hong Kong Doctors Union
- Hong Kong Dental Association
- Hong Kong College of Cardiology
- The Pharmaceutical Society of Hong Kong
- The Hong Kong Academy of Nursing Limited
- The Society of Hospital Pharmacists of Hong Kong
- Hospital Authority

家長及教育界

- 家庭與學校合作事宜委員會
- 香港資助小學校長會
- 香港津貼中學議會
- 香港中學校長會
- 生活教育活動計劃

## 病人及戒煙者組織

- 香港新聲會
- 清新健康人協會
- 香港防癌會

### 其他行動

委員會亦聯同79個來自醫學界、學術界、家長教師界、病人組織及青少年服務界別等的團體，於2020年1月致公開信予財政司司長，促請政府於2020至2021財政年度大幅增加煙草稅百分之一百，並按年增加煙草稅，委員會亦敦促政府儘快落實全面禁止另類吸煙產品，及制訂煙草終局的全面計劃，保障市民健康。

同時，委員會於2020年1月16日在三份本地報章包括am730、明報及南華早報刊登「大幅增加煙草稅100%」廣告，爭取市民支持增加煙草稅。惟政府於2020至2021財政年度連續第六年凍結煙草稅，委員會表示非常失望，但有關報道已成功獲得市民的關注。

## Parents and Education Sector

- Committee on Home-School Co-operation
- Hong Kong Aided Primary School Heads Association
- Hong Kong Subsidized Secondary Schools Council
- The Hong Kong Association of the Heads of Secondary Schools
- Life Education Activity Programme

### Patient and quitter Groups

- The New Voice Club of Hong Kong
- Quit-Winners Club
- The Hong Kong Anti-Cancer Society

## Other Acts

COSH, together with 79 organizations from medical, academia, parents and teachers, patient and youth service sectors, sent an open letter to the Financial Secretary in January 2020 to urge the Government to raise tobacco tax substantially by 100% in FY2020-2021, as well as to increase annual tax subsequently in order to further decrease the smoking prevalence. COSH also urged the Government to enact a total ban on alternative smoking products, and formulate a comprehensive plan on Tobacco Endgame to safeguard public health.

In the meantime, advertisements themed “Raising tobacco tax substantially by 100%” were published in three local newspapers including am730, Ming Pao and South China Morning Post on 16 January 2020 to raise public awareness and gather support for raising tobacco tax. COSH expressed strong disappointment with Government’s decision to freeze tobacco tax again in FY2020-2021 for the sixth consecutive year. Still, the media coverage successfully raised the awareness of general public.



## 宣傳吸煙與2019冠狀病毒病的關係

有研究顯示，在2019冠狀病毒病確診者中，吸煙者出現嚴重病徵的機會率比非吸煙者高1.4倍，而吸煙患者需接受深切治療、使用呼吸器或死亡個案約為非吸煙者的2.4倍。此外，由於吸煙時未能佩戴外科口罩，或以雙手接觸口鼻，均會增加吸煙者傳播及感染病毒之風險。

鑑於2019冠狀病毒病在世界各地迅速蔓延，委員會適時透過發佈新聞稿、網站資訊、傳媒報導及於社交媒體宣傳，向市民釐清「吸煙可以預防2019冠狀病毒病」之誤導性報導，並講解吸煙有機會增加患上2019冠狀病毒病的風險及令病情惡化的機會，藉此呼籲市民在疫情期間不要開始吸煙，亦建議有吸煙習慣的人士必須即時停止使用任何形式的煙草產品，包括傳統捲煙、電子煙、加熱非燃燒煙草製品及水煙等，以減低患上相關疾病的風險，保障自己及家人健康。



## Promotion on the Correlation between Smoking and Coronavirus Disease 2019

According to the study of confirmed Coronavirus Disease 2019 (COVID-19) cases, smokers were 1.4 times more likely to have severe symptoms of COVID-19, and approximately 2.4 times more likely to be admitted to an Intensive Care Unit, need mechanical ventilation or die compared to non-smokers. Since smokers could not wear a surgical mask or avoid contacting with the mouth and nose while smoking, it might increase the risk of spreading COVID-19 and viral infection.

In view of the latest epidemic development of COVID-19 across the globe, COSH debunked the misleading claim that “smoking could help prevent COVID-19” and explained smoking increases the risk of viral infection and getting severe symptoms through press release, information update on websites, media coverage and promotion via social media platforms. Citizens were encouraged not to initiate smoking and smokers should stop using any forms of tobacco products including conventional cigarettes, electronic cigarettes, heat-not-burn tobacco products and waterpipe tobacco immediately for reduction of disease risk, in order to safeguard their health as well as their family.





## 社區聯繫及推廣

## Community Involvement and Promotion

### 「無煙老友記」計劃 2019-2020

委員會一向致力向市民推廣無煙生活，香港現時每日吸食捲煙的人數達637,900人，其中26.3%為60歲或以上。為配合年長吸煙人士的需要，鼓勵他們建立無煙健康生活，委員會推出「無煙老友記」計劃2019-2020，向長者講解吸煙的禍害、澄清有關戒煙的謬誤及鼓勵他們加入戒煙行列。計劃透過舉辦健康講座、工作坊及媒體宣傳等，傳遞無煙信息給更多長者。

#### 健康講座

在2019年4月至2020年1月期間，委員會走訪各區長者中心舉辦接近40場健康講座，以生動有趣的方式向約2,000名長者宣揚無煙生活及鼓勵戒煙，並推動他們與親友分享無煙信息。



#### 電台廣播

此外，委員會與商業電台合作製作電台節目，邀請戒煙專家、成功戒煙人士及「無煙老友大使」，分享吸煙禍害資訊、戒煙故事及無煙推廣的經驗。同時製作宣傳聲帶，於「第三齡接觸」節目內播放，消除長者對吸煙的誤解及增進對戒煙服務的認識，促進大眾支持吸煙人士戒煙。

### Elderly Smoking Cessation Promotion Project 2019-2020

COSH has been dedicated to promoting a smoke-free lifestyle. Currently, there are 637,900 daily cigarette smokers in Hong Kong, in which 26.3% aged 60 years or above. To cater the needs of elderly smokers and invite them to live smoke-free, COSH launched the Elderly Smoking Cessation Promotion Project 2019-2020, with the aims to promote tobacco hazards, clarify the misconceptions of smoking cessation and encourage the elderlies to kick the smoking habit. The smoke-free messages were widely spread among elderlies through health talks, workshops and media promotion.

#### Health Talks

From April 2019 to January 2020, COSH conducted about 40 sessions of health talks at elderly centres across the territory to promote smoke-free messages and encourage smoking cessation among about 2,000 elderlies. They were also invited to share the messages with their families and friends.

#### Radio Promotion

Besides, COSH collaborated with Commercial Radio to produce radio segments and invite smoking cessation experts, successful quitters and "Smoke-free Elderly Ambassadors" to share harms of smoking, their quit stories and experiences of smoke-free promotion. Audio clips were also broadcast at the programme "Silver Age Club" to debunk the myths of smoking, promote smoking cessation services and solicit public support for smoking cessation.



### 「無煙老友大使」工作坊

「無煙老友記」計劃2019-2020得到新界西長者學苑聯網及循道衛理亞斯理社會服務處的支持，共招募42位長者成為「無煙老友大使」，以同儕作橋樑，鼓勵吸煙長者及其他人士戒煙。「無煙老友大使」參加了委員會舉辦的工作坊，增強對煙害及戒煙方法的認知，了解簡單中醫保健知識，更學習製作社交媒體圖像信息「長輩圖」，藉此推動身邊人士早日遠離煙草。



### 「無煙老友大使」嘉許典禮

委員會於2020年1月7日舉辦「無煙老友大使」嘉許典禮，以感謝合作團體及「無煙老友大使」的支持及積極傳遞無煙信息。主禮嘉賓包括衛生署控煙酒辦公室主管封螢醫生、安老事務委員會主席林正財醫生、委員會主席鄭祖盛及副主席伍婉婷。香港大學公共衛生學院社會醫學講座教授及羅旭龢基金教授(公共衛生學)林大慶教授、「無煙老友大使」、歌手梁釗峰及陳健安亦出席活動，透過遊戲及分享環節鼓勵大眾儘早遠離煙害。

### “Smoke-free Elderly Ambassadors” Workshops

With the support from New Territories West Elder Academies Cluster (NTWEAC) and Asbury Methodist Social Service, Elderly Smoking Cessation Promotion Project 2019-2020 recruited 42 “Smoke-free Elderly Ambassadors” to promote smoking cessation among their peers. Workshops were held to enhance their knowledge on hazards of smoking, quit tips and basic Chinese medical healthcare. They also learnt to make social media images to motivate others to quit smoking.

### “Smoke-free Elderly Ambassadors” Appreciation Ceremony

“Smoke-free Elderly Ambassadors” Appreciation Ceremony was held on 7 January 2020, to compliment the support and participation of working partners and “Smoke-free Elderly Ambassadors”. Officiating guests included Dr FUNG Ying, Head of Tobacco and Alcohol Control Office, Department of Health, Dr LAM Ching-choi, Chairman of Elderly Commission, Antonio KWONG, COSH Chairman and Yolanda NG, COSH Vice-chairman. Prof LAM Tai-hing, Chair Professor of Community Medicine & Sir Robert Kotewall Professor in Public Health, School of Public Health, The University of Hong Kong, “Smoke-free Elderly Ambassadors”, singers Andy LEUNG and On CHAN also attended the event and called for public support to stay away from tobacco through games and chat sessions.





## 「無煙健康人生更美好」嘉年華

沙田區議會李子榮議員辦事處於2019年4月21日假馬鞍山海柏花園舉辦「無煙健康人生更美好」嘉年華。委員會獲邀於是次活動中設置攤位遊戲及派發無煙宣傳品，加深沙田區居民的煙害知識，活動共吸引逾500名市民參與。



## Smoke-free Carnival in Sha Tin

LEE Chi-wing Sha Tin District Councilor's Office organized a Smoke-free Carnival at Bayshore Towers in Ma On Shan on 21 April 2019. COSH was invited to host a game booth to raise public awareness on smoking hazards and smoke-free souvenirs were distributed to over 500 citizens who joined the carnival.

## “Togetherness, We are the Voice that Shine” Sunday Carnival cum Open Day of the New Voice Club of Hong Kong

The New Voice Club of Hong Kong assists laryngectomies and laryngeal cancer patients in regaining their voice and reintegrating into the community through promoting self-help and mutual help spirit. The Club hosted the “Togetherness, We are the Voice that Shine” Sunday Carnival cum Open Day on 28 April 2019 at Shek Kip Mei Estate. The Club arranged Chinese medicine consultation, health talks and body checks for citizens to understand their scope of services and facilities.

## 香港新聲會「有你在旁同聲同樂」周日嘉年華暨無喉者中心開放日

香港新聲會一直以自助及互助精神，協助無喉者及喉癌患者恢復發聲能力和建立自信，支持他們重新投入社會。該會於2019年4月28日假石硤尾邨舉辦「有你在旁同聲同樂」周日嘉年華暨無喉者中心開放日，活動當日為市民提供中醫義診、健康專題講座及身體檢查等多元化活動，讓公眾深入了解其服務及中心設施。

委員會亦獲邀設置互動攤位遊戲及向市民派發戒煙小冊子，鼓勵吸煙人士戒煙，以減低患上喉癌及其他疾病的風險，吸引過百名市民參與。





## 「家校合作顯關愛」嘉年華

九龍城區家長教師會聯會於2019年5月1日假民生書院舉辦「家校合作顯關愛」嘉年華。委員會於是次活動中舉行健康講座、設置資訊展板及攤位遊戲，向300多名家長及學生介紹香港控煙工作及宣傳煙草禍害。

## 香港鐵路有限公司無煙推廣活動

委員會與香港鐵路有限公司合作於旗下車廠舉辦無煙推廣活動，鼓勵吸煙的員工踏出戒煙的第一步。委員會分別於2019年7月8日及11月7日在九龍灣車廠及何東樓車廠設置資訊展板及派發宣傳刊物，提高前線員工對健康的關注，亦即場為吸煙的員工提供一氧化碳呼氣測試，為有意戒煙者提供戒煙轉介服務。



## Home-School Co-operation Carnival

Federation of Parent-Teacher Association, Kowloon City District organized the Home-School Co-operation Carnival at Munsang College on 1 May 2019. COSH was invited to deliver a health talk, set up exhibition panel and host a game booth to introduce tobacco control development in Hong Kong as well as smoking hazards to over 300 participating parents and students.



## Smoke-free Promotion Programmes of MTR Corporation Limited

COSH co-organized smoke-free programmes with MTR Corporation Limited to motivate smoking staff to quit smoking. COSH was invited to set up exhibition panel and distribute promotional publications at Kowloon Bay Depot and Ho Tung Lau Depot on 8 July and 7 November 2019 respectively to raise staff consciousness on health and wellbeing. COSH also conducted the carbon monoxide breath tests and referred some smokers for smoking cessation services.

## 香港賽馬會無煙推廣活動

委員會與香港賽馬會自2014年起一直緊密合作，透過龐大的地區網絡開展多元化無煙推廣活動，協助於社區內宣揚無煙文化。香港賽馬會於2019年1月起在全港所有投注處內張貼全新無煙宣傳海報，鼓勵市民遠離煙草產品。委員會亦獲邀於2019年7月14日在將軍澳投注處內設置無煙推廣攤位，以輕鬆有趣的互動遊戲，令大眾認識煙草為身體帶來的影響，更即場為吸煙者提供戒煙服務轉介，推動他們戒煙。

## 香港國際牙科博覽暨研討會 2019

香港牙醫學會於2019年8月2日至4日假香港會議展覽中心舉辦「香港國際牙科博覽暨研討會2019」。委員會獲邀於展覽會上設置資訊攤位及派發控煙刊物，並向與會者介紹委員會的教育推廣工作及本港控煙概況，以促進與牙科專業人員在控煙工作上的交流及合作。此外，委員會更邀請與會者簽名支持「全面禁止另類吸煙產品」及邀請加入「無煙新頻道」，支持建設無煙香港。



## Smoke-free Promotion Campaign of The Hong Kong Jockey Club

Since 2014, COSH has been working closely with The Hong Kong Jockey Club to organize diversified smoke-free programmes to advocate smoke-free culture in the community through its extensive network. Smoke-free posters had been displayed at all betting branches across the territory since January 2019 to encourage public to stay away from tobacco products. Promotional booth was set up on 14 July 2019 at Tseung Kwan O branch to educate the public on adverse effects of smoking through interactive games. Smoking cessation referrals were also provided for smokers to boost their determination.



## Hong Kong International Dental Expo and Symposium 2019

The Hong Kong Dental Association hosted the "Hong Kong International Dental Expo and Symposium 2019" on 2 to 4 August 2019 at Hong Kong Convention and Exhibition Centre. To enhance the collaboration on tobacco control works with dental professionals, COSH was invited to set up an information booth and distribute smoke-free publications for introducing COSH's education and publicity programmes and the tobacco control works in Hong Kong. Participants were also urged to sign the "Support to Enact a Total Ban on Alternative Smoking Products" and pledge for joining "Smoke-free Channel", to strive for a smoke-free Hong Kong.

## 「愛·營動」家庭健康體驗日

基督教家庭服務中心於2019年8月17日假觀塘總部舉辦「愛·營動」家庭健康體驗日，以推廣無煙、無酒、關注營養及運動的健康生活。除了互動攤位遊戲外，活動亦安排膽固醇及血糖快速測試、BMI及脂肪測試等。另外，亦有註冊護士及營養師即場為觀塘區居民提供疾病及營養諮詢。委員會亦於是次活動設置「無煙旅程」遊戲攤位，以輕鬆有趣的遊戲宣揚無煙信息，活動吸引約500名居民參與。



## 癌症資訊網慈善基金「越跑越友慈善賽」

癌症資訊網慈善基金於2019年9月1日假白石角科學園舉辦首屆「越跑越友慈善賽」，目的為癌症病人支援服務籌募經費。委員會獲邀於是次活動設置攤位，以互動形式宣揚無煙生活的重要性，更即場派發戒煙資訊的小冊子，鼓勵參加者推動吸煙人士及早戒煙，以預防患上任何與吸煙有關之癌症風險，與家人及朋友一起投入無煙生活。

## Health Family Day of Christian Family Service Centre

Christian Family Service Centre held a Health Family Day on 17 August 2019 at the Kwun Tong Headquarters, targeted to promote a smoke-free and alcohol free lifestyle and arouse public awareness on nutrition and physical exercises. Apart from game booths, body checks such as cholesterol tests, glucose level and BMI, medical consultation were available for the residents in Kwun Tong. Registered nurses and nutritionists also provided diseases and nutrition consultation. COSH was invited to host the “Smoke-free Journey” interactive game booth to equip participants with knowledge on smoking hazards. Around 500 residents participated in the event.

## “Run For Passion” of the Cancerinformation.com.hk Charity Foundation

The Cancerinformation.com.hk Charity Foundation held the first charity run named “Run For Passion” on 1 September 2019 at Science Park, Pak Shek Kok. The Run aimed to raise funding for cancer patients in need. COSH was invited to set up a game and information booth to promote the importance of living smoke-free and encourage participants to support their smoking family members and friends to kick the habit, in order to minimize the risk of smoking-related cancers. Booklets with smoking cessation information were distributed at the event.





## 2019/2020 年度中西區健康節

為加強中西區居民對健康的關注，中西區健康城市督導委員會與中西區民政事務處於2019年9月7日及8日假士美非路體育館舉辦「2019/2020年度中西區健康節」。當日活動內容豐富，包括健康展覽、攤位遊戲、講座、運動示範及多項免費身體檢查，吸引近千名市民參與。

委員會項目籌劃高級經理梁可欣應邀出席開幕典禮。委員會同場設置攤位，以有趣的遊戲、無煙宣傳短片及小冊子，加強居民對煙草禍害的認識，並邀請參加者簽名支持「全面禁止另類吸煙產品」。



## Central and Western District Health Festival 2019/2020

To enhance health consciousness of the residents in Central and Western District, the Steering Committee on Healthy City in the Central and Western District collaborated with the Central and Western District Office to organize the "Central and Western District Health Festival 2019/2020" on 7 to 8 September 2019 at Smithfield Sports Centre. A series of health exhibitions, game booths, health talks, exercise demonstrations and free-of-charge body checks were provided. The event attracted nearly a thousand of participants.

Jacqueline LEUNG, COSH Senior Project Manager was invited to join the opening ceremony. COSH also set up a booth to enhance participants' understanding on smoking hazards through interesting games, smoke-free short videos and booklets. COSH also urged the public to join the signatory campaign of "Support to Enact a Total Ban on Alternative Smoking Products".



## 中華電力安全健康環保日 2019

香港中華電力有限公司於2020年1月18日假屯門龍鼓灘發電廠舉行年度活動「安全健康環保日」，透過舞台表演、攤位遊戲及各類展覽增強參加者對安全、健康及環保的關注，吸引逾5,000名員工及其家屬參與。委員會獲邀於活動設置「支持無煙香港」遊戲攤位，派發無煙小冊子和單張，並向參加者介紹無煙生活的好處，鼓勵參加者支持全面禁止另類吸煙產品。



## CLPP Safety, Health & Environment (SHE) Day 2019

CLP Power Hong Kong Limited annual event "Safety, Health & Environment (SHE) Day" was held on 18 January 2020 at Black Point Power Station in Tuen Mun. The event aimed to boost participants' awareness on safety, health and environment through stage performances, game booths and exhibitions. Over 5,000 staff and their families participated in the event. COSH was invited to host a game booth namely "Support Smoke-free Hong Kong" and distribute smoke-free brochures and leaflets to highlight the importance of a smoke-free lifestyle. Participants were also invited to support a total ban on alternative smoking products.

## 教育及青少年活動 Education and Youth Programmes

### 青少年教育活動 Youth Education Programmes

#### 「無煙新世代」健康講座

從小開始教育兒童及青少年堅拒第一口煙非常關鍵，灌輸無煙知識予下一代，能令他們明白建立無煙健康生活的重要性，並鼓勵他們支持家人及朋友戒煙。故此，委員會自1991年起，每年到訪全港各區幼稚園、中小學及大專院校舉辦健康講座，向兒童及青少年推廣無煙信息，讓他們及早認清並遠離煙草禍害。

委員會於2019至2020學年走訪超過80間學校舉行健康講座，逾15,000名學生參與。講座詳述吸煙、二手煙、三手煙及另類吸煙產品的禍害，學生亦能從中了解最新的控煙資訊，包括本港的控煙政策、戒煙服務及煙草商的宣傳伎倆等，並介紹委員會的控煙工作及活動，以及播放最新的宣傳短片。此外，委員會的教育幹事會透過問答環節，增強與學生的互動，令他們更全面汲取無煙資訊。

#### Health Talks for “Smoke-free New Generation”

Delivering smoke-free messages to the next generation at an early stage is critical to help them recognize the importance of a smoke-free environment, deter them from lighting up the first cigarette and motivate them to encourage family members and friends to quit smoking. Since 1991, COSH has organized health talks in kindergartens, primary schools, secondary schools and tertiary institutions across the territory every year to educate the children and teenagers on smoking hazards.

During the school year 2019 to 2020, COSH delivered health talks in more than 80 schools, reaching over 15,000 students. The health talks covered the harmful effects of smoking, secondhand smoke, third-hand smoke and other alternative smoking products, as well as the latest updates on tobacco control, such as tobacco control policy in Hong Kong, smoking cessation services and marketing tactics of the tobacco industry. COSH educators also introduced COSH's programmes, broadcast promotional videos and enhanced students interaction by question-and-answer session.





## 「無煙 Teens 計劃」2019-2020



青少年是推動香港控煙工作的重要力量，委員會多年來致力加強無煙教育，讓青少年了解煙草的禍害，積極建立健康的無煙生活態度。委員會自2012年開始每年舉辦「無煙Teens計劃」，透過一系列的活動，將最新的控煙資訊傳遞予青少年，更提供機會讓參加者學習籌辦多元化的無煙推廣活動，藉此培育青少年多方面的才能，成為社會未來領袖。

計劃至今已成功培育超過2,400名「無煙Teens」，成效顯著。2019-2020年度的計劃由教育局協辦，吸引近200名來自20間中學及制服團隊的14至18歲青少年參與。

### 無煙大本營

「無煙大本營」於2019年暑假期間舉行，委員會於營前舉行簡報會暨工作坊，邀請極地馬拉松跑手盧俊賢及STEM（科學、科技、工程及數學）教學機構創辦人黎志輝擔任講者，分享以健康嗜好代替吸煙的好處及如何善用STEM元素優化宣傳推廣計劃，為參加者日後進行無煙行動作好準備。



## “Smoke-free Teens Programme” 2019-2020

Youngsters are the major force of tobacco control in Hong Kong. COSH is devoted to smoke-free education to equip youngsters with knowledge on smoking hazards and encourage them to live a healthy lifestyle. The “Smoke-free Teens Programme” has been organized annually since 2012 to instill knowledge of tobacco control and smoking hazards in youngsters, provide opportunities to develop various skills and organize smoke-free promotion activities to be future leaders.

Over 2,400 Smoke-free Teens have been nurtured as tobacco control pioneers under the Programme. The Programme 2019-2020 was co-organized by Education Bureau, about 200 youngsters aged 14 to 18, from 20 secondary schools and uniform groups joined the Programme.



### Smoke-free Training Camps

The leadership training camps were held during the summer holiday in 2019. To prepare participants for organizing smoke-free activities, COSH held a pre-camp briefing session cum workshop and invited extreme marathon runner Steve LO and Ken LAI, the co-founder of a STEM (Science, Technology, Engineering and Mathematics) education organization. They shared the benefits of replacing smoking by healthy habits and useful tips on planning effective promotion activities with STEM elements.



於四場兩日一夜的訓練營中，「無煙Teens」透過多元活動學習煙草禍害及控煙資訊，同時亦通過團隊任務提升他們的領導才能、創意及批判思考、溝通及衝突管理、團隊及合作精神、項目策劃及戒煙輔導技巧等。

Four 2-Day-1-Night leadership training camps shared information on smoking hazards and tobacco control measures with Smoke-free Teens. Diversified trainings and group activities further enhanced participants' skills on leadership, creative and critical thinking, communication and problem solving, team building, programme planning and smoking cessation counseling techniques.



## 無煙行動

完成暑期訓練營後，「無煙Teens」於2019年9月至12月期間回到校園實踐所學，籌辦近60項無煙社區及學校活動，將無煙信息傳遞予一萬多名來自不同階層的市民。「無煙Teens」的活動籌劃方式漸趨成熟，除了舉辦校內的推廣活動如攤位遊戲及拍攝創意宣傳短片外，更勇於走進社區與市民一同探討世界各地的控煙議題，鼓勵更多市民支持健康無煙生活。

## Smoke-free Programmes in Schools and the Community

After completing the leadership training camp in summer, the Smoke-free Teens applied their knowledge to hold about 60 innovative smoke-free programmes at schools and the community between September and December 2019, reaching over 10,000 citizens from all walks of life. Smoke-free Teens demonstrated their enhanced skills by organizing different activities including game booths and production of creative short films. Street interviews were also conducted to collect public opinions on tobacco control policies round the world and encourage the mass public to adopt a smoke-free lifestyle.









冠軍隊伍宣道會陳瑞芝紀念中學(第二隊)同學製作了極具創意的「無煙學科六面睇」短片系列，邀請學科老師及社工等參與拍攝，以不同角度深入探討吸煙的禍害。此外，隊伍於校內設置攤位遊戲，善用社交媒體平台宣傳和分享無煙活動及短片，更連同其他學校一起走進社區，製作及派發心意卡鼓勵吸煙人士戒煙。同學亦於活動完成後自設問卷調查，以檢討活動成果，透過高效的宣傳手法和積極的檢討，一系列活動共接觸近1,800名同學及市民，反應非常熱烈。



The champion team, Christian Alliance S C Chan Memorial College (Team 2) produced a series of creative videos named "Take a closer look at smoking hazards from different perspectives", with participation of subject teachers and social workers. The videos provided in-depth exploration of smoking hazards from different angles. The team also set up game booths at school, promoted the videos through social media platforms, liaised with other schools to design and distributed greeting cards to encourage smokers to quit smoking. A tailor-made survey was conducted for evaluating the effectiveness of their activities. Through effective promotional channels and constant review, the team's activities spread smoke-free messages to around 1,800 individuals with overwhelming response.



亞軍隊伍嶺南鍾榮光博士紀念中學以「無煙·同行」為主題，舉辦了多項別出心裁的無煙活動，包括攤位遊戲、街頭訪問、製作短片及心意掛牌、中文寫作比賽及家長座談會等，加強學生、家長及市民對煙草禍害的認識及另類吸煙產品的關注，將無煙信息廣泛傳遞予接近2,300名人士。

The first runner-up team, Lingnan Dr Chung Wing Kwong Memorial Secondary School organized a series of creative smoke-free activities with the theme of "Smoke-free, walk together", including interactive game booths, street interviews, short films and DIY greeting cards, Chinese writing competition and parents' seminars. Around 2,300 people were reached while awareness on hazards of smoking and alternative smoking products were enhanced.



季軍隊伍棉紡會中學則參考人氣綜藝節目，製作一輯宣傳短片，運用生活化和富趣味的方式強調吸煙的後果，並分享戒煙的好處，亦邀請校長及隊員參與短片拍攝並於社交媒體分享。



The second runner-up team, Cotton Spinners Association Secondary School, produced a video with reference to a popular variety show and highlighted the health consequences of smoking and the benefits of smoking cessation in a humorous way. Sharing videos by the principal and the team were also promoted at social media platform.



得獎名單如下：

冠軍：宣道會陳瑞芝紀念中學(第二隊)

亞軍：嶺南鍾榮光博士紀念中學

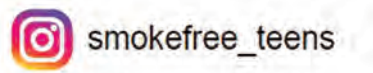
季軍：棉紡會中學

「優異無煙Teens團隊」：

- 樂善堂梁植偉紀念中學
- 皇仁舊生會中學
- 博愛醫院歷屆總理聯誼會梁省德中學

計劃網頁：

[www.smokefree.hk/smokefreeteens](http://www.smokefree.hk/smokefreeteens)



Winner List:

Champion: Christian Alliance S C Chan Memorial College (Team 2)

First runner-up: Lingnan Dr Chung Wing Kwong Memorial Secondary School

Second runner-up: Cotton Spinners Association Secondary School

Outstanding Smoke-free Teams:

- Lok Sin Tong Leung Chik Wai Memorial School
- Queen's College Old Boys' Association Secondary School
- The Association of Directors & Former Directors of Pok Oi Hospital Limited Leung Sing Tak College

Programme Website:

[www.smokefree.hk/smokefreeteens](http://www.smokefree.hk/smokefreeteens)





### 學校互動教育巡迴劇場 「無煙大搜查」

自1995年起，委員會以「學校互動教育巡迴劇場」作為預防兒童及青少年吸煙的重點教育及宣傳活動之一，透過與學校及專業藝術團體合作，以互動教育劇場的形式加強同學的無煙知識，鼓勵他們與家人一起推動無煙生活。劇場先後於全港學校舉辦超過2,000場表演，接近57萬名學生和教師觀賞及參與。

互動教育劇場以音樂、舞台效果及生動有趣的演繹手法，讓同學可以在輕鬆愉快的氣氛下認識吸煙、二手煙、三手煙及另類吸煙產品的禍害，了解吸煙的謬誤及拒絕二手煙等正面信息，並學習如何鼓勵親友戒煙，劇場同時亦歡迎家長參與。

2019-2020年度「學校互動教育巡迴劇場」由教育局協辦，並首度與iStage劇團合作，推出全新劇目「無煙大搜查」。特別鳴謝香港海洋公園的支持，繼續派出角色小紅熊參與演出，一起宣揚無煙信息。委員會亦感謝林大慶教授擔任此劇的顧問。

### School Interactive Education Theatre “Smoke-free Detective Adventure”

Since 1995, the “School Interactive Education Theatre Programme” has been one of COSH’s major education and publicity programmes to prevent youth smoking. Cooperating with schools and local professional troupe, COSH encourages the students to promote a smoke-free lifestyle with their families. The Programme contributed over 2,000 performances, reaching almost 570,000 students and teachers over the years.

Key messages of tobacco control are delivered when students enjoyed the interactive education theatre performance along with music, stage effects and interesting presentations. Students learn about the harmful effects of smoking, secondhand smoke, third-hand smoke and alternative smoking products. They could also understand the fallacies about smoking, how to say no to secondhand smoke and the ways to encourage smoking family members to kick the habit. Parents are also welcomed to attend the performances.

The 2019-2020 Programme was co-organized by Education Bureau. In collaboration with iStage Theatre for the first time, a brand-new interactive drama titled “Smoke-free Detective Adventure” was launched. With the support of Ocean Park Hong Kong, a character Redd, was featured in the drama to spread smoke-free messages. In addition, special credit was given to Prof LAM Tai-hing, the professional consultant of the drama.



故事講述一名來自2050年的天才科學家哈飛博士 (Dr Healthy)，經過醫療機械人健康號3.0的檢查後，發現自己身上有多種由吸煙引致的疾病，但奇怪的是哈飛博士根本沒有吸煙習慣。為了尋根究底，他帶同最愛的小紅熊，乘坐自己研發的時光機回到過去進行搜查。哈飛博士回到2019年後，遇上小學時期的自己(康仔)、青梅竹馬的同學曾寶珠，還有爸爸和媽媽。他發現煙害源頭都指向身邊的親人和朋友，百感交集。最後，哈飛博士與所有同學合作偵破多個煙害危機，並成功勸勉好朋友拒絕吸煙誘惑及鼓勵家人戒煙。觀眾踴躍參與劇中的互動環節，與主角們一同偵查煙害，承諾拒絕吸第一口煙，並肩負向吸煙的家人宣揚無煙信息之使命。

劇場的首演禮於2019年10月10日假香港理工大學賽馬會綜藝館舉行，約300名師生及嘉賓率先觀賞。嘉賓包括衛生署控煙酒辦公室主管封螢醫生、教育局總課程發展主任(德育、公民及國民教育)譚家強博士、香港大學公共衛生學院社會醫學講座教授暨羅旭龢基金教授(公共衛生學)林大慶教授、香港海洋公園高級市務經理羅巧婷、委員會主席鄭祖盛及總幹事黎慧賢。首演禮後，劇團隨即在全港各區學校展開巡迴演出。

The story was about Dr Healthy, a scientist who came from 2050, found himself suffering from smoking related diseases after the check-up by his medical robot Healthy 3.0, despite the fact that he had never smoke. To find out the root cause, he travelled back to 2019 with his favorite Redd by the time-travelling machine he invented. In 2019, he met Hong Jai (his childhood), Bo Chu (his best friend) and his parents. He was puzzled to find all smoking hazards attributed to his family and friends. With the assistance of all students, he detected the tobacco risks, convinced his best friend to stay away from the temptation to smoke and successfully encouraged his family member to quit smoking. Audience actively participated in the interactive sessions with actors, promised to reject the first cigarette and share smoke-free messages with their families.

The premiere was held at the Jockey Club Auditorium, The Hong Kong Polytechnic University on 10 October 2019, which was attended by around 300 students, teachers and guests. Honounble guests included Dr FUNG Ying, Head of Tobacco and Alcohol Control Office, Department of Health, Dr Andy TAM, Chief Curriculum Development Officer (MCNE), Education Bureau, Prof LAM Tai-hing, Chair Professor of Community Medicine & Sir Robert Kotewall Professor in Public Health, School of Public Health, The University of Hong Kong, Candy LAW, Senior Marketing Manager, Ocean Park Hong Kong, Antonio KWONG, COSH Chairman and Vienna LAI, COSH Executive Director. The Programme began its tours across the territory afterwards.





除劇場外，委員會亦為老師設計「無煙教育資源套」及為學生準備了一系列的配套活動，包括劇場網頁、小冊子及紀念品，讓學生觀賞劇場後隨時重溫無煙資訊，亦可參與『無煙大搜查』工具設計及戒煙口號創作比賽，將無煙知識學以致用，並發揮創意。

鑑於2019冠狀病毒病疫情，學校於本學年下學期停課，為配合「停課不停學」，委員會首次推出網上版劇場及互動學習專區，讓學生可安在家中欣賞劇場及參與延伸學習活動，以鞏固無煙知識及學習拒絕吸煙，並鼓勵他們將無煙信息推廣至家人，一同建立無煙家庭。本年度的巡迴演出連同網上版劇場，合共有超過20,000名學生及老師欣賞。

劇場網頁：[www.educationtheatre.hk](http://www.educationtheatre.hk)

Apart from the drama performance, a "Smoke-free Teaching Kit" was developed for teachers while a designated website, bring-home educational materials and souvenirs were provided for students to review the smoke-free information anytime. Through the "Smoke-free Detective Tool and Slogan Design Competition", students were encouraged to utilize the knowledge they acquired during the drama to spread the smoke-free messages in a creative way.

Due to the school suspension in second term under the epidemic of Coronavirus Disease 2019, COSH echoed "Suspending Classes without Suspending Learning" by launching an online version of the drama performance with an interactive learning platform, which allowed primary students to enrich their smoke-free knowledge and motivated them to share the messages with their families at home. In total, over 20,000 students and teachers were reached through touring and online version of the drama.

Programme Website: [www.educationtheatre.hk](http://www.educationtheatre.hk)



冠軍 Champion



亞軍 First runner-up



季軍 Second runner-up





## 與學界及社區聯繫

## Liaison with Academia and Community

### 香港大學護理學院課程

香港大學護理學院致力培訓專業護理人員，並提供有關控煙及戒煙輔導之課程，以提高學生對控煙議題的關注和鼓勵他們投入戒煙工作，是委員會多年來的緊密合作夥伴。

委員會項目籌劃高級經理朱偉康獲邀為其碩士課程擔任客席講者，分別於2019年4月1日及2020年3月30日，以「香港的煙草控制及預防工作」為題，共向超過100名護理學系碩士學生講解香港的控煙政策、戒煙服務及委員會的教育、宣傳及政策倡議工作，同時介紹香港控煙工作所面對的挑戰，以及委員會在推動無煙香港的角色。

### 救世軍新界西綜合服務－ 聯校學生領袖訓練計劃

救世軍新界西綜合服務舉辦「第三十五屆聯校學生領袖訓練計劃」，一眾參與的青少年於2019年4月26日到訪委員會，了解另類吸煙產品對香港控煙政策帶來的挑戰，同學們亦就立法全面禁止另類吸煙產品的議題發表意見。項目籌劃高級經理朱偉康、項目籌劃經理謝結齡和王志峰為同學介紹委員會的政策倡議工作及分享最新的國際控煙情況。委員會其後亦獲邀出席於2019年5月27日假嶺南大學舉行的「第三十五屆聯校學生領袖訓練計劃畢業典禮暨青年聲音薈萃」，觀賞同學們就電子煙對香港帶來的影響所自創的無煙短劇。



### HKU School of Nursing – Nursing Programme

School of Nursing of The University of Hong Kong endeavors to provide professional nursing training and is a close working partner of COSH over the years. Courses on tobacco control and smoking cessation counseling are provided to enhance their students' awareness and involvement in the works of curbing and quitting tobacco use.

On 1 April 2019 and 30 March 2020, Lawrence CHU, COSH Senior Project Manager was invited to give guest lectures to their Master programme and delivered presentations titled "Tobacco Control and Smoking Prevention Programmes in Hong Kong" to over 100 master students. Tobacco control measures and smoking cessation services in Hong Kong, as well as COSH's education, publicity programmes and advocacy works were introduced. Mr Chu also shared the challenges of tobacco control and role of COSH in building a smoke-free Hong Kong.

### New Territories West Integrated Service, The Salvation Army – Joint School Student Leadership Training Scheme

A group of teenage participants of "The 35<sup>th</sup> Joint School Student Leadership Training Scheme" organized by New Territories West Integrated Service of The Salvation Army visited COSH on 26 April 2019 to understand how the alternative smoking products imposed challenges on tobacco control in Hong Kong. Participants shared their opinions on the total ban on alternative smoking products. Lawrence CHU, COSH Senior Project Manager, Jacqueline TSE and Fung WONG, COSH Project Managers introduced COSH's advocacy works and the latest development of tobacco control across the globe. COSH was also invited to attend the graduation ceremony of "The 35<sup>th</sup> Joint School Student Leadership Training Scheme" on 27 May 2019 at Lingnan University to enjoy their smoke-free drama about the adverse impacts of electronic cigarettes in Hong Kong.



### 2019 年醫院管理局研討大會

為促進醫療新知及經驗交流，醫院管理局於2019年5月14日至15日假香港會議展覽中心舉辦「2019年醫院管理局研討大會」。委員會獲邀於研討會上設置資訊攤位，向與會者介紹委員會的教育宣傳工作及本港控煙概況，同時透過派發無煙刊物及宣傳品，促進與專業醫護人員在控煙上的協作交流。

### 香港大學青少年戒煙熱線 – 戒煙輔導員培訓課程

香港大學護理學院青少年戒煙熱線於2005年成立，目的為青少年提供朋輩式的戒煙輔導，以協助25歲或以下的吸煙人士戒煙。青少年戒煙熱線自成立以來成功招募及訓練為數不少的青少年戒煙輔導員。

委員會獲邀於2019年9月21日為其戒煙輔導員培訓課程提供講座。委員會總幹事黎慧賢向參加者講解香港的吸煙情況、控煙政策及委員會的角色。香港大學公共衛生學院社會醫學講座教授暨羅旭龢基金教授(公共衛生學)林大慶教授亦為課程的演講嘉賓，介紹吸煙及二手煙的禍害。資深戒煙輔導護士及輔導員教授電話戒煙輔導及動機性訪談技巧。參加者透過個案研究及小組討論，掌握專業理論及獲得實踐的機會。

### Hospital Authority Convention 2019

Hospital Authority hosted the “Hospital Authority Convention 2019” on 14 to 15 May 2019 at Hong Kong Convention and Exhibition Centre, which aimed to facilitate the sharing of knowledge and experience on clinical advances. COSH was invited to set up an information booth to introduce COSH’s education and publicity programmes as well as the tobacco control development in Hong Kong. Smoke-free publications and souvenirs were distributed to enhance the exchange and collaboration on tobacco control with medical and healthcare professionals.

### HKU Youth Quitline – Smoking Cessation Counselor Training Workshop

Established in 2005, the “Youth Quitline” is a youth-oriented smoking cessation hotline introduced by the School of Nursing of The University of Hong Kong to help smokers aged 25 or below kick the habit. Over the years, the “Youth Quitline” has been recruiting and nurturing many young smoking cessation counselors.

COSH was invited to deliver a lecture at the Smoking Cessation Counselor Training Workshop on 21 September 2019. Vienna LAI, COSH Executive Director shared the smoking prevalence of Hong Kong, tobacco control policies and COSH’s role with the participants. Prof LAM Tai-hing, Chair Professor of Community Medicine & Sir Robert Kotewall Professor in Public Health, School of Public Health, The University of Hong Kong also delivered a lecture on hazards of smoking and secondhand smoke. Skills and techniques on telephone counseling and motivational interviewing were delivered by the experienced smoking cessation nurses and counselors. Through case studies and group discussions, the participants understood the professional theories and got the opportunities for practice.

## 與傳播媒介之聯繫

### Working with the Mass Media

為使控煙資訊及委員會之宣傳活動能有效傳達至社會各階層，委員會一直與媒體保持緊密聯繫。秘書處經常處理不同報刊、電視台、電台及其他媒體之訪問及查詢。此外，本會於年度內亦曾發放下列新聞稿予各大傳媒機構：

COSH maintains a close and longstanding relation with the mass media, enabling the messages of tobacco control and COSH's promotion activities to penetrate into all levels of the society effectively. COSH Secretariat regularly fields interviews and enquiries from different newspapers, publications, television and radio stations, as well as other media platforms. COSH issued the following press releases to the media during the year:

日期 Date	新聞稿	Press Release
2019/4/13	支持全面禁止另類吸煙產品 保障市民健康	Support to enact a total ban on alternative smoking products
2019/4/25	專家建議香港須全禁新型吸煙產品 防患以未然	Expert recommended a total ban on alternative smoking products in Hong Kong
2019/5/23	儘快全禁另類吸煙產品 防止煙禍下一代	Enact a total ban on alternative smoking products promptly to protect public health and the next generations
2019/5/31	「無煙新頻道」正式啟動 鼓勵市民活出無煙新角度	Develop healthy hobbies to replace smoking via "Smoke-free Channel"
2019/10/10	學校互動教育巡迴劇場「無煙大搜查」 鼓勵同學偵破煙草禍害 肩負宣揚無煙信息使命	Premiere of School Interactive Education Theatre Encourages students to detect smoking hazards and spread smoke free message to their family
2020/1/7	「無煙老友記」計劃 2019-2020 幾大就幾大 話戒就要戒	"Elderly Smoking Cessation Promotion Project 2019-2020" reminds the elderly "Never Too Late to Quit"
2020/1/14	大幅增加煙草稅 從速實現全面禁煙	Raising tobacco tax substantially to achieve Tobacco Endgame
2020/1/21	致香港特別行政區財政司司長公開信 增加煙草稅 100% 並按年增加稅率 以加快降低香港吸煙率	Open Letter to Financial Secretary, HKSAR Government Tobacco tax increase by 100% and subsequent annual tax increase to accelerate smoking reduction
2020/2/26	委員會回應財政預算案的控煙措施	COSH's response to the tobacco control policies proposed by The Budget
2020/3/31	立即戒煙 減低患上 2019 冠狀病毒病風險	Quit smoking immediately to reduce the risks of COVID-19

## 會議及考察 Conferences and Visits



### 控煙專才培訓計劃 2019

衛生署控煙酒辦公室轄下的世界衛生組織控煙及煙癮治療合作中心於2019年11月11日至15日在香港舉辦為期五天的「控煙專才培訓計劃2019」，為在西太平洋區域從事控煙工作的政府或非政府組織人員提供培訓。培訓內容根據世界衛生組織(世衛)制定的「MPOWER」綱領而編排，透過講解最新的控煙措施、意見交流及經驗分享等，協助香港及西太平洋區域的控煙機構工作人員掌握控煙的技巧和策略，包括立法、執法、宣傳及推廣，以及戒煙服務的發展和評估。

國際及本地控煙專家獲邀為主講嘉賓，包括世衛資深政策顧問麥龍詩迪教授、世衛專家 Kathleen LANNAN 及 Mina KASHIWABARA、美國 Mayo Clinic 尼古丁依賴中心專家 Therese SHUMAKER、澳洲悉尼大學 Becky FREEMAN 博士、衛生署控煙酒辦公室主管封螢醫生，以及香港大學公共衛生學院社會醫學講座教授暨羅旭龢基金教授(公共衛生學)林大慶教授等。委員會主席鄭祖盛亦獲邀以「對抗香港的煙草流行——香港吸煙與健康委員會的倡議、教育及宣傳工作」為題，分享委員會多年來在香港控煙工作上的經驗及挑戰。



### Fellowship Programme on Tobacco Control 2019

The “Fellowship Programme on Tobacco Control 2019” was organized in Hong Kong from 11 to 15 November 2019 by the World Health Organization Collaborating Centre for Smoking Cessation and Treatment of Tobacco Dependence under the Tobacco and Alcohol Control Office, Department of Health. The programme aimed to provide training for the tobacco control personnel of governments and non-governmental organizations in West-Pacific Region. According to “MPOWER” framework laid down by the World Health Organization (WHO), the programme facilitated representatives from tobacco control organizations in Hong Kong and countries of West-Pacific Region to master tobacco control skills through a comprehensive overview of the latest tobacco control measures and experience sharing, which strengthened their knowledge including legislation, enforcement, advocacy and publicity, as well as development and evaluation of cessation programmes.

International and local tobacco control experts included Prof Judith MACKAY, WHO Senior Policy Advisor, Kathleen LANNAN and Mina KASHIWABARA, WHO experts, Therese SHUMAKER from Nicotine Dependence Center of Mayo Clinic, the United States, Dr Becky FREEMAN from The University of Sydney, Australia, Dr FUNG Ying, Head of Tobacco and Alcohol Control Office, Department of Health and Prof LAM Tai-hing, Chair Professor of Community Medicine & Sir Robert Kotewall Professor in Public Health, School of Public Health, The University of Hong Kong were invited as guest speakers. Antonio KWONG, COSH Chairman, was invited to deliver a presentation titled “Role of COSH in Advocacy, Education and Publicity against Tobacco Use in Hong Kong” which highlighted the experience and challenges of COSH’s works on tobacco control in Hong Kong over the years.



## 第20屆全國控煙學術研討會暨 第十屆海峽兩岸及香港澳門地區 煙害防治研討會

為促進全國各省市控煙專才及公共衛生學者的控煙交流和經驗分享，中國控制吸煙協會每兩年一次主辦「全國控煙學術研討會」。而「海峽兩岸及香港澳門地區煙害防治研討會」由中國控制吸煙協會、香港吸煙與健康委員會、台灣董氏基金會及澳門控煙聯盟四地控煙組織定期協辦，為各地控煙工作者提供交流平台，以促進中國內地、香港、台灣及澳門的控煙工作。

「第20屆全國控煙學術研討會暨第十屆海峽兩岸及香港澳門地區煙害防治研討會」於2019年11月17日至19日在四川省重慶市舉行。是次研討會以「健康中國2030規劃綱要」為主題，近500名來自全國各地及海外的控煙專家和學者參與，分享最新控煙進程研究成果。委員會派出代表團出席是次會議，成員包括主席鄭祖盛、總幹事黎慧賢及項目籌劃高級經理梁可欣。

## The 20<sup>th</sup> National Symposium on Tobacco Control cum the 10<sup>th</sup> Cross-strait, Hong Kong and Macau Tobacco Control Conference

“National Symposium on Tobacco Control” is organized by Chinese Association on Tobacco Control every two years with an aim to provide a platform for tobacco control practitioners and public health academics across the country to exchange knowledge and experience. The “Cross-strait, Hong Kong and Macau Tobacco Control Conference” is co-organized by Chinese Association on Tobacco Control, COSH, John Tung Foundation of Taiwan and Macao Tobacco Control Alliance regularly to enhance tobacco control collaboration in mainland China, Hong Kong, Taiwan and Macao.

With the theme of “Healthy China 2030 Initiative”, the 20<sup>th</sup> National Symposium on Tobacco Control cum the 10<sup>th</sup> Cross-strait, Hong Kong and Macau Tobacco Control Conference was held in Chongqing, Sichuan Province from 17 to 19 November 2019, and was attended by around 500 delegates and tobacco control experts to share the latest development on tobacco control and research findings. COSH formed a delegation comprising Antonio KWONG, Chairman, Vienna LAI, Executive Director and Jacqueline LEUNG, Senior Project Manager to join the Symposium cum the Conference.



委員會主席鄭祖盛獲邀參與圓桌討論環節，以「控煙行動中的領導力－我們如何知曉的努力是否奏效？」為題，代表香港分享本地控煙工作成果和未來的挑戰。委員會總幹事黎慧賢獲邀為「擴大煙害圖象警示有效傳播煙害信息及鼓勵戒煙：香港經驗」作主題報告，分享香港於2018年全面實施85%煙害圖象警示後，公眾對警示的認知增加及考慮戒煙。



此外，項目籌劃高級經理梁可欣則以「為運輸業界注入無煙力量『無煙車樂部』計劃推廣無煙旅程」為題作口頭報告，向與會者介紹委員會針對高吸煙率行業的無煙宣傳計劃。委員會報告的兩篇論文同時獲收錄於大會論文集，後者更獲選為優秀論文摘要。

在會議的閉幕儀式上，委員會主席鄭祖盛接過主辦單位中國控煙協會副會長廖文科的會議旗幟，並即席邀請各位專家學者出席將於香港舉行的「第十一屆海峽兩岸及香港澳門地區煙害防治研討會」。



Representing Hong Kong, Antonio KWONG, COSH Chairman, was invited to share the accomplishments and challenges on tobacco control in Hong Kong at the round-table panel discussion on “Leadership in Tobacco Control - How will we know if what we are doing is working?”. Vienna LAI, COSH Executive Director delivered a presentation on “Enlargement of pictorial health warnings can effectively promote smoking hazards and encourage smoking cessation: experiences in Hong Kong” to highlight the raising public awareness on the health warnings and consider to quit smoking after the 85% pictorial health warnings were in effective from 2018 in Hong Kong.

Besides, Jacqueline LEUNG, COSH Senior Project Manager introduced the tailor-made promotion programme targeting industry with high smoking rate at the presentation titled “Promote smoke-free culture among the transportation industry via tailored programme ‘Smoke-free Drivers Club’”. Two submitted abstracts by COSH were published in the abstract booklet, while the later one was also awarded as one of the outstanding abstracts.

At the closing ceremony, Antonio KWONG, COSH Chairman represented COSH to receive the conference flag from LIAO Wenke, Vice Chairman of China Association on Tobacco Control, organizer of the Conference. Mr Kwong invited all tobacco control experts to join the 11<sup>th</sup> Cross-strait, Hong Kong and Macau Tobacco Control Conference to be held in Hong Kong.





## 2019世界無煙日暨無煙澳門健康生活協會成立十週年

無煙澳門健康生活協會自2009年成立，多年來開展煙草使用的調查和研究，並向市民尤其是青少年教育煙草禍害，推動「無煙澳門」理念。為紀念協會成立十周年、宣傳世界無煙日及記錄澳門控煙的發展歷程，協會於2019年5月24日舉辦「2019世界無煙日暨無煙澳門健康生活協會成立十週年」活動，並邀請委員會及全國控煙機構出席慶祝儀式。中國控制吸煙協會研究員許桂華、委員會委員暨香港大學公共衛生學院副教授何世賢博士及台灣董氏基金會主任林清麗擔任專題演講嘉賓，分享各地的控煙經驗，並探討全球最新的控煙趨勢及挑戰。協會亦展示了澳門最新的控煙情況和成就，並向各個推動無煙澳門的團體及持分者致以謝意。委員會項目籌劃高級經理朱偉康代表委員會出訪交流及恭賀協會。



## 衛生署健康促進處

衛生署健康促進處於2019年10月9日到訪委員會，與委員會交流公共衛生政策、健康教育及宣傳推廣的策略。委員會總幹事黎慧賢、項目籌劃高級經理朱偉康及梁可欣講解委員會的宣傳及教育工作，以及控煙的挑戰。健康促進處則介紹轄下單位的最新宣傳活動。是次訪察加深雙方了解不同範疇之健康推廣，並探討如何攜手促進公眾健康。

## World No Tobacco Day 2019 cum the 10<sup>th</sup> Anniversary of Smoke-free & Healthy Life Association of Macau

Established in 2009, Smoke-free & Healthy Life Association of Macau (SHLAM) has been conducting a series of research on tobacco use, as well as launching smoke-free education programmes for mass public and youth, so as to spread out the smoke-free messages and advocate for a smoke-free Macao. To mark its 10<sup>th</sup> anniversary, echo the World No Tobacco Day and commemorate the tobacco control development in Macao, SHLAM organized the "2019 World No Tobacco Day cum the 10<sup>th</sup> Anniversary of Smoke-free & Healthy Life Association of Macau" on 24 May 2019. COSH and tobacco control organizations across the country were invited. XU Gui-hua, Researcher of Chinese Association on Tobacco Control, Dr Daniel HO, COSH Member and Associate Professor, School of Public Health, The University of Hong Kong and LIN Ching-li, Representative of John Tung Foundation of Taiwan delivered keynote speeches and shared their experiences, development and challenges of tobacco control from a global perspective. SHLAM also introduced the current development and achievements of tobacco control in Macao, and expressed their gratitude to different organizations and stakeholders for their contributions to a smoke-free Macao. Lawrence CHU, COSH Senior Project Manager represented COSH to attend the event and congratulated SHLAM.

## Health Promotion Branch, Department of Health

Health Promotion Branch of Department of Health visited COSH on 9 October 2019 and exchanged the strategies on public health policies, health education and promotion. Vienna LAI, COSH Executive Director, Lawrence CHU and Jacqueline LEUNG, COSH Senior Project Managers introduced the education and publicity works of COSH, as well as the challenges ahead for tobacco control. The latest publicity events of different divisions under the Health Promotion Branch were shared. The visit strengthened the mutual understanding on multiple perspectives of health promotion and enhanced collaboration in safeguarding public health.



## 資訊及研究項目計劃

### Information and Research Projects



#### 資源中心

委員會設有資源中心，供市民到訪和查閱有關吸煙和健康的資料。資源中心收藏各類有關煙草禍害、被動吸煙、戒煙及控煙法例等的資料，包括本地和國際期刊、書籍、學術研究論文、控煙會議文獻、參考資料、統計數據、教育資料及影音資料。市民亦可索取資料包括研究報告書、無煙宣傳及教育資料如小冊子及海報等。

到訪資源中心的人士主要包括學生、老師、家長、研究人員、醫護人員、控煙團體及公共衛生界別人士。委員會亦會接待本地及海外的考察代表團。

#### 有關吸煙與健康的諮詢

市民透過不同渠道包括電話、傳真或電郵等，獲取各項有關吸煙與健康及香港控煙法例的資訊、了解戒煙的方法和好處、查詢委員會的活動資料，以及就吸煙或其他相關議題作出查詢、建議或投訴。委員會在接獲投訴及建議後，會即時處理或/及轉交有關的政府部門及相關團體跟進。

在2019年4月1日至2020年3月31日期間，委員會共收到市民提出約230宗查詢、投訴及建議，主要個案類型包括查詢香港控煙法例、申請委員會教育及宣傳物品、查詢另類吸煙產品如電子煙、加熱非燃燒煙草製品(加熱煙)及水煙的資料及投訴違例吸煙等。

#### Resource Centre

COSH Resource Centre had been set up for visitors to provide a variety of information related to smoking and health. Collections of the Resource Centre include various local and international periodicals, journals, books, research papers, conference proceedings, reference materials, statistics, education materials and audio-visual materials about tobacco hazards, passive smoking, smoking cessation and tobacco control legislation, etc. Members of public can also access to the research reports, smoke-free promotion and education materials such as leaflets and posters.

Visitors of the Resource Centre include students, teachers, parents, researchers, medical and healthcare practitioners, tobacco control organizations and public health professionals. COSH also receives visits from local and overseas delegations.

#### Enquiry on Smoking and Health

The public can acquire information about smoking and health, smoke-free legislations in Hong Kong, methods and benefits to quit smoking and details of COSH's programmes via different means including telephone, fax or email etc. The public can also make enquiries, suggestions and complaints regarding smoking or other related issues. Any feedback, suggestions or complaints received will be responded instantly or/and referred to the government departments and organizations concerned respectively.

Between 1 April 2019 and 31 March 2020, COSH received about 230 enquiries from the public requesting for information, making suggestions and complaints. Major categories of cases included enquiries on tobacco control legislation in Hong Kong, applications for COSH's education and publicity materials, enquiries on information of alternative smoking products, including electronic cigarettes, heat-not-burn tobacco products and waterpipe tobacco, and complaints on smoking offenses.

## 委員會網站、Facebook專頁及電子通訊

委員會的網站([www.smokefree.hk](http://www.smokefree.hk))讓市民獲取與吸煙和健康相關的資訊，以及了解委員會的工作和活動。在2019年4月1日至2020年3月31日期間，委員會網站共錄得超過479,000瀏覽次數，其中以吸煙禍害、電子煙及戒煙方法的相關頁面錄得較高瀏覽量。

為方便不同階層的市民包括殘疾人士獲取有關控煙的資訊及委員會的服務，委員會網站採用無障礙網頁設計，並達至由香港互聯網註冊管理有限公司主辦、政府資訊科技總監辦公室協辦及平等機會委員會支持之「無障礙網頁嘉許計劃」的金獎級別，更由2018-2019年起獲得「三連金獎」。此外，委員會的活動網站「戒煙大贏家」無煙社區計劃([www.quittowin.hk](http://www.quittowin.hk))及學校互動教育巡迴劇場([www.educationtheatre.hk](http://www.educationtheatre.hk))亦分別獲得「三連金獎」及「金獎」。

同時，委員會定期發放電子通訊，內容包括世界各地有關吸煙和健康的研究、最新的控煙措施及委員會的最新活動等。歡迎公眾於委員會網站登記接收電子通訊。

社交媒體近年成為大眾接收資訊的主要途徑，委員會設立「無煙大家庭」Facebook專頁([www.facebook.com/smokefreefamily](http://www.facebook.com/smokefreefamily))，加強與市民互動。市民可透過專頁獲得最新控煙新聞、煙害資訊和認識戒煙的好處及方法，亦可了解及參與委員會的活動。



## COSH Website, Facebook Page and E-Newsletter

COSH's website ([www.smokefree.hk](http://www.smokefree.hk)) is developed to inform the public about the latest information related to smoking and health, as well as the updated activities of COSH. From 1 April 2019 to 31 March 2020, COSH's website recorded over 479,000 page views. The top viewed pages included smoking hazards, electronic cigarettes and methods of cessation.

To facilitate different segments of the community including persons with disability to access to tobacco control information and COSH's services, COSH's website adopted the accessibility design and attained the requirements of Gold Award of "Web Accessibility Recognition Scheme" organized by the Hong Kong Internet Registration Corporation Limited. This scheme is co-organized by the Office of the Government Chief Information Officer and supported by Equal Opportunities Commission. COSH's website had been awarded the Triple Gold Award since 2018-2019. The other two project websites "Quit to Win" Smoke-free Community Campaign ([www.quittowin.hk](http://www.quittowin.hk)) and "School Interactive Education Theatre Programme" ([www.educationtheatre.hk](http://www.educationtheatre.hk)) also achieved the Triple Gold Award and Gold Award respectively.

Meanwhile, e-newsletter is released regularly covering the recent findings on smoking hazards and smoking cessation across the globe, local and international development on tobacco control and the latest activities of COSH. The public is welcomed to subscribe the e-newsletter through COSH's website.

As social media becomes a popular information source, a Facebook page "Smoke-free Family" ([www.facebook.com/smokefreefamily](http://www.facebook.com/smokefreefamily)) had been set up to enhance interaction with the public, as well as release the latest news on tobacco control, hazards of smoking, tips and benefits of smoking cessation. Members of public can also obtain the details of COSH's programmes and join via the Facebook page.



無煙大家庭 [smokefreefamily](http://smokefreefamily)



## 研究項目計劃 Research Projects

### 控煙政策調查 2019

自2012年起，委員會進行「控煙政策調查」以定期評估香港控煙政策的成效及監測市民對控煙措施的意見。此調查是一個具代表性的橫斷研究，廣泛收集有關吸煙與健康的資料，包括吸煙習慣、戒煙和接觸二手煙的情況、對現行和未來控煙政策的意見等。

香港大學護理學院及公共衛生學院受委員會委託進行控煙政策調查2019，並由香港大學民意研究計劃(現為香港民意研究所)以隨機電話訪問形式，於2018年9月至2019年3月期間成功收集了共5,156名15歲或以上可以廣東話溝通的市民之意見，當中包括1,714名從不吸煙者、1,739名已戒煙者及1,703名現時吸煙者。而吸煙指使用任何類型的吸煙產品，包括捲煙、電子煙、加熱非燃燒煙草製品(加熱煙)等。受訪者被隨機分配回答包括不同核心問題和隨機問題組別的問卷。調查人員根據2018年的香港人口對最終樣本進行加權。

調查結果如下：

#### 吸煙產品使用情況

- 大部分(81.5%)現時吸煙者表示在過去四周使用一種吸煙產品，13.7%表示使用兩種或以上的吸煙產品。
- 吸捲煙的現時吸煙者平均每天吸12.7支捲煙。近一半(46.7%)在起床後半小時內吸第一支煙，顯示他們對尼古丁有較高的依賴。



### Tobacco Control Policy-related Survey 2019

COSH's Tobacco Control Policy-related Survey has been conducted since 2012 to regularly investigate the effectiveness of tobacco control policies in Hong Kong and keep track of the public's views on the policies. It is a representative cross-sectional survey and covers a wide scope of topics related to smoking and health, including pattern of smoking and cessation, secondhand smoke exposure, opinions towards current and future tobacco control measures, etc.

The School of Nursing and School of Public Health of The University of Hong Kong were commissioned by COSH to conduct the Tobacco Control Policy-related Survey 2019. Data were collected by Public Opinion Programme of The University of Hong Kong (currently known as Hong Kong Public Opinion Research Institute) via telephone interview. From September 2018 to March 2019, the survey successfully collected the information from the randomized sample of 5,156 respondents aged 15 years or above who could speak Cantonese, including 1,714 never smokers, 1,739 ex-smokers and 1,703 current smokers. Smoking refers to the use of any forms of tobacco products, including conventional cigarettes, electronic cigarettes (e-cigarettes) and heat-not-burn (HNB) tobacco products etc. Respondents were divided into different subsamples to answer different question subsets consisting of core and random questions. The final sample was weighted to the Hong Kong population in 2018.

#### Key results of the survey are shown below:

#### Use of Smoking Products

- Majority (81.5%) of current smokers reported single tobacco product use while 13.7% reported dual or multiple tobacco product use in the past four weeks.
- On average, current cigarette smokers consumed 12.7 cigarettes per day. Nearly half (46.7%) of the current cigarette smokers smoked the first cigarette within half an hour after waking up, indicating a higher addiction to nicotine.



- 在所有受訪者當中，有2.9%曾經使用過電子煙。
- 在所有受訪者當中，超過四分之一(27.4%)曾聽說過加熱煙，有2.5%曾經吸過加熱煙。
- 政府建議禁止進口、製造、售賣、分發及宣傳另類吸煙產品，包括電子煙及加熱煙。約三分二(64.0%)的受訪者支持全面禁止電子煙，過半數(58.2%)曾聽說過加熱煙的受訪者贊成全面禁止加熱煙。
- 受訪者中大部分(82.1%)曾聽說過水煙，有近一成(8.8%)曾經吸過水煙。

### 戒煙情況

- 近半數(43.8%)的現時吸煙者有意戒煙，但只有約四分之一(27.7%)在過去12個月內曾經嘗試戒煙，平均嘗試2.9次。
- 有約一成半(13.2%)的現時吸煙者曾經使用戒煙服務。

### 被動吸煙

- 在所有受訪者當中，有16.9%與最少一名吸煙者同住，並有14.2%表示在過去七天曾在家中接觸二手煙。
- 市民在工作場所接觸二手煙的情況並不罕見，有25.4%的在職受訪者於過去七天中最少有一天在工作時有人在其三米範圍內吸煙。

- Among all respondents, 2.9% had ever used e-cigarettes.
- Over a quarter (27.4%) of respondents among all respondents had heard about HNB tobacco products and 2.5% had ever used.
- The Government had proposed to ban the import, manufacture, sale, distribution and advertisement of alternative smoking products, including e-cigarettes and HNB tobacco products. About two-thirds of respondents (64.0%) supported to ban e-cigarettes, and more than half (58.2%) of those who had heard of HNB tobacco products supported to ban them.
- Most (82.1%) respondents had heard about waterpipe tobacco and 8.8% had ever used.



### Pattern of Smoking Cessation

- Nearly half (43.8%) of the current smokers had an intention to quit smoking, while about a quarter (27.7%) tried to quit and made 2.9 attempts on average in the past 12 months.
- About 13.2% of current smokers had ever used smoking cessation services.

### Passive Smoking

- Among all respondents, 16.9% lived with at least one smoker and 14.2% were exposed to secondhand smoke (SHS) at home in the past seven days.
- Exposure to SHS at workplace was not rare that 25.4% of employed respondents were exposed to SHS by smokers smoking within three meters at workplace in at least one day in the past seven days.

### 擴大法定禁煙範圍

- 調查顯示擴大法定禁煙範圍得到廣泛支持，大部分受訪者支持擴大禁煙範圍至公共交通等候處(96.0%)、公共地方的輪候隊伍(93.7%)、行人路(83.4%)、繁忙街道(83.1%)、住所公共地方(82.3%)、辦公大樓出入口三米範圍內(77.1%)、餐廳室外座位(68.4%)、所有室外公共地方(64.1%)及酒吧室外座位(61.0%)。



- 大部分受訪者支持在有兒童的地方禁止吸煙，包括所有公共地方(88.3%)、私家車輛(87.2%)及家中(73.5%)。
- 超過七成(73.7%)受訪者贊成政府應立法禁止吸煙人士在街道上一邊走路一邊吸煙。
- 超過八成(84.8%)受訪者認為政府應調高違例吸煙的罰款(現時的罰款為港幣1,500元)。
- 大多數(81.9%)受訪者認為禁煙場所管理人應為其場所內的違例吸煙情況負上刑責。

### Expansion of Statutory No Smoking Areas

- The survey showed expansion of statutory no smoking areas gained strong support. For instance, respondents supported to extend no smoking areas to public transport stops (96.0%), queuing line in public places (93.7%), pedestrian walkways (83.4%), busy streets (83.1%), public areas of residential buildings (82.3%), within three meters of doorways of office buildings (77.1%), seating-out areas of restaurants (68.4%), all public outdoor places (64.1%) and seating-out areas of bars (61.0%).
- Respondents overwhelmingly supported to ban smoking in the venues where children are present, including all public areas (88.3%), in private vehicles (87.2%) and home (73.5%).
- 73.7% of respondents agreed that the Government should ban smoking while walking on streets.
- Over 80% (84.8%) of respondents agreed that the Government should raise the fine of smoking offenses (the fine is HK\$1,500 at present).
- Majority (81.9%) of respondents supported that the person-in-charge of a smoke-free premise should be liable to a penalty upon smoking offenses in the premise.



## 煙草產品包裝規管

- 近九成 (88.6%) 現時吸煙者表示，在過去30天有留意到煙包上的煙害圖象警示，比率遠較從不吸煙者 (40.3%) 及已戒煙者 (37.4%) 為高。
- 現時吸煙者當中，超過六成 (62.5%) 在過去30天會因為看到煙包上的煙害圖象警示而聯想起吸煙的危害、31.0% 考慮戒煙及10.8% 曾停止當時的吸煙行為。
- 大部分 (78.9%) 受訪者認為煙害圖象警示應該更清晰及具警嚇性。另外，過半數 (63.8%) 受訪者贊成定期更換煙害圖象警示。
- 由2017年12月開始，香港採用佔煙包兩個最大表面面積的85%的煙害圖象警示，並須顯示戒煙熱線號碼。有超過一半 (61.8%) 現時吸煙者曾經留意到煙包上的戒煙熱線。
- 「全煙害警示包裝」即統一及簡化煙草產品的包裝，並禁止在煙包上展示商標、圖案及標誌；品牌名稱只可以統一的字款、顏色及位置展現在煙包上。一半 (50.7%) 的受訪者及近三分一 (30.0%) 現時吸煙者贊成採用「全煙害警示包裝」。



## Regulations on Cigarette Packaging

- Nearly 90% (88.6%) of current smokers noticed the pictorial health warnings (PHW) on cigarette packs in the past 30 days. The rate was much higher than in never smokers (40.3%) and ex-smokers (37.4%).
- Among the current smokers, 62.5% thought about the harms of smoking, 31.0% thought about quitting smoking and 10.8% held back from smoking after noticing PHW in the past 30 days.
- Most (78.9%) respondents agreed that the PHW should be clearer and more threatening about the hazards of smoking. Over half (63.8%) agreed to change the PHW regularly.
- Hong Kong adopted larger PHW at 85% of the two largest surfaces and mandated the quitline number on each cigarette pack since December 2017. More than half (61.8%) of the current smokers had seen the quitline number on cigarette packs.
- Plain packaging standardizes and simplifies the packaging of tobacco products. Trademarks, graphics and logos are not allowed on cigarette packs, while brand names can only be displayed in a standard font, colour and location on the package. Half (50.7%) of the respondents and nearly one-third (30.0%) of current smokers supported to adopt plain packaging.



### 煙草廣告及推廣

- 大多數(69.3%)受訪者於過去30天曾經在銷售點看到陳列的煙草產品。
- 大部分(70.6%)受訪者認為陳列煙草產品屬於廣告宣傳，45.0%認為陳列的煙草產品會鼓吹年輕人吸煙。
- 近三分二(65.0%)的受訪者及過半數(51.8%)現時吸煙者同意禁止於銷售點展示煙草產品。



### 煙草稅

- 大部分(79.6%)受訪者同意政府來年增加煙草稅。支持每年增加煙草稅的受訪者數亦佔大多數(70.9%)。
- 在已戒煙者及現時吸煙者當中，有63.8%贊成調高煙價以推動吸煙人士戒煙。
- 有近一半(49.8%)現時吸煙者表示會因為煙價調高而戒煙。他們認為煙價應該調高至平均每包港幣129元(中位數為港幣100元)，才能令他們戒煙。

### Tobacco Advertising and Promotion

- Most (69.3%) respondents noticed point of sale tobacco products display in the past 30 days.
- A majority (70.6%) of respondents thought that the display of tobacco products was a kind of advertisement and promotion, and 45.0% reckoned that the display encourages young people to smoke.
- Nearly two-thirds (65.0%) of respondents and slightly over half (51.8%) of the current smokers agreed to ban point of sale tobacco products display.

### Tobacco Tax

- Majority (79.6%) of respondents supported the Government to raise tobacco tax next year and most (70.9%) respondents agreed to raise tobacco tax annually.
- In ex-smokers and current smokers, 63.8% agreed that cigarette price should be increased to motivate smokers to quit smoking.
- Almost half (49.8%) of the current smokers said that they would quit smoking if the cigarette price increased. On average, they reckoned that the price of a pack of cigarettes should be raised to HK\$129 (median was HK\$100) to make them quit smoking.



### 對未來控煙政策的意見

- 近八成 (79.6%) 受訪者認為政府人員不應與煙草商或其代表有任何商業利益關係。
- 大部分 (79.5%) 受訪者及 69.3% 現時吸煙者贊成將法定購買煙草的年齡由 18 歲調高至 21 歲。
- 過半數 (58.5%) 受訪者同意禁止售賣煙草予 2018 年或之後出生的人士。
- 大部分受訪者支持香港全面禁止銷售煙草 (70.8%) 及使用任何類型的吸煙產品 (72.7%)；支持的現時吸煙者亦分別有 33.1% 及 33.6%。
- 近七成 (68.0%) 受訪者同意當香港吸煙率降至百分之五或以下，應實施全面禁煙。
- 約三分二 (65.7%) 受訪者及 35.8% 現時吸煙者贊成政府訂定 2027 年實現全面禁煙的目標。

為適時向政府倡議有效的控煙措施及提高公眾的關注，委員會已透過不同方式公佈部分題目的初步結果。



### Opinions on Future Tobacco Control Policies

- Respondents overwhelmingly agreed (79.6%) that public officers should not be commercially affiliated with the tobacco industry and its representatives.
- A majority (79.5%) of respondents and 69.3% of current smokers agreed to increase the legal age for purchasing cigarettes from 18 to 21 years old.
- More than half (58.5%) of the respondents agreed that children born in and after 2018 should never have access to cigarettes.
- Majority of respondents supported a total ban on the sale (70.8%) and on the use (72.7%) of all forms of tobacco products in Hong Kong. The measures were also supported by 33.1% and 33.6% of current smokers respectively.
- Almost 70% (68.0%) of respondents agreed to ban smoking if the smoking prevalence in Hong Kong decreases to 5% or lower.
- Around two-thirds (65.7%) of respondents and 35.8% of current smokers supported the Government to set 2027 as the year for enacting a total ban on smoking in Hong Kong.

To advocate for appropriate measures and raise public awareness duly, COSH released the preliminary findings on specific topics in different occasions.

## 減少小學生接觸煙草煙霧的集群隨機對照研究

儘管香港的吸煙率低，接觸二手煙的情況依然普遍。由於家庭單位一般都是面積細小，而且家人需要共用睡房，家中的二手煙及三手煙可成為兒童接觸煙草煙霧的主要來源。為制定具成本效益的策略以減少兒童接觸煙草煙霧，委員會與香港大學公共衛生學院設計了一個以學校及家庭為本的計劃，教育兒童及家人有關煙草煙霧的害處，並以集群隨機對照研究評估成效。



這項研究在2018年10月至2019年7月期間進行，邀請來自11間學校的3,434位小二至小四學生參與。在基線調查之後，學生被隨機分派至干預組或對照組，然後在第三個月及第六個月進行追蹤調查。干預組的學生收到一套共八份工作紙，內有簡單任務讓學生及家人一同完成；對照組的學生則收到一份簡單的無煙小冊子。在基線和第六個月，共44名學生（每組22名）提供了頭髮樣本作頭髮尼古丁檢測，以客觀的量度接觸煙草煙霧的情況。

### 主要的研究結果如下：

- 在第三個月及/或第六個月，干預組的二手煙及三手煙接觸的下降幅度比對照組的大。

## Cluster Randomized Controlled Trial on Reducing Exposure to Tobacco Smoke among Primary School Students

Secondhand smoke (SHS) exposure is common in Hong Kong despite of the low smoking prevalence. As homes are typically small flats with family members sharing bedrooms, SHS and third-hand smoke (THS) at home are the major sources of tobacco smoke exposure for children. To develop cost-effective strategies to reduce children exposure to tobacco smoke, COSH and the School of Public Health, The University of Hong Kong, designed a school and family-based programme to educate children and family members about the harms of tobacco smoke, and conducted a cluster randomized controlled trial for evaluation.

This study was conducted in 3,434 Primary 2 to 4 students from 11 schools between October 2018 and July 2019. After a baseline survey, students were randomized to the intervention or control group, and completed follow-up surveys at 3-month and 6-month. The intervention group received a set of eight worksheets with simple tasks for students and family members to complete together, while the control group received a simple smoke-free pamphlet. Hair samples were collected from 44 students (22 students in each group) at baseline and 6-month follow-up for hair nicotine test, as an objective measurement of tobacco smoke exposure.

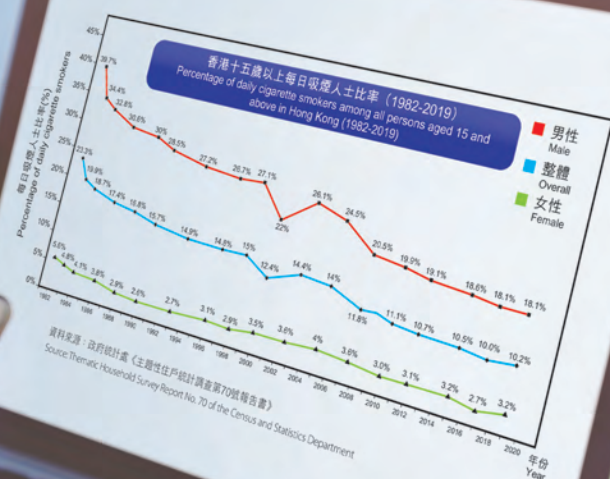
### Key results of the study are shown below:

- Compared with the control group, greater reduction in SHS exposure and THS exposure was observed in the intervention group at 3-month and/or 6-month follow-ups.



- 從基線到第六個月，過去七日在家中接觸二手煙的平均日數在干預組及對照組分別下降 16% 和 10%。
- 從基線到第三個月，過去七日在家中接觸從外面飄進家中的二手煙的平均日數在干預組及對照組分別下降 19% 和 8%；從基線到第六個月，該平均日數在兩組分別下降 26% 和 20%。
- 從基線到第三個月，過去七日在家中接觸三手煙的平均日數在干預組及對照組分別下降 16% 和 4%；從基線到第六個月，該平均日數在兩組分別下降 23% 和 9%。
- 從基線到第六個月，過去七日在家外接觸二手煙的平均日數在干預組及對照組分別下降 19% 和 12%。
- 頭髮尼古丁檢測顯示在干預組及對照組之間在基線及第六個月的煙草煙霧接觸並無顯著差異。
- The average number of days of SHS exposure at home in the past seven days reduced by 16% and 10% in the intervention and control group respectively, from baseline to 3-month follow-up.
- The average number of days of SHS exposure at home from outside in the past seven days reduced by 19% and 8% in the intervention and control group, respectively, from baseline to 3-month follow-up, and by 26% and 20% respectively, from baseline to 6-month follow-up.
- The average number of days of THS exposure at home in the past seven days reduced by 16% and 4% in the intervention and control group, respectively, from baseline to 3-month follow-up, and by 23% and 9% respectively, from baseline to 6-month follow-up.
- The average number of days of SHS exposure outside home in the past seven days reduced by 19% and 12% in the intervention and control group respectively, from baseline to 6-month follow-up.
- Hair nicotine test showed no statistically significant difference in tobacco smoke exposure between intervention and control groups at baseline and 6-month follow-up.





# 報告 Reports



環保工作報告  
Environmental Report

獨立核數師報告書  
Independent Auditor's Report



# 環保工作報告

## Environmental Report

### 目標與政策

委員會支持可持續發展，在進行各項內務或對外工作時本著環保目標而行。為保護環境，委員會奉行以下綠色管理政策：

- 提升能源效益；
- 減少耗用紙張；
- 減廢及回收；及
- 提高職員環保意識。

### 環保措施

#### 提升能源效益

委員會秘書處致力節約能源，各職員均自律省電，各種電器如電燈、冷氣機、電腦、螢幕、影印機和打印機等，在毋須使用時均會關掉。配合政府建議，辦公室溫度普遍維持在攝氏25.5度。

在採購電器時，委員會以能源效益作為其中一個考慮因素。電腦設備如電腦主機、螢幕及打印機等一般帶有自動省電功能，以減少能源消耗。此外，秘書處亦採用耗電量為傳統燈泡六分之一的節能燈泡。

#### 減少耗用紙張

為向公眾傳播最新的無煙資訊，委員會須印刷宣傳物品如海報、單張及小冊子等；另外，委員會與大眾及政府部門保持頻繁接觸和通訊。委員會藉以下措施減少耗紙量：

- 在可行情況下以電子郵件及內聯網代替便箋、信件及列印本作內部及外部通訊及文件傳遞；

### Aims and Strategies

To uphold sustainable development, COSH devises internal and external strategies to promote a sense of responsibility regarding environmental protection. To achieve this, COSH has adopted the following environmentally friendly policies:

- Enhance efficiency of energy consumption;
- Reduce paper consumption;
- Reduce waste and recycle; and
- Enhance awareness on environmental protection.

### Environmental Protection Strategies

#### Enhance Efficiency of Energy Consumption

The Secretariat conserves energy by ensuring that staff members switch off lights, air-conditioners, computers, the monitors of computers, photocopiers, printers and other electrical appliances immediately after use. Office room temperature is generally maintained at 25.5°C as recommended by the Government.

Energy efficiency is one of the considerations when purchasing electrical appliances. IT equipment with automatic energy saving functions has also been used, such as computers, the monitors of computers and printers. In addition, the Secretariat uses compact fluorescent lamps which consume one sixth of the energy of traditional globes.

#### Reduce Paper Consumption

To disseminate updated smoke-free information to the public, promotional materials such as posters, leaflets and brochures are produced. COSH also maintains frequent communications with the community and government departments. To reduce the consumption of paper, the following measures are in place:

- Use of email and intranet for internal and external communication and transfer of document instead of memorandums, letters and hardcopies, where possible;

- 使用電子傳真及電子檔案管理系統以減少列印文件；
- 定期評估印刷品的需求量並作出調整，以減少紙張消耗；
- 縮減印刷宣傳品之尺寸及數量，並逐漸使用環保紙張印刷宣傳品；
- 上載委員會的控煙資訊、宣傳內容及刊物到委員會網站供市民瀏覽，減少印刷品的需求；
- 在活動及節日時使用電子邀請函及節日賀卡，以取代傳統邀請函及賀卡；
- 在列印文件前使用列印預覽功能檢查格式及編排，避免浪費紙張；及
- 採用雙面印刷，減省用紙。
- Utilization of electronic-fax system and electronic document management system to reduce the amount of printing;
- Review on the needs for quantity of printing materials and adjust regularly to reduce paper consumption;
- Reduction of the size and quantity of the printed promotional materials and gradual use of environmentally friendly paper;
- The tobacco control information, promotional materials and publications have been uploaded to COSH website for public access in order to reduce the demand for hardcopies;
- Use electronic invitation and greeting cards in replacement of printed invitation and cards for events and on festive occasions;
- Use of "Print Preview" function to check the layout and style of document before printing to avoid wastage; and
- Use of both sides of paper to reduce consumption.

### Reduce Waste and Recycle

COSH supports waste reduction and recycling and joins the "Computer and Communication Products Recycling Programme" launched by the Environmental Protection Department. The unserviceable computers and computer accessories are delivered for recycling. In addition, recyclable printer toner cartridges have been used.

Unwanted papers such as documents with printing errors or drafts of documents have been collected for recycling. Recycling boxes have been placed at convenient locations in the office to encourage staff members to recycle waste paper.

Instead of paper cups and plastic cups, reusable cups were provided for guests during meetings and visits.

### Enhance Awareness on Environmental Protection

Staff members are informed on the aims and reminded to comply with the green measures via staff meetings, email reminders and notices.

Where applicable, service providers and working partners are encouraged to follow the principles of environmental protection, e.g. use of eco-friendly materials and submission of document in electronic format.

COSH will continue to make every endeavor to comply with the green measures.

### 減廢及回收

委員會支持回收減廢，並參與環境保護署推出的「電腦及通訊產品回收計劃」，將已更換的電腦和電腦配件回收處理。另外，委員會使用可循環再用的打印機墨盒。

委員會鼓勵職員回收廢棄紙張，如錯誤列印的文件、草稿等，並於辦公室的方便地點放置廢紙回收箱。

進行會議及接待訪客時提供可重用的水杯，避免使用紙杯及膠杯。

### 提高環保意識

委員會秘書處不時透過舉行簡報會、電郵傳閱或張貼告示等，讓職員了解節約能源的目的，提醒他們遵行各項環保措施。

在可行情況下，委員會亦會鼓勵服務供應商及合作夥伴注意及實踐環保理念，如使用環保物料及透過電子方式遞交文件等。

委員會將繼續竭力執行各項環保措施。

# 獨立核數師報告書

## Independent Auditor's Report

香港吸煙與健康委員會  
財務報表  
截至2020年3月31日止年度

致 香港吸煙與健康委員會成員

(根據香港吸煙與健康委員會條例於香港註冊成立)

### 意見

本核數師(以下簡稱「我們」)已審計列載於第110頁至第139頁香港吸煙與健康委員會「貴會」的財務報表，此財務報表包括於2020年3月31日的財務狀況表與截至該日止年度的全面收益表、權益變動表及現金流量表，以及財務報表附註，包括主要會計政策概要。

我們認為，該等財務報表已根據香港會計師公會頒布的《香港財務報告準則》真實而中肯地反映了貴會於2020年3月31日的財務狀況及截至該日止年度的財務表現及現金流量。

### 意見的基礎

我們已根據香港會計師公會頒布的《香港審計準則》進行審計。我們在該等準則下承擔的責任已在本報告「核數師就審計財務報表承擔的責任」部分中作進一步闡述。根據香港會計師公會頒布的《專業會計師道德守則》(以下簡稱「守則」)，我們獨立於貴會，並已履行守則中的其他專業道德責任。我們相信，我們所獲得的審計憑證能充足及適當地為我們的審計意見提供基礎。

Hong Kong Council on Smoking and Health  
Financial Statements  
For the year ended 31 March 2020

To the Council Members of Hong Kong Council on Smoking and Health

(incorporated in Hong Kong under the Hong Kong Council on Smoking and Health Ordinance)

### Opinion

We have audited the financial statements of Hong Kong Council on Smoking and Health ("the Council") set out on pages 110 to 139, which comprise the statement of financial position as at 31<sup>st</sup> March 2020, and the statement of comprehensive income, statement of changes in equity and cash flow statement for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the financial statements give a true and fair view of the financial position of the Council as at 31<sup>st</sup> March 2020, and of its financial performance and its cash flows for the year then ended in accordance with Hong Kong Financial Reporting Standards ("HKFRSs") issued by the Hong Kong Institute of Certified Public Accountants ("HKICPA").

### Basis for Opinion

We conducted our audit in accordance with Hong Kong Standards on Auditing ("HKSA") issued by the HKICPA. Our responsibilities under those standards are further described in the **Auditor's Responsibilities for the Audit of the Financial Statements** section of our report. We are independent of the Council in accordance with the HKICPA's *Code of Ethics for Professional Accountants* ("the Code"), and we have fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.



## 財務報表及其核數師報告以外的信息

委員會成員須對其他信息負責。其他信息包括年報內的所有信息，但不包括財務報表及我們的核數師報告。年報預計會於本核數師報告簽發日後才能提供給我們。

我們對財務報表的意見並不涵蓋其他信息，我們亦不對該等其他信息發表任何形式的鑒證結論。

結合我們對財務報表的審計，我們的責任是當以上所指的其他信息提供給我們時閱讀這其他信息，在此過程中，考慮其他信息是否與財務報表或我們在審計過程中所了解的情況存在重大抵觸或者似乎存在重大錯誤陳述的情況。

## 委員會成員及治理層就財務報表須承擔的責任

委員會成員須負責根據香港會計師公會頒布的《香港財務報告準則》擬備真實而中肯的財務報表，並對其認為為使財務報表的擬備不存在由於欺詐或錯誤而導致的重大錯誤陳述所需的內部控制負責。

在擬備財務報表時，委員會成員負責評估 貴會持續經營的能力，並在適用情況下披露與持續經營有關的事項，以及使用持續經營為會計基礎，除非委員會成員有意將 貴會清盤或停止經營，或別無其他實際的替代方案。

治理層須負責監督 貴會的財務報告過程。

## Information Other than the Financial Statements and Auditor's Report Thereon

The Council members are responsible for the other information. The other information comprises the information included in the annual report, but does not include the financial statements and our auditor's report thereon. The annual report is expected to be available to us after the date of this auditor's report.

Our opinion on the financial statements does not cover the other information and we will not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information identified above when it becomes available and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated.

## Responsibilities of Council Members and Those Charged Governance for the Financial Statements

The Council members are responsible for the preparation of the financial statements that give a true and fair view in accordance with HKFRSs issued by the HKICPA, and for such internal control as the Council members determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Council members are responsible for assessing the Council's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Council members either intend to liquidate the Council or to cease operations, or have no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Council's financial reporting process.

## 核數師就審計財務報表承擔的責任

我們的目標，是對財務報表整體是否不存在由於欺詐或錯誤而導致的重大錯誤陳述取得合理保證，並出具包括我們意見的核數師報告。我們是按照香港吸煙與健康委員會條例第十七(五)條的規定，僅向整體成員報告，除此以外本報告書別無其他目的。我們概不就本報告書的內容，對任何其他人士負上或承擔任何責任。合理保證是高水平的保證，但不能保證按照《香港審計準則》進行的審計，在某一重大錯誤陳述存在時總能發現。錯誤陳述可以由欺詐或錯誤引起，如果合理預期它們單獨或滙總起來可能影響財務報表使用者依賴財務報表所作出的經濟決定，則有關的錯誤陳述可被視作重大。

在根據《香港審計準則》進行審計的過程中，我們運用了專業判斷，保持了專業懷疑態度。我們亦：

- 識別和評估由於欺詐或錯誤而導致財務報表存在重大錯誤陳述的風險，設計及執行審計程序以應對這些風險，以及獲取充足和適當的審計憑證，作為我們意見的基礎。由於欺詐可能涉及串謀、偽造、蓄意遺漏、虛假陳述，或凌駕於內部控制之上，因此未能發現因欺詐而導致的重大錯誤陳述的風險高於未能發現因錯誤而導致的重大錯誤陳述的風險。
- 了解與審計相關的內部控制，以設計適當的審計程序，但目的並非對貴會內部控制的有效性發表意見。
- 評價委員會成員所採用會計政策的恰當性及作出會計估計和相關披露的合理性。

## Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. This report is made solely to you, as a body, in accordance with section 17(5) of the Hong Kong Council on Smoking and Health Ordinance, and for no other purpose. We do not assume responsibility towards or accept liability to any other person for the contents of this report. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with HKSAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with HKSAs, we exercise professional judgement and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Council's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Council members.

## 核數師就審計財務報表承擔的責任 (續)

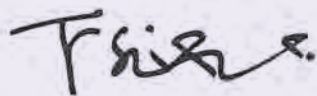
- 對委員會成員採用持續經營會計基礎的恰當性作出結論。根據所獲取的審計憑證，確定是否存在與事項或情況有關的重大不確定性，從而可能導致對 貴會的持續經營能力產生重大疑慮。如果我們認為存在重大不確定性，則有必要在核數師報告中提請使用者注意財務報表中的相關披露。假若有關的披露不足，則我們應當發表非無保留意見。我們的結論是基於核數師報告日止所取得的審計憑證。然而，未來事項或情況可能導致 貴會不能持續經營。
- 評價財務報表的整體列報方式、結構和內容，包括披露，以及財務報表是否中肯反映交易和事項。

除其他事項外，我們與治理層溝通了計劃的審計範圍、時間安排、重大審計發現等，包括我們在審計中識別出內部控制的任何重大缺陷。

## Auditor's Responsibilities for the Audit of the Financial Statements (continued)

- Conclude on the appropriateness of the Council members' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Council's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Council to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.



李福樹會計師事務所  
香港執業會計師

F. S. Li & Co.  
Certified Public Accountants

香港，2020年7月28日

Hong Kong, 28 July 2020



# 全面收益表

## Statement of Comprehensive Income

截至 2020 年 3 月 31 日止年度  
For the year ended 31 March 2020

(港幣)	(HK\$)	附註 Note	二零二零年 2020	二零一九年 2019
<b>收入</b>	<b>Income</b>			
香港特別行政區政府 津貼	Subventions from the Government of the Hong Kong Special Administrative			
一般津貼	Region General subvention		<b>28,273,500</b>	24,045,926
銀行利息收入	Bank interest income		<b>4,349</b>	1,498
雜項收入	Sundry income		<b>4,482</b>	3,330
			<b>28,282,331</b>	24,050,754
<b>支出</b>	<b>Expenditure</b>			
批准職位編製	Approved establishment	3	<b>6,342,430</b>	5,851,498
項目員工	Project staff	4	<b>3,165,247</b>	1,785,606
宣傳及推廣費用	Publicity and promotion expenses		<b>11,531,469</b>	12,348,940
會議費用	Conference expenses		<b>14,010</b>	168,577
參考書籍及刊物	Reference books and periodicals		<b>11,884</b>	12,334
辦公室租金、差餉及管理費	Office rent, rates and management fee		<b>512,203</b>	2,923,928
貨倉租金及費用	Warehouse rent and expenses		<b>60,324</b>	225,304
維修及保養費用	Repairs and maintenance		<b>94,452</b>	74,790
清潔工資及費用	Cleaning wages and fees		<b>67,013</b>	54,972
物業、機器及設備之折舊	Depreciation on property, plant and equipment		<b>16,824</b>	12,773
使用權資產之折舊	Depreciation on right-of-use assets		<b>2,889,259</b>	–
保險	Insurance		<b>77,239</b>	75,256
電費	Electricity		<b>45,377</b>	42,407
電話及通訊費用	Telephone and communication expenses		<b>57,416</b>	42,500
職工招募費用	Recruitment expenses		<b>40,596</b>	70,972
職工訓練及發展費用	Staff training and development expenses		–	1,500
法律、專業及核數費用	Legal, professional and audit fees		<b>33,100</b>	32,800
郵費	Postage		<b>13,855</b>	16,219
印刷及文具	Printing and stationery		<b>100,211</b>	84,944
租賃負債之利息支出	Interest expense on lease liabilities		<b>129,750</b>	–
雜項支出	Sundry expenses		<b>51,614</b>	38,250
			<b>25,254,273</b>	23,863,570
<b>本年度盈餘</b>	<b>Surplus for the Year</b>	5	<b>3,028,058</b>	187,184
<b>本年度全面收入</b>	<b>Total Comprehensive Income for the Year</b>		<b>3,028,058</b>	187,184

# 財務狀況表

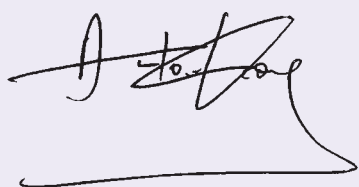
## Statement of Financial Position

於2020年3月31日  
At 31 March 2020

(港幣)	(HK\$)	附註 Note	二零二零年 2020	二零一九年 2019
<b>非流動資產</b>	<b>Non-Current Assets</b>			
物業、機器及設備	Property, plant and equipment	7	81,250	30,906
使用權資產	Right-of-use assets	8	5,672,559	–
			<b>5,753,809</b>	30,906
<b>流動資產</b>	<b>Current Assets</b>			
按金及預付款項	Deposits and prepayments	9	955,704	961,754
銀行及現金結存	Bank and cash balances		3,419,730	514,501
			<b>4,375,434</b>	1,476,255
<b>減：流動負債</b>	<b>Less: Current Liabilities</b>			
應付費用	Accrued charges		1,167,500	1,088,461
租賃負債 – 短期部份	Lease liabilities – current portion	10	2,920,755	–
年假撥備	Provision for annual leave entitlements		225,068	245,095
應退回衛生署之本年度經調整盈餘	Adjusted surplus for the year refundable to the Department of Health	11	3,004,236	184,096
應退回衛生署之累積盈餘	Accumulated surpluses refundable to the Department of Health	12	203,640	203,640
			<b>7,521,199</b>	1,721,292
<b>流動負債</b>	<b>Net Current Liabilities</b>		<b>(3,145,765)</b>	(245,037)
<b>總資產減流動負債</b>	<b>Total Assets Less Current Liabilities</b>		<b>2,608,044</b>	(214,131)
<b>非流動負債</b>	<b>Non-Current Liabilities</b>			
租賃負債 – 長期部份	Lease liabilities – non-current portion	10	(2,798,353)	–
<b>淨負債</b>	<b>Net Liabilities</b>		<b>(190,309)</b>	(214,131)
等於：	representing:			
<b>累積虧損</b>	<b>Accumulated Deficits</b>		<b>(190,309)</b>	(214,131)

委員會於2020年7月28日通過及批准發布於第110頁至第139頁的財務報表。

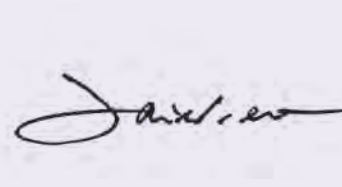
The financial statements on pages 110 to 139 were approved and authorized for issue by the Council on 28 July 2020.



鄭祖盛先生 MH  
主席  
Mr Antonio KWONG Cho-shing, MH  
Chairman



伍婉婷女士 MH  
副主席  
Ms Yolanda NG Yuen-ting, MH  
Vice-chairman



黎慧賢女士  
總幹事  
Ms Vienna LAI Wai-yin  
Executive Director

# 權益變動表

## Statement of Changes in Equity

截至2020年3月31日止年度  
For the year ended 31 March 2020

(港幣)	(HK\$)	附註 Note	二零二零年 2020	二零一九年 2019
<b>累積虧損</b>	<b>Accumulated deficits</b>			
上年度轉來之虧損	Deficit brought forward		<b>(214,131)</b>	(217,219)
本年度盈餘 / 本年度全面收入	Surplus for the year/ Total comprehensive income for the year		<b>3,028,058</b>	187,184
應退回衛生署之經調整盈餘	Adjusted surplus refundable to the Department of Health	11	<b>(3,004,236)</b>	(184,096)
本會應佔之盈餘	Surplus attributable to the Council		<b>23,822</b>	3,088
撥入下年度之虧損	Deficit carried forward		<b>(190,309)</b>	(214,131)



# 現金流量表

## Cash Flow Statement

截至2020年3月31日止年度  
For the year ended 31 March 2020

(港幣)	(HK\$)	附註 Note	二零二零年 2020	二零一九年 2019
營運活動之現金流量	Cash Flows From Operating Activities			
本年度盈餘	Surplus for the year		<b>3,028,058</b>	187,184
調整：	Adjustments for:			
利息收入	Interest income		<b>(4,349)</b>	(1,498)
利息支出	Interest expense		<b>129,750</b>	–
物業、機器及設備之折舊	Depreciation on property, plant and equipment		<b>16,824</b>	12,773
使用權資產之折舊	Depreciation on right-of-use assets		<b>2,889,259</b>	–
營運資金變動前之營運盈餘	Operating surplus before working capital changes		<b>6,059,542</b>	198,459
按金及預付款項之減少／(增加)	Decrease/(Increase) in deposits and prepayments		<b>6,050</b>	(118,531)
應付費用之增加	Increase in accrued charges		<b>79,039</b>	77,992
年假撥備之(減少)/增加	(Decrease)/Increase in provision for annual leave entitlements		<b>(20,027)</b>	11,322
營運活動所產生之淨現金	Net cash from operating activities		<b>6,124,604</b>	169,242
投資活動之現金流量	Cash flows from investing activities			
購入物業、機器及設備	Purchase of property, plant and equipment		<b>(67,168)</b>	(27,183)
已收利息	Interest received		<b>4,349</b>	1,498
投資活動所使用之淨現金	Net cash used in investing activities		<b>(62,819)</b>	(25,685)
融資活動之現金流量	Cash flows from financing activities			
盈餘退回衛生署	Surplus refunded to the Department of Health		<b>(184,096)</b>	(9,971)
已付租賃租金之資本部份	Capital element of lease rentals paid		<b>(2,842,710)</b>	–
已付租賃租金之利息部份	Interest element of lease rentals paid		<b>(129,750)</b>	–
融資活動所使用之淨現金	Net cash used in financing activities		<b>(3,156,556)</b>	(9,971)
現金及現金等值之淨增加	Net increase in cash and cash equivalents		<b>2,905,229</b>	133,586
年初現金及現金等值結存	Cash and cash equivalents at beginning of the year		<b>514,501</b>	380,915
年終現金及現金等值結存	Cash and cash equivalents at end of the year		<b>3,419,730</b>	514,501
現金及現金等值結存分析	Analysis of the balances of cash and cash equivalents			
銀行及現金結存	Bank and cash balances		<b>3,419,730</b>	514,501

# 財務報表附註

## Notes to the Financial Statements

### 1. 概述

香港吸煙與健康委員會「本會」乃根據香港吸煙與健康委員會條例於1987年10月1日註冊成立的機構。

本會辦公地址為香港灣仔皇后大道東183號合和中心44樓4402至4403室。

### 2. 主要會計政策

#### (a) 編製基準

本財務報表已按照香港會計師公會頒布所有適用的香港財務報告準則（其統稱已包括個別適用的香港財務報告準則、香港會計準則及詮釋）及香港公認會計準則編製。本財務報表以歷史成本慣例編製。

香港會計師公會頒布若干於本會計年度生效的全新及經修改香港財務報告準則。除下文所述的香港財務報告準則第16號外，採用其他全新及經修改香港財務報告準則，對本會於本會計年度及以往會計年度之業績及財務狀況及／或此等財務報表所載的披露並無重大影響。

### 1. General

The Hong Kong Council on Smoking and Health ("the Council") is an organization incorporated under the Hong Kong Council on Smoking and Health Ordinance on 1 October 1987.

The office address of the Council is at Unit 4402-03, 44<sup>th</sup> Floor, Hopewell Centre, 183 Queen's Road East, Wanchai, Hong Kong.

### 2. Principal Accounting Policies

#### (a) Basis of Preparation

These financial statements have been prepared in accordance with all applicable Hong Kong Financial Reporting Standards ("HKFRSs"), which collective term includes all applicable individual Hong Kong Financial Reporting Standards, Hong Kong Accounting Standards and Interpretations issued by the Hong Kong Institute of Certified Public Accountants ("HKICPA"), and accounting principles generally accepted in Hong Kong. The financial statements have been prepared under the historical cost convention.

The HKICPA has issued certain new and revised HKFRSs that are first effective for the current accounting year of the Council. Except for application of HKFRS 16 Lease as described below, the application of other new and revised HKFRSs has no material effect on the results and financial position of the Council for the current and prior accounting years and/or on the disclosures set out in these financial statements.

## 2. 主要會計政策 (續)

### (a) 編製基準 (續)

#### 香港財務報告準則第16號：租賃

香港財務報告準則第16號取代香港會計準則第17號：租賃、香港(國際財務報告詮釋委員會)第4號：釐定安排是否包括租賃、香港(準則詮釋委員會)第15號：經營租賃 – 優惠及香港(準則詮釋委員會)第27號：評估涉及租賃法律形式交易之內容。該準則載列確認、計量、呈列及披露租賃之原則，並要求承租人就所有租賃單一以資產負債表內之模式入賬。以出租人會計模式而言，香港財務報告準則第16號大致沿用香港會計準則第17號。出租人繼續使用與香港會計準則第17號相似之原則將租賃分類為經營租賃或融資租賃。

本會使用經修訂追溯採納方法採納香港財務報告準則第16號，首次應用日期為2019年4月1日。根據此方法，本會追溯應用準則，並將首次採納之累計影響作為對於2019年4月1日之累積虧損期初結餘之調整，而2019年3月31日之比較資料並無重列並繼續根據香港會計準則第17號呈報。

## 2. Principal Accounting Policies (continued)

### (a) Basis of Preparation (continued)

#### HKFRS 16, Leases

HKFRS 16 replaces HKAS 17, Leases, HK(IFRIC) 4, *Determining whether an Arrangement contains a Lease*, HK(SIC) 15, *Operating Leases – Incentives*, and HK(SIC) 27, *Evaluating the Substance of Transactions Involving the Legal Form of a Lease*. The standard sets out the principles for the recognition, measurement, presentation and disclosure of leases and requires lessees to account for all leases under a single on-balance sheet model. Lessor accounting under HKFRS 16 is substantially unchanged from HKAS 17. Lessors continue to classify leases as either operating or finance leases using similar principles as in HKAS 17.

The Council adopted HKFRS 16 using the modified retrospective method of adoption with the date of initial application of 1 April 2019. Under this method, the standard is applied retrospectively with the cumulative effect of initial adoption as an adjustment to the opening balance of accumulated deficits at 1 April 2019, and the comparative information for 31 March 2019 was not restated and continues to be reported under HKAS 17.



## 2. 主要會計政策 (續)

### (a) 編製基準 (續)

#### 香港財務報告準則第16號：租賃 (續)

##### (i) 租賃之新定義

根據香港財務報告準則第16號，倘合約為換取代價而授權於一段時間內控制一項已識別資產之用途，則該合約屬租賃或包含租賃。倘客戶有權從使用該已識別資產中獲取絕大部分經濟利益並有權主導該已識別資產之用途，則表示擁有控制權。本會選擇使用過渡可行權宜方法，僅於首次應用日期對先前應用香港會計準則第17號及香港（國際財務報告詮釋委員會）第4號識別為租賃之合約應用該準則。根據香港會計準則第17號及香港（國際財務報告詮釋委員會）第4號未有識別為租賃之合約並未予以重新評估。因此，香港財務報告準則第16號之租賃定義僅應用於在2019年4月1日或之後訂立或變更之合約。

## 2. Principal Accounting Policies (continued)

### (a) Basis of Preparation (continued)

#### HKFRS 16, Leases (continued)

##### (i) New definition of a lease

Under HKFRS 16, a contract is, or contains a lease if the contract conveys a right to control the use of an identified asset for a period of time in exchange for consideration. Control is conveyed where the customer has both the right to obtain substantially all of the economic benefits from use of the identified asset and the right to direct the use of the identified asset. The Council elected to use the transition practical expedient allowing the standard to be applied only to contracts that were previously identified as leases applying HKAS 17 and HK(IFRIC) 4 at the date of initial application. Contracts that were not identified as leases under HKAS 17 and HK(IFRIC) 4 were not reassessed. Therefore, the definition of a lease under HKFRS 16 has been applied only to contracts entered into or changed on or after 1 April 2019.

## 2. 主要會計政策(續)

### (a) 編製基準(續)

#### 香港財務報告準則第16號：租賃(續)

- (ii) 採納香港財務報告準則第16號之影響性質

本會擁有辦公樓宇及貨倉之租賃合約。作為承租人，本會先前根據有關租賃是否已將資產所有權之絕大部分回報及風險轉移至本會之評估，將租賃分類為經營租賃。根據香港財務報告準則第16號，本會採用單一方法確認及計量所有租賃之使用權資產及租賃負債，惟租期為12個月或以下之租賃（「短期租賃」）（透過有關資產之級別選擇）之選擇性豁免除外。本會確認使用權資產之折舊（及減值（如有））以及未償還租賃負債產生之利息（作為融資成本），而並非於2019年4月1日開始之租期內按直線法於經營租賃項下確認租金開支。

- (iii) 過渡之影響

於2019年4月1日應用香港財務報告準則第16號時，本會使用以下選擇性可行權宜方法：

- (a) 對租期於首次應用日期起計12個月內結束之租賃應用短期租賃豁免。
- (b) 依賴有關於緊接2019年4月1日前應用香港會計準則第17號對租約是否繁重之實體評估，以替代減值檢討。

## 2. Principal Accounting Policies (continued)

### (a) Basis of Preparation (continued)

#### HKFRS 16, Leases (continued)

- (ii) Nature of the effect of adoption of HKFRS 16

The Council has lease contracts for office building and warehouse. As a lessee, the Council previously classified leases as operating leases based on the assessment of whether the lease transferred substantially all the rewards and risks of ownership of assets to the Council. Under HKFRS 16, the Council applies a single approach to recognize and measure right-of-use assets and lease liabilities for all leases, except for elective exemption for leases with a lease term of 12 months or less ("short-term leases") (elected by class of underlying asset). Instead of recognizing rental expenses under operating leases on a straight-line basis over the lease term commencing from 1 April 2019, the Council recognizes depreciation (and impairment, if any) of the right-of-use assets and interest accrued on the outstanding lease liabilities (as finance costs).

- (iii) Impact on transition

The Council has used the following elective practical expedients when applying HKFRS 16 at 1 April 2019:

- (a) Applying the short-term lease exemptions to leases with a lease term that ends within 12 months from the date of initial application.
- (b) Relied on the entity's assessment of whether leases were onerous by applying HKAS 17 immediately before 1 April 2019 as an alternative to performing an impairment review.

## 2. 主要會計政策 (續)

### (a) 編製基準 (續)

#### 香港財務報告準則第16號：租賃 (續)

##### (iii) 過渡之影響 (續)

採納香港財務報告準則第16號  
本會於2019年4月1日之財務狀  
況表並沒有影響。

於2019年4月1日之租賃負債與  
於2019年3月31日之經營租賃  
承擔之對賬如下：

(港幣)	(HK\$)	
於2019年3月31日之 經營租賃承擔	Operating lease commitments as at 31 March 2019	34,000
減：剩餘租期於2020年3月31日 或之前屆滿之租賃 相關之承擔	Less: Commitments relating to the lease with a remaining lease term ended on or before 31 March 2020	(34,000)
於2019年4月1日之 租賃負債	Lease liabilities as at 1 April 2019	—

本會並沒有提早採用本年度尚未生效  
之全新及經修改之香港財務報告準  
則。相關說明記載於附註17。

## 2. Principal Accounting Policies (continued)

### (a) Basis of Preparation (continued)

#### HKFRS 16, Leases (continued)

##### (iii) Impact on transition (continued)

Adoption of HKFRS 16 had no impact on the  
Council's statement of financial position as at  
1 April 2019.

The lease liabilities as at 1 April 2019 reconciled  
to the operating lease commitments as at  
31 March 2019 are as follows:

The Council has not early adopted new and revised  
HKFRSs that are not yet effective for the current  
accounting year. Explanation of this is included in Note  
17.



## 2. 主要會計政策(續)

### (a) 編製基準(續)

#### 香港財務報告準則第16號：租賃(續)

在編製符合香港財務報告準則之財務報表時，管理層需作出判斷、估計和假設，此等對會計政策之應用，以及對資產、負債、收入和支出之報告數額構成影響。這些估計和相關假設是根據以往經驗和管理層因應當時情況認為合理之多項其他因素作出的，其結果構成了管理層在無法依循其他途徑及時得知資產與負債之帳面值時所作出判斷之基礎。實際結果可能有別於估計數額。

管理層會不斷審閱各項估計和相關假設。如果會計估計之修訂只是影響某一期間，其影響便會在該期間內確認；如果修訂對當前和未來期間均有影響，則在作出修訂之期間和未來期間確認。

### (b) 收入確認

(i) 當本會可合理地確信能符合政府津貼的條款及可預期收到津貼時，政府津貼金額會在相關成本發生的期間有系統地確認為收入，從而對應政府援助打算補償的相關成本。已收但未符合收入確認準則的政府津貼需確認為負債。

(ii) 銀行利息收入按實際利率法累計。

## 2. Principal Accounting Policies (continued)

### (a) Basis of Preparation (continued)

#### HKFRS 16, Leases (continued)

The preparation of the financial statements in conformity with HKFRSs requires management to make judgements, estimates and assumptions that affect the application of policies and reported amounts of assets, liabilities, income and expenses. The estimates and associated assumptions are based on historical experience and various other factors that are believed to be reasonable under the circumstances, the results of which form the basis of making the judgements about carrying values of assets and liabilities that are not readily apparent from other sources. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognized in the period in which the estimates is revised if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

### (b) Revenue Recognition

(i) Government subventions are recognized as income over periods necessary to match them with the related costs they are intended to compensate, on a systematic basis when there is reasonable assurance that the Council will comply with the conditions attaching of them and the subventions will be received. Government subventions received before the revenue recognition criteria satisfied are recognized as a liability.

(ii) Bank interest income is recognized as it accrues using the effective interest method.

## 2. 主要會計政策 (續)

### (c) 外幣折算

本會以港元為功能及列帳貨幣。外幣交易均以交易當日的外幣匯率換算為港元。以外幣為單位的貨幣性資產及負債則按報告期末日的外幣匯率換算為港元。匯兌盈虧會記入盈餘或虧損內。

### (d) 減值損失

於各報告期末，若有跡象顯示包含於物業、機器及設備及使用權資產項內的資產出現減值情況，則需要估計該資產的可收回價值。可收回價值乃其公允價值減出售費用及使用價值兩者中的較高者。若可收回價值低於帳面值，該資產須減值至其可收回價值，而減值虧損則記入盈餘或虧損內。倘用以釐定可收回價值的估計出現有利變動，則撥回減值虧損。惟撥回減值虧損不得導致資產帳面值超過如無過往年度確認減值虧損時所應釐定之資產帳面值。撥回減值虧損於撥回年度計入盈餘及虧損內。

## 2. Principal Accounting Policies (continued)

### (c) Foreign Currencies Translation

The Council's functional currency and presentation currency are Hong Kong dollars. Transactions arising in foreign currencies are converted at exchange rates approximating to those ruling at transaction dates. Monetary assets and liabilities denominated in foreign currencies at the end of the reporting period are translated at rates of exchange approximating to those ruling at that date. All exchange differences are dealt with in surplus or deficit.

### (d) Impairment Losses

At the end of each reporting period, where there is any indication that an asset, including items of property, plant and equipment, and right-of-use assets is impaired, the recoverable amount of the asset should be estimated. The recoverable amount of an asset is the higher of its fair value less costs to sell and value in use. If the recoverable amount is less than the carrying amount, an impairment loss is recognized to reduce the asset to its recoverable amount. Such impairment losses are recognized in surplus or deficit. An impairment loss is reversed if there has been a favourable change in the estimates used to determine the recoverable amount. A reversal of an impairment loss should not result in the asset's carrying amount exceeding that which would have been determined has no impairment loss been recognized in prior years. Reversals of impairment losses are credited to surplus or deficit in the year in which the reversals are recognized.

## 2. 主要會計政策 (續)

### (e) 物業、機器及設備

物業、機器及設備以成本價減已收或可收的資助、累積折舊及累積減值損失列帳。

折舊計算方法乃將物業、機器及設備以成本價減已收或可收的資助及累積減值損失，按其估計使用年期，以直線攤銷方法，依照下列比率按年撇除：

租賃物業改良工程 尚餘租賃年期

傢俬及裝置	每年百分之二十五
辦公室設備	每年百分之二十五

### (f) 租賃

#### (i) 2019年4月1日前適用

經營租賃乃擁有資產的風險及回報大致全歸出租人之租賃。經營租賃作出之付款，於租賃期內以直線法記入盈餘或虧損內。

#### (ii) 自2019年4月1日起適用

本會於合約開始時評估合約是否為或包含租賃。倘合約為換取代價而給予在一段時間內控制可識別資產使用之權利，則該合約為或包含租賃。

## 2. Principal Accounting Policies (continued)

### (e) Property, Plant and Equipment

Property, plant and equipment are stated at historical cost less any subsidies received or receivable, accumulated depreciation and any accumulated impairment losses.

Depreciation is calculated to write off the cost of property, plant and equipment less subsidies received or receivable and accumulated impairment losses over their estimated useful lives using a straight-line basis at the following rates:

Leasehold improvements	over unexpired period of lease
Furniture and fixtures	25 percent per annum
Office equipment	25 percent per annum

### (f) Lease

#### (i) Applicable before 1 April 2019

Leases where substantially all the risks and rewards of ownership of assets remain with the lessor are accounted for as operating leases. Payments made under operating leases are charged to surplus or deficit on a straight-line basis over the lease periods.

#### (ii) Applicable from 1 April 2019

The Council assesses at contract inception whether a contract is, or contains, a lease. A contract is, or contains, a lease if the contract conveys the right to control the use of an identified asset for a period of time in exchange for consideration.



## 2. 主要會計政策 (續)

### (f) 租賃 (續)

#### (ii) 自2019年4月1日起適用 (續)

本會對所有租賃(惟短期租賃及低價值資產租賃除外)採取單一確認及計量方法。本會確認租賃負債以作出租賃付款，而使用權資產指使用相關資產之權利。

使用權資產於租賃開始日期(其為相關資產可供使用之日期)確認。使用權資產乃按成本減任何累計折舊及任何減值虧損計量，並就租賃負債之任何重新計量作出調整。使用權資產之成本包括已確認租賃負債金額、已產生初始直接成本及於開始日期或之前作出之租賃付款減任何已收取之租賃優惠。使用權資產於租賃期內按直線法折舊。

租賃負債於租賃開始日期按租賃期內作出的租賃付款之現值確認。租賃付款包括固定付款(包括實質固定付款)減任何應收租賃優惠、取決於某一指數或比率之浮動租賃付款以及預期根據剩餘價值擔保支付之金額。租賃付款亦包括本會合理確定將予行使之購買選擇權之行使價，以及在租賃條款反映了本會行使選擇權終止租賃之情況下因終止租賃而支付之罰款。並非取決於某一指數或比率之浮動租賃付款於觸發付款之事件或條件發生期間確認為開支。

## 2. Principal Accounting Policies (continued)

### (f) Lease (continued)

#### (ii) Applicable from 1 April 2019 (continued)

The Council applies a single recognition and measurement approach for all leases, except for short-term leases and leases of low-value assets. The Council recognizes lease liabilities to make lease payments and right-of-use assets representing the right to use the underlying assets.

Right-of-use assets are recognized at the commencement date of the lease (that is the date the underlying asset is available for use). Right-of-use assets are measured at cost, less any accumulated depreciation and any impairment losses, and adjusted for any remeasurement of lease liabilities. The cost of right-of-use assets includes the amount of lease liabilities recognized, initial direct costs incurred, and lease payments made at or before the commencement date less any lease incentives received. Right-of-use assets are depreciated on a straight-line basis over the lease terms.

Lease liabilities are recognized at the commencement date of the lease at the present value of lease payments to be made over the lease term. The lease payments include fixed payments (including in-substance fixed payments) less any lease incentives receivable, variable lease payments that depend on an index or a rate, and amounts expected to be paid under residual value guarantees. The lease payments also include the exercise price of a purchase option reasonably certain to be exercised by the Council and payments of penalties for termination of a lease, if the lease term reflects the Council exercising the option to terminate. The variable lease payments that do not depend on an index or a rate are recognized as an expense in the period in which the event or condition that triggers the payment occurs.

## 2. 主要會計政策(續)

## (f) 租賃(續)

## (ii) 自2019年4月1日起適用(續)

於計算租賃付款之現值時，由於租賃中隱含之利率不易確定，本會使用其於租賃開始日期之增量借貸利率。於開始日期後，租賃負債之金額會增加以反映利息之增長，並就所作出之租賃付款作出扣減。此外，倘存在修改、租賃期更改、租賃付款更改(即某一指數或比率發生變化而導致未來租賃付款更改)或購買相關資產之選擇權評估變更，則重新計量租賃負債之賬面值。

本會就其樓宇之短期租賃(即自開始日期起計租期12個月或以下，並且不包含購買選擇權之租賃)應用短期租賃確認豁免。其亦應用低價值資產租賃確認豁免。

當本會就低價值資產訂立租賃時，本會按個別租賃基準決定是否將租賃資本化。

短期租賃及低價值資產租賃之租賃付款於租賃期內按直線法確認為開支。

## 2. Principal Accounting Policies (continued)

## (f) Lease (continued)

## (ii) Applicable from 1 April 2019 (continued)

In calculating the present value of lease payments, the Council uses its incremental borrowing rate at the lease commencement date because the interest rate implicit in the lease is not readily determinable. After the commencement date, the amount of lease liabilities is increased to reflect the accretion of interest and reduced for the lease payments made. In addition, the carrying amount of lease liabilities is remeasured if there is a modification, a change in the lease term, a change in lease payments (e.g. a change to future lease payments resulting from a change in an index or rate) or a change in assessment of an option to purchase the underlying asset.

The Council applies the short-term lease recognition exemption to its short-term leases of buildings (that is those leases that have a lease term of 12 months or less from the commencement date and do not contain a purchase option). It also applies the recognition exemption for leases of low-value assets.

When the Council enters into a lease in respect of a low-value asset, the Council decides whether to capitalize the lease on a lease-by-lease basis.

Lease payments on short-term leases and leases of low-value assets are recognized as an expense on a straight-line basis over the lease term.

## 2. 主要會計政策 (續)

### (g) 按金

按金首先以公允價值確認，其後以攤銷成本列帳，若折現影響不大時，則以成本列帳。

### (h) 應付費用

應付費用首先以公允價值確認，其後以攤銷成本列帳，若折現影響不大時，則以成本列帳。

### (i) 現金及現金等值

就編製現金流量表而言，現金及現金等值包括現金和於存入後三個月內到期的銀行存款。

### (j) 僱員獲享假期

僱員所享有的年假按有關年假應歸僱員時入帳。截至報告期末，本會已就僱員提供的服務所產生的有薪年假，作出評估及撥備。

## 2. Principal Accounting Policies (continued)

### (g) Deposits

Deposits are initially recognized at fair value and thereafter stated at amortized cost unless the effect of discounting would be immaterial, in which case they are stated at cost.

### (h) Accrued Charges

Accrued charges are initially recognized at fair value and thereafter stated at amortized cost unless the effect of discounting would be immaterial, in which case they are stated at cost.

### (i) Cash and Cash Equivalents

For the purposes of the cash flow statement, cash and cash equivalents comprise cash on hand and deposits with banks within three months to maturity from date of deposit.

### (j) Employee Leave Entitlements

Employee entitlements to annual leave are recognized when they accrue to employees. A provision is made for the estimated liability for annual leave as a result of services rendered by employees up to the end of the reporting period.



## 2. 主要會計政策(續)

## (k) 有關連人士

就本財務報表而言，有關連人士包括符合以下定義的人士及實體：

- (i) 下列人士或其近親家屬將被視為與本會有關連，若該名人士：
  - (a) 控制或共同控制本會；
  - (b) 對本會有重大影響力；或
  - (c) 為本會之主要管理層成員。
- (ii) 若下列任何一項條件吻合，則有關實體將被視為與本會有關連：
  - (a) 該實體為本會或與本會有關連之實體就僱員利益設立之退休福利計劃。若本會便是該計劃，提供資助的僱主與本會有關連。
  - (b) 該實體被就(i)所指人士控制或共同控制。
  - (c) 就(i)(a)所指人士在對實體有重大影響力或為該實體之主要管理層成員。
  - (d) 該實體或其所屬集團旗下任何成員公司向本會提供主要管理人員服務。

## 2. Principal Accounting Policies (continued)

## (k) Related Parties

For the purposes of these financial statements, related party includes a person and an entity as defined below:

- (i) A person or a close member of that person's family is related to the Council if that person:
  - (a) has control or joint control of the Council;
  - (b) has significant influence over the Council; or
  - (c) is a member of the key management personnel of the Council.
- (ii) An entity is related to the Council if any of the following conditions applies:
  - (a) The entity is a post-employment benefit plan for the benefit of employees of either the Council or an entity related to the Council. If the Council is itself such a plan, the sponsoring employers are also related to the Council.
  - (b) The entity is controlled or jointly controlled by a person identified in (i).
  - (c) A person identified in (i)(a) has significant influence over the entity or is a member of the key management personnel of the entity.
  - (d) The entity, or any member of a group of which it is a part, provides key management personnel services to the Council.

### 3. 批准職位編製

### 3. Approved Establishment

(港幣)	(HK\$)	二零二零年 2020	二零一九年 2019
薪金及津貼	Salaries and allowances	<b>6,228,770</b>	5,686,105
強積金供款	Mandatory provident fund contributions	<b>155,735</b>	146,912
年假(撥備回撥)/撥備	Provision for annual leave entitlements (written back)/made	<b>(42,075)</b>	18,481
		<b>6,342,430</b>	5,851,498

### 4. 項目員工

### 4. Project Staff

(港幣)	(HK\$)	二零二零年 2020	二零一九年 2019
薪金	Salaries	<b>3,008,399</b>	1,710,310
強積金供款	Mandatory provident fund contributions	<b>134,800</b>	82,455
年假撥備 / (撥備回撥)	Provision for annual leave entitlements made/(written back)	<b>22,048</b>	(7,159)
		<b>3,165,247</b>	1,785,606

### 5. 本年度盈餘 / (虧損)

### 5. Surplus/(Deficit) for the Year

本年度盈餘已扣除下列費用：

Surplus for the year is stated after charging the following items:

(港幣)	(HK\$)	二零二零年 2020	二零一九年 2019
員工成本 *	Staff costs *	<b>9,564,797</b>	7,691,704
土地及樓宇短期租賃租金支出	Rentals of land and buildings held under short-term lease	<b>34,000</b>	—
土地及樓宇經營租賃租金支出 (香港會計準則第 17 號)	Rentals of land and buildings held under operating leases (HKAS 17)	—	2,641,056

\* 包括支付定額供款退休保障計劃供款共港幣  
290,535 元 (2019 年：229,367 元)

\* including contribution of HK\$290,535 (2019: HK\$229,367) to  
defined contribution provident fund scheme.

## 6. 委員會成員的酬金

本會所有委員會成員於本年度內均未有因向本會提供服務而收取酬金(2019年：無)。

## 6. Council Members' Remuneration

None of the Council members received any remuneration in respect of their services to the Council during the year (2019: Nil).

## 7. 物業、機器及設備

## 7. Property, Plant and Equipment

(港幣)	(HK\$)	租賃物業 改良工程 Leasehold improvements	傢俬 及裝置 Furniture and fixtures	辦公室 設備 Office equipment	總額 Total
<b>成本</b>	<b>Cost</b>				
於2018年3月31日	At 31 March 2018	36,305	111,376	542,772	690,453
添置	Additions	–	3,885	23,298	27,183
於2019年3月31日	At 31 March 2019	36,305	115,261	566,070	717,636
添置	Additions	–	8,470	58,698	67,168
於2020年3月31日	At 31 March 2020	36,305	123,731	624,768	784,804
<b>累積折舊</b>	<b>Accumulated depreciation</b>				
於2018年3月31日	At 31 March 2018	36,305	109,809	527,843	673,957
截至2019年3月31日 止年度計提	Charge for the year ended 31 March 2019	–	1,860	10,913	12,773
於2019年3月31日	At 31 March 2019	36,305	111,669	538,756	686,730
截至2020年3月31日 止年度計提	Charge for the year ended 31 March 2020	–	2,494	14,330	16,824
於2020年3月31日	At 31 March 2020	36,305	114,163	553,086	703,554
<b>帳面淨值</b>	<b>Net book value</b>				
於2020年3月31日	At 31 March 2020	–	9,568	71,682	81,250
於2019年3月31日	At 31 March 2019	–	3,592	27,314	30,906



## 8. 使用權資產

(港幣)	(HK\$)	
<b>成本</b>	<b>Cost</b>	
添置	Additions	8,561,818
於 2020 年 3 月 31 日	At 31 March 2020	8,561,818
<b>累積折舊</b>	<b>Accumulated depreciation</b>	
截至 2020 年 3 月 31 日止年度計提	Charge for the year ended 31 March 2020	2,889,259
於 2020 年 3 月 31 日	At 31 March 2020	2,889,259
<b>帳面淨值</b>	<b>Net book value</b>	
於 2020 年 3 月 31 日	At 31 March 2020	5,672,559

## 8. Right-of-use Assets

## 9. 按金及預付款項

預期會於一年後收回之按金為港幣 617,566 元(2019 年：港幣 643,856 元)，預付款項港幣 330,138 元(2019 年：港幣 317,898 元)將會於一年內全數記入費用。

## 9. Deposits and Prepayments

The amount of deposits expected to be recovered after one year is HK\$617,566 (2019: HK\$643,856). The prepayments in sum of HK\$330,138 (2019: HK\$317,898) are expected to be recognized as expenses within one year.

## 10. 租賃負債

(港幣)	(HK\$)	二零二零年 2020	二零一九年 2019
應付租賃付款的現值	Present value of the lease payments	<b>8,561,818</b>	—
利息支出	Interest expense	<b>129,750</b>	—
已付租賃付款	Lease payment made	<b>(2,972,460)</b>	—
		<b>5,719,108</b>	—

## 10. Lease Liabilities

## 10. 租賃負債 (續)

租賃負債在財務狀況表中列示如下：

(港幣)	(HK\$)	二零二零年 2020	二零一九年 2019
短期部份	Current portion	<b>2,920,755</b>	–
長期部份	Non-current portion	<b>2,798,353</b>	–
		<b>5,719,108</b>	–

於報告期末根據合約未貼現付款之租賃負債之到期情況如下：

Lease liabilities are presented in the statement of financial position as follows:

The maturity profile of the lease liabilities, as at the end of the reporting period, based on the contractual undiscounted payments, was as follows:

(港幣)	(HK\$)	二零二零年 2020	二零一九年 2019
帳面值	Carrying amount	<b>5,719,108</b>	–
合約未折現現金流總額	Total contractual undiscounted cash flow		
– 應要求即付或於一年內	– Within one year or on demand	<b>3,008,460</b>	–
– 超過一年但少於兩年	– More than one year but less than two years	<b>2,828,460</b>	–
		<b>5,836,920</b>	–

## 11. 應退回衛生署之經調整盈餘

由於衛生署並不承認僱員年假撥備為費用而只在年假補償付出時承認，及視物業、機器及設備的添置及租賃付款為年度的費用而不承認折舊及租賃負債之利息支出。因此，在計算應退回衛生署之盈餘時，不包括年假撥備／撥備回撥、物業、機器及設備及使用權資產的折舊及租賃負債之利息，而扣除物業、機器及設備的添置及租賃付款。

## 11. Adjusted Surplus Refundable to the Department of Health

As the Department of Health does not recognize the provision for annual leave entitlements as expenses until actual payment is made, and regards addition to property, plant and equipment and lease payment as expenses during the year without recognition of depreciation and interest expense on lease liabilities, accordingly, for the purpose of calculating the surplus refundable to the Department of Health, the provision/provision written back for annual leave entitlements, depreciation of property, plant and equipment and right-of-use assets and interest expense on lease liabilities have been excluded, and the addition to property, plant and equipment and lease payment have been deducted.

# 11. 應退回衛生署之經調整盈餘 (續) 11. Adjusted Surplus Refundable to the Department of Health (continued)

(港幣)	(HK\$)	二零二零年 2020	二零一九年 2019
本年度盈餘	Surplus for the year	<b>3,028,058</b>	187,184
加：物業、機器及 設備之折舊	Add: Depreciation on property, plant and equipment	<b>16,824</b>	12,773
使用權資產之折舊	Depreciation on right-of-use assets	<b>2,889,259</b>	–
年假撥備	Provision for annual leave entitlements	–	11,322
租賃負債之利息支出	Interest expenses on lease liabilities	<b>129,750</b>	–
減：物業、機器及 設備的添置	Less: Additions to property, plant and equipment	<b>(67,168)</b>	(27,183)
租賃付款	Lease payment	<b>(2,972,460)</b>	–
年假撥備回撥	Provision for annual leave entitlements written back	<b>(20,027)</b>	–
應退回衛生署之經調整盈餘	Adjusted surplus refundable to the Department of Health	<b>3,004,236</b>	184,096

## 12. 應退回衛生署之累積盈餘 12. Accumulated Surpluses Refundable to the Department of Health

本會管理層認為截至1998年3月31日累積盈餘將會於衛生署要求時退回。

The management of the Council considers that the accumulated surpluses up to 31 March 1998 will be refunded to the Department of Health upon request.



## 13. 其他現金流資料

## 13. Other Cash Flow Information

## (a) 融資活動所產生的負債變動

## (a) Changes in Liabilities Arising from Financing Activities

租賃負債(附註10) (港幣)	Lease liabilities (Note 10) (HK\$)	
融資現金流量的變動:	Changes from financing cash flows:	
已付租賃租金之資本部份	Capital element of lease rentals paid	(2,842,710)
已付租賃租金之利息部份	Interest element of lease rentals paid	(129,750)
融資現金流量的變動總額	Total changes from financing cash flows	(2,972,460)
其他變動:	Other changes:	
新租賃	New lease	8,561,818
利息支出	Interest expenses	129,750
其他變動總額	Total other changes	8,691,568
於2020年3月31日	Balance at 31 March 2020	5,719,108

## (b) 租賃現金流量總額

## (b) Total Cash Flow for Leases

計入現金流量表之租賃現金流出總額  
如下：

Amounts included in the cash flow statement for  
leases comprise the following:

(港幣)	(HK\$)	二零二零年 2020	二零一九年 2019
經營業務內	Within operating activities	34,000	2,641,056
融資項目內	Within financing activities	2,972,460	–
		3,006,460	2,641,056

## 14. 金融資產及金融負債

## 14. Financial Assets and Liabilities

## (a) 金融資產及負債類別

## (a) Categories of Financial Assets and Liabilities

(港幣)	(HK\$)	二零二零年 2020	二零一九年 2019
<b>金融資產</b>	<b>Financial assets</b>		
流動資產 – 按攤銷 成本值：	Current assets – at amortized cost:		
按金	Deposits	625,566	643,856
銀行及現金結存	Bank and cash balances	3,419,730	514,501
		<b>4,045,296</b>	1,158,357
<b>金融負債</b>	<b>Financial liabilities</b>		
流動負債 – 按攤銷 成本值：	Current liabilities – at amortized cost:		
應付費用	Accrued charges	1,167,500	1,088,461
年假撥備	Provision for annual leave entitlements	225,068	245,095
應退回衛生署之 本年度經調整盈餘	Adjusted surplus for the year refundable to the Department of Health	3,004,236	184,096
應退回衛生署之 累積盈餘	Accumulated surpluses refundable to the Department of Health	203,640	203,640
		<b>4,600,444</b>	1,721,292

## (b) 財務風險管理的目標及政策

## (b) Financial Risk Management Objectives and Policies

在日常運作中，本會並不會存在重大的外幣風險、利率風險和商品及價格風險。其他風險敘述如下：

In the normal course of the operation, the Council does not expose to significant foreign currency risk, interest rate risk and commodity and price risks. Other risks are described below:

## (i) 信貸風險

## (i) Credit Risk

本會之信貸風險基本上源自銀行存款，但由於對方為擁有高信用評級之銀行，所以信貸風險並不重大。

The Council's credit risk is primarily attributable to cash at bank and is insignificant because the counterparty is a bank with high credit rating.

## 14. 金融資產及金融負債(續)

## (b) 財務風險管理的目標及政策(續)

## (ii) 流動資金風險

本會會定期監管現時和預計的流動資金的需求，以確保維持充裕之現金儲備，滿足短期和較長期的流動資金需求。

於2020年及2019年3月31日，本會金融負債之剩餘合約還款期均在一年以內，該等金融負債之帳面值相等於其合約之未貼現現金流量。

## (c) 合理價值

於2020年及2019年3月31日所有金融資產及金融負債之價值與其合理價值並無重大差異。合理價值乃按照日後現金流量以現時利率折算現值而估計。

## 15. 經營租約承擔

於2019年3月31日，本會根據不可撤銷的土地及樓宇經營租賃而須於未來支付的最低租賃付款總額如下：

港幣

(HK\$)

---

 第一年內

---

 Not later than one year

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 34,000

## 14. Financial Assets and Liabilities (continued)

## (b) Financial Risk Management Objectives and Policies (continued)

## (ii) Liquidity Risk

The Council's policy is to regularly monitor current and expected liquidity requirements to ensure that it maintains sufficient reserves of cash to meet its liquidity requirements in the short and longer term.

As at 31 March 2020 and 2019, the contractual maturities of all the Council's financial liabilities, whose carrying amounts are equal to total contracted undiscounted cash flows, are due within one year.

## (c) Fair Values

All financial assets and liabilities are carried at amounts not materially different from their fair values as at 31 March 2020 and 2019. The fair value is estimated as the present value of future cash flows, discounted at current market interest rate.

## 15. Commitments under Operating Leases

At 31 March 2019, the Council had the following future aggregate minimum lease payments under non-cancellable operating leases in respect of land and buildings:



## 16. 有關連人士交易

在年度內本會與有關連人士所進行的日常營運交易如下：

(港幣)	(HK\$)	二零二零年 2020	二零一九年 2019
主要管理人員的報酬	Remuneration for key management personnel		
短期員工福利	Short-term employee benefits	2,076,189	1,730,671
離職後福利	Post-employment benefits	18,000	18,000
		<b>2,094,189</b>	1,748,671

## 16. Related Party Transactions

During the year the Council undertook the following transactions with related parties in the normal course of its operation:

## 17. 已頒佈但尚未生效之修訂、新準則及詮釋可能產生之影響

香港會計師公會已頒佈於本年度尚未生效且並未在本財務報表內採納的多項修訂及新準則，包括可能與本會相關的下列各項。

香港財務報告準則第3號修訂本：  
業務的定義

香港會計準則第1號及香港會計準則  
第8號修訂本：重要性的定義

於2020年1月1日或之後開始之會計期間  
生效

## 17. Possible Impact of Amendments, New Standards and Interpretations Issued But Not Yet Effect

The HKICPA has issued a number of amendments and new standards which are not yet effective for the current accounting year and which have not been adopted in these financial statements. These include the following which may be relevant to the Council.

*Amendments to HKFRS 3, Definition of a business*

*Amendments to HKAS 1 and HKAS 8, Definition of material*

*Effective for annual periods beginning on or after 1 January 2020*

## 17. 已頒佈但尚未生效之修訂、 新準則及詮釋可能產生之影響 (續)

### 香港財務報告準則第3號修訂本：業務的 定義

香港財務報告準則第3號修訂本澄清業務的定義，並提供額外指引。該修訂本訂明可視為業務的一組整合活動和資產，必須至少包括一項投入和一項重要過程，而兩者必須對形成收益的能力有重大貢獻。業務毋須包括形成產出所需的所有投入或過程。該修訂取消了評估市場參與者是否有能力收購業務並能持續獲得收益的規定，轉為重點關注所取得的投入和重要過程共同對形成收益的能力有否重大貢獻。該修訂亦已收窄收益的定義範圍，重點關注為客戶提供的商品或服務、投資收益或日常活動產生的其他收入。此外，修訂本亦提供有關評估所取得過程是否重大的指引，並新增公平值集中度測試選項，允許對所取得的一組活動和資產是否不屬於業務進行簡化評估。

### 香港會計準則第1號及香港會計準則第8 號修訂本：重要性的定義

香港會計準則第1號及香港會計準則第8號修訂本重新界定重要性。根據新定義，倘可合理預期漏報、錯報或掩蓋個別信息將可影響使用財務報表作一般目的的主要使用者基於相關財務報表作出的決定，則該信息為重要。修訂本指明，重要性取決於信息的性質或牽涉範圍。倘可合理預期信息錯報會影響主要使用者作出的決定，則有關錯誤為重大。

本會管理層預計採用這些經修改財務報告準則及會計準則對本會帳目影響並不重大。

## 17. Possible Impact of Amendments, New Standards and Interpretations Issued But Not Yet Effect (continued)

### Amendments to HKFRS 3, Definition of a Business

Amendments to HKFRS 3 clarify and provide additional guidance on the definition of a business. The amendments clarify that for an integrated set of activities and assets to be considered a business, it must include, at a minimum, an input and a substantive process that together significantly contribute to the ability to create output. A business can exist without including all of the inputs and processes needed to create outputs. The amendments remove the assessment of whether market participants are capable of acquiring the business and continue to produce outputs. Instead, the focus is on whether acquired inputs and acquired substantive processes together significantly contribute to the ability to create outputs. The amendments have also narrowed the definition of outputs to focus on goods or services provided to customers, investment income or other income from ordinary activities. Furthermore, the amendments provide guidance to assess whether an acquired process is substantive and introduce an optional fair value concentration test to permit a simplified assessment of whether an acquired set of activities and assets is not a business.

### Amendments to HKAS 1 and HKAS 8, Definition of Material

Amendments to HKAS 1 and HKAS 8 provide a new definition of material. The new definition states that information is material if omitting, misstating or obscuring it could reasonably be expected to influence decisions that the primary users of general purpose financial statements make on the basis of those financial statements. The amendments clarify that materiality will depend on the nature or magnitude of information. A misstatement of information is material if it could reasonably be expected to influence decisions made by the primary users.

The management of the Council does not anticipate that the application of these revised HKFRSs and HKASs will have a material effect on the amounts recognized in the Council's financial statements.

# 鳴謝

## Acknowledgement

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楊協和醫生	Dr Victor YEUNG	袁惟寧先生	Mr Willy YUEN
余秋良醫生	Dr YU Chau-leung		

**政府部門 Government Departments**

衛生署青少年健康服務計劃統籌組	Adolescent Health Programme Coordination Section, Department of Health
中西區區議會	Central and Western District Council
中西區民政事務處	Central and Western District Office
懲教署	Correctional Services Department
衛生署	Department of Health
東區區議會	Eastern District Council
教育局	Education Bureau
安老事務委員會	Elderly Commission
食物及衛生局	Food and Health Bureau
衛生署健康促進處	Health Promotion Branch, Department of Health
醫院管理局	Hospital Authority
政府新聞處	Information Services Department
離島區議會	Islands District Council
九龍城區議會	Kowloon City District Council
葵青區議會	Kwai Tsing District Council
觀塘區議會	Kwun Tong District Council
北區區議會	Northern District Council
香港電台	Radio Television Hong Kong
西貢區議會	Sai Kung District Council
沙田區議會	Sha Tin District Council
深水埗區議會	Sham Shui Po District Council
南區區議會	Southern District Council
大埔區議會	Tai Po District Council
土地註冊處	The Land Registry
衛生署控煙酒辦公室	Tobacco and Alcohol Control Office, Department of Health
荃灣區議會	Tsuen Wan District Council
屯門區議會	Tuen Mun District Council
灣仔區議會	Wan Chai District Council
黃大仙區議會	Wong Tai Sin District Council
油尖旺區議會	Yau Tsim Mong District Council
元朗區議會	Yuen Long District Council



## 組織 Organizations

精進建築有限公司	Aggressive Construction Co Ltd
樂用有限公司	And-Joy Limited
香港明愛「兒」動藝術館	Artkids Studio, Caritas Hong Kong
循道衛理亞斯理社會服務處長者鄰舍中心	Asbury Methodist Social Service Elderly Neighbourhood Centre
	Asia-Pacific Association for Control of Tobacco
亞洲反吸煙諮詢所	Asian Consultancy on Tobacco Control
香港亞洲醫學生學生會	Asian Medical Students' Association Hong Kong
工程界社促會	Association of Engineering Professionals in Society Ltd
香港私人執業專科醫生協會	Association of Private Medical Specialists of Hong Kong
醫療輔助隊長官聯會	Auxiliary Medical Service Officers' Club
包浩斯國際(控股)有限公司	Bauhaus International (Holdings) Limited
滙秀企業有限公司	Broadway-Nassau Investments Limited
利基 – 顯豐工程聯營	Build King – Richwell Engineering Joint Venture
利基 – SKEC 聯營	Build King – SKEC Joint Venture
利基土木工程有限公司	Build King Civil Engineering Limited
癌症資訊網慈善基金	Cancerinformation.com.hk Charity Foundation
明愛莫張瑞勤社區中心	Caritas Mok Cheung Sui Kun Community Centre
美國胸肺學院(港澳分會)有限公司	Chest Delegation Hong Kong and Macau Limited
兒童癌病基金	Children's Cancer Foundation
中國海外房屋工程有限公司	China Overseas Building Construction Ltd
中國路橋集團(香港)有限公司	China Road and Bridge Group (HK) Limited
中國建築工程(香港)有限公司	China State Construction Engineering (Hong Kong) Limited
中國控制吸煙協會	Chinese Association on Tobacco Control
建業建築有限公司	Chinney Construction Co Ltd
潮僑工商塑膠聯合總會有限公司	Chiu Chau Ind & Comm Plastic United Ass Ltd
潮僑食品業商會有限公司	Chiu Chow Overseas Food Trade Merchants Association Ltd
基督教家庭服務中心	Christian Family Service Centre
港基物業管理有限公司	Citybase Property Management Limited
城巴有限公司及新世界第一巴士服務有限公司	Citybus Limited & New World First Bus Services Limited
爭氣行動	Clear the Air
中華電力有限公司	CLP Power Hong Kong Limited
家庭與學校合作事宜委員會	Committee on Home-School Co-operation
香港通訊業聯會	Communications Association of Hong Kong
社區藥物教育輔導會	Community Drug Advisory Council

再思社區健康組織	Community Health Organization for Intervention, Care and Empowerment Ltd
東華三院 E 大調合奏團	E Major Ensemble, Tung Wah Group of Hospitals
飲食業職工總會	Eating Establishment Employees General Union
海航物流有限公司	Elegant Logistics Group Ltd
香港僱主聯合會	Employers' Federation of Hong Kong
環保工程商會有限公司	Environmental Contractors Management Association Limited
香港工業總會	Federation of Hong Kong Industries
九龍城區家長教師會聯會	Federation of Parent-Teacher Association, Kowloon City District
香港南區家長教師會聯會	Federation of Parent-Teacher Association, Southern District, HK
大埔區家長教師會聯會	Federation of Parent-Teacher Association, Tai Po District
屯門區家長教師會聯會	Federation of Parent-Teacher Associations, Tuen Mun
灣仔區家長教師會聯會	Federation of Parent-Teacher Associations, Wanchai District
葵青區家長教師會聯會有限公司	Federation of Parent-Teacher Associations (Kwai Tsing District) Ltd
中西區家長教師會聯會	Federation of Parent-Teacher Associations of the Central and Western District
西貢區家長教師會聯會	Federation of Parent-Teacher Associations of the Sai Kung District
元朗區家長教師會聯會有限公司	Federation of Parent-Teacher Associations of Yuen Long District Limited
深水埗區家長教師會聯會有限公司	Federation of Parent-Teacher Associations Sham Shui Po District Limited
黃大仙區家長教師會聯會有限公司	Federation of Parent-Teacher Associations Wongtaisin District Limited
觀塘區家長教師會聯會有限公司	Federation of Parent Teacher Associations in Kwun Tong District Limited
香港東區家長教師會	Federation of Parent Teacher Associations of Hong Kong Eastern District
離島區家長教師會聯會	Federation of Parent Teacher Associations of Islands District
友聯的士車主聯誼會	Fraternity Taxi Owners Association
未來照明有限公司	Future Lighting Collection Limited
金紫荊女企業家協會	Golden Bauhinia Women Entrepreneur Association
恆堡會有限公司	Hanberg Club Limited
恆堡有限公司	Hanberg Limited
車馬樂的士聯會有限公司	Happy Taxi Operator's Association Ltd
基督教靈實協會	Haven of Hope Christian Service
協興建築有限公司	Hip Hing Construction Co Ltd

基督復臨安息日會港澳會山景綜合青少年服務中心	Shan King Integrated Children and Youth Services Centre of Seventh-day Adventists
香港大學女性戒煙計劃	HKU Women Quit
香港大學青少年戒煙熱線	HKU Youth Quitline
科大侍學行	HKUST Connect
香港九龍玉器工商聯會	Hong Kong & Kowloon Jade Merchants & Workers Union Association
香港資助小學校長會	Hong Kong Aided Primary School Heads Association
香港病人組織聯盟有限公司	Hong Kong Alliance of Patients' Organization Limited
香港九龍潮州公會	Hong Kong and Kowloon Chiu Chow Public Association
香港防癌會	Hong Kong Anti-Cancer Society
香港中小企業促進發展協會	Hong Kong Association for Promotion & Development of SMEs
香港家庭醫學及基層健康護士協會	Hong Kong Association of Family Medicine and Primary Health Care Nurses
香港中學校長會	The Hong Kong Association of the Heads of Secondary Schools
香港青少年發展聯會	Hong Kong Association of Youth Development
香港品牌發展局	Hong Kong Brand Development Council
香港青少年服務處馬鞍山青少年外展社會工作隊	Hong Kong Children & Youth Services Ma On Shan Youth Outreaching Social Work Team
香港青少年服務處大埔地區青少年外展社會工作隊	Hong Kong Children & Youth Services Tai Po District Youth Outreaching Social Work Team
香港潮州商會	Hong Kong Chiu Chow Chamber of Commerce
香港建造商會有限公司	Hong Kong Construction Association Ltd
香港貨櫃拖運業聯會有限公司	Hong Kong Container Drayage Services Association Ltd
香港學術及職業資歷評審局	Hong Kong Council for Accreditation of Academic and Vocational Qualifications
香港牙醫學會	Hong Kong Dental Association
香港發展專業協會	Hong Kong Development Professionals Association
香港西醫工會	Hong Kong Doctors Union
香港電器工程商會	Hong Kong Electrical Contractors' Association
香港電子業總會	Hong Kong Electronics Industry Council
香港展覽會議業協會	Hong Kong Exhibition & Convention Industry Association (HKECIA)
香港建築業承建商聯會	Hong Kong General Building Contractors Association
房協長者安居資源中心	Hong Kong Housing Society Elderly Resources Centre
香港會計師公會	Hong Kong Institute of Certified Public Accountants
香港人力資源管理學會	Hong Kong Institute of Human Resource Management

香港地產行政師學會	Hong Kong Institute of Real Estate Administrators
香港投資基金公會	Hong Kong Investment Funds Association
香港玉器商會	Hong Kong Jade Association
香港胸肺基金會	Hong Kong Lung Foundation
香港澳門緬甸工商會	Hong Kong Macau and Myanmar Chamber of Commerce & Industry
香港緬甸商會	Hong Kong Myanmar Chamber of Commerce
香港新興科技教育協會	Hong Kong New Emerging Technology Education Association
香港營養師學會	Hong Kong Nutritionists Society
香港光機電行業協會	Hong Kong Opto-Mechatronics Industries Association
離島婦聯有限公司	Hong Kong Outlying Islands Women's Association Limited
香港病人政策連線	Hong Kong Patients' Voices
香港塑膠機械協會	Hong Kong Plastic Machinery Association
香港遊樂場協會	Hong Kong Playground Association
香港生產力促進局	Hong Kong Productivity Council
香港專業及資深行政人員協會	Hong Kong Professionals and Senior Executives Association
香港中小企促進聯會	Hong Kong SME Development Federation Ltd
香港護理教育學會	Hong Kong Society for Nursing Education
香港兒童免疫過敏及傳染病學會	Hong Kong Society for Paediatric Immunology Allergy & Infectious Diseases
香港兒童呼吸及過敏學會	Hong Kong Society of Paediatric Respiriology and Allergy
香港南區婦女會	Hong Kong Southern District Women's Association
香港津貼中學議會	Hong Kong Subsidized Secondary Schools Council
香港表面處理學會	Hong Kong Surface Finishing Society
香港胸肺學會	Hong Kong Thoracic Society
香港表廠商會	Hong Kong Watch Manufacturers Association Ltd
香港布廠商會	Hong Kong Weaving Mills Association
香港無線科技商會	Hong Kong Wireless Technology Industry Association Limited
香港貨運物流業協會	Hongkong Association of Freight Forwarding and Logistics (HAFFA)
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稻苗學會	Institution of Dining Art
互聯網專業協會	Internet Professional Association
iStage 劇團	iStage Theatre Limited
國際青年商會香港總會	Junior Chamber International Hong Kong
	Knowledge-Action-Change
九龍總商會	Kowloon Chamber of Commerce



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葵涌醫院	Kwai Chung Hospital
葵青地區康健中心	Kwai Tsing District Health Centre
葵青安全社區及健康城市協會	Kwai Tsing Safe Community and Healthy City Association
觀塘健康城市督導委員會	Kwun Tong Healthy City Steering Committee
立基冷氣工程有限公司	Lap Kei Engineering (Holdings) Limited
李子榮議員辦事處	Lee Chi-wing District Council Office
生活教育活動計劃	Life Education Activity Programme
領展資產管理有限公司	Link Asset Management Limited
龍鳳冰室	Lung Fung Café
澳門社會保障學會	Macau Social Security Society
灼見名家傳媒有限公司	Master Insight Media Limited
	Medical Association of Thailand
香港大學學生會醫學會	Medical Society, The Hong Kong University Students' Union
香港中文大學學生會醫學院院會	Medical Society, The Student Union of The Chinese University of Hong Kong
香港醫學會青年委員會醫學生附屬委員會	Medical Students' Subcommittee, Youth Committee, The Hong Kong Medical Association
	Medipella
香港鐵路有限公司	MTR Corporation Limited
南豐集團 – 民亮發展有限公司 (華基中心)	Nan Fung Group – Main Shine Development Limited (Ricky Centre)
南豐集團 – 民亮發展有限公司 (泰豐工業中心)	Nan Fung Group – Main Shine Development Limited (Tai Fung Industrial Building)
南豐集團 – 民亮發展有限公司 (德豐工業中心)	Nan Fung Group – Main Shine Development Limited (Tak Fung Industrial Centre)
南豐集團 – 萬寶物業管理有限公司 (將軍澳廣場)	Nan Fung Group – Vineberg Property Management Limited (Tseung Kwan O Plaza)
新家園協會	New Home Association
新界的士商會有限公司	New Territories Taxi Merchants Association Limited
救世軍新界西綜合服務	New Territories West Integrated Service, The Salvation Army
新西蘭商會	New Zealand Chamber of Commerce in Hong Kong
北區家長教師會聯會	North District Federation of Parent-Teacher Associations
北區的士商會	North District Taxi Merchants Association
新界的士車主司機同業總會	NT Taxi Owners & Drivers Fraternal Association
新界西長者學苑聯網	NT West Elder Academies Cluster
職業安全健康局	Occupational Safety and Health Council

香港海洋公園	Ocean Park Hong Kong
聖母醫院	Our Lady of Maryknoll Hospital
保華安保聯營	Paul Y – Able Joint Venture
鋒生有限公司	Pioneer Dynamic Limited
保良局	Po Leung Kuk
博愛醫院	Pok Oi Hospital
博愛醫院社區健康中心	Pok Oi Hospital Community Health Care Centre
威爾斯親王醫院	Prince of Wales Hospital
香港專業建築測量顧問公會	Professional Building Surveying Consultants Association of Hong Kong
香港專業保險經紀協會	Professional Insurance Brokers Association
公共巴士同業聯會	Public Omnibus Operators Association
清新健康人協會	Quit-Winners Club
富安集團有限公司	Richform Holdings Limited
顯豐土木聯營	Richwell Civil Joint Venture
中區扶輪社	Rotary Club of Central
第一太平戴維斯物業管理有限公司 – 京瑞廣場二期	Savills Property Management Limited – Kings Wing Plaza 2
森科產品有限公司	Semk Products Limited
長者安居協會	Senior Citizen Home Safety Association
展亮技能發展中心(觀塘)	Shine Skills Centre (Kwun Tong)
嚙色園	Sik Sik Yuen
信和物業管理有限公司	Sino Estates Management Limited
研科有限公司	Smarthon Limited
無煙澳門健康生活協會	Smoke-free & Healthy Life Association of Macau
戒煙保健會	Smoking Abstention and Good Health Association
南區健康安全協會有限公司	Southern District Healthy and Safe Association Limited
舞台文化餐飲服務有限公司	Stage Catering Services Limited
中西區健康城市督導會	Steering Committee on Healthy City in the Central and Western District
香港善導會(朗日居)	Sunrise House, The Society of Rehabilitation and Crime Prevention, Hong Kong
昇捷管理服務有限公司 – 和明苑	Synergis Management Services Limited – Wo Ming Court
太興飲食集團	Tai Hing Catering Group
大埔青年協會	Tai Po Youths Association
香港餐務管理協會	The Association for Hong Kong Catering Services Management Ltd

香港醫務委員會執照醫生協會	The Association of Licentiates of Medical Council of Hong Kong
香港比利時盧森堡商會	The Belgium-Luxembourg Chamber of Commerce in Hong Kong
香港小童群益會	The Boys' & Girls' Clubs Association of Hong Kong
香港運輸物流學會	The Chartered Institute of Logistics and Transport in Hong Kong
香港華商銀行公會	The Chinese Banks' Association Ltd
香港中華廠商聯合會	The Chinese Manufacturers' Association of Hong Kong
香港鐘表業總會	The Federation of Hong Kong Watch Trades & Industries Ltd
香港醫學組織聯合會	The Federation of Medical Societies of Hong Kong
港九電業總會	The Hong Kong & Kowloon Electric Trade Association
香港銀行公會	The Hong Kong Association of Banks
香港物業管理公司協會	The Hong Kong Association of Property Management Companies
香港中華出入口商會	The Hong Kong Chinese Importers' & Exporters' Association
香港食品委員會	The Hong Kong Food Council
香港中小型企業總商會	The Hong Kong General Chamber of Small and Medium Business Ltd
香港建築師學會	The Hong Kong Institute of Architects
香港特許秘書公會	The Hong Kong Institute of Chartered Secretaries
香港董事學會	The Hong Kong Institute of Directors
香港房屋經理學會	The Hong Kong Institute of Housing
香港工程師學會	The Hong Kong Institution of Engineers
香港賽馬會	The Hong Kong Jockey Club
香港醫學會	The Hong Kong Medical Association
香港藥行商會	The Hong Kong Medicine Dealers' Guild
香港耆康老人福利會柴灣長者地區中心	The Hong Kong Society for Aged Chai Wan District Elderly Community Centre
香港復康會	The Hong Kong Society for Rehabilitation
香港道教聯合會	The Hong Kong Taoist Association
香港青年協會全健思維中心	The Hongkong Federation of Youth Groups, Wellness Mind Centre
香港青年協會賽馬會祥華青年空間	The Hongkong Federation of Youth Groups Jockey Club Cheung Wah Youth SPOT
沙田區家長教師會聯會有限公司	The Joint Council of Parent-Teacher Associations of the Shatin District Ltd
九龍樂善堂	The Lok Sin Tong Benevolent Society, Kowloon
鄰舍輔導會東區/灣仔外展社會工作隊	The Neighbourhood Advice-Action Council Eastern/Wanchai District Youth Outreaching Social Work Team
香港新聲會	The New Voice Club of Hong Kong
海外潮人企業家協會	The Overseas Teo Chew Entrepreneurs Association

香港藥學會	The Pharmaceutical Society of Hong Kong
香港地產建設商會	The Real Estate Developers Association of Hong Kong
香港戒毒會	The Society for the Aid and Rehabilitation of Drug Abusers
香港醫院藥劑師學會	The Society of Hospital Pharmacists of Hong Kong
天水圍婦聯有限公司	Tin Shui Wai Women Association Limited
交通事業從業員協會	Traffic Services Employees Association
荃灣區家長教師會聯會有限公司	Tsuen Wan District Parent Teacher Association Federation Limited
荃灣安全健康社區督導委員會	Tsuen Wan Safe and Healthy Community Steering Committee
荃灣商會有限公司	Tsuen Wan Trade Association Ltd
東華三院	Tung Wah Group of Hospitals
東華三院戒煙綜合服務中心	Tung Wah Group of Hospitals Integrated Centre on Smoking Cessation
聯力建築有限公司	Unistress Building Construction Ltd
基督教聯合那打素社康服務	United Christian Nethersole Community Health Service
聯友的士同業聯會有限公司	United Friendship Taxi Owners & Drivers Association Ltd
宏施慈善基金深水埗社會服務處	Windshield Charitable Foundation Sham Shui Po Social Services
宏施慈善基金社會服務處	Windshield Charitable Foundation Social Services
婦女服務聯會	Women Service Association
黃大仙區健康安全城市	Wong Tai Sin District Healthy and Safe City
仁濟醫院	Yan Chai Hospital
仁愛堂有限公司	Yan Oi Tong Ltd
油尖區賢毅社	Yau Tsim District Yin Ngai Society
油尖旺區家長教師會聯會	Yau Tsim Mong Federation of Parents Teachers Association
圓玄軒婦女中心	Yuen Yuen V-Learn Women Centre



**學校、制服團隊及青少年中心 Schools, Uniform Groups and Youth Centres**

博愛醫院歷屆總理聯誼會梁省德中學	AD & FD of Pok Oi Hospital Limited Leung Sing Tak College
博愛醫院歷屆總理聯誼會鄭任安夫人千禧小學	AD & FD of Pok Oi Hospital Limited Mrs Cheng Yam On Millennium School
愛秩序灣官立小學	Aldrich Bay Government Primary School
鴨脷洲街坊學校	Aplichau Kaifong Primary School
醫療輔助隊少年團	Auxiliary Medical Service Cadet Corps
伯特利中學	Bethel High School
福德學校	Bishop Ford Memorial School
般咸道官立小學	Bonham Road Government Primary School
佛教林炳炎紀念學校(香港佛教聯合會主辦)	Buddhist Lam Bing Yim Memorial School (SPSD by HKBA)
佛教林金殿紀念小學	Buddhist Lim Kim Tian Memorial Primary School
佛教沈香林紀念中學	Buddhist Sum Heung Lam Memorial College
佛教大雄中學	Buddhist Tai Hung College
香港嘉諾撒學校	Canossa School (Hong Kong)
中華基督教會全完中學	CCC Chuen Yuen College
中華基督教會元朗真光小學	CCC Chun Kwong Primary School
中華基督教協和小學(長沙灣)	CCC Heep Woh Primary School (Cheung Sha Wan)
中華基督教會基真幼稚園	CCC Kei Chun Kindergarten
中華基督教會基慈小學	CCC Kei Tsz Primary School
中華基督教會基灣小學	CCC Kei Wan Primary School
中華基督教會大澳小學	CCC Tai O Primary School
陳瑞祺(喇沙)小學	Chan Sui Ki (La Salle) Primary School
晉德學校	Chinese Academy
潮陽百欣小學	Chiu Yang Por Yen Primary School
香港潮陽小學	Chiu Yang Primary School of Hong Kong
宣道會陳瑞芝紀念中學	Christian Alliance S C Chan Memorial College
基督教家庭服務中心趣樂幼稚園	Christian Family Service Centre Cheerland Kindergarten
珠海學院	Chu Hai College of Higher Education
真鐸學校	Chun Tok School
香港城市大學	City University of Hong Kong
民眾安全服務隊少年團	Civil Aid Service Cadet Corps
棉紡會中學	Cotton Spinners Association Secondary School
香港中文大學校友會聯會張煊昌學校	CUHKFAA Thomas Cheung School
地利亞(閩僑)英文小學	Delia (Man Kiu) English Primary School
地利亞英文小學	Delia English Primary School

拔萃女小學	Diocesan Girls' Junior School
胡素貞博士紀念學校	Dr Catherine F Woo Memorial School
基督教香港信義會深信學校	ELCHK Faith Lutheran School
基督教香港信義會心誠中學	ELCHK Fanling Lutheran Secondary School
基督教香港信義會葵盛信義學校	ELCHK Kwai Shing Lutheran Primary School
基督教香港信義會禾輦信義學校	ELCHK Wo Che Lutheran School
法國國際學校	French International School
福建中學(北角)	Fukien Middle School (North Point)
鳳溪廖潤琛紀念學校	Fung Kai Liu Yun Sum Memorial School
東莞工商總會張煌偉小學	GCCITKD Cheong Wong Wai Primary School
天主教善導小學	Good Counsel Catholic Primary School
香島中學	Heung To Middle School
香海正覺蓮社佛教正覺蓮社學校	HHCKLA Buddhist Ching Kok Lin Association School
香港正覺蓮社佛教正慈小學	HHCKLA Buddhist Wisdom Primary School
香港基督教服務處雋樂幼稚園	HKCS Pario Kindergarten
香港基督教服務處滙豐幼兒學校	HKCS Wayfoong Nursery School
香港青年協會李兆基小學	HKFYG Lee Shau Kee Primary School
香港保護兒童會新航黃埔幼兒學校	HKSPC Sia Whampoa Nursery School
香港道教聯合會飛雁幼稚園	HKTA Fei Ngan Kindergarten
香港道教聯合會純陽小學	HKTA Shun Yeung Primary School
香港道教聯合會圓玄學院陳呂重德紀念學校	HKTA The Yuen Yuen Institute Chan Lui Chung Tak Memorial School
香港道教聯合會圓玄學院石圍角小學	HKTA The Yuen Yuen Institute Shek Wai Kok Primary School
香港道教聯合會雲泉吳禮和紀念學校	HKTA Wun Tsuen Ng Lai Wo Memorial School
嚳色園主辦可立小學	Ho Lap Primary School (Sponsored by Sik Sik Yuen)
嚳色園主辦可銘學校	Ho Ming Primary School (Sponsored by Sik Sik Yuen)
旅港開平商會學校	Hoi Ping Chamber of Commerce Primary School
旅港開平商會中學	Hoi Ping Chamber of Commerce Secondary School
港九街坊婦女會環翠幼稚園環翠幼兒園	Hong Kong & Kowloon Kaifong Women's Association Wan Tsui Kindergarten Wan Tsui Nursery
香港醫學專科學院	Hong Kong Academy of Medicine
香港護理專科學院有限公司	Hong Kong Academy of Nursing Limited
香港浸會大學附屬學校王錦輝中小學	Hong Kong Baptist University Affiliated School Wong Kam Fai Secondary and Primary School
香港心臟專科學院	Hong Kong College of Cardiology
香港社區及公共健康護理學院	Hong Kong College of Community and Public Health Nursing

香港社會醫學學院	Hong Kong College of Community Medicine
香港急症科護理學院	Hong Kong College of Emergency Nursing
香港護理及衛生管理學院	Hong Kong College of Nursing & Health Care Management
香港兒科醫學院	Hong Kong College of Paediatric
香港建造學院 – 上水院校	Hong Kong Institute of Construction – Sheung Shui Campus
香港南區官立小學	Hong Kong Southern District Government Primary School
國際基督教優質音樂中學暨小學	International Christian Quality Music Secondary and Primary School
香島道官立小學	Island Road Government Primary School
天主教甘霖幼稚園	Kam Lam Catholic Kindergarten
金錢村何東學校	Kam Tsin Village Ho Tung School
英皇書院同學會學校	King's College Old Boys' Association Primary School
潔心林炳炎中學	Kit Sam Lam Bing Yim Secondary School
九龍灣聖若翰天主教小學	Kowloon Bay St John The Baptist Catholic Primary School
九龍城浸信會禧年(恩平)小學	Kowloon City Baptist Church Hay Nien (Yan Ping) Primary School
九龍城浸信會嘉福幼稚園	Kowloon City Baptist Church Ka Fuk Kindergarten
九龍真光中學(小學部)	Kowloon True Light School (Primary Section)
寶血會伍季明紀念學校	Kwai Ming Wu Memorial School of The Precious Blood
光明學校	Kwong Ming School
荔枝角天主教小學	Laichikok Catholic Primary School
藍田靈糧幼稚園	Lam Tin Ling Liang Kindergarten
林村公立黃福鑾紀念學校	Lam Tsuen Public Wong Fook Luen Memorial School
李求恩紀念中學	Lee Kau Yan Memorial School
路德會梁鉅鏐小學	Leung Kui Kau Lutheran Primary School
李鄭屋官立小學	Li Cheng Uk Government Primary School
香港大學李嘉誠醫學院	Li Ka Shing Faculty of Medicine, The University of Hong Kong
李陞小學	Li Sing Primary School
嶺南鍾榮光博士紀念中學	Lingnan Dr Chung Wing Kwong Memorial Secondary School
嶺南中學	Lingnan Secondary School
嶺南大學	Lingnan University
世界龍岡學校黃耀南小學	LKWFSL Wong Yiu Nam Primary School
樂善堂顧超文中學	Lok Sin Tong Ku Chiu Man Secondary School
樂善堂劉德學校	Lok Sin Tong Lau Tak Primary School
樂善堂梁植偉紀念中學	Lok Sin Tong Leung Chik Wai Memorial School
樂善堂梁銑珪學校	Lok Sin Tong Leung Kau Kui Primary School

樂善堂梁銑琚學校(分校)	Lok Sin Tong Leung Kau Kui Primary School (Branch)
樂善堂楊仲明學校	Lok Sin Tong Yeung Chung Ming Primary School
路德會呂明才中學	Lui Ming Choi Lutheran College
	Mahidol University
天佑小學	Mary of Providence Primary School
慕光英文書院	Mu Kuang English School
梅窩學校	Mui Wo School
寧波公學	Ning Po College
北角衛理小學	North Point Methodist Primary School
南丫北段公立小學	Northern Lamma School
新界鄉議局元朗區中學	NT Heung Yee Kuk Yuen Long District Secondary School
天主教佑華小學	Our Lady of China Catholic Primary School
保良局陳守仁小學	Po Leung Kuk Camões Tan Siu Lin Primary School
保良局世德小學	Po Leung Kuk Castar Primary School
保良局莊啟程小學	Po Leung Kuk Chong Kee Ting Primary School
保良局方王錦全小學	Po Leung Kuk Fong Wong Kam Chuen Primary School
保良局馮晴紀念小學	Po Leung Kuk Fung Ching Memorial Primary School
保良局金銀業貿易場張凝文學校	Po Leung Kuk Gold & Silver Exchange Society Pershing Tsang School
保良局甲子何玉清中學	Po Leung Kuk Ho Yuk Ching (1984) College
保良局志豪小學	Po Leung Kuk Horizon East Primary School
保良局陳維周夫人紀念學校	Po Leung Kuk Madam Chan Wai Chow Memorial School
保良局蕭漢森小學	Po Leung Kuk Siu Hon Sum Primary School
保良局何壽南小學	Po Leung Kuk Stanley Ho Sau Nan Primary School
保良局黃永樹小學	Po Leung Kuk Wong Wing Shu Primary School
博愛醫院陳國威小學	Pok Oi Hospital Chan Kwok Wai Primary School
博愛醫院朱國京夫人紀念幼稚園幼兒中心	Pok Oi Hospital Mrs Chu Kwok King Memorial Kindergarten Day Nursery
保祿六世書院	Pope Paul VI College
跑馬地寶血小學	Precious Blood Primary School (Happy Valley)
天主教博智小學	Price Memorial Catholic Primary School
香港培正中學	Pui Ching Middle School
嘉諾撒培德學校	Pui Tak Canossian Primary School
伊利沙伯中學舊生會小學分校	Queen Elizabeth School Old Students' Association Branch Primary School
皇仁舊生會中學	Queen's College Old Boys' Association Secondary School



嘉諾撒聖心學校	Sacred Heart Canossian School
西貢樂育幼稚園	Sai Kung Lok-Yuk Kindergarten
新會商會學校	San Wui Commercial Society School
香港浸會大學傳理學院	School of Communication, Hong Kong Baptist University
香港大學李嘉誠醫學院護理學院	School of Nursing, Li Ka Shing Faculty of Medicine, The University of Hong Kong
東華學院護理學院	School of Nursing, Tung Wah College
香港大學李嘉誠醫學院公共衛生學院	School of Public Health, Li Ka Shing Faculty of Medicine, The University of Hong Kong
深水埗浸信會幼稚園	Sham Shui Po Baptist Church Kindergarten
深水埗官立小學	Sham Shui Po Government Primary School
十八鄉鄉事委員會公益社小學	Shap Pat Heung Rural Committee Kung Yik She Primary School
路德會沙崙堂幼稚園	Sharon Lutheran Church Kindergarten
石籬聖若望天主教小學	Shek Lei St John's Catholic Primary School
善一堂安逸幼稚園	Shin Yat Tong On Yat Kindergarten
禮賢會順天幼兒園	Shun Tin Rhenish Nursery
聖公會主愛小學	SKH Chu Oi Primary School
聖公會主愛小學(梨木樹)	SKH Chu Oi Primary School (Lei Muk Shue)
聖公會奉基千禧小學	SKH Fung Kei Millennium Primary School
聖公會何澤芸小學	SKH Ho Chak Wan Primary School
聖公會嘉福榮真小學	SKH Ka Fuk Wing Chun Primary School
聖公會基愛小學	SKH Kei Oi Primary School
聖公會基榮小學	SKH Kei Wing Primary School
聖公會李兆強小學	SKH Lee Shiu Keung Primary School
聖公會聖安德烈小學	SKH St Andrew's Primary School
聖公會聖紀文小學	SKH St Clement's Primary School
聖公會聖馬太小學	SKH St Matthew's Primary School
聖公會聖米迦勒小學	SKH St Michael's Primary School
聖公會聖彼得小學	SKH St Peter's Primary School
聖公會聖多馬小學	SKH St Thomas' Primary School
聖公會田灣始南小學	SKH Tin Wan Chi Nam Primary School
聖公會青衣邨何澤芸小學	SKH Tsing Yi Estate Ho Chak Wan Primary School
南屯門官立中學	South Tuen Mun Government Secondary School
聖安當小學	St Antonius Primary School
聖文德天主教小學	St Bonaventure Catholic Primary School

嘉諾撒聖方濟各書院	St Francis' Canossian College
德萃幼稚園・幼兒園(紅磡)	St Hilary's Kindergarten • Nursery (Hung Hom)
德萃幼稚園・幼兒園(太子)	St Hilary's Kindergarten • Nursery (Prince Edward)
聖若翰天主教小學	St John the Baptist Catholic Primary School
聖若瑟英文中學	St Joseph's Anglo-Chinese School
聖類斯中學	St Louis School
聖類斯中學(小學部)	St Louis School (Primary Section)
聖瑪加利男女英文中小學	St Margaret's Co-educational English Secondary and Primary School
聖馬可小學	St Mark's Primary School
路德會聖馬太學校(秀茂坪)	St Matthew's Lutheran School (Sau Mau Ping)
天主教聖保祿幼兒園(大圍)	St Paul's Catholic Day Nursery (Tai Wai)
聖保祿天主教小學	St Paul's Primary Catholic School
聖伯多祿中學	St Peter's Secondary School
聖士提反堂中學	St Stephen's Church College
培基小學	Stewards Pooi Kei Primary School
順德聯誼會何日東小學	STFA Ho Yat Tung Primary School
順得聯誼總會梁潔華小學	STFA Leung Kit Wah Primary School
順德聯誼總會胡少渠紀念小學	STFA Wu Siu Kui Memorial Primary School
大角嘴天主教小學	Tai Kok Tsui Catholic Primary School
大埔官立小學	Tai Po Government Primary School
大埔循道衛理小學	Tai Po Methodist School
大埔舊墟公立學校(寶湖道)	Tai Po Old Market Public School (Plover Cove)
香港中文大學	The Chinese University of Hong Kong
香港恒生大學	The Hang Seng University of Hong Kong
香港演藝學院	The Hong Kong Academy for Performing Arts
香港中國婦女會馮堯敬紀念中學	The Hong Kong Chinese Women's Club Fung Yiu King Memorial Secondary School
香港精神健康護理學院	The Hong Kong College of Mental Health Nursing
香港家庭教育學院	The Hong Kong Institute of Family Education
香港科技大學	The Hong Kong University of Science and Technology
賽馬會毅智書院	The Jockey Club Eduyoung College
香港中文大學醫學院賽馬會公共衛生及基層醫療學院	The Jockey Club School of Public Health and Primary Care, Faculty of Medicine, The Chinese University of Hong Kong
基督教聖約教會司務道幼稚園暨幼兒園	The Mission Covenant Church Sister Annie's Kindergarten cum Nursery

香港中文大學那打素護理學院	The Nethersole School of Nursing, Faculty of Medicine, The Chinese University of Hong Kong
救世軍華富幼兒學校	The Salvation Army Wah Fu Nursery School
香港大學	The University of Hong Kong
將軍澳培智學校	Tseung Kwan O Pui Chi School
青衣商會小學	Tsing Yi Trade Association Primary School
荃灣潮州公學	Tsuen Wan Chiu Chow Public School
荃灣官立小學	Tsuen Wan Government Primary School
荃灣公立何傳耀紀念小學	Tsuen Wan Public Ho Chuen Yiu Memorial Primary School
荃灣商會學校	Tsuen Wan Trade Association Primary School
慈雲山聖文德天主教小學	Tsz Wan Shan St Bonaventure Catholic Primary School
東涌天主教學校	Tung Chung Catholic School
東華學院	Tung Wah College
東華三院李潤田紀念中學	TWGHs Lee Ching Dea Memorial College
東華三院李東海小學	TWGHs Leo Tung-hai LEE Primary School
東華三院呂潤財紀念中學	TWGHs Lui Yun Choy Memorial College
東華三院馬錦燦紀念小學	TWGHs Ma Kam Chan Memorial Primary School
東華三院冼次雲小學	TWGHs Sin Chu Wan Primary School
東華三院姚達之紀念小學(元朗)	TWGHs Yiu Dak Chi Memorial Primary School (Yuen Long)
和富慈善基金李宗德小學	W F Joseph Lee Primary School
上水惠州公立學校	Waichow Public School (Sheung Shui)
香港東區婦女福利會黎桂添幼兒園	WWC (ED) HK Lai Kwai Tim Day Nursery
油蔴地天主教小學	Yaumati Catholic Primary School
油蔴地天主教小學(海泓道)	Yaumati Catholic Primary School (Hoi Wang Road)
約克中英幼稚園	York English & Chinese Kindergarten
中華基督教會元朗堂真光幼稚園二校	Yuen Long Church (CCC) Chan Kwong Kindergarten No 2
元朗寶覺小學	Yuen Long Po Kok Primary School
元朗東莞同鄉會熊定嘉幼稚園	Yuen Long Tung Koon District Association Hung Ting Ka Kindergarten

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## Awards List of “Hong Kong Smoke-free Leading Company Awards 2019”

### 三年卓越金獎 Triple Gold Awards

百麗國際控股有限公司	Belle International Holdings Limited
富安集團有限公司	Richform Holdings Limited

### 金獎 Gold Awards

置富資產管理有限公司	ARA Asset Management (Fortune) Limited
中華電力有限公司	CLP Power Hong Kong Limited
建造業議會	Construction Industry Council
懲教署	Correctional Services Department
敦豪國際速遞(香港)有限公司	DHL Express (Hong Kong) Limited
金門建築有限公司	Gammon Construction Limited
青洲英坭有限公司	Green Island Cement Company Limited
葵涌醫院	Kwai Chung Hospital
領展資產管理有限公司	Link Asset Management Limited
新世界建築有限公司 (協盛建築集團)	New World Construction Company Limited (Hip Seng Group of Companies)
天星小輪有限公司	The “Star” Ferry Company, Limited
香港賽馬會 – 零售部	The Hong Kong Jockey Club - Retail Department
香港大學	The University of Hong Kong
偉邦物業管理有限公司 (恒基兆業地產集團成員)	Well Born Real Estate Management Limited (A Member of Henderson Land Group)



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**銀獎 Silver Awards**

利基 – 顯豐工程聯營	Build King - Richwell Engineering Joint Venture
豐盛服務集團有限公司	FSE Services Group Limited
怡中航空服務集團	Jardine Aviation Services Group
啟勝管理服務有限公司 – 新都廣場	Kai Shing Management Services Limited - Metropolis Plaza
冠忠巴士集團有限公司	Kwoon Chung Bus Holdings Limited
南豐物業管理 – 華基中心	Nan Fung Property Management - Ricky Centre
新世界第一渡輪服務有限公司	New World First Ferry Services Limited
新時代卡拉OK有限公司	Neway Karaoke Box Limited
博愛醫院 – 中醫服務	Pok Oi Hospital - Chinese Medicine Service
第一太平戴維斯物業管理有限公司	Savills Property Management Limited
亞洲國際餐飲集團	Taste of Asia Group Limited
香港中文大學	The Chinese University of Hong Kong
土地註冊處	The Land Registry
超敏科技有限公司	Ultra Active Technology Limited
富城集團	Urban Group
惠康環境服務有限公司	Waihong Environmental Services Limited

**傑出無煙社區參與大獎 Outstanding Smoke-free Community Involvement Awards**

中華電力有限公司	CLP Power Hong Kong Limited
金門建築有限公司	Gammon Construction Limited

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**優異獎 Certificates of Merit**

毅信生命科學諮詢有限公司	Action Life Sciences Consulting Limited
置富資產管理有限公司 – 麗港城商場	ARA Asset Management (Fortune) Limited - Laguna Plaza
工程及醫療義務工作協會 – 展毅中心	Association for Engineering and Medical Volunteer Services - The Endeavor
	BEAUSKIN Medical
標保有限公司	BIBO Limited
利基 – 金城聯營	Build King - Kum Shing Joint Venture
專業買賣有限公司	Build-U-Biz Limited
家利物業管理有限公司 – 麗城花園	Cayley Property Management Limited - Belvedere Garden
家利物業管理有限公司 – 東達中心	Cayley Property Management Limited - Eastern Centre
家利物業管理有限公司 – 東南工業大廈	Cayley Property Management Limited - Southeast Industrial Building
家利物業管理有限公司 – The Hub	Cayley Property Management Limited - The Hub
家利物業管理有限公司 – 億利商業大廈	Cayley Property Management Limited - Yardley Commercial Building
華潤物業有限公司	China Resources Property Limited
中國建築工程(香港)有限公司 – 中環灣仔繞道8號連接路段	China State Construction Engineering (HK) Limited - Central - Wanchai Bypass Tunnel (Slip Road 8 Section)
捷盛(物業管理)有限公司 – 嘉薈軒	Chissay (Property Management) Limited - J Residence
捷盛(物業管理)有限公司 – 嘉匯	Chissay (Property Management) Limited - K.CITY
捷盛(物業管理)有限公司 – 嘉華國際中心	Chissay (Property Management) Limited - K.Wah Centre
捷盛(物業管理)有限公司 – 嘉昌商業中心	Chissay (Property Management) Limited - Kingsfield Centre
捷盛(物業管理)有限公司 – 深灣9號	Chissay (Property Management) Limited - Marinella
捷盛(物業管理)有限公司 – 嘉暉花園	Chissay (Property Management) Limited - Monterey Villas
捷盛(物業管理)有限公司 – 嘉富商業中心	Chissay (Property Management) Limited - Prosperity Centre
捷盛(物業管理)有限公司 – 嘉富臺	Chissay (Property Management) Limited - Prosperous Height
捷盛(物業管理)有限公司 – 肇輝臺	Chissay (Property Management) Limited - Shiu Fai Terrace
捷盛(物業管理)有限公司 – SOLO	Chissay (Property Management) Limited - SOLO
捷盛(物業管理)有限公司 – The Factory	Chissay (Property Management) Limited - The Factory
捷盛(物業管理)有限公司 – 嘉御山	Chissay (Property Management) Limited - The Great Hill
捷盛(物業管理)有限公司 – 嘉達環球中心	Chissay (Property Management) Limited - The Octagon
捷盛(物業管理)有限公司 – 嘉悅	Chissay (Property Management) Limited - Twin Peaks
捷盛(物業管理)有限公司 – 嘉尚匯	Chissay (Property Management) Limited - Vertical SQ
中信企業地產代理有限公司	CITIC Properties Agencies Limited
中信國際電訊(信息技術)有限公司	CITIC Telecom International CPC Limited
中信大廈管理有限公司	CITIC Tower Property Management Company Limited

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港基物業管理有限公司	Citybase Property Management Limited
港基物業管理有限公司 – 嘉湖山莊麗湖居	Citybase Property Management Limited - Kingswood Villas (Lynwood Court)
港基物業管理有限公司 – 四季名園管理服務中心	Citybase Property Management Limited - Seasons Monarch Management Services Centre
港基物業管理有限公司 – 賞湖居	Citybase Property Management Limited - Sherwood Court
港基物業管理有限公司 – 峻瀝	Citybase Property Management Limited - The Beaumont
港基物業管理有限公司 – 峻瀝II	Citybase Property Management Limited - The Beaumont II
港基物業管理有限公司 – 尚城管理服務中心	Citybase Property Management Limited - Uptown Management Services Centre
科聯系統有限公司	Computer And Technologies International Limited
華豐正凌國際有限公司	Crossover International Company Limited
大金冷氣(香港)有限公司	Daikin Airconditioning (Hong Kong) Limited
潛水歷險會有限公司	Diving Adventure Limited
德保工程(香港)有限公司	DuctPro Engineering (H.K.) Limited
海航物流集團有限公司	Elegant Logistics Group Limited
邇文基因科技有限公司	Eman Genetics Biotech Limited
永年物業管理有限公司	Eternal Year Property Services Limited
長興國際(集團)控股有限公司	Evergreen International Holdings Limited
無添加化粧品有限公司	Fantastic Natural Cosmetics Limited
豐盛機電工程集團有限公司	FSE Engineering Group Limited
豐盛創建控股有限公司	FSE Holdings Limited
富邦銀行(香港)有限公司	Fubon Bank (Hong Kong) Limited
高衛物業管理有限公司	Goodwell Property Management Limited
高衛物業管理有限公司 – 創業街9號	Goodwell Property Management Limited - 9 Chong Yip Street
高衛物業管理有限公司 – 波老道21號	Goodwell Property Management Limited - 21 Borrett Road
高衛物業管理有限公司 – 海柏花園	Goodwell Property Management Limited - Bayshore Towers
高衛物業管理有限公司 – 半山壹號	Goodwell Property Management Limited - Celestial Heights
高衛物業管理有限公司 – 鹿茵山莊	Goodwell Property Management Limited - DeerHill Bay
高衛物業管理有限公司 – DIVA	Goodwell Property Management Limited - DIVA
高衛物業管理有限公司 – 富高工業中心	Goodwell Property Management Limited - Focal Industrial Centre
高衛物業管理有限公司 – 維港中心第一座	Goodwell Property Management Limited - Harbour Centre Tower 1
高衛物業管理有限公司 – 浩文苑	Goodwell Property Management Limited - Homan Villa
高衛物業管理有限公司 – 康瑞苑	Goodwell Property Management Limited - Hong Shui Court
高衛物業管理有限公司 – 葵昌中心	Goodwell Property Management Limited - Kwai Cheong Centre
高衛物業管理有限公司 – 海逸豪園	Goodwell Property Management Limited - Laguna Verde

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高衛物業管理有限公司 – 珏堡	Goodwell Property Management Limited - Le Chateau
高衛物業管理有限公司 – 尚御	Goodwell Property Management Limited - Meridian Hill
高衛物業管理有限公司 – 一號西九龍	Goodwell Property Management Limited - One West Kowloon
高衛物業管理有限公司 – 星輝豪庭	Goodwell Property Management Limited - Peninsula Heights
高衛物業管理有限公司 – 創富中心	Goodwell Property Management Limited - Prosperity Centre
高衛物業管理有限公司 – 泓富廣場	Goodwell Property Management Limited - Prosperity Place
高衛物業管理有限公司 – 嵐岸	Goodwell Property Management Limited - Sausalito
高衛物業管理有限公司 – 滙景花園	Goodwell Property Management Limited - Sceneway Garden
高衛物業管理有限公司 – 維港·星岸	Goodwell Property Management Limited - Stars By The Harbour
高衛物業管理有限公司 – 興業工商大廈	Goodwell Property Management Limited - Summit Building
高衛物業管理有限公司 – 海逸坊	Goodwell Property Management Limited - The Laguna Mall
高衛物業管理有限公司 – 渣甸山 – 名門	Goodwell Property Management Limited - The Legend at Jardine's Lookout
高衛物業管理有限公司 – 都會大廈	Goodwell Property Management Limited - The Metropolis Tower
高衛物業管理有限公司 – 盈峰翠邸	Goodwell Property Management Limited - The Paramount
高衛物業管理有限公司 – 港景峯	Goodwell Property Management Limited - The Victoria Towers
高衛物業管理有限公司 – 港景匯商場	Goodwell Property Management Limited - Victoria Mall
高衛物業管理有限公司 – 聽濤雅苑	Goodwell Property Management Limited - Vista Paradiso
綠壹研究所有限公司	Green One Lab Limited
GV 物理治療中心 (中環)	GV Physiotherapy Centre (Central)
GV 物理治療中心 (馬鞍山)	GV Physiotherapy Centre (Ma On Shan)
GV 物理治療中心 (大圍)	GV Physiotherapy Centre (Tai Wai)
恆堡會有限公司	Hanberg Club Limited
恆堡有限公司	Hanberg Limited
恒聯昌物業管理有限公司 – 中信電訊大廈	Hang Luen Chong Property Management Company Limited - CITIC Telecom Tower
興勝建築有限公司	Hanison Construction Company Limited
港島海逸君綽酒店	Harbour Grand Hong Kong
	Harbourfront Landmark Premium Services Limited
夏利文物業管理有限公司 – 中保集團大廈	Harriman Property Management Limited - China Insurance Group Building
夏利文物業管理有限公司 – 卡佛大廈	Harriman Property Management Limited - Crawford House
夏利文物業管理有限公司 – Gough Hill Residences	Harriman Property Management Limited - Gough Hill Residences
夏利文物業管理有限公司 – 交樓服務中心	Harriman Property Management Limited - Handover Team
夏利文物業管理有限公司 – Island Residence	Harriman Property Management Limited - Island Residence
夏利文物業管理有限公司 – 加多利山	Harriman Property Management Limited - Kadoorie Hill



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夏利文物業管理有限公司 – Kensington Hill	Harriman Property Management Limited - Kensington Hill
夏利文物業管理有限公司 – 九龍貨倉	Harriman Property Management Limited - Kowloon Godwon
夏利文物業管理有限公司 – La Hacienda	Harriman Property Management Limited - La Hacienda
夏利文物業管理有限公司 – Lexington Hill	Harriman Property Management Limited - Lexington Hill
夏利文物業管理有限公司 – 永安集團大廈管理處	Harriman Property Management Limited - Management Office of Wing On House
夏利文物業管理有限公司 – 宏利大廈	Harriman Property Management Limited - Manulife Tower
夏利文物業管理有限公司 – Monterey	Harriman Property Management Limited - Monterey
夏利文物業管理有限公司 – One Bay East	Harriman Property Management Limited - One Bay East
夏利文物業管理有限公司 – Savannah	Harriman Property Management Limited - Savannah
夏利文物業管理有限公司 – The Babington	Harriman Property Management Limited - The Babington
夏利文物業管理有限公司 – The Parkside	Harriman Property Management Limited - The Parkside
恒基兆業地產附屬機構 恒益物業管理有限公司 – 東貿廣場	Henderson Land Group Subsidiary Hang Yick Properties Management Limited - E Trade Plaza
恒基兆業地產附屬機構 恒益物業管理有限公司 – 豐隆工業中心	Henderson Land Group Subsidiary Hang Yick Properties Management Limited - Hong Leong Industrial Complex
恒基兆業地產附屬機構 恒益物業管理有限公司 – 御皇臺	Henderson Land Group Subsidiary Hang Yick Properties Management Limited - Royal Terrace
恒基兆業地產附屬機構 恒益物業管理有限公司 – 耀安邨	Henderson Land Group Subsidiary Hang Yick Properties Management Limited - Yiu On Estate
恒基兆業地產附屬機構 尊家管業有限公司 – 維峯	Henderson Land Group Subsidiary H-Privilege Limited - The Hemispheres
恒基兆業地產附屬機構 偉邦物業管理有限公司 – 凱譽	Henderson Land Group Subsidiary Well Born Real Estate Management Limited - Harbour Pinnacle
恆華(香港)裝飾工程有限公司	Heng Wah (Hong Kong) Decoration Company Limited
海棠物流(香港)股份有限公司	Hoi Tong Logistics (H.K.) Limited
香港空氣淨化器中心有限公司	Hong Kong Air Purifier Center Limited
香港移民升學顧問有限公司	Hong Kong Immigration & Education Consultancy Limited
香港債務重組中心有限公司	Hong Kong IVA Professional Centre Limited
香港疼痛醫學中心	Hong Kong Pain Medicine Centre
康業服務有限公司 – 環薈中心	Hong Yip Service Company Limited - CEO Tower
康業服務有限公司 – 長江工廠大廈	Hong Yip Service Company Limited - Cheung Kong Factory Building
康業服務有限公司 – 昌隆工業大廈	Hong Yip Service Company Limited - Cheung Lung Industrial Building
康業服務有限公司 – 經達廣場	Hong Yip Service Company Limited - Comweb Plaza
康業服務有限公司 – 恒發工業大廈	Hong Yip Service Company Limited - Hang Fat Industrial Building
康業服務有限公司 – 香港工業中心 A 座	Hong Yip Service Company Limited - Hong Kong Industrial Centre Block A

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康業服務有限公司 – 香港工業中心 B 及 C 座	Hong Yip Service Company Limited - Hong Kong Industrial Centre Block B & C
康業服務有限公司 – 合力工業中心	Hong Yip Service Company Limited - Hoplite Industrial Centre
康業服務有限公司 – 栢裕工業中心	Hong Yip Service Company Limited - Precious Industrial Centre
康業服務有限公司 – 新昌工業大廈	Hong Yip Service Company Limited - Sun Cheong Industrial Building
康業服務有限公司 – 宏昌工業大廈	Hong Yip Service Company Limited - Wang Cheong Industrial Building
康業服務有限公司 – 裕明苑	Hong Yip Service Company Limited - Yu Ming Court
顧培顧問國際有限公司	Human Performance International Limited
鴻福堂集團控股有限公司	Hung Fook Tong Group Holdings Limited
和黃物流中心管理有限公司	Hutchison Logistics Centre Management Limited
和記物業管理有限公司 – 華人行	Hutchison Property Management Company Limited - China Building
一心旅遊有限公司	Instant Travel Service Limited
國際物業管理有限公司 – 碧瑤灣	International Property Management Limited - Baguio Villa
國際物業管理有限公司 – 建文大廈	International Property Management Limited - Kin Man Building
國際物業管理有限公司 – 文利大廈	International Property Management Limited - Manley House
國際物業管理有限公司 – 美倫閣	International Property Management Limited - Merlin Court
國際物業管理有限公司 – 碧麗閣	International Property Management Limited - Phoenix Court
泰美商業科技有限公司	Intimex Business Solutions Company Limited
	iSTEM Limited
仲量聯行物業管理有限公司	Jones Lang LaSalle Management Services Limited
健樂護理有限公司	K L Home Care Limited
嘉誠管理顧問有限公司	Ka Shing Management Consultant Limited
啟勝管理服務有限公司 – 創貿廣場	Kai Shing Management Services Limited - APEC Plaza
啟勝管理服務有限公司 – 絲寶國際大廈	Kai Shing Management Services Limited - C - BONS International Center
啟勝管理服務有限公司 – 新城市中央廣場	Kai Shing Management Services Limited - Grand Central Plaza
啟勝管理服務有限公司 – 荔欣苑	Kai Shing Management Services Limited - Lai Yan Court
啟勝管理服務有限公司 – 上水廣場	Kai Shing Management Services Limited - Landmark North
啟勝管理服務有限公司 – 鯉安苑	Kai Shing Management Services Limited - Lei On Court
啟勝管理服務有限公司 – 創紀之城五期及 apm	Kai Shing Management Services Limited - Millennium City 5 & apm
啟勝管理服務有限公司 – 新城市廣場一期	Kai Shing Management Services Limited - New Town Plaza Phase I
啟勝管理服務有限公司 – 浪翠園第四期	Kai Shing Management Services Limited - Sea Crest Villa Phase 4
啟勝管理服務有限公司 – 天晉 IIIA	Kai Shing Management Services Limited - The Wings IIIA
啟勝管理服務有限公司 – 天晉 IIIB	Kai Shing Management Services Limited - The Wings IIIB

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啟勝管理服務有限公司 – 世貿中心	Kai Shing Management Services Limited - World Trade Centre
金記控股有限公司	Kam Kee Holdings Limited
金城信貸有限公司	Kin Cheng Finance Limited
	KOHO Facility Management Limited
新里程國際有限公司	Leading Edge Worldwide Limited
能益有限公司	Long Data Technology Limited
萬泰服務有限公司 – 麗都花園管理服務中心	Mantex Services Limited - Lido Garden Management Services Centre
萬迪有限公司	Maxgrand Limited
萬士博(亞洲)有限公司	MaxiPro (Asia) Limited
宏力保安服務有限公司	Megastrength Security Services Company Limited
Miris Spa 岩石按摩專門店	Miris Spa
美國萬利理財控股有限公司	Money Concepts (Asia) Holdings Limited
安栢市場策劃(香港)有限公司	MPEG (HK) Limited
南豐物業管理 – 加列山道 7 至 15 號	Nan Fung Property Management - 7 - 15 Mount Kellett Road
南豐物業管理 – 深水灣徑 8 號	Nan Fung Property Management - 8 Deep Water Bay Drive
南豐物業管理 – 羅便臣道 80 號	Nan Fung Property Management - 80 Robinson Road
南豐物業管理 – 浪濤灣	Nan Fung Property Management - Aqua Blue
南豐物業管理 – 海慧花園	Nan Fung Property Management - Aquamarine Garden
南豐物業管理 – 亞洲貿易中心	Nan Fung Property Management - Asia Trade Centre
南豐物業管理 – 南源	Nan Fung Property Management - Bay Villas
南豐物業管理 – 長豐工業大廈	Nan Fung Property Management - Cheung Fung Industrial Building
南豐物業管理 – 豐寓	Nan Fung Property Management - Edition 178
南豐物業管理 – 海桃灣	Nan Fung Property Management - Florient Rise
南豐物業管理 – 福康工業大廈	Nan Fung Property Management - Fook Hong Industrial Building
南豐物業管理 – 福田大廈	Nan Fung Property Management - Fook Tin Building
南豐物業管理 – 福業大廈	Nan Fung Property Management - Fook Yip Building
南豐物業管理 – 福慧大廈	Nan Fung Property Management - Fortuna Court
南豐物業管理 – 金龍工業中心	Nan Fung Property Management - Golden Dragon Industrial Centre
南豐物業管理 – 華景園	Nan Fung Property Management - Grand Garden
南豐物業管理 – 翠景臺	Nan Fung Property Management - Greenview Terrace
南豐物業管理 – 啟匯	Nan Fung Property Management - Harbourside HQ
南豐物業管理 – 山頂道 26 號	Nan Fung Property Management - Interocean Court
南豐物業管理 – 香島	Nan Fung Property Management - Island Garden
南豐物業管理 – 金豐大廈	Nan Fung Property Management - Kam Fung Building

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南豐物業管理 – 錦豐園	Nan Fung Property Management - Kam Fung Garden
南豐物業管理 – 葵涌廣場	Nan Fung Property Management - Kwai Chung Plaza
南豐物業管理 – 尚珩	Nan Fung Property Management - La Cresta
南豐物業管理 – 湖景花園	Nan Fung Property Management - Lakeview Garden
南豐物業管理 – 麗華大廈	Nan Fung Property Management - Lever Building
南豐物業管理 – 華業大廈	Nan Fung Property Management - Marvel Industrial Building
南豐物業管理 – 馬鞍山中心(商場及停車場)	Nan Fung Property Management - MOS Centre (Shopping Arcade & Carpark)
南豐物業管理 – Mount Nicholson	Nan Fung Property Management - Mount Nicholson
南豐物業管理 – 南豐中心	Nan Fung Property Management - Nan Fung Centre
南豐物業管理 – 南豐商業中心	Nan Fung Property Management - Nan Fung Commercial Centre
南豐物業管理 – 南豐廣場	Nan Fung Property Management - Nan Fung Plaza
南豐物業管理 – 南豐新邨	Nan Fung Property Management - Nan Fung Sun Chuen
南豐物業管理 – 甘道 21 號	Nan Fung Property Management - No 21 Coombe Road
南豐物業管理 – 山頂道 84 號	Nan Fung Property Management - No 84 Peak Road
南豐物業管理 – 寶業大廈	Nan Fung Property Management - Pao Yip Building
南豐物業管理 – 順寧苑	Nan Fung Property Management - Peaceful Mansion
南豐物業管理 – 北河大廈	Nan Fung Property Management - Pei Ho Building
南豐物業管理 – 盈業大廈	Nan Fung Property Management - Profit Industrial Building
南豐物業管理 – 湓玥·天賦海灣	Nan Fung Property Management - Providence Peak
南豐物業管理 – 新蒲崗廣場	Nan Fung Property Management - San Po Kong Plaza
南豐物業管理 – 翠豐臺	Nan Fung Property Management - Summit Terrace
南豐物業管理 – 泰豐工業大廈	Nan Fung Property Management - Tai Fung Industrial Building
南豐物業管理 – 晉名峰	Nan Fung Property Management - The Grandville
南豐物業管理 – 昇薈	Nan Fung Property Management - The Visionary
南豐物業管理 – 將軍澳廣場(商場)	Nan Fung Property Management - TKO Plaza (Mall)
南豐物業管理 – 華寶中心	Nan Fung Property Management - Treasure Centre
南豐物業管理 – 翠峰小築	Nan Fung Property Management - Verdant Villa
南豐物業管理 – 華豐園	Nan Fung Property Management - Wah Fung Garden
南豐物業管理 – 慧林苑	Nan Fung Property Management - Wayne Place
南豐物業管理 – 和豐工業中心	Nan Fung Property Management - Well Fung Industrial Centre
南豐物業管理 – 慧安園	Nan Fung Property Management - Well On Garden
南豐物業管理 – 雲暉大廈	Nan Fung Property Management - Winfield Building
南豐物業管理 – 永興工業大廈	Nan Fung Property Management - Wing Hing Industrial Building
南豐物業管理 – 福仁大廈	Nan Fung Property Management - Wonder Building
科研資訊系統有限公司	NetMon Information Systems Limited



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新創富興業有限公司	New Rich Inc. Limited
華僑永亨銀行	OCBC Wing Hang Bank Limited
協成行旺角中心	OfficePlus @ Mong Kok
協成行太子中心	OfficePlus @ Prince Edward
協成行上環中心	OfficePlus @ Sheung Wan
協成行灣仔中心	OfficePlus @ Wan Chai
	One Harbour Square & Two Harbour Square
壹達集團有限公司	Onestart Group Limited
領康醫療	OT&P Healthcare
超越乒乓球訓練中心	Overstep Table Tennis Training Centre
百利保物業管理有限公司 – 莊士敦道 211 號	Paliburg Estate Management Limited - 211 Johnston Road
百利保物業管理有限公司 – 松柏商業大廈	Paliburg Estate Management Limited - Chung Pak Commerical Building
百利保物業管理有限公司 – 北海中心	Paliburg Estate Management Limited - CNT Tower
百利保物業管理有限公司 – 金安大廈	Paliburg Estate Management Limited - Come On Building
百利保物業管理有限公司 – 富萊花園 (第一期)	Paliburg Estate Management Limited - Fuller Gardens (Phase I)
百利保物業管理有限公司 – 富麗花園	Paliburg Estate Management Limited - Fulrich Garden
百利保物業管理有限公司 – 尚都	Paliburg Estate Management Limited - The Ascent
保華 – 安保聯營	Paul Y. - Able Joint Venture
美國輝瑞科研製藥有限公司	Pfizer Corporation Hong Kong Limited
筆克 (香港) 有限公司	Pico International (HK) Limited
鋒生有限公司	Pioneer Dynamic Limited
正意工作室有限公司	QConcept Limited
富豪物業管理有限公司 – 尚築及富豪 · 悅庭	Regal Estate Management Limited - Domus and Casa Regalia
富豪物業管理有限公司 – 富豪 · 山峯	Regal Estate Management Limited - Mount Regalia
富豪物業管理有限公司 – 富豪海灣	Regal Estate Management Limited - Regalia Bay
富豪物業管理有限公司 – We Go Mall	Regal Estate Management Limited - We Go Mall
生興建築工程有限公司	Sang Hing Construction Company Limited
第一太平戴維斯物業管理有限公司 – 太古灣道 12 及 14 號	Savills Property Management Limited - 12 & 14 Taikoo Wan Road
第一太平戴維斯物業管理有限公司 – 藍塘道 23 至 39	Savills Property Management Limited - 23 - 39 Blue Pool Road
第一太平戴維斯物業管理有限公司 – 亞洲物流中心 – 順豐大廈	Savills Property Management Limited - Asia Logistics Hub - SF Centre
第一太平戴維斯物業管理有限公司 – 安盛匯	Savills Property Management Limited - AXA Southside

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第一太平戴維斯物業管理有限公司 – 東亞銀行港灣中心	Savills Property Management Limited - BEA Harbour View Centre
第一太平戴維斯物業管理有限公司 – 中國人壽中心	Savills Property Management Limited - China Life Center
第一太平戴維斯物業管理有限公司 – 中國太平大廈	Savills Property Management Limited - China Taiping Tower
第一太平戴維斯物業管理有限公司 – 西洋會所	Savills Property Management Limited - Club Lusitano
第一太平戴維斯物業管理有限公司 – 鱷魚恤中心	Savills Property Management Limited - Crocodile Center
第一太平戴維斯物業管理有限公司 – 福源廣場	Savills Property Management Limited - Ford Glory Plaza
第一太平戴維斯物業管理有限公司 – 興迅廣場	Savills Property Management Limited - Grandion Plaza
第一太平戴維斯物業管理有限公司 – 皇廷廣場	Savills Property Management Limited - King Palace Plaza
第一太平戴維斯物業管理有限公司 – 京瑞廣場一期	Savills Property Management Limited - Kings Wing Plaza 1
第一太平戴維斯物業管理有限公司 – 京瑞廣場二期	Savills Property Management Limited - Kings Wing Plaza 2
第一太平戴維斯物業管理有限公司 – 南灣	Savills Property Management Limited - Larvotto
第一太平戴維斯物業管理有限公司 – 理文商業中心	Savills Property Management Limited - Lee & Man Commercial Center
第一太平戴維斯物業管理有限公司 – 寧晉中心	Savills Property Management Limited - Legend Tower
第一太平戴維斯物業管理有限公司 – 力寶中心	Savills Property Management Limited - Lippo Centre
第一太平戴維斯物業管理有限公司 – OLIV	Savills Property Management Limited - OLIV
第一太平戴維斯物業管理有限公司 – 二千年廣場	Savills Property Management Limited - Plaza 2000
第一太平戴維斯物業管理有限公司 – 金鐘廊	Savills Property Management Limited - Queensway Plaza
第一太平戴維斯物業管理有限公司 – 中環中心	Savills Property Management Limited - The Center
第一太平戴維斯物業管理有限公司 – The Loop	Savills Property Management Limited - The Loop
第一太平戴維斯物業管理有限公司 – 敦皓	Savills Property Management Limited - The Morgan
信和物業管理有限公司 – 旺角中心第一座	Sino Estates Management Limited - Argyle Centre Phase I
信和物業管理有限公司 – 帝國中心	Sino Estates Management Limited - Empire Centre
信和物業管理有限公司 – 畢架山峰	Sino Estates Management Limited - Mount Beacon

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信和物業管理有限公司 – 尖沙咀中心	Sino Estates Management Limited - Tsim Sha Tsui Centre
滙寶醫療用品配套有限公司	Solutions Health Care Products & Services Limited
金朝陽集團有限公司	Soundwill Holdings Limited
舞台文化餐飲服務有限公司	Stage Catering Services Limited
昌明科技有限公司	Strong Bright Technology Limited
牲暉控股集團有限公司	Sunlight Enterprises Holding Limited
昇捷設施管理有限公司 – 寶能閣	Synergis Facility Management Limited - Boland Court
昇捷設施管理有限公司 – 寶能閣第二期	Synergis Facility Management Limited - Boland Court Phase 2
昇捷設施管理有限公司 – 新田圍商場及停車場	Synergis Facility Management Limited - Sun Tin Wai Commercial Centre & Carpark
昇捷管理服務有限公司	Synergis Management Services Limited
昇捷管理服務有限公司 – 喇沙利道 18A	Synergis Management Services Limited - 18A La Salle Road
昇捷管理服務有限公司 – 88 廣場	Synergis Management Services Limited - 88 Square
昇捷管理服務有限公司 – 香港仔大道 178 號	Synergis Management Services Limited - 178 Aberdeen Main Road
昇捷管理服務有限公司 – 雅苑	Synergis Management Services Limited - Arden Court
昇捷管理服務有限公司 – 雅景台	Synergis Management Services Limited - Broadview Terrace
昇捷管理服務有限公司 – 夏威夷豪園	Synergis Management Services Limited - Casa Pardizo
昇捷管理服務有限公司 – 山翠苑	Synergis Management Services Limited - Century Court
昇捷管理服務有限公司 – 欣翠花園	Synergis Management Services Limited - Cheerful Park
昇捷管理服務有限公司 – 芝古台	Synergis Management Services Limited - Chico Terrace
昇捷管理服務有限公司 – 頌雅苑	Synergis Management Services Limited - Chung Nga Court
昇捷管理服務有限公司 – 康定舍	Synergis Management Services Limited - Content Lodge
昇捷管理服務有限公司 – 德星樓	Synergis Management Services Limited - Edward Court
昇捷管理服務有限公司 – 富雅花園	Synergis Management Services Limited - Elegance Garden
昇捷管理服務有限公司 – 疊翠豪庭	Synergis Management Services Limited - Emerald Palace
昇捷管理服務有限公司 – 帝文苑	Synergis Management Services Limited - Emperor Place
昇捷管理服務有限公司 – 雲景台	Synergis Management Services Limited - Evelyn Towers
昇捷管理服務有限公司 – 俊慧園	Synergis Management Services Limited - Fairland Gardens
昇捷管理服務有限公司 – 蔚林居	Synergis Management Services Limited - Forest Hill
昇捷管理服務有限公司 – 富善邨	Synergis Management Services Limited - Fu Shin Estate
昇捷管理服務有限公司 – 富欣閣	Synergis Management Services Limited - Fu Yan Court
昇捷管理服務有限公司 – 富雅花園	Synergis Management Services Limited - Full Wealth Gardens
昇捷管理服務有限公司 – 金基工業大廈	Synergis Management Services Limited - Gold King Industrial Building
昇捷管理服務有限公司 – 嘉翠園	Synergis Management Services Limited - Green Knoll Court

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昇捷管理服務有限公司 – 恆豐園	Synergis Management Services Limited - Harvest Garden
昇捷管理服務有限公司 – 赫頓大廈	Synergis Management Services Limited - Hatton House
昇捷管理服務有限公司 – 芊紅居	Synergis Management Services Limited - Hibiscus Park
昇捷管理服務有限公司 – 嘉林別墅	Synergis Management Services Limited - Hiram's Villa
昇捷管理服務有限公司 – 怡和苑	Synergis Management Services Limited - Homestead Mansion
昇捷管理服務有限公司 – 康利中心	Synergis Management Services Limited - Honley Court
昇捷管理服務有限公司 – 中華大廈	Synergis Management Services Limited - Jonsim Place
昇捷管理服務有限公司 – 嘉盛苑	Synergis Management Services Limited - Ka Shing Court
昇捷管理服務有限公司 – 康德大廈	Synergis Management Services Limited - Kent Mansion
昇捷管理服務有限公司 – 建輝大廈	Synergis Management Services Limited - Kin Fai Building
昇捷管理服務有限公司 – 瓊軒苑	Synergis Management Services Limited - King Hin Court
昇捷管理服務有限公司 – 景雅苑	Synergis Management Services Limited - King Nga Court
昇捷管理服務有限公司 – 景盛苑	Synergis Management Services Limited - King Shing Court
昇捷管理服務有限公司 – 僑苑大廈	Synergis Management Services Limited - Kiu Yuen Mansion
昇捷管理服務有限公司 – 廣明苑	Synergis Management Services Limited - Kwong Ming Court
昇捷管理服務有限公司 – 年達園	Synergis Management Services Limited - Linden Height
昇捷管理服務有限公司 – 龍欣苑	Synergis Management Services Limited - Lung Yan Court
昇捷管理服務有限公司 – 馬寶花園	Synergis Management Services Limited - Marbella Garden
昇捷管理服務有限公司 – 悅海華庭	Synergis Management Services Limited - Marina Habitat
昇捷管理服務有限公司 – 美佳大廈	Synergis Management Services Limited - Miami Mansion
昇捷管理服務有限公司 – 鑑波樓	Synergis Management Services Limited - Mirror Marina
昇捷管理服務有限公司 – 景峰閣	Synergis Management Services Limited - Mountainville Court
昇捷管理服務有限公司 – 康福台 2 號	Synergis Management Services Limited - No 2 Comfort Terrace
昇捷管理服務有限公司 – 何文田街 3 號	Synergis Management Services Limited - No 3 Ho Man Tin Street
昇捷管理服務有限公司 – 歌和老街 7 至 11 號	Synergis Management Services Limited - No 7 - 11 Cornwall Street
昇捷管理服務有限公司 – 天后廟道 104 至 106 號	Synergis Management Services Limited - No 104 - 106 Tin Hau Temple Road
昇捷管理服務有限公司 – 棕月灣	Synergis Management Services Limited - Palm Beach
昇捷管理服務有限公司 – 柏雨花園	Synergis Management Services Limited - Parkview Garden
昇捷管理服務有限公司 – 明珠台	Synergis Management Services Limited - Pearl Gardens
昇捷管理服務有限公司 – 龍珠島東座別墅	Synergis Management Services Limited - Pearl Island Villas Eastern Block
昇捷管理服務有限公司 – 筆克大廈	Synergis Management Services Limited - Pico Tower
昇捷管理服務有限公司 – 松翠小築	Synergis Management Services Limited - Pine Villa
昇捷管理服務有限公司 – 寶明苑	Synergis Management Services Limited - Po Ming Court



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昇捷管理服務有限公司 – 麗沙灣別墅	Synergis Management Services Limited - Rise Park Villas
昇捷管理服務有限公司 – 樂怡小築	Synergis Management Services Limited - Rosary Villas
昇捷管理服務有限公司 – 豪峰嶺	Synergis Management Services Limited - Royal Knoll
昇捷管理服務有限公司 – 海悅花園	Synergis Management Services Limited - Serene Garden
昇捷管理服務有限公司 – 順豐大廈	Synergis Management Services Limited - Shun Fung Building
昇捷管理服務有限公司 – 銀巒閣	Synergis Management Services Limited - Sliver Crest
昇捷管理服務有限公司 – 香港浸會大學職員宿舍	Synergis Management Services Limited - SSQ HK Baptist University
昇捷管理服務有限公司 – 文星樓	Synergis Management Services Limited - Star Court
昇捷管理服務有限公司 – 新業大廈	Synergis Management Services Limited - Summit Industrial Building
昇捷管理服務有限公司 – 新興花園	Synergis Management Services Limited - Sun Hing Garden
昇捷管理服務有限公司 – 朗峰園	Synergis Management Services Limited - Symphony Garden
昇捷管理服務有限公司 – 菁雋	Synergis Management Services Limited - T Plus
昇捷管理服務有限公司 – 大埔花園	Synergis Management Services Limited - Tai Po Garden
昇捷管理服務有限公司 – 太和邨	Synergis Management Services Limited - Tai Wo Estate
昇捷管理服務有限公司 – 丹拿花園	Synergis Management Services Limited - Tanner Garden
昇捷管理服務有限公司 – 仁禮花園	Synergis Management Services Limited - The Crescent
昇捷管理服務有限公司 – 翠巒	Synergis Management Services Limited - The Green Villa
昇捷管理服務有限公司 – 天富苑	Synergis Management Services Limited - Tin Fu Court
昇捷管理服務有限公司 – 天平邨	Synergis Management Services Limited - Tin Ping Estate
昇捷管理服務有限公司 – 華貴邨	Synergis Management Services Limited - Wah Kwai Estate
昇捷管理服務有限公司 – 華泰工業大廈	Synergis Management Services Limited - Wah Tai Industrial Building
昇捷管理服務有限公司 – 宏龍工業大廈	Synergis Management Services Limited - Wang Lung Industrial Building
昇捷管理服務有限公司 – 和明苑	Synergis Management Services Limited - Wo Ming Court
昇捷管理服務有限公司 – 盈力工業中心	Synergis Management Services Limited - Yale Industrial Centre
昇捷管理服務有限公司 – 怡豐花園	Synergis Management Services Limited - Yee Fung Garden
昇捷管理服務有限公司 – 益發大廈	Synergis Management Services Limited - Yik Fat Building
昇捷管理服務有限公司 – 煜明方	Synergis Management Services Limited - Yuk Ming Court
昇捷管理服務有限公司 – 仁孚工業大廈	Synergis Management Services Limited - Zung Fu Industrial Building
太興集團控股有限公司	Tai Hing Group Holdings Limited
御金·國峯物業管理有限公司	The Coronation Estates Management Limited
霞明閣業主立案法團	The Incorporated Owners of Chermain Heights
星影匯	The Metroplex
棠記工程有限公司	Tong Kee Engineering Limited

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泰富物業管理有限公司 – 利南道 111 號 荃灣迪高保齡球館	Tylfull Realty Management Company Limited - 111 Lee Nam Road U.S. Dacos Bowling Centre (Tsuen Wan)
富城物業管理有限公司 – 郝德傑道 8 至 10 號	Urban Property Management Limited - 8 - 10 Caldecott Road
富城物業管理有限公司 – 何文田山道 23 號	Urban Property Management Limited - 23 Homantin Hill Road
富城物業管理有限公司 – 廣播道 87 至 91 號	Urban Property Management Limited - 87 - 91 Broadcast Drive
富城物業管理有限公司 – 銅鑼灣道 118 號	Urban Property Management Limited - 118 Tung Lo Wan Road
富城物業管理有限公司 – 均樂大廈	Urban Property Management Limited - A. Kun Lock Building
富城物業管理有限公司 – 學士臺停車場	Urban Property Management Limited - Academic Terrace (Car Park)
富城物業管理有限公司 – 荃威花園管業處	Urban Property Management Limited - Allway Gardens
富城物業管理有限公司 – 艾麗大廈	Urban Property Management Limited - Attilio Building
富城物業管理有限公司 – 盤谷銀行大廈	Urban Property Management Limited - Bangkok Bank Building
富城物業管理有限公司 – 富豪閣	Urban Property Management Limited - Beverley Heights
富城物業管理有限公司 – 波蒂妮斯大廈	Urban Property Management Limited - Bodynits Building
富城物業管理有限公司 – 長沙灣政府合署	Urban Property Management Limited - Cheung Sha Wan Government Offices
富城物業管理有限公司 – 青宏苑	Urban Property Management Limited - Ching Wang Court
富城物業管理有限公司 – 周大福商業中心	Urban Property Management Limited - Chow Tai Fook Centre
富城物業管理有限公司 – 嘉富麗苑	Urban Property Management Limited - Clovelly Court
富城物業管理有限公司 – 招商永隆銀行大廈	Urban Property Management Limited - CMB Wing Lung Bank Building
富城物業管理有限公司 – 深灣畔	Urban Property Management Limited - Deep Bay Grove
富城物業管理有限公司 – 金龍大廈	Urban Property Management Limited - Dragon Court
富城物業管理有限公司 – 伊利沙伯大廈	Urban Property Management Limited - Elizabethan Court
富城物業管理有限公司 – 前長沙灣屠房	Urban Property Management Limited - Ex-Cheung Sha Wan Abattoir
富城物業管理有限公司 – 鳳禮苑	Urban Property Management Limited - Fung Lai Court
富城物業管理有限公司 – 恒順園	Urban Property Management Limited - Handsome Court
富城物業管理有限公司 – 幸俊苑	Urban Property Management Limited - Hang Chun Court
富城物業管理有限公司 – 康睦庭園第一座	Urban Property Management Limited - Harmony Garden Block 1
富城物業管理有限公司 – 何文田政府合署	Urban Property Management Limited - Homantin Government Offices
富城物業管理有限公司 – 康利苑	Urban Property Management Limited - Hong Lee Court
富城物業管理有限公司 – 康樂大廈	Urban Property Management Limited - Hong Lok Mansion
富城物業管理有限公司 – 光明臺	Urban Property Management Limited - Illumination Terrace
富城物業管理有限公司 – 入境事務處李鄭屋員佐級職員宿舍	Urban Property Management Limited - Immigration Department Lei Cheng Uk Rank and File Staff Quarters

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富城物業管理有限公司 – 入境事務處職員宿舍	Urban Property Management Limited - Immigration Department Officers Quarters
富城物業管理有限公司 – 嘉隆苑管業處	Urban Property Management Limited - Ka Lung Court Management Office
富城物業管理有限公司 – 嘉田苑	Urban Property Management Limited - Ka Tin Court
富城物業管理有限公司 – 凱旋工商中心 (第一、二及三期)	Urban Property Management Limited - Kaiser Estate (Phase 1, 2 & 3)
富城物業管理有限公司 – 錦泰苑	Urban Property Management Limited - Kam Tai Court
富城物業管理有限公司 – 根德閣	Urban Property Management Limited - Kent Court
富城物業管理有限公司 – 嘉峰臺	Urban Property Management Limited - Kingsford Terrace
富城物業管理有限公司 – 九龍政府合署	Urban Property Management Limited - Kowloon Government Offices
富城物業管理有限公司 – 葵芳商業中心	Urban Property Management Limited - Kwai Fong Commercial Centre
富城物業管理有限公司 – 冠暉苑	Urban Property Management Limited - Kwun Fai Court
富城物業管理有限公司 – 冠熹苑	Urban Property Management Limited - Kwun Hei Court
富城物業管理有限公司 – 荔枝角政府合署	Urban Property Management Limited - Lai Chi Kok Government Offices
富城物業管理有限公司 – 龍豐花園	Urban Property Management Limited - Lung Fung Garden
富城物業管理有限公司 – 龍蟠苑(A至F座)	Urban Property Management Limited - Lung Poon Court (Blocks A-F)
富城物業管理有限公司 – 俊賢花園	Urban Property Management Limited - Lyttelton Garden
富城物業管理有限公司 – 萬年大廈	Urban Property Management Limited - Manning House
富城物業管理有限公司 – 萬豪閣	Urban Property Management Limited - Manrich Court
富城物業管理有限公司 – 循道衛理大廈	Urban Property Management Limited - Methodist House
富城物業管理有限公司 – 旺角政府合署	Urban Property Management Limited - Mong Kok Government Offices
富城物業管理有限公司 – 爾登豪庭	Urban Property Management Limited - Monte Carlton
富城物業管理有限公司 – 楠氏大廈	Urban Property Management Limited - Nairn House
富城物業管理有限公司 – 新世界大廈	Urban Property Management Limited - New World Tower
富城物業管理有限公司 – 畢架山一號	Urban Property Management Limited - One Beacon Hill
富城物業管理有限公司 – 君頤峰	Urban Property Management Limited - Parc Palais
富城物業管理有限公司 – 尚悅·方	Urban Property Management Limited - Park Reach
富城物業管理有限公司 – 名珠城	Urban Property Management Limited - Pearl City Plaza
富城物業管理有限公司 – 翠峰園	Urban Property Management Limited - Pine Court
富城物業管理有限公司 – 寶麗苑	Urban Property Management Limited - Po Lai Court
富城物業管理有限公司 – 博康邨	Urban Property Management Limited - Pok Hong Estate
富城物業管理有限公司 – 景峰花園	Urban Property Management Limited - Prime View Garden

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富城物業管理有限公司 – 培正道政府合署	Urban Property Management Limited - Pui Ching Road Government Offices
富城物業管理有限公司 – 帝后華庭	Urban Property Management Limited - Queen's Terrace
富城物業管理有限公司 – 海韻臺	Urban Property Management Limited - Rhine Terrace
富城物業管理有限公司 – 采頤花園	Urban Property Management Limited - Rhythm Garden
富城物業管理有限公司 – 龍華花園	Urban Property Management Limited - Ronsdale Garden
富城物業管理有限公司 – 金山花園	Urban Property Management Limited - San Francisco Towers
富城物業管理有限公司 – 御景臺	Urban Property Management Limited - Scenic Rise
富城物業管理有限公司 – 倚雲山莊	Urban Property Management Limited - Severn Hill
富城物業管理有限公司 – 深水埗政府合署	Urban Property Management Limited - Sham Shui Po Government Offices
富城物業管理有限公司 – 石硤尾職員宿舍	Urban Property Management Limited - Shek Kip Mei Staff Quarters
富城物業管理有限公司 – 聚安樓	Urban Property Management Limited - Silvercrest
富城物業管理有限公司 – 倚嶺南庭	Urban Property Management Limited - South Hillcrest
富城物業管理有限公司 – 南濤閣	Urban Property Management Limited - South Wave Court
富城物業管理有限公司 – 信基商業中心	Urban Property Management Limited - Southgate Commercial Centre
富城物業管理有限公司 – 穗禾苑	Urban Property Management Limited - Sui Wo Court
富城物業管理有限公司 – 科技中心	Urban Property Management Limited - Technology Plaza
富城物業管理有限公司 – 太興廣場	Urban Property Management Limited - Tern Plaza
富城物業管理有限公司 – 泓都	Urban Property Management Limited - The Merton
富城物業管理有限公司 – 帝景閣	Urban Property Management Limited - The Royal Court
富城物業管理有限公司 – 天麗苑	Urban Property Management Limited - Tin Lai Court
富城物業管理有限公司 – 天祐苑	Urban Property Management Limited - Tin Yau Court
富城物業管理有限公司 – 青州街海關人員宿舍	Urban Property Management Limited - Tsing Chau Street Customs Staff Quarters
富城物業管理有限公司 – 屯門怡樂花園	Urban Property Management Limited - Tuen Mun Elegance Gardens
富城物業管理有限公司 – 東駿苑	Urban Property Management Limited - Tung Chun Court
富城物業管理有限公司 – 爾登華庭	Urban Property Management Limited - Villa Carlton
富城物業管理有限公司 – 華聯工業中心	Urban Property Management Limited - Wah Luen Industrial Centre
富城物業管理有限公司 – 華成工商中心	Urban Property Management Limited - Wah Shing Centre
富城物業管理有限公司 – 宏昌大廈	Urban Property Management Limited - Wang Cheong Building
富城物業管理有限公司 – 西九龍紀律部隊宿舍	Urban Property Management Limited - West Kowloon Disciplined Services Quarters
富城物業管理有限公司 – 西九龍政府合署	Urban Property Management Limited - West Kowloon Government Offices



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富城物業管理有限公司 – 世和中心	Urban Property Management Limited - World Peace Centre
富城物業管理有限公司 – 油麻地停車場大廈	Urban Property Management Limited - Yaumatei Carpark Building (Carpark Floors Excluded)
富城物業管理有限公司 – 賢麗苑	Urban Property Management Limited - Yin Lai Court
富邦物業管理有限公司 – 蝶翠峰	Urban-Wellborn Property Management Limited - Sereno Verde
萬科物業服務(香港)有限公司	Vanke Service (Hong Kong) Company Limited
俊才系統有限公司	VTL-Solutions Limited
惠康環境服務有限公司 – 高鐵西九龍站	Waihong Environmental Services Limited - Express Rail Link West Kowloon Station
惠康環境服務有限公司 – 新城市廣場	Waihong Environmental Services Limited - New Town Plaza
惠康環境服務有限公司 – 大館	Waihong Environmental Services Limited - Tai Kwun
偉金建築有限公司	Welcome Construction Company Limited
香港西區隧道有限公司	Western Harbour Tunnel Company Limited
黃埔物業管理有限公司 – 白加道 28 號	Whampoa Property Management Limited - 28 Barker Road
黃埔物業管理有限公司 – 長輝路 99 號	Whampoa Property Management Limited - 99 Cheung Fai Road
黃埔物業管理有限公司 – 香港仔中心住宅	Whampoa Property Management Limited - Aberdeen Centre Residential
黃埔物業管理有限公司 – ac	Whampoa Property Management Limited - ac
黃埔物業管理有限公司 – 嘉樂苑	Whampoa Property Management Limited - Cameron House
黃埔物業管理有限公司 – 富麗苑	Whampoa Property Management Limited - Provident Villas
黃埔物業管理有限公司 – 藍澄灣商場	Whampoa Property Management Limited - Rambler Plaza
黃埔物業管理有限公司 – 海濱廣場	Whampoa Property Management Limited - The Harbourfront
黃埔物業管理有限公司 – 屈臣氏中心	Whampoa Property Management Limited - Watson Centre
黃埔體育會	Whampoa Sports Club
和興建築有限公司	Wo Hing Construction Company Limited
慶屋物業管理有限公司	Yoshiya Property Management Limited

## 各常務委員會之職能範圍

### Terms of Reference of Standing Committees

#### 甲、行政委員會

1. 就策略性規劃本會各項活動及倡議工作提供意見。
2. 審議及批核委員會項目及活動之財政預算。
3. 監督秘書處的運作，尤以人事及財政事宜為首。
4. 監督委員會之資訊保安全管理。

#### 乙、法例委員會

1. 監察《吸煙(公眾衛生)條例》及《定額罰款(吸煙罪)條例》的各項控煙措施之執行情況。
2. 檢討及向委員會建議與法例有關之適當行動。
3. 研究有效之方法以提升公眾對控煙法例之認識及鼓勵公眾遵守法例。

#### 丙、教育及宣傳委員會

1. 研究有效之方法以教育公眾有關吸煙與被動吸煙之禍害及向社區宣揚無煙生活方式之信息。
2. 策劃及組織大型之社區宣傳活動，以異化吸煙及宣揚戒煙信息。

#### A. Executive Committee

1. To advise COSH on the strategic planning of COSH programmes and initiatives.
2. To consider and endorse the budget of COSH projects and activities.
3. To oversee the functioning of COSH Secretariat, in particular staffing and financial matters.
4. To oversee the information security management of COSH.

#### B. Legislation Committee

1. To monitor the implementation of various tobacco control measures stipulated in the Smoking (Public Health) Ordinance and the Fixed Penalty (Smoking Offences) Ordinance.
2. To review and recommend to COSH appropriate action on legislative matters.
3. To consider ways and means to promote public awareness of the legislative requirements and encourage their compliance.

#### C. Education and Publicity Committee

1. To consider ways and means that can best educate the general public on the harm of smoking and passive smoking, and to promote a smoke-free lifestyle in the community.
2. To plan and organize territory-wide publicity campaigns to de-normalize smoking and promote smoking cessation.

3. 策劃及推行預防兒童及青少年吸煙之教育活動。
4. 監督宣傳物品之製作，包括：電視宣傳短片、海報、宣傳單張、紀念品及年報。
5. 檢討教育及宣傳活動之成效，並提出適切的改善方法。

## 丁、社區聯絡委員會

1. 與地區及社區組織保持聯繫，向他們推廣委員會之控煙及倡議工作。
2. 擔當委員會與社區在控煙工作上的聯繫點。
3. 與不同社區組織合作策劃及推行控煙項目及活動。

## 戊、資訊及研究委員會

1. 搜集及整理有關吸煙與健康之資料，並透過各種途徑傳遞給公眾。
2. 訂定調查研究項目及主題。
3. 就調查研究之設計及結果公佈提供意見。
4. 委託機構進行研究，並邀請機構就特定研究題目遞交計劃書；審查研究計劃書及向委員會推薦計劃以申請撥款。
5. 公佈調查研究結果，及建議跟進之工作。
6. 策劃及組織有關吸煙與健康的學術會議、研討會或工作坊。

3. To plan and implement education projects to prevent children and youth from taking up the habit of smoking.
4. To oversee the production of publicity materials such as TV Commercials, posters, leaflets, souvenirs and annual reports.
5. To evaluate the education and publicity campaigns and to initiate improvements where appropriate.

## D. Community Liaison Committee

1. To communicate with district and community groups on COSH's tobacco control works and initiatives.
2. To serve as a focal point for community liaison on matters related to COSH and tobacco control.
3. To partner with various community groups in the planning and implementation of tobacco control programmes and activities.

## E. Information and Research Committee

1. To collect and collate all information related to smoking and health and to disseminate such information through appropriate means and networks.
2. To identify appropriate themes of research and survey projects to be carried out.
3. To provide advice for the design of research and surveys and the subsequent presentation of results.
4. To commission out research projects; and to invite submission of research proposals on targeted research topics; to examine research proposals and recommend projects for funding to COSH.
5. To publicize the research/survey results and recommend follow-up actions having regard to such results.
6. To initiate and organize scientific conference, seminars or workshops on smoking and health research.

# 第八屆「戒煙大贏家」比賽

## 簡短戒煙建議、即時通訊輔導及主動轉介對戒煙的成效

陸子璿<sup>1</sup>, 王文炳<sup>1</sup>, 李浩祥<sup>1</sup>, 張懿德<sup>1</sup>,  
鄭祖盛<sup>2</sup>, 黎慧賢<sup>2</sup>, 林大慶<sup>3</sup>

<sup>1</sup> 香港大學護理學院

<sup>2</sup> 香港吸煙與健康委員會

<sup>3</sup> 香港大學公共衛生學院

### 1. 引言

雖然香港的吸煙率持續下降，但在 2017 年仍有約 615,000 名每日吸煙人士（佔總人口 10.0%）<sup>1</sup>，其中至少有一半會因吸煙而提早死亡<sup>2</sup>。香港每年有近 7,000 人因為吸煙或吸入二手煙所引致的疾病而死亡，造成高達約 56 億港元的經濟損失，相等於香港國民生產總值的 0.3%<sup>3</sup>。吸煙極易令人上癮，在沒有接受適當治療的情況下，大部分吸煙人士，尤其對尼古丁高度依賴的，都難以自行戒煙。另一方面，吸引無意戒煙的吸煙人士戒煙是一個挑戰。在香港，約有 68.8% 的每日吸煙人士未曾嘗試並無意戒煙<sup>1</sup>。研發新穎而簡短的戒煙干預，不僅能鼓勵及幫助吸煙人士戒煙，同時對改善公共衛生非常重要。

戒煙比賽能在社區透過提供獎品及獎金予成功戒煙的參加者，從而鼓勵吸煙人士戒煙<sup>4</sup>。香港吸煙與健康委員會（委員會）與香港大學護理學院和公共衛生學院每年合作舉辦「戒煙大贏家」無煙社區計劃，其目標包括（1）鼓勵吸煙人士戒煙；（2）動員非吸煙人士支持其身邊吸煙人士戒煙；（3）推動社區人士關注煙草禍害及支持地區控煙工作；及（4）發展及強化無煙社區推廣，共建無煙香港。自 2009 年以來（2011 年除外），已舉辦共七屆「戒煙大贏家」比賽，在社區成功吸引了逾 8,000 名吸煙人士戒煙。「戒煙大贏家」比賽亦提供了一個獨特的平台來進行隨機對照試驗研究（RCT），設計、評估和改善新穎的戒煙干預措施，幫助社區吸煙人士戒煙<sup>4</sup>。

運用手機提供戒煙支援是戒煙治療中的新興領域<sup>5</sup>。一項 2016 年的 Cochrane 系統文獻回顧發現，透過手機進行的

戒煙干預（主要透過短訊服務（SMS）提供）能使戒煙成功率增加約 70%<sup>6</sup>。即時通訊程式（如 WhatsApp 或微信等）能透過互聯網實時發送和收取文字訊息、表情符號、語音訊息和多媒體檔案，並已逐漸超越短訊服務，成為最廣泛使用的訊息傳遞工具<sup>7</sup>。一項在香港進行的大眾研究發現，成年人減少吸煙行為與透過即時通訊接收健康資訊有關<sup>8</sup>。另外，一項在東華三院戒煙綜合中心進行的隨機對照試驗發現，WhatsApp 線上支援小組可以有效防止近期戒煙人士復吸<sup>9</sup>。然而，透過即時通訊程式為吸煙人士提供更個人化和互動性的戒煙支援能否進一步提高戒煙率，仍然有待研究。

雖然使用戒煙服務能有效提高戒煙率，但在香港卻未得到充分利用。在 2017 年，只有 2.3% 的現時吸煙人士曾使用過戒煙服務<sup>1</sup>。在 2015 年第六屆「戒煙大贏家」比賽的隨機對照試驗研究提供了有力的證據，表明主動轉介參加者到戒煙服務能有效提高戒煙服務的使用和戒煙率<sup>10</sup>。其後，在 2016 年第七屆「戒煙大贏家」比賽評估了不同強度的主動轉介干預<sup>11</sup>，亦得到相同的結果。由此可見，主動轉介是提高社區戒煙服務使用和戒煙率的重要干預措施。

在 2017 年，委員會與香港大學、18 區區議會、17 個地區合作夥伴和 15 個支持機構合作舉辦第八屆「戒煙大贏家」比賽，並進行了一項兩組比較的隨機對照試驗研究，以評估簡短戒煙建議（AWARD）結合即時通訊輔導及主動轉介對增加戒煙成功率的成效。



## 2. 方法

### 2.1 招募詳情

在 2017 年 6 月 18 日至 9 月 30 日期間，委員會在全港 18 區舉辦了共 68 場招募活動。受過訓練的無煙大使於招募活動中主動接觸社區內的吸煙人士，邀請合資格的吸煙人士參加「戒煙大贏家」比賽和隨機對照試驗研究，並根據研究分組進行戒煙干預。隨機對照試驗的詳細研究方法已在一份國際同行評審的學術期刊中發表<sup>12</sup>。

參加隨機對照試驗研究的資格包括：

1. 年滿 18 歲及持有效香港身份證；
2. 在過去三個月每天吸食至少一支煙或以上；
3. 懂廣東話及閱讀中文；
4. 一氧化碳呼氣測試結果達 4 ppm 或以上；
5. 打算戒煙或減少吸煙；
6. 使用已安裝了即時通訊應用程式（如 WhatsApp）的手機；和
7. 能夠使用即時通訊應用程式進行溝通

所有合資格參加者必須先簽署書面同意後，才可以接受其研究分組的干預措施。

每場招募活動被隨機分成干預組或對照組（1:1）。在同一場招募活動所招募的參加者都得到相同的干預措施，以防止干預污染（Intervention contamination）。沒有參與招募工作的主要研究員使用微軟 Excel 分配順序，並設立大小為 2、4 或 6 隨機排列的區組，以確保每個研究組別所招募的人數能夠平均。無煙大使在招募活動當天才獲知分組情況。負責評估研究結果的人員則不會知道隨機分組的情況。

參加者在招募時可以選擇參加「戒煙大贏家」大抽獎組別或「戒煙大使」組別。大抽獎組別中，五名於三個月跟進時成功戒煙和通過生物化學測試的參加者，各贏取價值港幣 10,000 元的購物禮券。另外，「戒煙大使」組別中，有三名成功通過生物化學測試證實戒煙的參加者接受了委員會的邀請參加遴選面試，並成為「戒煙大贏家」得主。冠軍獲得價值港幣 25,000 元的澳洲旅遊禮券，亞軍及季軍則分別獲得價值港幣 15,000 元的新加坡旅遊禮券及港幣 10,000 元的泰國旅遊禮券。

### 2.2 戒煙干預與跟進

**干預組：**無煙大使在招募時，使用 AWARD 方法<sup>12,13</sup>，為參加者提供即場面對面的簡短戒煙建議，並於往後通過即時通訊發送。AWARD 方法包括：(1) 詢問吸煙及戒煙史 (Ask)；(2) 使用一氧化碳呼氣測試結果及健康警示宣傳單張忠告吸煙的害處 (Warn)；(3) 建議參加者儘快戒煙 (Advice)；(4) 轉介參加者至現有戒煙服務 (Refer)；及 (5) 通過即時通訊程式重覆以上步驟 (Do-it-again)。每位參加者均獲得一張健康警示宣傳單張，內容涵蓋了吸煙對世界和香港所構成的負擔，因吸煙和二手煙引致的相關疾病列表以及衛生署綜合戒煙熱線 1833 183 等相關資訊。該單張內容亦包含三個聲明 (1)「世界衛生組織警告，每兩個吸煙人士便有一個死於吸煙」；(2)「最新研究指出，每三個年輕時開始吸煙、煙量大或煙齡長的吸煙人士，便有兩個死於吸煙」；和 (3)「吸煙人士的平均壽命比非吸煙人士短十年」。

干預組的參加者於招募後，透過 WhatsApp 獲得為期三個月的即時通訊戒煙輔導。干預的設計和內容是根據一項對象為香港現時吸煙人士的焦點小組研究結果所制定<sup>14</sup>。戒煙輔導員能夠透過即時通訊與參加者溝通，並提供實時個人化的戒煙建議和資訊。輔導員根據參加者的特徵（姓氏，年齡和性別）和吸煙行為（每天的吸煙量和戒煙意願）提供個人化的戒煙支援。輔導員亦可以監察參加者的戒煙或減煙進度，並相應調整干預的內容。另外，參加者能夠收取有關已預約戒煙服務的詳情（如戒煙服務的聯絡方式和地址，預約日期和時間）。參加者可以隨時向輔導員發送訊息，輔導員則在辦公時間（星期一至星期五，上午 9 時 30 分至下午 6 時 30 分）內回覆。

戒煙輔導員根據特定的時間表，透過即時通訊向參加者定時發送 16 則的普通訊息，以展開和促進戒煙輔導員與參加者之間的互動：

- 基線調查至第一個月：每週發送二則訊息
- 第一個月至第二個月：每兩週發送三則訊息
- 第二個月至第三個月：每週發送一則訊息

是次研究使用的定期訊息是根據第七屆「戒煙大贏家」比賽中使用過的訊息及焦點小組研究的結果<sup>14</sup>制定。訊息的內容包括鼓勵性的說話、戒煙或減煙策略、預防和處理煙癮的方法、戒煙的好處和鼓勵使用衛生署綜合戒煙熱線（1833 183）的戒煙服務。參加者亦會在第一、二、三和六個月收到有關參與電話跟進的提示訊息，合共收到 20 則訊息。

干預組的參與者亦會於招募時獲主動轉介至戒煙服務。與第六屆「戒煙大贏家」比賽一樣，無煙大使使用戒煙熱線卡向參加者介紹香港現有的戒煙服務，包括 (1) 衛生署綜合戒煙熱線、(2) 東華三院戒煙綜合服務中心、(3) 醫院管理局戒煙診所、(4) 博愛醫院中醫戒煙服務、(5) 香港大學青少年戒煙熱線和女性戒煙熱線，並鼓勵參加者選擇其中一項服務，及填寫主動轉介表。取得參加者的同意後，他們的聯絡資料將轉交至他們所選擇的戒煙服務，以提供進一步的戒煙治療。

**對照組：**參加者在招募時獲得非常簡短的戒煙建議，並在第一、二、三和六個月透過短訊服務 (SMS) 收到一則有關電話跟進的提示短訊。另外，所有參加者於招募時亦會獲派發一本由委員會設計、12 頁的「踏出第一步」自助戒煙小冊子。

**非研究組別：**「戒煙大使」組別、沒有安裝即時通訊程式的手機、無法閱讀中文或以中文溝通、或於特定工作場所招募的參加者，會被分配到「非研究組」。在同一活動上招募到的非研究組別參加者會獲得與隨機對照試驗研究的參加者相同的戒煙干預，他們在三個月及六個月時通過生物化學測試後亦可獲得相同的獎金。

所有參加者於第一、二、三和六個月接受共四次的電話跟進訪問。為提高跟進的參與率，成功完成全部四次跟進的參加者可額外獲得港幣 100 元的現金獎勵。每名參加者於每次電話跟進時收到最多七次的來電及一個語音訊息，如仍然未能聯絡上，將會被列為是次跟進的失訪個案。在三個月和六個月跟進時自我報告已成功戒煙的參加者（在過去七天內完全沒有吸煙）會獲邀請進行生物化學測試（一氧化碳呼氣測試和可的寧口水測試），以核實戒煙情況。所有通過測試的參加者可獲得港幣 500 元的現金獎勵。

研究的主要結果為三個月及六個月電話跟進時自我報告過去七天內完全沒有吸煙的戒煙率。次要結果包括：在三個月和六個月跟進時 (1) 經生物化學測試核實的戒煙率；(2) 與基線調查比較，減少吸煙量達一半或以上的比率；(3) 自我報告嘗試戒煙（戒煙達 24 小時或以上）的比率；和 (4) 使用戒煙服務的情況。

所有參加者（總數 = 1,311）於基線調查時的人口特徵及吸煙情況會在報告中描述。我們通過卡方檢驗比較了兩個研究組別的主要和次要結果。我們採用治療意向分析法進行分析，假設數據缺失參加者的吸煙行為於基線調查後沒有變化，亦採用完整資料個案分析，將失訪的參與者排除在外。我們還評估參加者使用戒煙服務的情況、戒煙認知的改變、

戒煙嘗試及其原因、退癮徵狀、戒煙時得到的社交支持、戒煙輔助工具的使用和對電話跟進的意見。

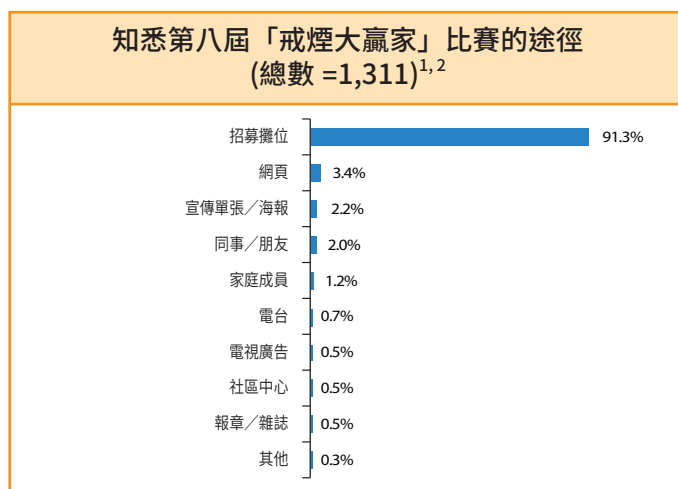
### 3. 結果

在第八屆「戒煙大贏家」比賽的 68 場招募活動中，約 155,000 名市民曾行經「戒煙大贏家」的招募攤位，其中超過 9,400 人查詢戒煙資訊、詢問比賽詳情或參與招募活動中的遊戲攤位。48 名接受過培訓的無煙大使於現場協助進行推廣和招募活動，共接觸了約 2,700 名吸煙人士和約 9,000 名非吸煙人士。

在 1,347 名招募到的吸煙人士當中，有 12 人 (0.9%) 不符合參加比賽的資格。排除 24 位 (1.8%) 合資格但拒絕參加比賽的吸煙人士後，共有 1,311 名 (97.3%) 吸煙人士參加了「戒煙大贏家」比賽。當中共有 1,185 名 (90.4%) 參加者參與隨機對照試驗研究，並被隨機分配至干預組 (591 人) 或對照組 (594 人)。非研究組別的參加者會作獨立分析，當中包括 72 名 (5.5%) 參加「戒煙大使」組別的參加者，以及 54 名 (4.1%) 手機沒有安裝即時通訊程式、無法以中文溝通或於特定工作場所招募的參加者。

大部分參加者主要透過招募攤位 (91.3%) 知悉第八屆「戒煙大贏家」比賽（圖一）。其次的知悉途徑包括網站 (3.4%)、傳單／海報 (2.2%) 以及同事／朋友 (2.0%)。

圖一



<sup>1</sup> 沒有顯示缺失數據

<sup>2</sup> 參加者可選擇多於一個答案

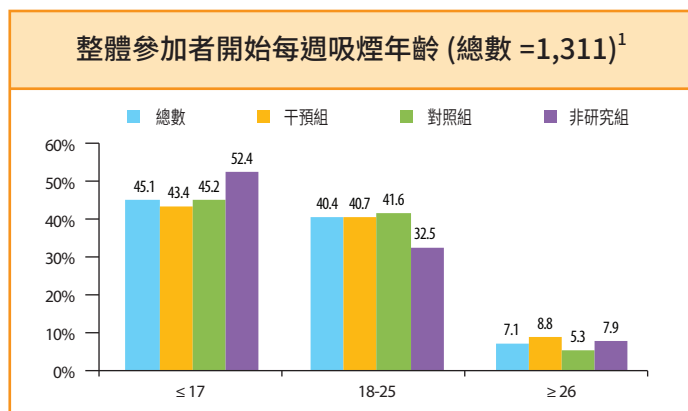
### 3.1 基線人口特徵

參加者的年齡為 18 歲至 94 歲，平均為 42.1 歲（標準差 =14.6），大多數為男性（78.1%）。在排除缺失數據的參加者後，60.2% 的參加者已婚，39.6% 與至少一個孩子同住；近半具有高中或以上學歷（67.3%）、居住在租住公共房屋（48.2%）、家庭每月收入低於港幣 20,000 元（44.6%）；大多數為在職人士（81.4%）（表一）。

### 3.2 吸煙概況

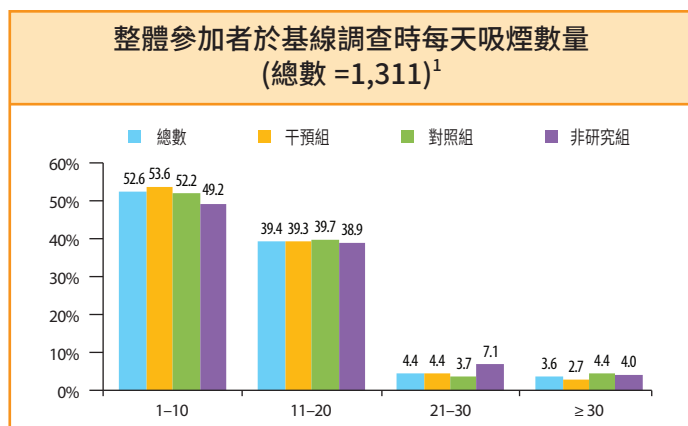
參加者開始吸煙的平均年齡為 18.2 歲（標準差 =5.7），其中 45.1% 的參加者在 18 歲前開始每週吸煙（圖二）。參加者平均煙齡為 24.0 年（標準差 =14.6），平均每日吸食 13.9 支捲煙（標準差 =8.8）。超過一半的參加者（52.6%）每天吸食少於 10 支捲煙（圖三）。

圖二



<sup>1</sup> 沒有顯示缺失數據

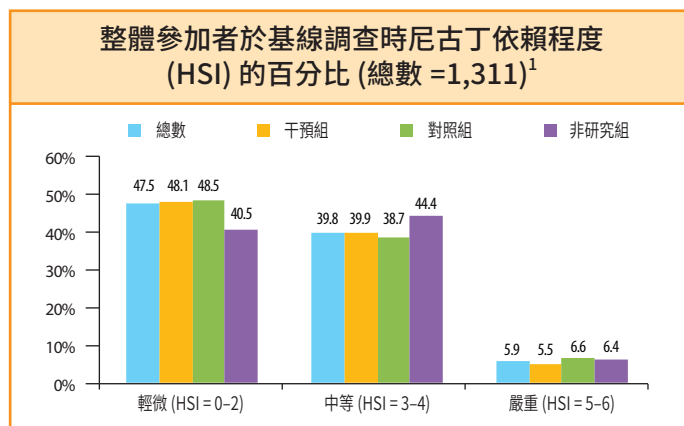
圖三



<sup>1</sup> 沒有顯示缺失數據

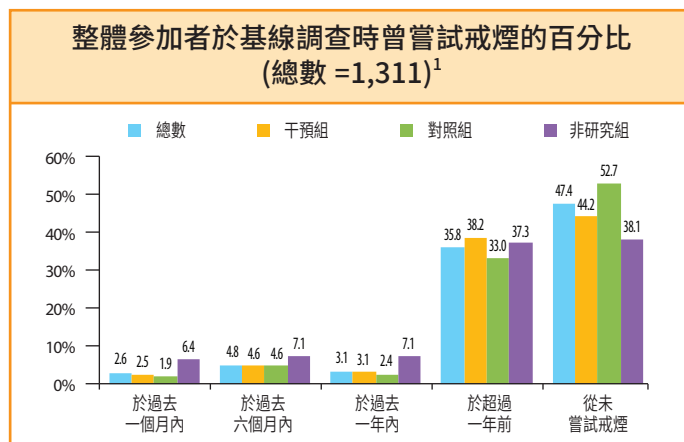
大約三分之一的參加者（33.0%）在起床後的五分鐘內吸食第一支煙。依據吸煙嚴重度指數（Heaviness of Smoking Index, HSI），約半數參加者的尼古丁依賴程度為中等至嚴重（45.7%）（圖四），亦有約半數從未嘗試戒煙（47.4%）（圖五），亦無意於基線調查後的 30 天內戒煙（61.3%）（圖六）。相比於隨機對照試驗組別，有更多非研究組別的參加者計劃於基線調查後七天內戒煙（p 值 <0.001）。

圖四



<sup>1</sup> 沒有顯示缺失數據

圖五



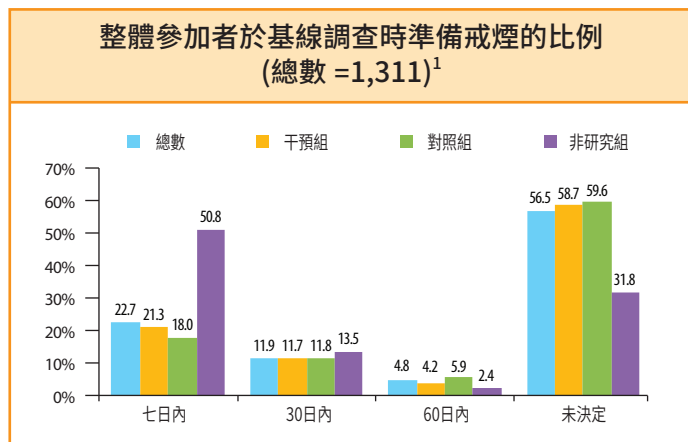
<sup>1</sup> 沒有顯示缺失數據

表一 參加者基線人口特徵 (總數 = 1,311)

人數 (%)	總數 (人數 =1,311)	非研究組 (人數 =126)	干預組 (人數 =591)	對照組 (人數 =594)
年齡，平均值 (標準差)，歲	42.1 ± 14.6	47.1 ± 18.5	40.6 ± 13.4	42.5 ± 14.5
性別				
男性	1,024 (78.1)	106 (84.1)	450 (76.1)	468 (78.8)
女性	287 (21.9)	20 (15.9)	141 (23.9)	126 (21.2)
婚姻狀況				
單身	327 (24.9)	43 (34.1)	154 (26.1)	130 (21.9)
已婚／同居	553 (42.2)	54 (42.9)	243 (41.1)	256 (43.1)
其他	39 (3.0)	7 (5.6)	13 (2.2)	19 (3.2)
缺失數據	392 (29.9)	22 (17.5)	181 (30.6)	189 (31.8)
與十八歲以下的子女同住				
是	328 (25.0)	28 (22.2)	140 (23.7)	160 (26.9)
否	501 (38.2)	66 (52.4)	223 (37.7)	212 (35.7)
缺失數據	482 (36.8)	32 (25.4)	228 (38.6)	222 (37.4)
教育程度				
沒有正式接受教育	19 (1.5)	8 (6.3)	6 (1.0)	5 (0.8)
小學程度	72 (5.5)	17 (13.5)	19 (3.2)	36 (6.1)
初中程度	179 (13.7)	14 (11.1)	74 (12.5)	91 (15.3)
高中程度	379 (28.9)	27 (21.4)	191 (32.3)	161 (27.1)
大專或以上	176 (13.4)	32 (25.4)	75 (12.7)	69 (11.6)
缺失數據	486 (37.1)	28 (22.2)	226 (38.2)	232 (39.1)
就業情況				
學生	22 (1.7)	6 (4.8)	7 (1.2)	9 (1.5)
在職人士	753 (57.4)	58 (46.0)	356 (60.2)	339 (57.1)
待業	39 (3.0)	9 (7.1)	14 (2.4)	16 (2.7)
家庭主婦	23 (1.8)	4 (3.2)	12 (2.0)	7 (1.2)
退休	88 (6.7)	25 (19.8)	26 (4.4)	37 (6.2)
缺失數據	386 (29.4)	24 (19.0)	176 (29.8)	186 (31.3)
家庭每月收入 (港幣)				
少於 10,000	110 (8.4)	26 (20.6)	42 (7.1)	42 (7.1)
10,000–19,999	233 (17.8)	26 (20.6)	114 (19.3)	93 (15.7)
20,000–29,999	177 (13.5)	7 (5.6)	80 (13.5)	90 (15.2)
30,000–39,999	108 (8.2)	5 (4.0)	48 (8.1)	55 (9.3)
40,000 或以上	141 (10.8)	22 (17.5)	59 (10.0)	60 (10.1)
缺失數據	542 (41.3)	40 (31.7)	248 (42.0)	254 (42.8)
居住情況				
租住公共房屋	408 (31.1)	50 (39.7)	170 (28.8)	188 (31.6)
自置公共房屋	42 (3.2)	4 (3.2)	16 (2.7)	22 (3.7)
自置居屋計劃	101 (7.7)	14 (11.1)	41 (6.9)	46 (7.7)
租住私人房屋	124 (9.5)	14 (11.1)	55 (9.3)	55 (9.3)
自置私人房屋	132 (10.1)	15 (11.9)	65 (11.0)	52 (8.8)
其他	39 (3.0)	4 (3.2)	22 (3.7)	13 (2.2)
缺失數據	465 (35.5)	25 (19.8)	222 (37.6)	218 (36.7)



圖六



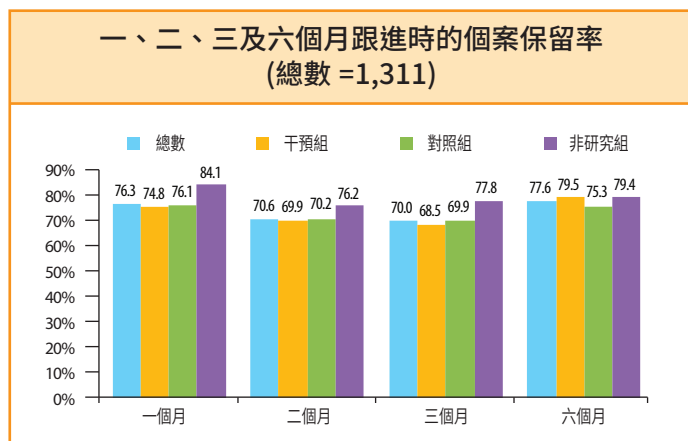
<sup>1</sup> 沒有顯示缺失數據

### 3.3 一、二、三及六個月電話跟進結果

#### 個案保留率

第一、二、三和六個月跟進訪問的整體個案保留率分別為 76.3%、70.6%、70.0% 和 77.6%。干預組與對照組於第一個月(74.8% 比 76.1%； $p$  值 = 0.60)、第二個月(69.9% 比 70.2%； $p$  值 = 0.91)、第三個月(68.5% 比 69.9%； $p$  值 = 0.62)和第六個月(79.5% 比 75.3%； $p$  值 = 0.079)的保留率並無顯著差異(圖七)。

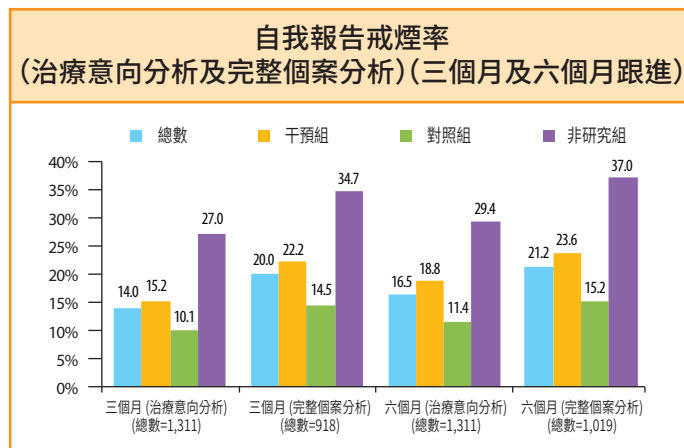
圖七



### 主要結果：三個月及六個月跟進的自我報告戒煙率

根據治療意向分析，三個月和六個月跟進時的整體自我報告戒煙率(在過去七天內完全沒有吸煙)分別為 14.0% 和 16.5%。干預組於三個月(15.2% 比 10.1%； $p$  值 = 0.008)和六個月(18.8% 比 11.4%； $p$  值 < 0.001)的自我報告戒煙率都顯著高於對照組約 50% 至 65%。完整個案分析亦得出類似的結果(圖八)。

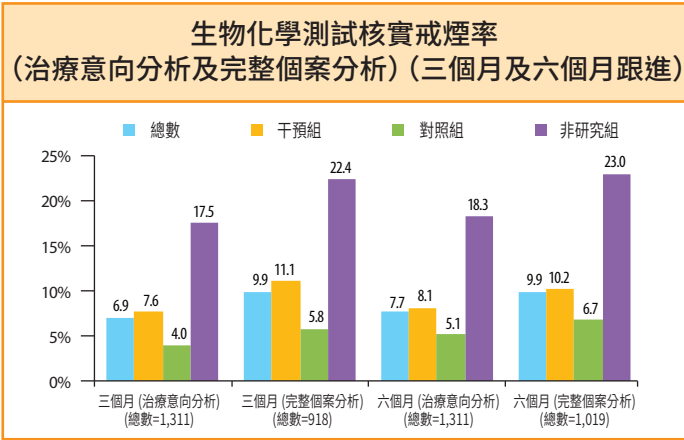
圖八



三個月及六個月跟進的生物化學測試核實的戒煙率

治療意向分析顯示，整體在三個月及六個月的生物化學測試核實的戒煙率分別為 6.9% 及 7.7%。干預組在三個月 (7.6% 比 4.0%; p 值 =0.009) 和六個月 (8.1% 比 5.1%; p 值 =0.033) 的核實戒煙率顯著高於對照組約 60% 至 90%。完整個案分析亦得到類似的結果 (圖九)。

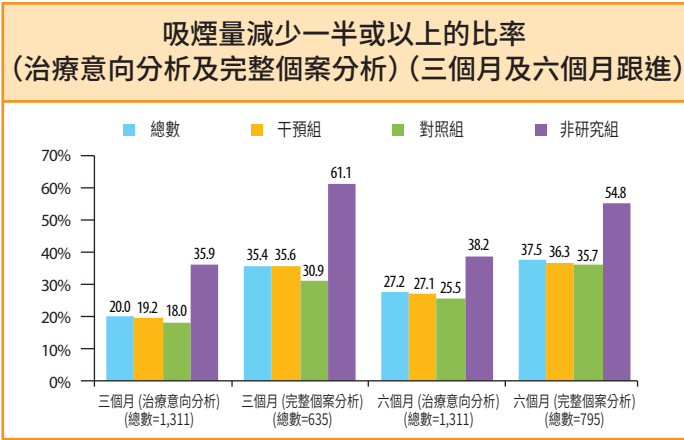
圖九



三個月和六個月跟進的減煙率

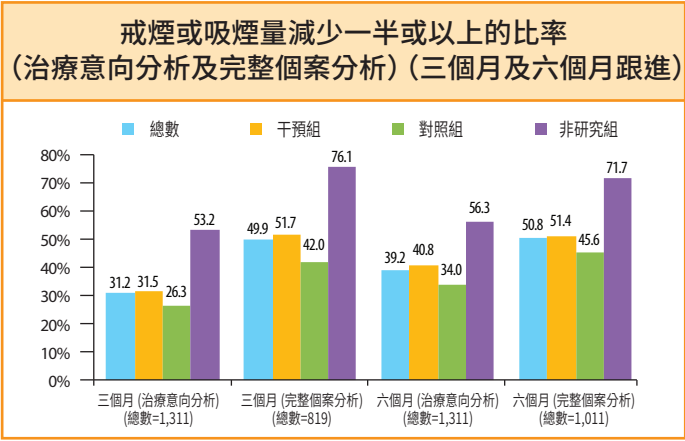
根據治療意向分析，整體有 20.0% 和 27.2% 未能成功戒煙的參加者分別在三個月和六個月時的吸煙量比基線調查時減低了至少一半 (圖十)。雖然干預組在所有跟進的減煙率都比對照組稍高，但差異並不顯著 (所有 p 值 >0.05)。

圖十



根據治療意向分析，整體參加者在三個月和六個月的戒煙或減煙比率分別為 31.2% 和 39.2% (圖十一)。干預組於三個月 (31.5% 比 26.3%; p 值 =0.048) 和六個月 (40.8% 比 34.0%; p 值 =0.016) 的戒煙或減煙率，均顯著高於對照組。完整個案分析亦得到相似的結果。

圖十一



戒煙服務的使用情況 (一、二、三及六個月跟進)

根據隨機對照試驗研究的設計，只有干預組的參加者獲主動轉介至戒煙服務。在整個研究期間，共有 26.3% 的整體參加者曾要求轉介至戒煙服務 (表二)。總累計請求轉介次數為 345 次，當中干預組的次數為 292 次，而對照組則為 13 次。

表二 整體參加者的轉介情況 (總數 =1,311)

	總數 (人數 =1,311)	干預組 (人數 =591)	對照組 (人數 =594)	非研究組 (人數 =126)
曾要求轉介至戒煙服務	345 (26.3)	292 (49.4)	13 (2.2)	40 (31.7)

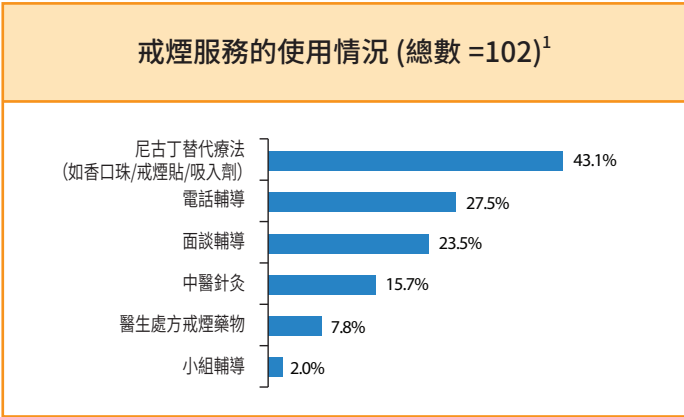
曾使用戒煙服務的參加者人數隨著跟進時間增加。於六個月跟進時，有 11.5% 的整體參加者曾使用過至少一次戒煙服務 (表三)。在所有跟進中，干預組的累計戒煙服務使用率都顯著高於對照組 (所有 p 值 <0.001)。

表三 戒煙服務使用情況 (總數 =1,311)

	總數 (人數 =1,311)	干預組 (人數 =591)	對照組 (人數 =594)	非研究組 (人數 =126)
一個月	78 (6.0)	56 (9.5)	8 (1.4)	14 (11.1)
二個月	108 (8.2)	76 (12.9)	11 (1.9)	21 (16.7)
三個月	127 (9.7)	91 (15.4)	13 (2.2)	23 (18.3)
六個月	151 (11.5)	102 (17.3)	23 (3.9)	26 (20.6)

在 102 名曾使用戒煙服務的干預組參加者中，最常用的服務為尼古丁替代療法 (43.1%)，其次為電話輔導 (27.5%) 和面談輔導 (23.5%) (圖十二)。

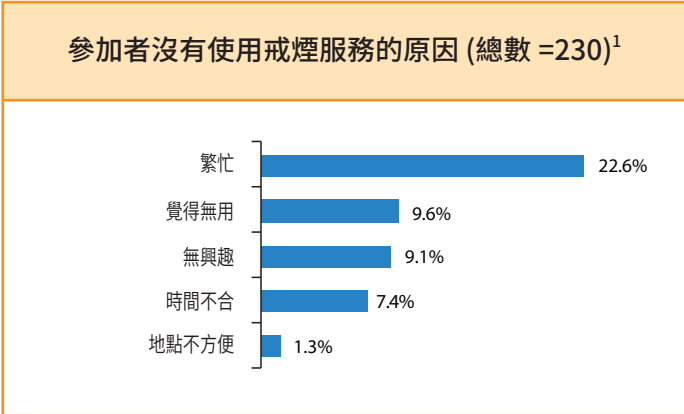
圖十二



<sup>1</sup> 參加者可選擇多於一個答案

在一個月跟進時，230 名干預組參加者沒有使用戒煙服務，首要原因為「繁忙」(22.6%)，其次為「覺得無用」(9.6%)、「無興趣」(9.1%)、「時間不合」(7.4%)、「地點不方便」(1.3%) (圖十三)。

圖十三



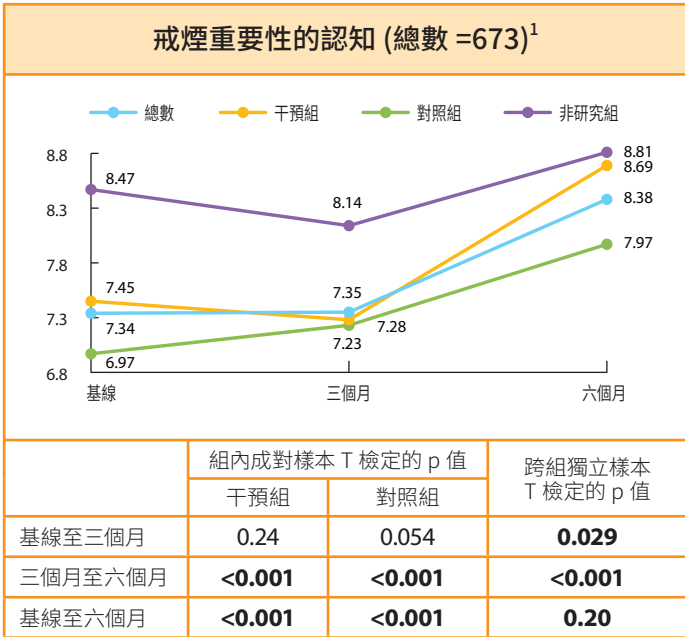
<sup>1</sup> 參加者可選擇多於一個答案

戒煙的自我效能

戒煙重要性的認知

在基線調查、三個月及六個月跟進時均提供了完整數據的參加者中，戒煙重要性認知的整體平均分雖然於基線調查和三個月跟進相近 (7.34 至 7.35；p 值 =0.91)，但是於三個月跟進至六個月跟進之間顯著增加 (7.35 至 8.38；p 值 <0.001)。兩個研究組別的戒煙重要性認知平均分從三個月跟進至六個月跟進之間，及從基線調查至六個月跟進之間顯著增加 (所有 p 值 < 0.001)，干預組增加的幅度比對照組顯著更高 (p 值 < 0.001) (圖十四)。

圖十四

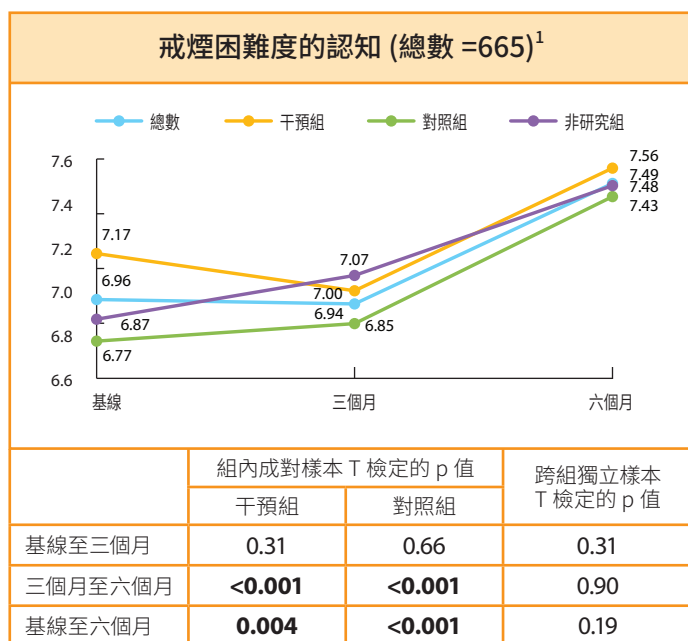


<sup>1</sup> 由 0 分 (完全不重要) 至 10 分 (非常重要)；缺失數據排除在外。

## 戒煙困難度的認知

在基線調查、三個月及六個月跟進均回答了相關問題的參加者中，戒煙困難度認知的整體平均分於基線調查和三個月跟進時相近（由 6.96 至 6.94； $p$  值 = 0.86），其後於三個月跟進至六個月跟進之間顯著增加（6.94 至 7.49； $p$  值 < 0.001）。干預組和對照組的平均分都從三個月跟進至六個月跟進之間，及基線調查至六個月跟進之間顯著增加（所有  $p$  值 ≤ 0.004），其增加幅度在兩組間並無顯著差異（ $p$  值 = 0.19 至 0.90）（圖十五）。

圖十五

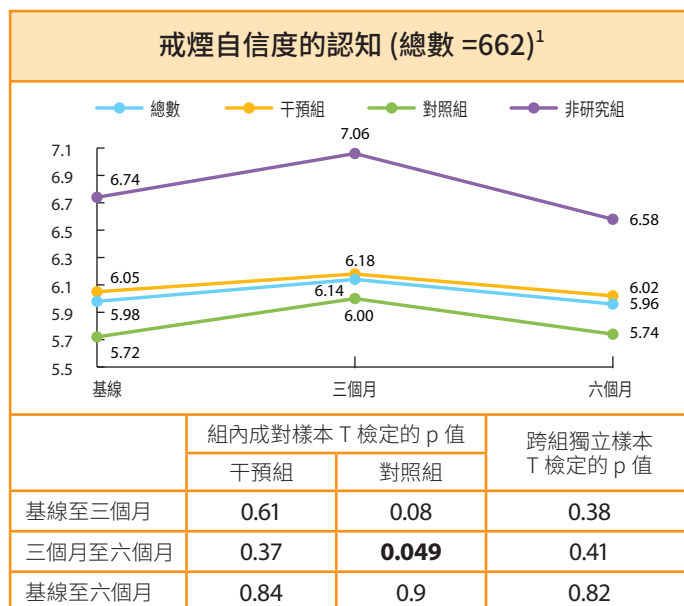


<sup>1</sup> 由 0 分（完全沒有困難）至 10 分（非常困難）；缺失數據排除在外。

## 戒煙自信度的認知

在提供了完整數據的參加者中，戒煙自信度認知的整體平均分雖然在基線調查和三個月跟進之間（5.98 至 6.14； $p$  值 = 0.062）以及基線調查和六個月跟進之間（5.98 至 5.96； $p$  值 = 0.84）沒有顯著改變，但是在三個月跟進和六個月跟進之間顯著下降（6.14 至 5.96； $p$  值 = 0.010）。對照組的平均分於三個月跟進至六個月跟進時顯著下降（6.00 至 5.74； $p$  值 = 0.049）。研究期間，平均分的改變在組間比較中沒有顯著差異（ $p$  值 = 0.38 至 0.82）（圖十六）。

圖十六

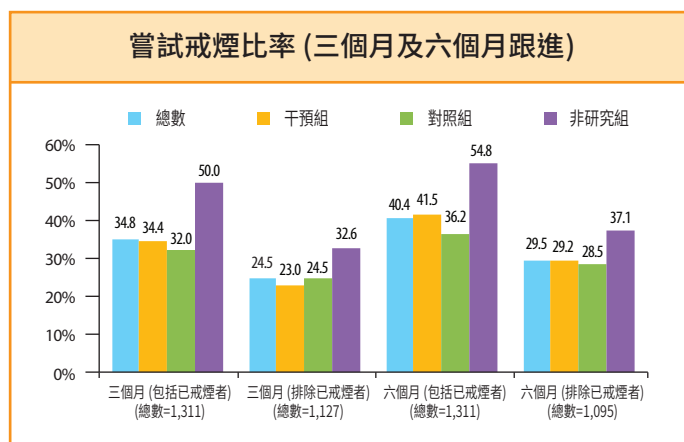


<sup>1</sup> 由 0 分（完全沒有信心）至 10 分（非常有信心）；缺失數據排除在外。

## 三個月及六個月跟進的嘗試戒煙比率

根據治療意向分析，分別有 34.8% 和 40.4% 的參加者在基線調查後三個月和六個月內曾作至少一次戒煙嘗試（圖十七）。在未能成功戒煙者當中，三個月和六個月的嘗試戒煙比率為 24.5% 和 29.5%。不管有否計算成功戒煙者在內，干預組的嘗試戒煙比率在三個月和六個月跟進時均稍高於對照組，但差異並不顯著（ $p$  值 = 0.063 至 0.82）。

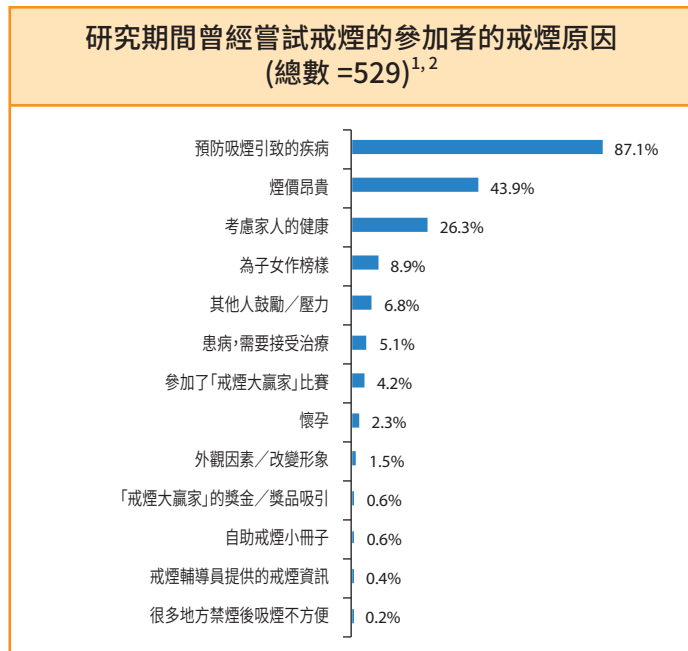
圖十七





在研究期間曾作至少一次戒煙嘗試的參加者中，戒煙的主要原因為「預防吸煙引致的疾病」(87.1%)，其次是「煙價昂貴」(43.9%)及「考慮家人的健康」(26.3%)(圖十八)。戒煙原因在干預組和對照組間並沒有顯著差異(所有  $p$  值  $> 0.05$ )。

圖十八

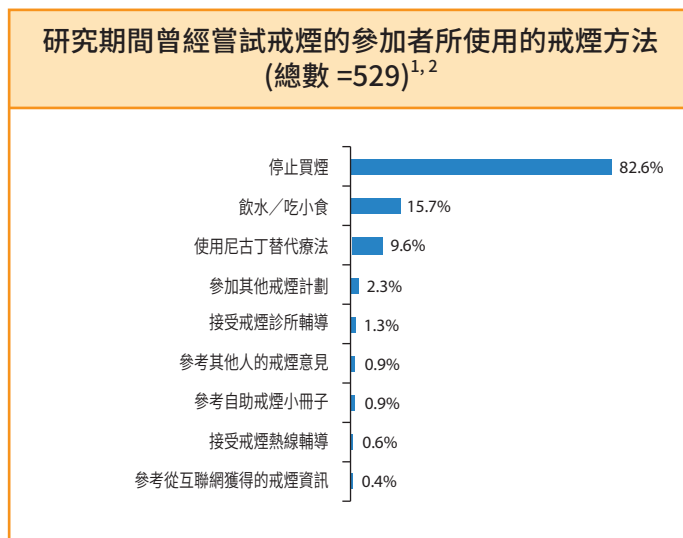


<sup>1</sup> 失訪數據被排除在外

<sup>2</sup> 參加者可選擇多於一個答案

所有在研究期間曾作至少一次戒煙嘗試的參加者都有使用特定的方法戒煙。最常見的方法包括「停止買煙」(82.6%)、「飲水／吃小食」(15.7%)和「使用尼古丁替代療法」(9.6%)(圖十九)。

圖十九

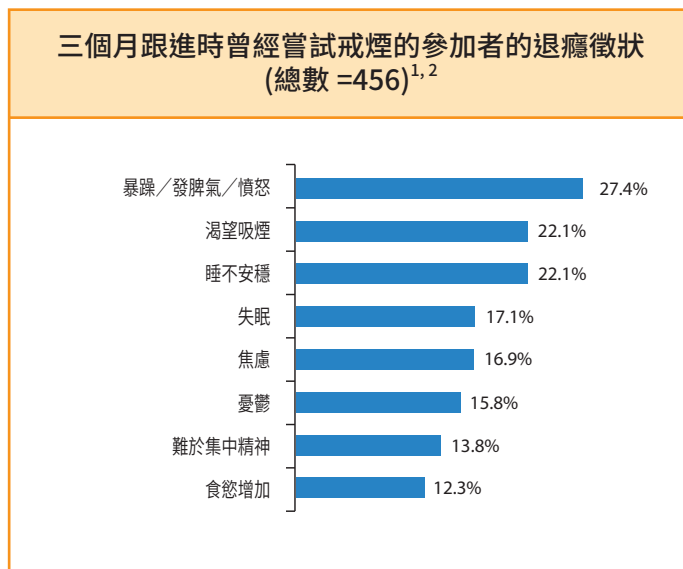


<sup>1</sup> 失訪數據被排除在外

<sup>2</sup> 參加者可選擇多於一個答案

在一、二和三個月跟進訪問時評估了參加者的退癮症狀。在三個月內曾作至少一次戒煙嘗試的參加者中，60.1%表示曾經歷過退癮症狀。最普遍的退癮症狀為「暴躁／發脾氣／憤怒」(27.4%)，其次為「渴望吸煙」(22.1%)和「睡不安穩」(22.1%)(圖二十)。

圖二十



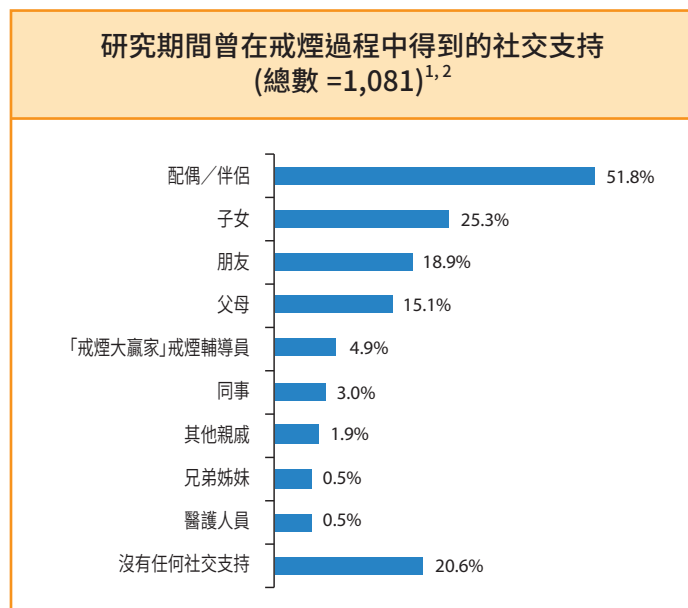
<sup>1</sup> 失訪數據被排除在外

<sup>2</sup> 參加者可選擇多於一個答案

## 戒煙過程中的社交支持

在研究期間完成跟進訪問的參加者中，79.4% 在戒煙過程中得到其他人的支持。最常見的社交支持來自「配偶／伴侶」(51.8%)，其次為「子女」(25.3%)和「朋友」(18.9%)(圖二十一)。然而，約兩成的參加者(20.6%)得不到任何社交支持。

圖二十一



<sup>1</sup> 失訪數據被排除在外

<sup>2</sup> 參加者可選擇多於一個答案

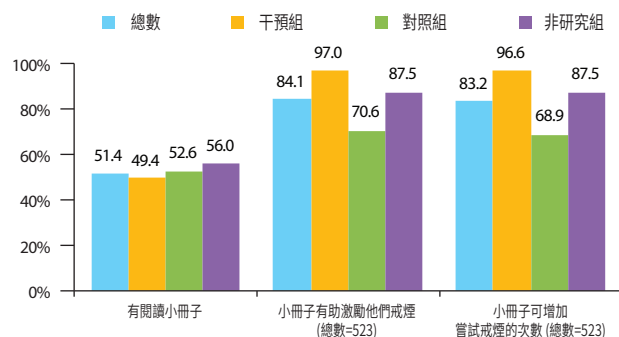
## 戒煙輔助工具的使用和滿意度

### 「踏出第一步」小冊子

在六個月跟進時，過半參加者(51.4%)曾閱讀過12頁的「踏出第一步」戒煙小冊子(圖二十二)。干預組和對照組閱讀過小冊子的比率相近(49.4% 比 52.6%;  $p=0.78$ )。大多數閱讀過小冊子的參加者認為小冊子有助激勵他們戒煙(84.1%)和增加嘗試戒煙的次數(83.2%)。干預組認為小冊子有助激勵他們戒煙(97.0% 比 70.6%;  $p$  值  $<0.001$ )和增加戒煙嘗試(96.6% 比 68.9%;  $p$  值  $<0.001$ )的比率均顯著高於對照組。

圖二十二

### 六個月跟進時參加者閱讀「踏出第一步」小冊子的情況 (總數 = 1,017)<sup>1,2</sup>



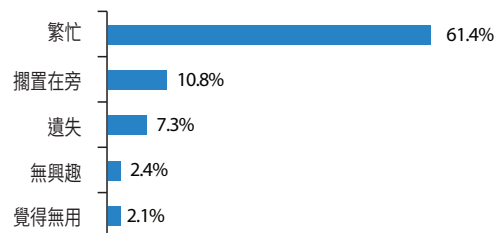
<sup>1</sup> 失訪數據被排除在外

<sup>2</sup> 沒有顯示缺失數據

參加者表示未曾閱讀小冊子的最常見原因是「繁忙」(61.4%)，其次是「擱置在旁」(10.8%)和「遺失」(7.3%)(圖二十三)。

圖二十三

### 參加者未曾閱讀印刷資料的原因 (總數 = 381)<sup>1,2</sup>



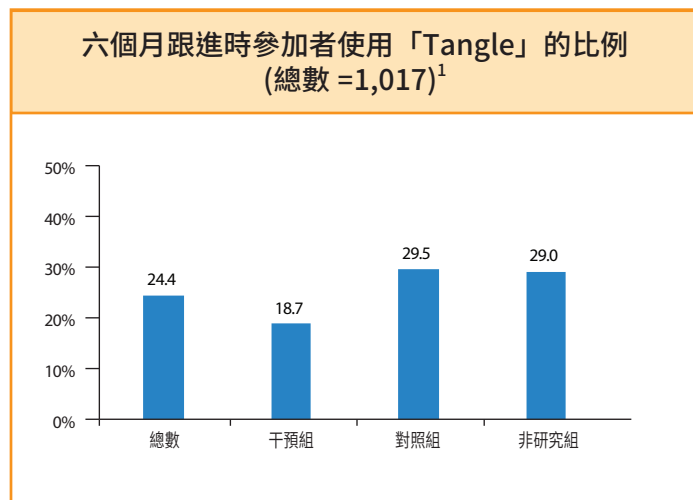
<sup>1</sup> 參加者可選多於一個答案

<sup>2</sup> 在六個月跟進時的失訪數據及缺失數據被排除在外

## 紓緩手癮的工具「Tangle」

24.4% 的整體參加者於六個月跟進時表示曾使用過紓緩手癮工具「Tangle」。在1分(完全沒有用)至5分(非常有用的)量表上，使用過「Tangle」的參加者認為「Tangle」對戒煙幫助程度的平均分為1.27分(標準差 = 0.55)。干預組的分數顯著低於對照組(1.19 比 1.32;  $p$  值 = 0.014)(圖二十四)。

圖二十四

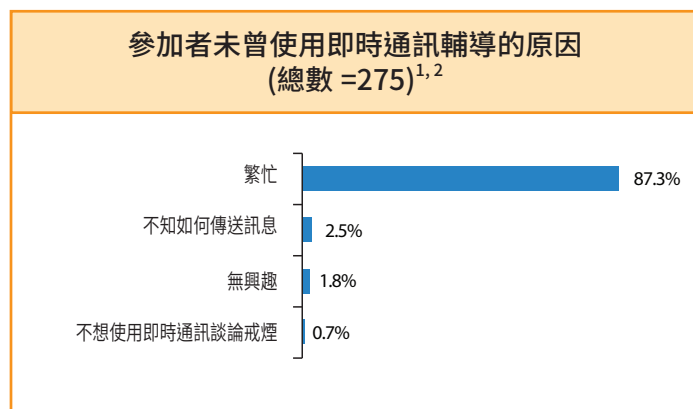


<sup>1</sup> 在六個月跟進時的失訪數據及缺失數據被排除在外

### WhatsApp 即時通訊輔導

在所有完成了三個月跟進的干預組參加者中，13.4% 表示曾透過 WhatsApp 即時通訊與戒煙輔導員交談。在 0 分（完全不滿意／沒有用）到 10 分（非常滿意／有用）的量表上，曾進行交談的參加者對 WhatsApp 即時通訊輔導滿意程度的平均分為 8.1 分（標準差 = 1.2），對激勵他們戒煙和增加戒煙嘗試的幫助程度的平均分分別為 7.4 分（標準差 = 1.6）和 7.5 分（標準差 = 1.6）。在未曾與輔導員交談的參加者中，「繁忙」是未曾使用即時通訊輔導的首要原因（87.3%）（圖二十五）。

圖二十五



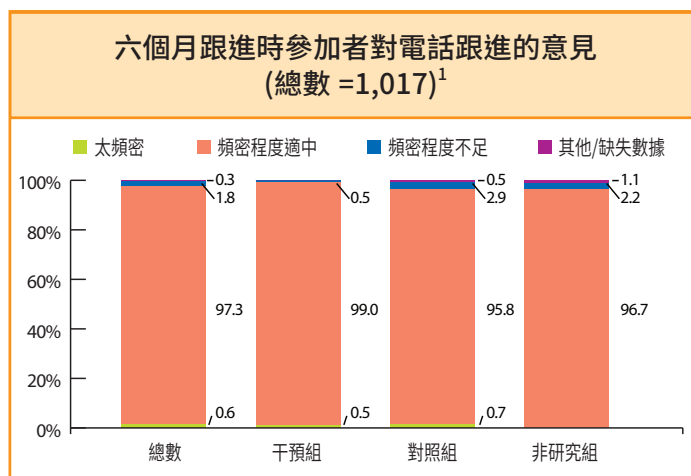
<sup>1</sup> 參加者可選擇多於一個答案

<sup>2</sup> 在三個月跟進時的失訪數據及缺失數據被排除在外

### 對電話跟進的意見

在六個月跟進時，大多數參加者認為電話跟進的頻率適中（97.3%）。對照組認為頻密程度不足的比例稍高於干預組（2.9% 比 0.51%； $p$  值 = 0.014）（圖二十六）。

圖二十六



<sup>1</sup> 在六個月跟進時的失訪數據被排除在外，沒有顯示缺失數據

## 4. 討論

第八屆「戒煙大贏家」無煙社區計劃在全港 18 區舉辦 68 場推廣和招募活動，成功六個月內向超過 50,000 名的市民傳遞無煙信息，並吸引了超過 1,300 名吸煙人士戒煙。根據治療意向分析，整體參加者在六個月跟進時的自我報告過去七天的戒煙率為 16.5%，高於 2013 年 (9.4%)、2014 年 (10.9%)、2015 年 (13.0%) 和 2016 年 (16.0%) 的「戒煙大贏家」比賽。

第八屆「戒煙大贏家」比賽中進行了一項群組隨機對照試驗，評估一個新穎的綜合干預措施（簡短戒煙建議、即時通訊輔導及主動轉介），能否有效增加在社區招募的吸煙人士的成功戒煙率。根據治療意向分析，此綜合干預措施能有效增加在基線調查後三個月和六個月時的自我報告過去七天的戒煙率和經生物化學測試核實的戒煙率。干預組的自我報告戒煙率高於對照組約 50% 至 65%，核實戒煙率則增加約 60% 至 90%，其效應值為中等。敏感度分析（完整個案分析）亦得到相似的結果。隨機對照試驗的完整研究結果已在一份國際同行評審的學術期刊中發表<sup>15</sup>。

WhatsApp 即時通訊輔導是第八屆「戒煙大贏家」比賽綜合干預措施中的主要測試部分，而隨機對照試驗提供初步證據顯示，干預措施有助戒煙。根據損耗定律，任何數碼醫療干預的試驗中，都有相當部分的參加者不會使用有關干預措施<sup>16</sup>，研究結果與定律一致，只有小部分干預組的參加者（三個月跟進：13.4%）曾透過 WhatsApp 即時通訊與戒煙輔導員交談，而時間限制或繁忙似乎是使用干預措施的主要障礙。然而，曾與輔導員交談過的參加者都對干預表示非常滿意（在 0 至 10 分的量表上，平均分 = 8.1），為其可普及性提供依據，亦表明即時通訊輔導是綜合干預措施中的重要要素。未來研究需要進一步探討增加 WhatsApp 互動的方法，例如延長服務時間至非辦公時間和非工作天，以及為 WhatsApp 作為獨立的干預措施對戒煙有效性進行測試。

主動轉介並非第八屆「戒煙大贏家」比賽主要測試的干預措施，因此，強度較第七屆比賽中的「高強度主動轉介」和第六屆比賽的「AWARD 建議及主動轉介」低<sup>10</sup>。這解釋為何第八屆「戒煙大贏家」比賽中參加者的戒煙服務累計使用率 (17.3%) 低於第七屆 (36.2%) 和第六屆 (25.8%) 的比賽。儘管如此，干預組使用戒煙服務的比率仍然顯著高於對照組。

雖然兩個研究組別曾閱讀過「踏出第一步」自助戒煙小冊子的比例相近，但有更多干預組的參加者認為小冊子能激勵他們戒煙和增加嘗試戒煙的次數。而簡短戒煙建議、即時通訊輔導和主動轉介的綜合干預是否與印刷資料產生協同作用，加強戒煙的效果，則須進一步檢視。我們亦發現，在研究期間，干預組對戒煙重要性的認知程度增加幅度高於對照組。這些都可能是綜合干預措施增加戒煙成功率的潛在機制，未來需要進一步驗證。

## 5. 結論

總括而言，第八屆「戒煙大贏家」無煙社區計劃，包括無煙大使輔導訓練課程、戒煙比賽、無煙社區宣傳活動及隨機對照試驗研究，成功向社區內很多非吸煙人士和吸煙人士傳遞無煙訊息。研究發現簡短戒煙建議結合即時通訊輔導和主動轉介，能有效增加戒煙率和戒煙服務的使用率。WhatsApp 即時通訊輔導是一個具潛力的平台為吸煙人士提供戒煙支援。未來的研究需要進一步改善即時通訊輔導干預，並在不同環境和組群中測試以及進行為期更長的跟進（如 12 個月），以評估和改善干預措施對增加戒煙的有效性。

## 6. 臨床試驗註冊編號

臨床試驗註冊編號：NCT03182790 (ClinicalTrials.gov).

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## The 8<sup>th</sup> “Quit to Win” Contest – Effectiveness of a Combined Intervention of Brief Advice, Instant Messaging and Active Referral to Achieve Abstinence

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### 1. Introduction

Despite a falling smoking prevalence, Hong Kong still had about 615,000 daily cigarette smokers (10.0%) in 2017<sup>1</sup>; at least half of whom would die prematurely because of smoking<sup>2</sup>. Every year, nearly 7,000 people succumb to diseases caused by active and passive smoking, with a substantial economic burden of about HK\$5.6 billion in Hong Kong (0.3% of GDP)<sup>3</sup>. Smoking is highly addictive, and many smokers fail to quit unaided, especially those with high level of nicotine dependence. Engaging smokers who are not ready to quit smoking is a challenge—about 68.8% daily smokers in Hong Kong had no previous quit attempt and no interest in quitting<sup>1</sup>. Developing novel and brief interventions to motivate and assist smokers to quit is essential for public health implications.

Smoking cessation (SC) competitions or “Quit and Win” Contests encourage smokers from the community to quit smoking by offering opportunities to win prizes (e.g. by lottery) after making a successful quit attempt<sup>4</sup>. The “Quit to Win (QTW)” Contest cum Smoke-free Community Campaign is an annual event organized by The Hong Kong Council on Smoking and Health (COSH) in collaboration with School of Nursing and the School of Public Health, The University of Hong Kong (HKU). The goals include (1) motivating smokers to get rid of their smoking habit; (2) encouraging non-smokers to support their family members and friends to quit; (3) raising public awareness on smoking hazards and community participation in tobacco control; and (4) strengthening the promotion of smoke-free community and to strive for a smoke-free Hong Kong. Seven QTW Contests have been conducted since 2009 (except in 2011), which have engaged over 8,000 smokers from the community to quit smoking.

The QTW Contests provided a unique platform to design and conduct RCTs to develop, evaluate and refine novel interventions for promoting quitting in community smokers<sup>4</sup>.

Applying mobile technologies to provide SC support is an emerging area in SC treatment<sup>5</sup>. A 2016 Cochrane review found that mobile phone-based SC interventions (predominantly via SMS messaging) increased abstinence by about 70%<sup>6</sup>. Mobile instant messaging apps, such as WhatsApp or WeChat, have gradually surpassed SMS as the most widely used mobile messaging tool<sup>7</sup>. They provide a platform for exchange of text, emojis, voice messages and multimedia freely through internet in real time. A population-based study in Hong Kong has found adults exposed to health information through instant messaging were associated with reduced smoking<sup>8</sup>. WhatsApp online support group has also been found effective in preventing relapse among participants who have recently quit smoking among service users of Tung Wah Group of Hospitals Integrated Centre on Smoking Cessation<sup>9</sup>. It remains unknown if more personalized and interactive messaging support provided by using instant messaging apps could further improve cessation outcomes.

SC services are effective in increasing quit rate but are severely underused in Hong Kong—only 2.3% current smokers had ever sought professional help from SC services in 2017<sup>1</sup>. The 6<sup>th</sup> QTW Contest in 2015 provided strong evidence that actively referring participants to a SC service could increase SC service use and quit rate<sup>10</sup>. The results were also replicated by the 7<sup>th</sup> QTW Contest in 2016, which evaluated

active referral interventions of different intensities<sup>11</sup>. Active referral presents an important intervention to promote SC service use and quitting in the community.

In 2017, COSH collaborated with HKU, 18 District Councils, 17 district partners and 15 supporting organizations to organize the 8<sup>th</sup> QTW Contest. A two-arm randomized controlled trial (RCT) was conducted to examine the effectiveness of a combined intervention of face-to-face brief cessation advice (AWARD model), instant messaging SC support plus active referral to SC services (AIR) in promoting quitting.

## 2. Methods

### 2.1 Recruitment

From 18 June to 30 September 2017, participants were recruited in 68 recruitment sessions in shopping malls and public areas in all 18 districts in Hong Kong. Trained SC ambassadors were deployed to approach smokers in the community, screen for their eligibility, recruit eligible smokers into the QTW contest and RCT, and deliver assigned interventions to participants. Details of the research method of the RCT has been published in an international peer-refereed journal.

Eligibility criteria for RCT participation included:

1. Hong Kong residents aged 18 years or above;
2. Daily smokers who smoked at least 1 cigarette per day in the past 3 months;
3. Able to communicate in Cantonese and read Chinese;
4. Exhaled carbon monoxide (CO) of 4 parts per million (ppm) or above;
5. Intended to quit/ reduce smoking;
6. Using a cell phone with an instant messaging app (e.g. WhatsApp) installed; and
7. Able to use an instant messaging app for communication.

Written informed consents were obtained from all eligible participants who enrolled in the QTW Contest prior to delivery of the assigned treatment to the participants.

Recruitment sessions were randomized into either the intervention or control groups (1:1). All participants recruited in the same session were assigned the same interventions to prevent intervention contamination. Random permuted block size of two, four or six were used to ensure similar number of recruitment sessions in both groups of the RCT. The allocation sequence was generated by an investigator not involved in the recruitment using Microsoft Excel. The allocations were not disclosed to the SC ambassadors until immediately

before the start of each recruitment session. Blinding of the participants and the ambassadors were not possible, but outcome assessors were blinded to the group assignment.

During recruitment, participants were given the options of participating in either the Lucky Draw group or SC Ambassador group. Five biochemically validated quitters at 3-month in the Lucky Draw group won a lottery prize of HK\$10,000 supermarket coupon each. Three validated quitters at 3-month in the SC Ambassador group were chosen from interviews by a selection committee formed by COSH to win travelling vouchers of HK\$25,000 to Australia (Champion), HK\$15,000 to Singapore (1<sup>st</sup> runner-up) and HK\$10,000 to Thailand (2<sup>nd</sup> runner-up).

### 2.2 Interventions and Follow-up

**Intervention group:** Participants received brief SC advice guided by the AWARD model<sup>12, 13</sup>, which comprised the following components: **A**sking about the participants' smoking history, **W**arning about the harm of smoking using the result of the CO test and a health warning leaflet, **A**dvising them to quit as soon as possible, **R**eferring them to SC services using a referral card, and **D**oing-it-again—repeat the AWARD advice through instant messaging. The health warning leaflet covered information about the burden of smoking in the world and in Hong Kong, a list of diseases with pictures attributable to active and passive smoking, and the Department of Health Integrated Smoking Cessation Hotline 1833 183. The leaflet also contained three statements of (1) "The World Health Organization warns that 1 in 2 smokers will die prematurely due to smoking"; (2) "Emerging evidence suggests that 2 in 3 smokers who began smoking at a younger age, smoke more, or have greater number of years of smoking will die prematurely because of smoking"; and (3) "The life expectancy of smokers is on average 10 years shorter than non-smokers".

Participants in the intervention group also received SC support through instant messaging (WhatsApp) for 3 months from baseline. The design and content of the intervention was informed by a formative focus group study in current smokers in Hong Kong<sup>14</sup>. The intervention allowed an SC counselor to interact with a participant and provide personalized SC advice and information in real time. The counselor personalized the intervention according to the characteristics (surname, age and sex) and smoking behaviors (number of cigarettes per day and readiness to quit) of the participants. The counselors also monitored their quit or reduction progress and tailored the intervention content accordingly. Details of successfully booked SC service appointment (e.g. contacts and address of the SC service, appointment date and time) were also delivered to the participants. The participants could send a message to the counselor anytime and the counselor would respond during office hours (0930 to 1830 from Monday to Friday).

To initiate and facilitate the interaction between the SC counselors and the participants, 16 generic messages were sent to the participants via WhatsApp on a tapering schedule:

- Baseline to 1-month follow-up: 2 messages per week
- 1- to 2-month follow-up: 3 messages every fortnight
- 2- to 3-month follow-up: 1 message per week

The regular messages were developed based on the messages used in 7<sup>th</sup> QTW Contest and the findings from the formative qualitative study<sup>14</sup>. The messages covered motivational messages, strategies to quit and reduce smoking, strategies to prevent and manage craving, benefits of quitting, and encouragement to use SC services through the Department of Health Integrated Smoking Cessation Hotline (1833 183). A reminder to participate in each follow-up at 1-, 2-, 3- and 6-month were also sent, making up a total of 20 messages.

Participants in the intervention group also received active referral to SC services. Similar to the 6<sup>th</sup> QTW Contest, SC counselors used a 3-fold referral card to introduce the existing SC services in Hong Kong at baseline, which included (1) Integrated Smoking Cessation Hotline of Department of Health, (2) Tung Wah Group of Hospitals Integrated Centre on Smoking Cessation, (3) Hospital Authority Smoking Counseling and Cessation Centres, (4) Pok Oi Hospital Smoking Cessation Service, (5) Youth Quitline and Women Quitline of HKU. Participants were encouraged to select a service and complete an active referral form. With the consent of the participants, their contacts were then sent to the respective SC service for further actions.

**Control group:** Participants received general brief SC advice and one SMS reminder to participate in the telephone follow-ups at 1-, 2-, 3- and 6-month. Participants in all groups received a 12-page self-help SC booklet “Be Smart, Quit Smoking!” designed by COSH.

**Non-trial group:** Participants of the SC ambassador group, or those who did not own a smartphone with an instant messaging app installed, or those who were unable to read or communicate in Chinese, or recruited from a specific workplace, were assigned to the non-trial group. Participants in the non-trial group received the same treatment as their RCT counterparts recruited from the same recruitment session, including the same small cash incentives if they passed biochemical validation of their abstinence at 3- and 6-month follow-ups.

Telephone follow-ups were conducted to all participants at 1-, 2-, 3- and 6-month after randomization. To enhance the retention rate, an incentive of \$100 was given to participants who completed all follow-ups. Those who could not be reached after a maximum of seven telephone calls and a voice message at the scheduled follow-up time points were considered lost to follow-up. Self-reported quitters (did not smoke even a puff for 7 days or longer) at the 3- and 6-month

were invited to participate in the biochemical validations (exhaled CO and salivary cotinine tests). Those who passed the validations could receive a cash incentive of HK\$500 each at 3- and 6- month.

The primary outcomes were self-reported 7-day point prevalence abstinence (PPA) at 3- and 6-month follow-ups after recruitment. Secondary outcomes included (1) biochemically validated abstinence, (2) smoking reduction by at least half of the baseline number of cigarette consumed per day, (3) self-reported quit attempt (abstinence for 24 hours or longer) and (4) SC service use at 3- and 6-month.

The baseline socio-demographic and smoking profile of all participants at baseline (N=1,311) were presented descriptively. The primary and secondary outcomes were compared between the two study groups by chi-square tests. Analyses were by intention-to-treat (ITT), such that participants with missing data were assumed to have no change in their smoking behavior, and by complete case (CC), in which participants with missing outcomes were excluded. We also assessed participants’ use of SC services, change in perception of quitting, quit attempt with reasons and withdrawal symptoms experienced, perceived social support for quitting, perceptions and use of SC aids provided, and perception of follow-up calls.

### 3. Results

A total of 68 recruitment sessions were held with about 155,000 people passers-by. Over 9,400 people enquired about SC and the QTW Contest, visited the recruitment booth or participated in the anti-smoking game. 48 trained SC ambassadors were involved in promotional activities and recruitment sessions. They have approached nearly 2,700 smokers and 9,000 non-smokers.

Of 1,347 smokers screened for inclusion, 12 (0.9%) did not meet the eligibility criteria and were excluded. After excluding 24 (1.8%) eligible smokers who declined to participate in the QTW Contest, 1,311 (97.3%) smokers joined the QTW Contest. Of all participants, 1,185 (90.4%) participated in the RCT and were randomized to either the intervention (n=591) or control groups (n=594). The non-trial group, which was analyzed separately, consisted of 72 (5.5%) participants who joined the SC ambassador group and 54 (4.1%) participants who did not own a smartphone with an instant messaging app installed, or were unable to communicate in Chinese, or recruited from a specific workplace.

Most participants reported recruitment booths as the primary source from which they learnt about the 8<sup>th</sup> QTW Contest (91.3%) (Figure 1). This was followed by websites (3.4%), leaflets or posters (2.2%), and colleagues or friends (2.0%).



Figure 1



<sup>1</sup>Missing data were not shown.

<sup>2</sup>Participants could choose more than one option.

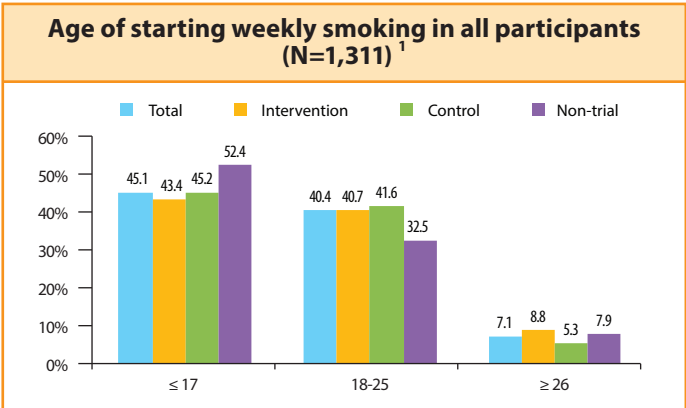
### 3.1 Socio-demographic characteristics

The mean age of the participants was 42.1 (SD=14.6) years (ranged from 18 to 94) and most were male (78.1%). After excluding participants with missing information, 60.2% were married and 39.6% were living with at least a child; nearly half attained senior secondary education or above (67.3%), resided in rented public housing (48.2%) and had monthly household income below HK\$20,000 (44.6%); and most were self-employed or employed (81.4%) (Table 1).

### 3.2 Smoking profile

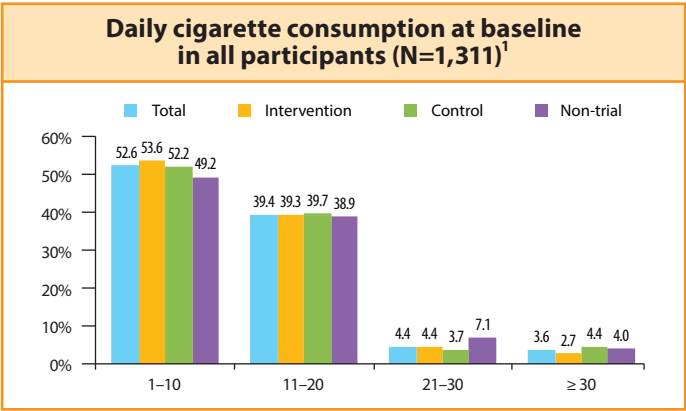
The participants’ mean age of smoking initiation was 18.2 (SD=5.7) years, and 45.1% (591) participants began smoking weekly before the age of 18 years (Figure 2). The mean duration of smoking was 24.0 (SD=14.6) years. The participants smoked on average 13.9 (SD=8.8) cigarettes per day. Over half of the participants (52.6%) smoked less than 10 cigarettes daily (Figure 3).

Figure 2



<sup>1</sup>Missing data were not shown.

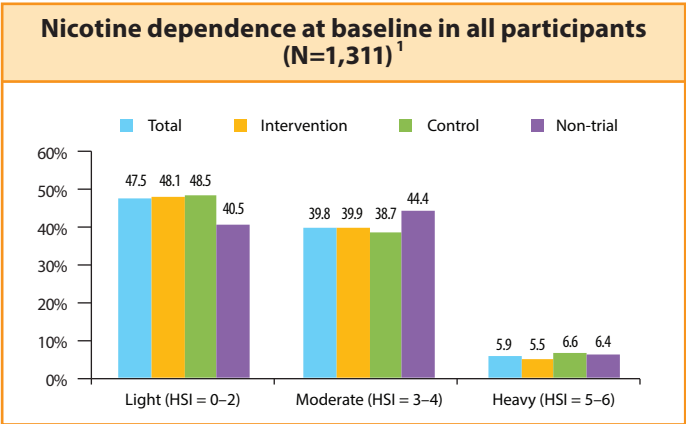
Figure 3



<sup>1</sup>Missing data were not shown.

About a third of participants (33.0%) smoked their first cigarette of the day within 5 minutes after waking up. Nearly half had moderate to heavy nicotine dependence assessed by Heaviness of Smoking Index (HSI) (45.7%) (Figure 4), had no previous quit attempt (47.4%) (Figure 5), and had no intention to quit within 30 days at baseline (61.3%) (Figure 6). The non-trial group had significantly more participants with intention to quit within 7 days after baseline than the RCT group (P<0.001).

Figure 4

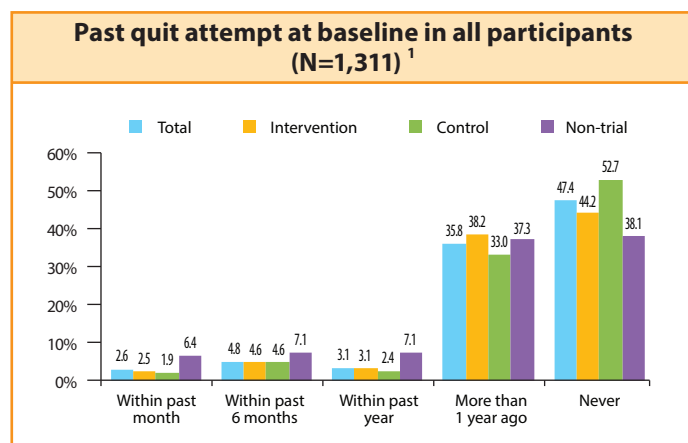


<sup>1</sup>Missing data were not shown.

**Table 1. Socio-demographic characteristics of all participants (N=1,311)**

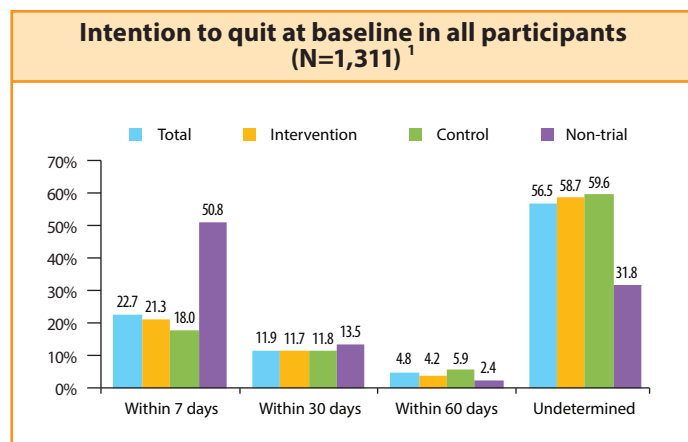
n (%)	Total	Non-trial	Intervention	Control
	(N=1,311)	(N=126)	(N=591)	(N=594)
Age, mean $\pm$ SD, years	42.1 $\pm$ 14.6	47.1 $\pm$ 18.5	40.6 $\pm$ 13.4	42.5 $\pm$ 14.5
Gender				
Male	1,024 (78.1)	106 (84.1)	450 (76.1)	468 (78.8)
Female	287 (21.9)	20 (15.9)	141 (23.9)	126 (21.2)
Marital status				
Single	327 (24.9)	43 (34.1)	154 (26.1)	130 (21.9)
Married/ Cohabited	553 (42.2)	54 (42.9)	243 (41.1)	256 (43.1)
Others	39 (3.0)	7 (5.6)	13 (2.2)	19 (3.2)
Missing	392 (29.9)	22 (17.5)	181 (30.6)	189 (31.8)
Living with a child aged below 18 years old				
Yes	328 (25.0)	28 (22.2)	140 (23.7)	160 (26.9)
No	501 (38.2)	66 (52.4)	223 (37.7)	212 (35.7)
Missing	482 (36.8)	32 (25.4)	228 (38.6)	222 (37.4)
Education level				
No formal education	19 (1.5)	8 (6.3)	6 (1.0)	5 (0.8)
Elementary education	72 (5.5)	17 (13.5)	19 (3.2)	36 (6.1)
Junior secondary education	179 (13.7)	14 (11.1)	74 (12.5)	91 (15.3)
Senior secondary education	379 (28.9)	27 (21.4)	191 (32.3)	161 (27.1)
Post-secondary or above	176 (13.4)	32 (25.4)	75 (12.7)	69 (11.6)
Missing	486 (37.1)	28 (22.2)	226 (38.2)	232 (39.1)
Employment status				
Student	22 (1.7)	6 (4.8)	7 (1.2)	9 (1.5)
Self-employed/ employed	753 (57.4)	58 (46.0)	356 (60.2)	339 (57.1)
Unemployed	39 (3.0)	9 (7.1)	14 (2.4)	16 (2.7)
Housewife	23 (1.8)	4 (3.2)	12 (2.0)	7 (1.2)
Retired	88 (6.7)	25 (19.8)	26 (4.4)	37 (6.2)
Missing	386 (29.4)	24 (19.0)	176 (29.8)	186 (31.3)
Monthly household income (HK\$)				
Less than 10,000	110 (8.4)	26 (20.6)	42 (7.1)	42 (7.1)
10,000-19,999	233 (17.8)	26 (20.6)	114 (19.3)	93 (15.7)
20,000-29,999	177 (13.5)	7 (5.6)	80 (13.5)	90 (15.2)
30,000-39,999	108 (8.2)	5 (4.0)	48 (8.1)	55 (9.3)
40,000 or more	141 (10.8)	22 (17.5)	59 (10.0)	60 (10.1)
Missing	542 (41.3)	40 (31.7)	248 (42.0)	254 (42.8)
Housing condition				
Public housing (rental)	408 (31.1)	50 (39.7)	170 (28.8)	188 (31.6)
Public housing (purchased)	42 (3.2)	4 (3.2)	16 (2.7)	22 (3.7)
Home Ownership Scheme	101 (7.7)	14 (11.1)	41 (6.9)	46 (7.7)
Private housing (rental)	124 (9.5)	14 (11.1)	55 (9.3)	55 (9.3)
Private housing (purchased)	132 (10.1)	15 (11.9)	65 (11.0)	52 (8.8)
Others	39 (3.0)	4 (3.2)	22 (3.7)	13 (2.2)
Missing	465 (35.5)	25 (19.8)	222 (37.6)	218 (36.7)

**Figure 5**



<sup>1</sup>Missing data were not shown.

**Figure 6**



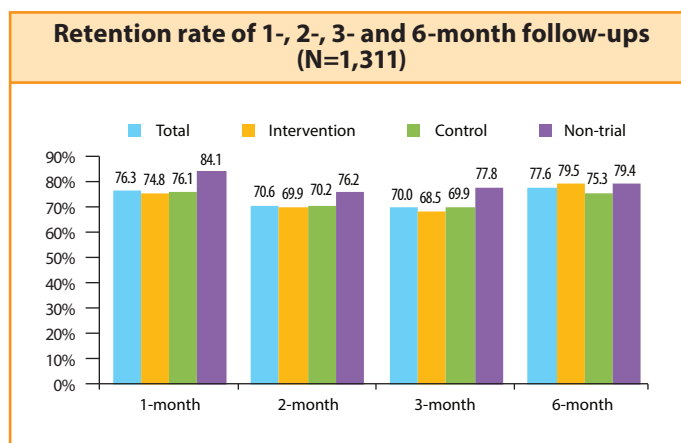
<sup>1</sup>Missing data were not shown.

### 3.3 1-, 2-, 3- and 6-month follow-ups results

#### Retention rate

The overall retention rates were 76.3%, 70.6%, 70.0% and 77.6% at 1-, 2-, 3- and 6-month follow-ups, respectively. The retention rates were similar between the intervention and control groups at 1-month (74.8% vs 76.1%;  $P=0.60$ ), 2-month (69.9% vs 70.2%;  $P=0.91$ ), 3-month (68.5% vs 69.9%;  $P=0.62$ ) and 6-month (79.5% vs 75.3%;  $P=0.079$ ) follow-ups (Figure 7).

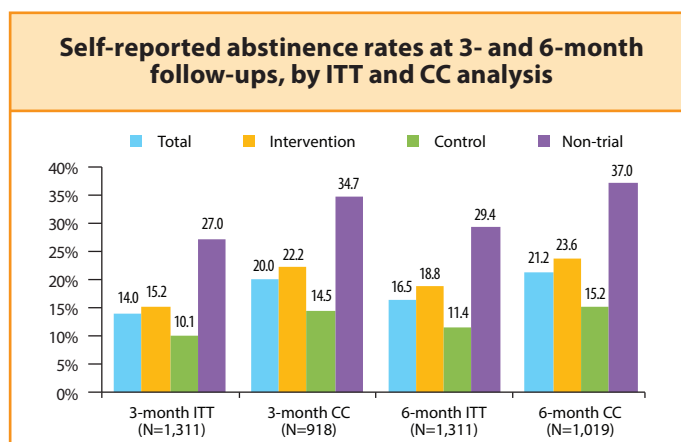
**Figure 7**



#### Primary outcome: Self-reported 7-day point prevalence abstinence rate at 3- and 6-month follow-ups

By ITT analysis, the overall self-reported 7-day PPA was 14.0% at 3-month and 16.5% at 6-month follow-ups. Significantly more participants in the intervention group reported abstinence in the past 7 days than in the control group at 3-month (15.2% vs 10.1%;  $P=0.008$ ) and 6-month (18.8% vs 11.4%;  $P<0.001$ ), equivalent to about 50% to 65% increase in quitting in the intervention than in the control group. The CC analysis yielded similar results. (Figure 8).

**Figure 8**

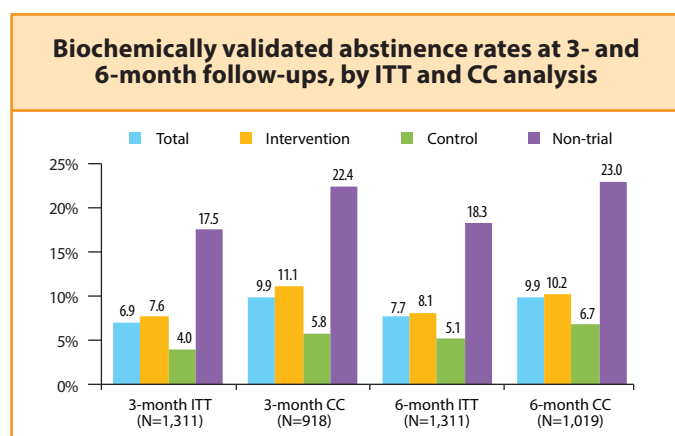


ITT: Intention-to-treat analysis; CC: Complete-case analysis

## Biochemically validated abstinence rate at 3- and 6-month follow-ups

The overall biochemically validated quit rate was 6.9% at 3-month and 7.7% at 6-month follow-ups by ITT analysis. The figures were significantly higher in the intervention group than in the control group (7.6% vs 4.0%;  $P=0.009$ ) at 3-month and (8.1% vs 5.1%;  $P=0.033$ ) at 6-month, which were amounted to about 60% to 90% increase in the intervention than in the control group. The results were supported by the CC analysis (Figure 9).

**Figure 9**

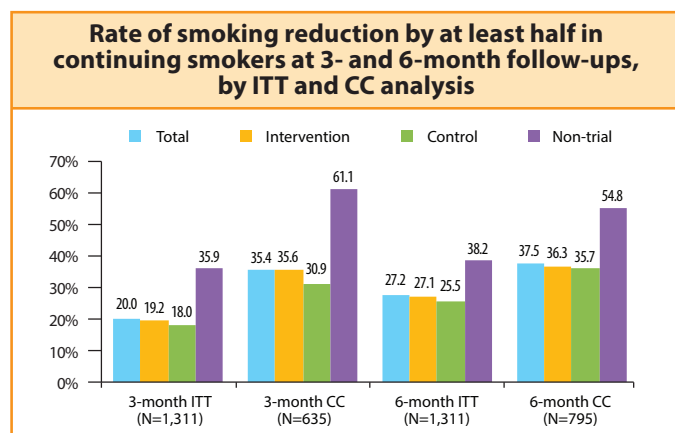


ITT: Intention-to-treat analysis; CC: Complete-case analysis

## Smoking reduction rate at the 3- and 6-month follow-ups

By ITT analysis, the proportion of participants who cut their daily cigarette consumption by half or more after joining the QTW Contest was 20.0% at 3-month and 27.2% at 6-month among those who failed to quit (Figure 10). The smoking reduction rates were higher in the intervention group than in the control group at all follow-up time points, although the differences were insignificant (all  $P>0.05$ ).

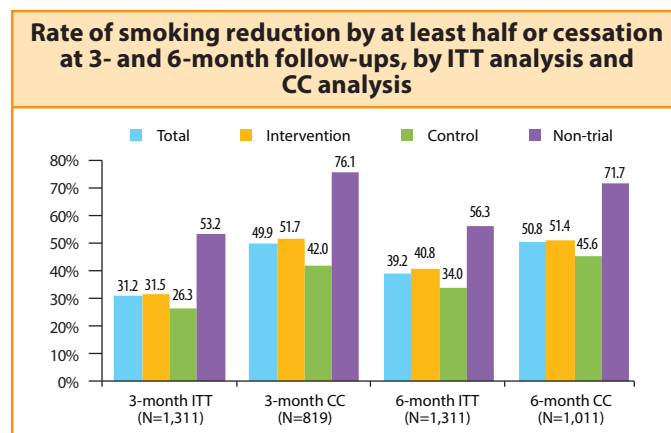
**Figure 10**



ITT: Intention-to-treat analysis; CC: Complete case analysis

By ITT analysis, the overall rate of smoking reduction or cessation were 31.2% and 39.2% at 3- and 6-month, respectively (Figure 11). The smoking reduction or quit rate was significantly higher in the intervention group than in the control group at 3-month (31.5% vs 26.3%;  $P=0.048$ ) and at 6-month (40.8% vs 34.0%;  $P=0.016$ ) follow-ups. CC analysis yielded similar results.

**Figure 11**



ITT: Intention-to-treat analysis; CC: Complete case analysis

## Use of smoking cessation services at 1-, 2-, 3- and 6-month follow-ups

Participants only in the intervention group were actively referred to SC services owing to the RCT study design. Throughout the entire study period, there were 345 referral requests to SC services made by 26.3% of all QTW Contest participants (Table 2). The cumulative number of referral requests were 292 in the intervention group, compared with 13 in the control group.

**Table 2 Referral status for all participants (N=1,311)**

	Total (N=1,311)	Intervention (N=591)	Control (N=594)	Non-trial (N=126)
Had made a referral request	345 (26.3)	292 (49.4)	13 (2.2)	40 (31.7)

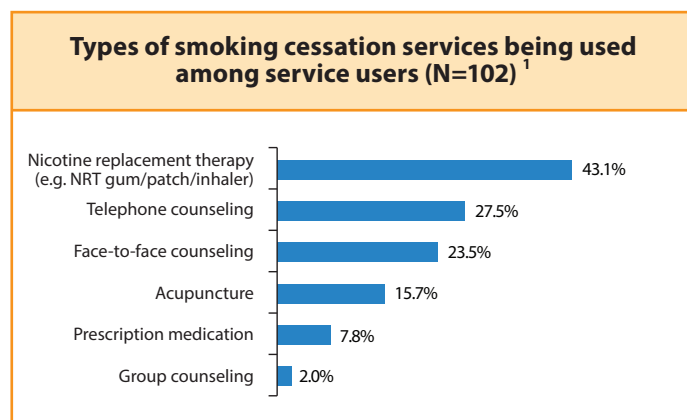
The number of participants who ever used a SC service increased through follow-up time points. Overall, 11.5% of all participants had used a SC service at least once by the 6-month follow-up (Table 3). The cumulative prevalence of SC service use was significantly higher in the intervention group than in the control group at all follow-up time points (All  $P<0.001$ ).



**Table 3 Use of SC service (N=1,311)**

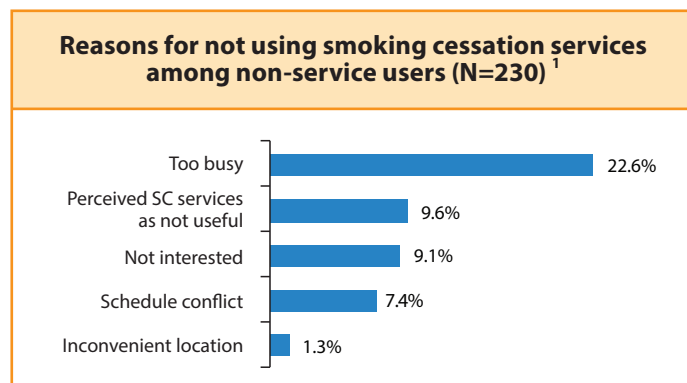
	Total (N=1,311)	Intervention (N=591)	Control (N=594)	Non-trial (N=126)
<b>1-month</b>	78 (6.0)	56 (9.5)	8 (1.4)	14 (11.1)
<b>2-month</b>	108 (8.2)	76 (12.9)	11 (1.9)	21 (16.7)
<b>3-month</b>	127 (9.7)	91 (15.4)	13 (2.2)	23 (18.3)
<b>6-month</b>	151 (11.5)	102 (17.3)	23 (3.9)	26 (20.6)

Among 102 service users who reported the type of treatment used in the intervention group, the most frequently received treatment from the SC services were nicotine replacement therapy (43.1%), followed by telephone counseling (27.5%) and face-to-face counseling (23.5%) (Figure 12).

**Figure 12**

<sup>1</sup>Participants could choose more than one option.

In the intervention group, 230 participants who did not use SC service at 1 month provided a reason for not using the SC services. The primary reasons were “too busy” (22.6%), followed by “perceived SC services as not useful” (9.6%); “not interested” (9.1%); “schedule conflict” (7.4%); “inconvenient location” (1.3%) (Figure 13).

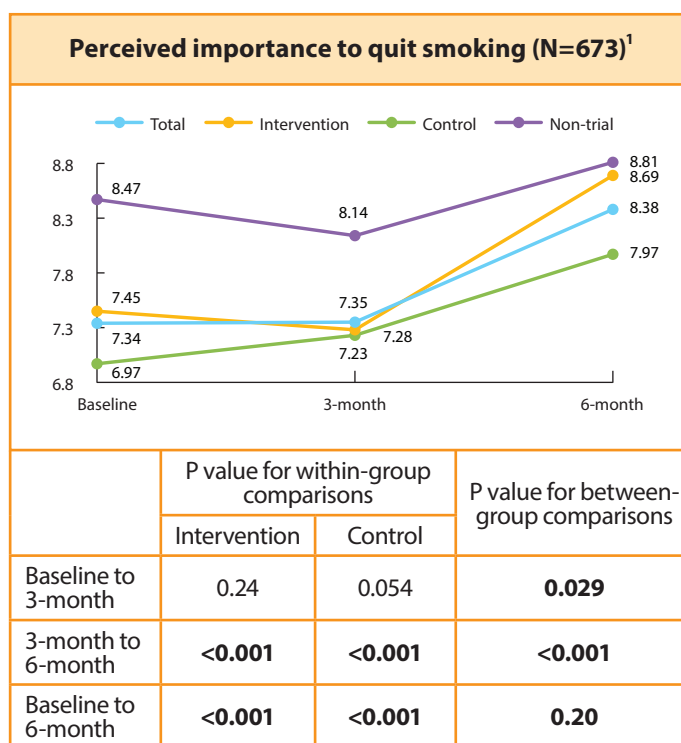
**Figure 13**

<sup>1</sup>Participants could choose more than one option.

## Self-efficacy of quitting

### Perceived importance to quit smoking

Among participants with complete data at all time points, the overall mean score of perceived importance to quit smoking were similar between baseline and 3-month follow-up (7.34 vs 7.35;  $P=0.91$ ), but significantly increased from 3-month to 6-month follow-up (from 7.35 to 8.38;  $P<0.001$ ). The mean score significantly increased from 3- to 6-month follow-up and from baseline to 6-month follow-up in both study groups (all  $P<0.001$ ), and the increase was significantly greater in the intervention group than in the control group from 3- to 6-month follow-up ( $P<0.001$ ) (Figure 14).

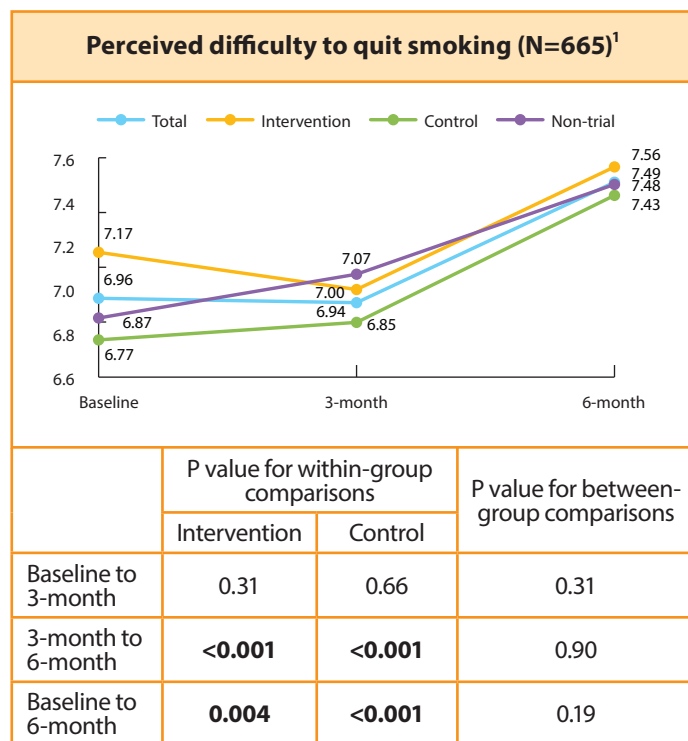
**Figure 14**

<sup>1</sup>From 0 (not important at all) to 10 (very important); missing data were excluded.

## Perceived difficulty to quit smoking

In participants who responded to the questions, the mean score of perceived difficulty to quit smoking were similar between baseline and 3-month follow-up (from 6.96 to 6.94;  $P=0.86$ ), then increased from 3-month to 6-month follow-up (6.94 to 7.49;  $P<0.001$ ). The mean score significantly increased from 3-month to 6-month and from baseline to 6-month in both study groups ( $P\leq 0.004$ ). There was no significant between-group difference in change in mean scores between any time points ( $P=0.19$  to  $0.90$ ) (Figure 15).

**Figure 15**

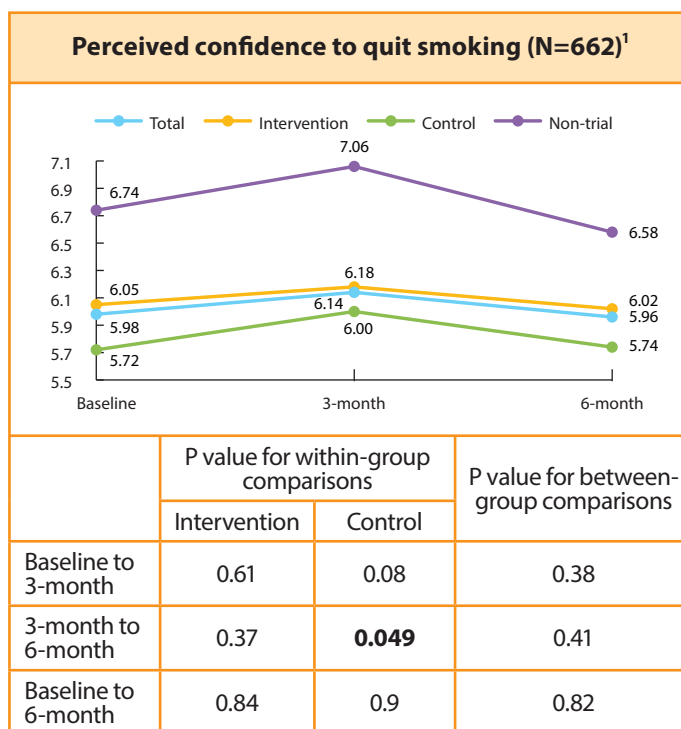


<sup>1</sup>From 0 (not difficult at all) to 10 (very difficult); missing data were excluded.

## Perceived confidence to quitting

In participants with complete data, there was no significant change in the mean scores of perceived confidence to quit smoking between baseline and 3-month (5.98 vs 6.14;  $P=0.062$ ) and baseline and 6-month (5.98 vs 5.96;  $P=0.84$ ), despite a small and significant decrease from 3-month to 6-month (6.14 vs 5.96;  $P=0.010$ ). The decrease is significant in participants in the control group (6.00 vs 5.74;  $P=0.049$ ). There was no significant difference in changes in mean scores between any time points between both study groups ( $P=0.38$  to  $0.82$ ) (Figure 16).

**Figure 16**

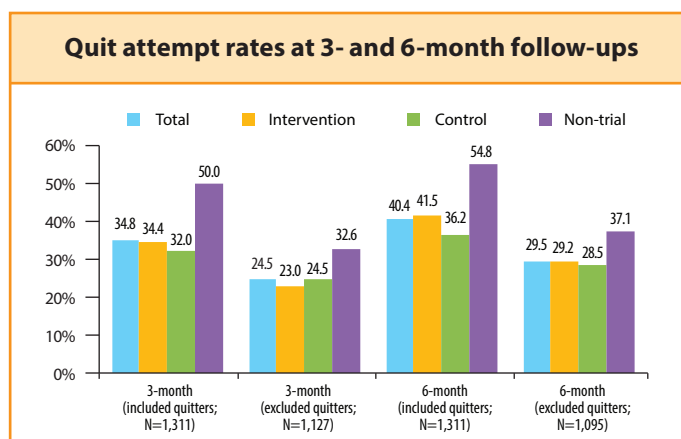


<sup>1</sup>From 0 (not confident at all) to 10 (very confident); missing data were excluded.

## Quit attempt at 3- and 6-month follow-ups

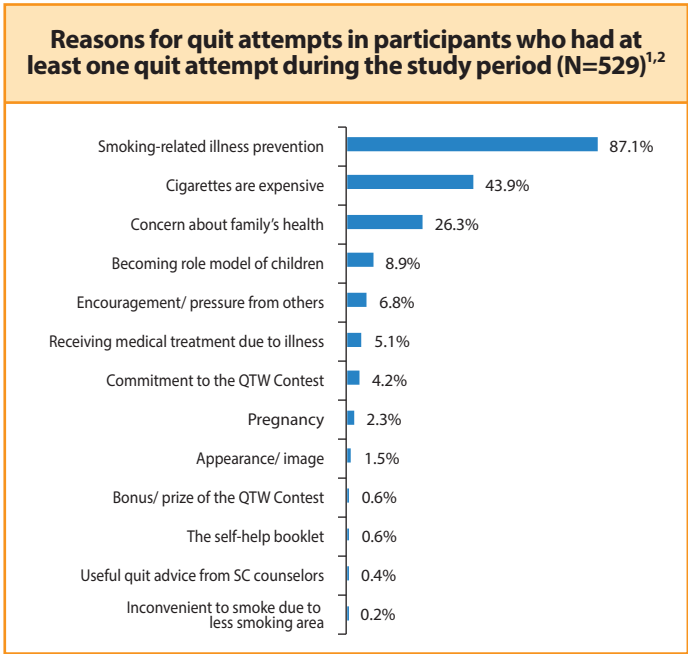
By ITT analysis, the proportion of participants with at least one quit attempt was 34.8% by 3-month and 40.4% by 6-month (Figure 17). Excluding those participated who quitted successfully, the corresponding figures were 24.5% and 29.5% respectively. Although the proportion of participants with at least a quit attempt by 3- and 6-month were slightly greater in the intervention group than in the control group with or without inclusion of quitters, there was no significant differences ( $P=0.063$  to  $0.82$ ).

**Figure 17**



Among participants who made at least one quit attempt during the study period, the leading reasons for making the quit attempts were “smoking-related illness prevention (87.1%), followed by “cigarettes are expensive” (43.9%) and “concern about family’s health” (26.3%) (Figure 18). There was no significant difference in the proportion of participants reporting each reason for quit attempt between the intervention and control groups (all  $P>0.05$ ).

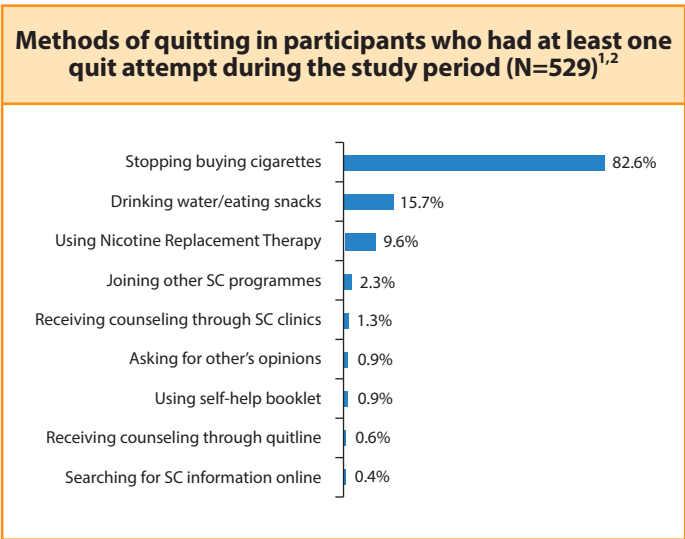
**Figure 18**



<sup>1</sup>Participants who were lost to follow-up were excluded.  
<sup>2</sup>Participants could choose more than one option.

All participants who made at least a quit attempt used specific methods when making the quit attempts. The most common methods to quit smoking were “stop buying cigarettes” (82.6%), “drinking water/ eating snacks” (15.7%) and “using Nicotine Replacement Therapy” (9.6%) (Figure 19).

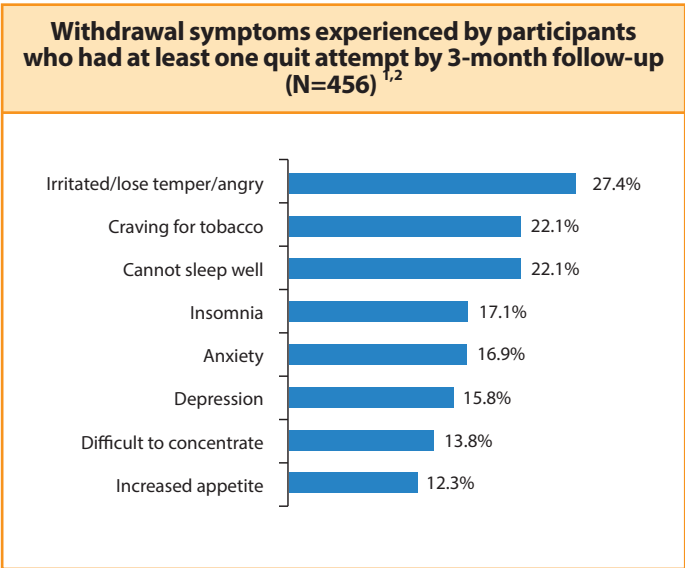
**Figure 19**



<sup>1</sup>Participants who were lost to follow-up were excluded.  
<sup>2</sup>Participants could choose more than one option.

Withdrawal symptoms were assessed in 1-, 2- and 3-month follow-ups. Among the participants who had at least one quit attempt up to the 3-month follow-up, 60.1% reported having experienced withdrawal symptoms during the quit attempt. The most common withdrawal symptoms were “irritated/ lose temper/angry” (27.4%), followed by “craving for tobacco” (22.1%) and “cannot sleep well” (22.1%) (Figure 20).

**Figure 20**

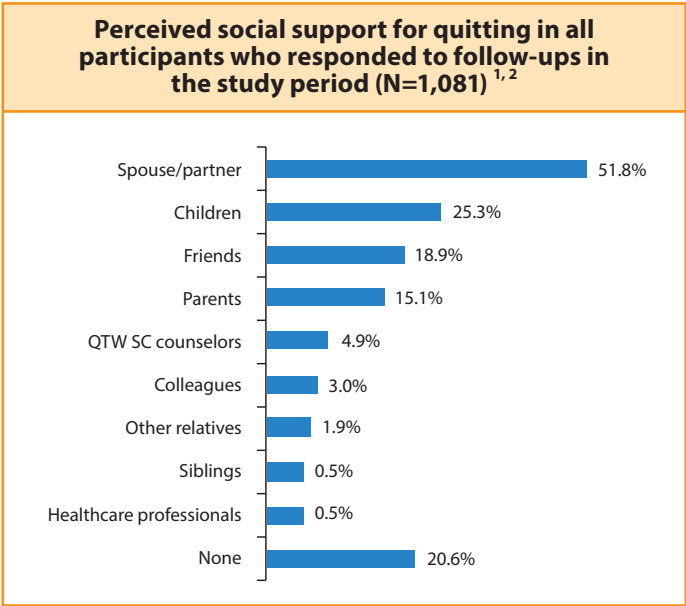


<sup>1</sup>Participants who were lost to follow-up were excluded.  
<sup>2</sup>Participants could choose more than one option.

Perceived social support for quitting

Among the participants who responded to follow-ups in the study period, 79.4% perceived having received support from other persons. The most common sources of perceived support were from “spouse/partner” (51.8%), followed by “children” (25.3%) and “friends” (18.9%) (Figure 21). However, about one-fifth (20.6%) of participants did not perceive any social support.

Figure 21



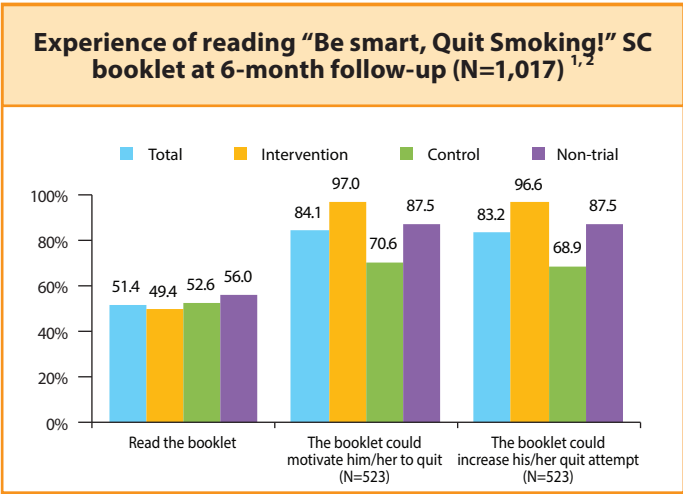
<sup>1</sup>Participants who were lost to follow-up were excluded.  
<sup>2</sup>Participants could choose more than one option.

Use and satisfaction of smoking cessation aids provided

“Be smart, Quit Smoking!” booklet

Over half (51.4%) of the participants at 6 months reported having read the 12-page “Be smart, Quit Smoking” SC booklet (Figure 22). The proportions of participants who read the booklet were similar between the intervention and control groups (49.4% vs 52.6%;  $P=0.78$ ). Most participants who read the booklet perceived the booklet to be useful in motivating them to quit (84.1%) and in increasing their quit attempt (83.2%). More participants in the intervention group than in the control group thought the booklet could motivate them to quit (97.0% vs 70.6%;  $P<0.001$ ) and increase their quit attempt (96.6% vs 68.9%;  $P<0.001$ ).

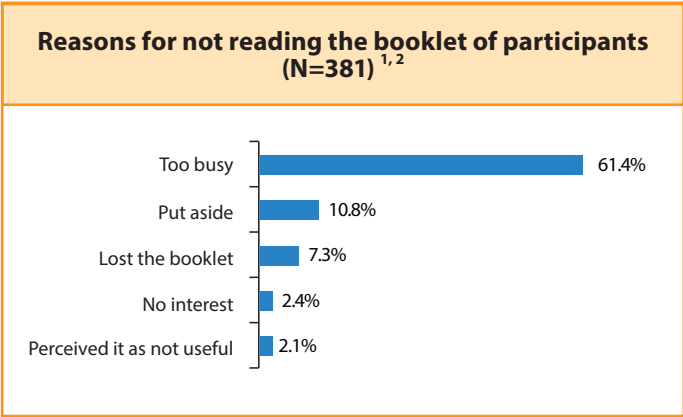
Figure 22



<sup>1</sup>Participants who were lost to follow-up at 6 months were excluded.  
<sup>2</sup>Missing data were not shown.

Among the participants who had never read the booklet, “too busy” was the most frequently reported reason (61.4%), which was followed by “put aside” (10.8%) and “lost the booklet” (7.3%) (Figure 23).

Figure 23



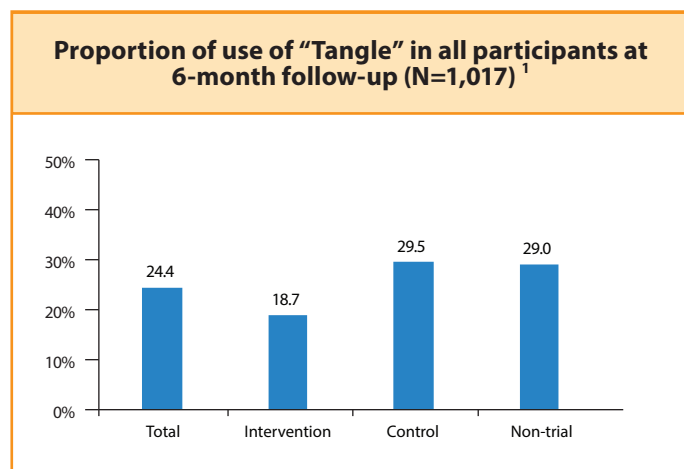
<sup>1</sup> Participants could choose more than one option.  
<sup>2</sup> Participants who were lost to follow-up at 6-month or with missing data were excluded.

Tangle

24.4% of the participants reported having used a tangle at 6-month follow-up. On a scale of 1 (not helpful at all) to 5 (very helpful), the mean (SD) score of perceived helpfulness of “Tangle” for SC was 1.27 (0.55) in participants who had ever used the “Tangle” at the 6-month follow-up. The score was significantly lower among participants in the intervention group than in the control group (1.19 vs 1.32;  $P=0.014$ ) (Figure 24).



**Figure 24**

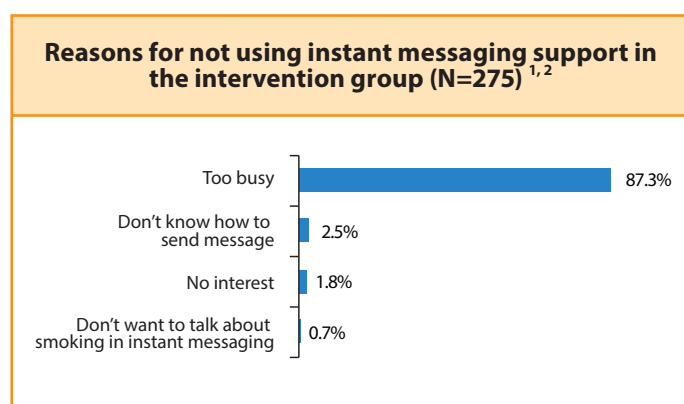


<sup>1</sup> Participants who were lost to follow-up at 6-month were excluded; missing data were not shown

### Instant messaging support via WhatsApp

Of all participants in the intervention group followed at 3 months, 13.4% reported having ever interacted with a counselor through WhatsApp instant messaging. On a scale of 0 (not satisfied/ useful at all) to 10 (very satisfied/ useful), those who had ever interacted with a counselor via WhatsApp gave a mean (SD) score of 8.1(1.2) for level of satisfaction with the WhatsApp instant messaging support. The corresponding mean (SD) scores for perceived helpfulness of the interaction to increase motivation to quit and number of quit attempts were 7.4(1.6) and 7.5(1.6), respectively. "Too busy" was reported as the leading reason among participants for not interacting with a counselor via WhatsApp (87.3%) (Figure 25).

**Figure 25**



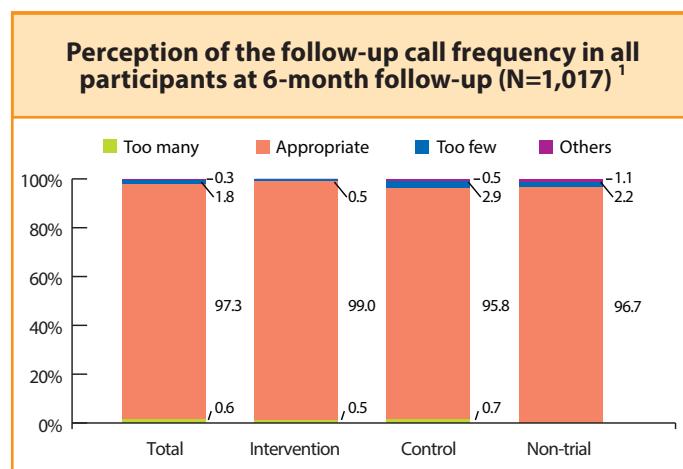
<sup>1</sup> Participants could choose more than one option.

<sup>2</sup> Participants who were lost to follow-up at 3-month or with missing data were excluded.

### Perception on the frequency of follow-up calls

The frequency of the follow-up calls was considered appropriate by most participants responding to the 6-month follow-up (97.3%). Slightly more participants in the control group considered the frequency to be "too few" than the intervention group (2.9% vs 0.51%;  $P=0.014$ ) (Figure 26).

**Figure 26**



<sup>1</sup> Participants who were lost to follow-up at 6 months were excluded; missing data were not shown.

## 4. Discussion

Through 68 promotion and recruitment activities held in all 18 districts in Hong Kong, the 8<sup>th</sup> "Quit to Win" Contest cum Smoke-free Community Campaign spread the smoke-free messages to over 50,000 members of public and engaged over 1,300 smokers in SC. By intention-to-treat analysis, the self-reported past 7-day PPA was 16.5% at 6 months, which was higher than those reported in QTW 2013 (9.4%), 2014 (10.9%), 2015 (13.0%) and 2016 (16.0%).

A cluster RCT was nested within the 8<sup>th</sup> QTW Contest to examine the effectiveness of an innovative, integrated AIR (brief advice, instant messaging intervention via WhatsApp and active referral) intervention for increasing quit rate in proactively recruited smokers in the community. By intention-to-treat analyses, the AIR intervention was found to be effective in increasing self-reported past 7-day PPA and biochemically validated abstinence and use of SC service at 3 and 6 months after baseline. The effect sizes of about 50% to 65% increase in self-reported abstinence and 60% to 90% increase in biochemically validated abstinence in the intervention group relative to the control group were moderate. The results were confirmed in sensitivity analyses (complete case analysis). The full trial results have been published in an international, peer-referred journal<sup>15</sup>.

The RCT has provided the first evidence on the utility of instant messaging support via WhatsApp for SC, which was the major component of the AIR intervention being examined in the 8<sup>th</sup> QTW Contest. Consistent with the law of attrition, which purported that a large proportion of participants in any trials of digital health intervention do not use the intervention<sup>16</sup>, few participants in the intervention group had ever interacted with a SC counselors via WhatsApp (13.4% at 3 months). Time constraint or busy schedule appeared to be the major barriers. However, participants who had ever interacted with a SC counselor reported a high level of satisfaction (mean score=8.1 on a scale of 0 to 10), supporting the acceptability of the intervention. This suggested the instant messaging intervention could be an important component of the AIR intervention model. Future studies to explore methods to increase the utilization of the WhatsApp interaction, such as extending the intervention duration to non-office hours and non-working days, and to examine WhatsApp intervention as a stand-alone intervention are warranted.

Since active referral was not the major component being examined in 8<sup>th</sup> QTW Contest, the intensity of the active referral intervention was less than those used in intervention groups of the 7<sup>th</sup> QTW Contest (High intensity active referral) and the 6<sup>th</sup> QTW Contest (AWARD advice plus active referral)<sup>10</sup>. This could explain the lower cumulative proportion of participants who used an SC service (17.3%) in the 8<sup>th</sup> than those of the 7<sup>th</sup> (36.2%) and the 6<sup>th</sup> (25.8%) QTW Contests. Nevertheless, the proportion of participants using a SC service was significantly greater in the intervention group than in the control group.

The proportions of participants who had ever read the 12-page "Be smart, Quit Smoking!" SC booklet were similar in both study groups. However, significantly more participants in the intervention group perceived it as useful in motivating them to quit and increasing their quit attempt. Whether there is synergistic effect between the AIR intervention and print-based materials on SC outcomes requires further investigation. We also noted a significantly greater increase in the perceived level of importance to quit in the intervention than control groups. All these may be the underlying mechanisms of the AIR intervention on SC outcomes, which warrant further studies.

## 5. Conclusions

To conclude, the 8<sup>th</sup> QTW Contest cum Smoke-free Community Campaign, encompassing SC counseling training, the QTW Contest, community-based promotion and a RCT, successfully delivered smoke-free messages to a large number of non-smokers and smokers in the Hong Kong community. The AIR intervention was found to be effective in increasing quit rate and use of SC services. Instant messaging support via WhatsApp could be a promising platform for delivering SC support to smokers. Future studies to examine and refine the instant messaging intervention in different settings and populations and with longer follow-up (e.g., 12 months) are warranted.

## 6. Clinical trial Registration

Trial registry: ClinicalTrials.gov, number NCT03182790.

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# 新款擴大的煙包煙害圖象警示的成效

2020年8月 第二十七號報告書



## 新款擴大的煙包煙害圖象警示的成效 控煙政策調查2018

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### 1. 簡介

根據世界衛生組織（下稱「世衛」）《煙草控制框架公約》第11條，所有締約方採用煙害圖象警示，將大號字體、清晰、顯眼、易讀的吸煙危害相關信息展示於煙草包裝的主要展示範圍<sup>1</sup>。煙害圖象警示是一種有效宣揚吸煙危害訊息的途徑。研究顯示，煙害圖象警示能有效地引起對吸煙的負面情緒（例如害怕、憂慮）、防止從不吸煙者開始吸煙、提升吸煙者的戒煙意欲<sup>2-5</sup>。截至2020年2月11日，109個國家及司法管轄區已立法規定煙害圖象警示須覆蓋煙草包裝的主要範圍至少50%，其中8個更規定須覆蓋至少85%<sup>6</sup>。

香港自1983年起在煙草包裝上採用純文字煙害警示，並於2007年引入煙害圖象警示<sup>7</sup>。煙包都必須由6款煙害圖象警示中的一款覆蓋其兩個最大表面的至少50%<sup>8</sup>。早前一項全港性研究發現，煙害圖象警示或使社會環境氛圍更不利於吸煙，即使在強硬的吸煙者中亦如是<sup>9</sup>。

這些煙害圖象警示十年來都沒有更新，其勸阻吸煙的效力可能已經減弱。香港特別行政區立法會於2017年6月通過了《吸煙（公眾衛生）（公告）（修訂）令2017》（下稱《修訂令》），修訂對煙害圖象警示的要求。《修訂令》要求煙包兩個最大表面的至少85%都必須由12款新款煙害圖象警示中的一款所覆蓋（圖象內容包括爛腳趾、肺癌、殮房的屍體、喪禮中女人的遺像、燒鈔票、下垂的捲煙、使用氧氣罩的男人、插鼻胃管的女人、起皺紋的女人、有造口的喉嚨、使用助行器及患病的小童）<sup>10</sup>（附件）。煙包上還須展示綜合戒煙熱線電話（1833 183）。《修訂令》設有6個月的過渡期（2017年12月21日至2018年6月20日），期間准許售賣帶有舊

款煙害圖象警示的煙草產品。自2018年6月21日起，出售的煙草產品必須展示新款煙害圖象警示。

這些新款及擴大的圖象警示展示更強警嚇性的內容及圖片，旨在減少本港的煙草使用，但其成效仍有待研究。吸煙者可能會因應新款煙害圖象警示而採取相應的抗拒行為，但有關抗拒行為的研究甚少。因此，新款煙害圖象警示的成效和吸煙者的抗拒行為值得探討。

香港吸煙與健康委員會從2013年起定期進行的控煙政策調查（下稱「調查」）是一項橫斷面調查，收集具人口代表性的吸煙相關數據和公眾對控煙政策之意見。自2015年起，每次調查均訪問約5,100名受訪者，當中現時吸煙者及已戒煙者被超採樣。控煙政策調查2018分為兩輪，分別於新款煙害圖象警示過渡期（下稱「第一輪」）及全面實施之後（下稱「第二輪」）進行。連同在新款煙害圖象警示實施前進行的控煙政策調查2017，我們評估了新款煙害圖象警示的成效。在下文中，控煙政策調查2017、控煙政策調查2018第一輪及第二輪的時期分別被稱為實施前、過渡期及全面實施後。

### 2. 方法

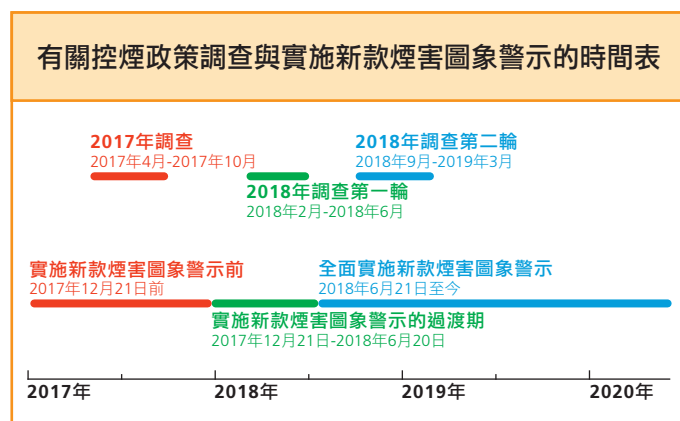
#### 2.1 研究設計及受訪者

調查由香港大學民意研究計劃（現為香港民意研究所）以電話訪問和不記名形式進行。圖一顯示3次控煙政策調查及新款煙害圖象警示實施的時間表：2017年4月至10月（實施前）、2018年2月至6月（過渡期）及2018



年9月至2019年3月（全面實施後）。調查訪問15歲或以上、操廣東話的人士。受訪者按照吸煙狀況分為三組：（1）現時吸煙者（在調查時，每天或偶爾吸煙）；（2）已戒煙者（過往曾吸煙，但在調查時已經戒煙）；（3）從不吸煙者。在2017年的調查中，吸煙僅指使用捲煙，而在2018年的兩輪調查中，吸煙指使用任何類型的煙草產品。這個差異降低了這兩年研究結果的可比性。電話訪問於平日及周末下午2時至晚上10時30分之間進行，以覆蓋不同職業和工作時間的受訪者。每個隨機抽取的電話號碼會於不同時間及日子撥打，5次嘗試後仍未能接觸受訪者的電話號碼會被歸類為「未能聯絡」。所有受訪者於接受電話訪問之前均已提供口頭同意，並可以隨時退出訪問而無須作出任何解釋。這項研究的方案，包括受訪者招募、知情同意程序及數據收集，已獲得香港大學/醫院管理局港島西聯網研究倫理委員會批准。

圖一



## 2.2 抽樣方法及選取受訪者

電話號碼是從以住宅電話簿衍生的抽樣框中隨機抽取。為了涵蓋住宅電話簿未收錄的號碼，電腦以「加/減1/2」方法產生另一組電話號碼。篩除重複的電話號碼後，其餘的號碼以隨機次序打出。當成功聯絡到一個目標住戶後，運用「下一個生日」的方法從所有合資格的在場家庭成員中選出一位接受訪問。

## 2.3 問卷設計

2017年（實施前）、2018年第一輪（過渡期）及第二輪（全面實施後）控煙政策調查所使用的問卷是根據此前調查的問卷修改而成，包括核心問題及隨機問題。隨機問題是設計予特定吸煙狀況的隨機亞樣本受訪者。社會人口特徵，例如性別、年齡、教育程度、家庭每月收入和就業情況是所有受訪者的核心問題。在2017年調查

（實施前）中，大部分煙害圖象警示的問題是現時吸煙者的隨機問題。在2018年第一輪（過渡期）及第二輪（全面實施後）調查中，大部分煙害圖象警示的問題是核心問題。店舖煙草陳列的問題是隨機問題，由不同吸煙狀況的隨機亞樣本受訪者回答。

## 2.4 權重及統計分析

2017年調查（實施前）訪問了5,131位受訪者，包括1,712位從不吸煙者、1,715位已戒煙者及1,704位現時吸煙者。2018年第一輪調查（過渡期）訪問了5,132名受訪者，包括1,713位從不吸煙者、1,707位已戒煙者及1,712位現時吸煙者。2018年第二輪調查（全面實施後）訪問了5,156位受訪者，包括1,714位從不吸煙者、1,739位已戒煙者及1,703位現時吸煙者。為得出具人口代表性的估計數字，每次調查數據均根據調查年度推算的香港人口的男女、年齡以及吸煙狀況分佈進行加權處理。本報告顯示的所有百分比都是整體人口的估計數字。

本報告提供以下結果：（1）受訪者的社會人口特徵、（2）對煙害圖象警示的認知（在過去30日有見過）、（3）煙害圖象警示對吸煙相關風險認知及行為的影響、（4）現時吸煙者為避免看到煙害圖象警示而採取的抗拒行為、（5）對店舖煙草陳列的認知（在過去30日有見過）。這三次調查採用相似的調查及統計分析方法。

針對吸煙狀況進行的單變量分析採用卡方檢驗。相對風險（relative risk）由泊松回歸分析（Poisson regression）產生，用以評估在新款煙害圖象警示在過渡期及全面實施後的（相對）效果。統計學上的顯著性水平定為 $p < 0.05$ 。統計分析使用Stata（15.1版本，TX：StataCorp LLC）進行。

## 3. 調查結果

### 3.1 受訪者的社會人口特徵

表一顯示男性受訪者佔2017年調查（實施前）的45.2%、2018年第一輪調查（過渡期）的45.1%和2018年第二輪調查（全面實施後）的44.9%。三次調查中均有過半受訪者年齡在15至49歲之間（2017年調查為54.0%、2018年第一輪調查為53.1%、2018年第二輪調查為53.3%）。多數受訪者具有至少中學學歷（2017年調查為88.1%、2018年第一輪調查為88.6%、2018年第二輪調查為88.9%）。大約一半的受訪者為在職人士（2017年調查為49.0%、2018第一輪調查為54.9%、2018第二輪調查為50.0%）。

**表一 2017年（實施前）、2018年第一輪（過渡期）及第二輪（全面實施後）調查中受訪者的社會人口特徵**

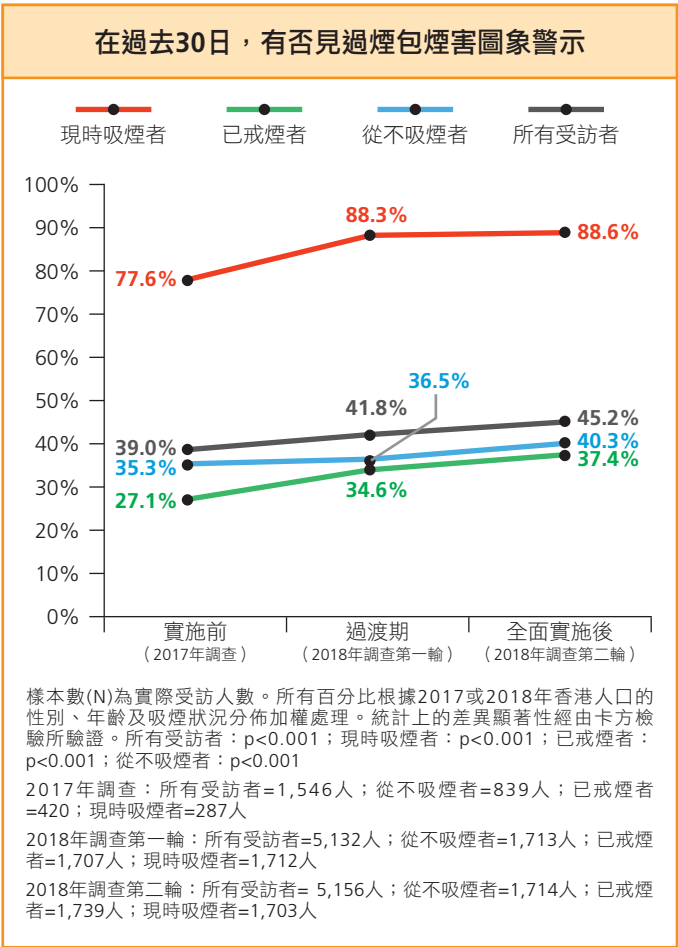
	2017年調查（實施前）	2018年第一輪調查（過渡期）	2018年第二輪調查（全面實施後）
受訪者總人數	(N=5,131)	(N=5,132)	(N=5,156)
性別 (%)			
男性	45.2	45.1	44.9
女性	54.8	54.9	55.1
年齡，歲 (%)			
15-29	19.2	18.5	18.6
30-39	17.5	17.4	17.5
40-49	17.3	17.2	17.2
50-59	19.1	18.6	18.7
60 或以上	26.4	27.3	27.4
不知道/拒絕回答	0.5	1.0	0.6
教育程度 (%)			
小學或以下	11.6	10.7	11.1
中學	43.7	43.1	46.0
大專或以上	44.4	45.5	42.9
不知道/拒絕回答	0.3	0.7	0.0
就業情況 (%)			
在職	49.0	54.9	50.0
在學	10.6	8.7	9.6
無酬家庭從業者/待業/ 退休	39.5	35.6	40.1
不知道/拒絕回答	0.9	0.8	0.3

樣本數（N）為實際受訪人數；所有百分比根據 2017或2018年香港人口的性別、年齡及吸煙狀況分佈加權處理。

3.2 對煙害圖象警示的認知

圖二顯示，在實施新款煙害圖象警示之前，39.0%的所有受訪者（77.6%的現時吸煙者、27.1%的已戒煙者及35.3%的從不吸煙者）察覺（在過去30日有見過）煙害圖象警示。在過渡期內，察覺的人增加至41.8%（88.3%的現時吸煙者、34.6%的已戒煙者及36.5%的從不吸煙者）。在全面實施後，察覺的人增加至45.2%（88.6%的現時吸煙者、37.4%的已戒煙者及40.3%的從不吸煙者）。

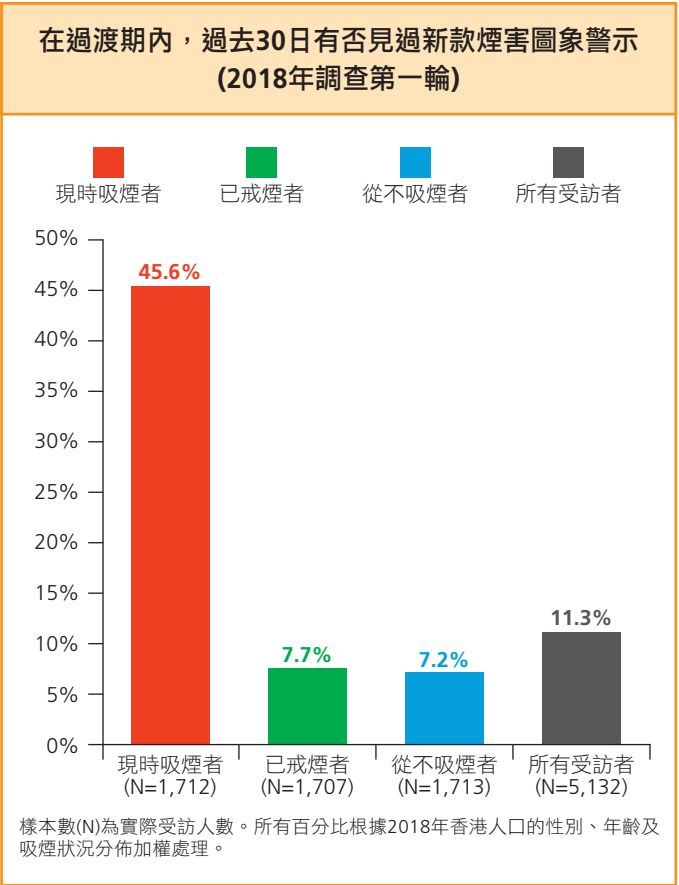
圖二



圖二亦顯示，在全面實施後，45.2%的受訪者察覺煙害圖象警示（88.6%的現時吸煙者，37.4%的已戒煙者及40.3%的從不吸煙者）。

圖三顯示，在過渡期內11.3%的所有受訪者及45.6%的現時吸煙者在過去30日內見過新款煙害圖象警示。他們見到的每100包捲煙中，新款煙害圖象警示所佔百分比中位數為80%（四分位距為50%-100%，未顯示於圖中）。

圖三



表二 受訪者對煙害圖象警示的認知，在實施前、過渡期及全面實施後的比較

相對風險 (95%信賴區間)				
	所有受訪者	現時吸煙者	已戒煙者	從不吸煙者
過渡期對比實施前	1.06 (0.97-1.17)	1.14 (1.06-1.23) ***	1.26 (1.05-1.51) **	1.03 (0.91-1.16)
全面實施後對比實施前	1.14 (1.04-1.26) **	1.15 (1.07-1.23) ***	1.37 (1.14-1.63) ***	1.13 (0.99-1.27)
全面實施後對比過渡期	1.08 (1.01-1.16) *	1.00 (0.98-1.03)	1.08 (0.99-1.19)	1.10 (1.00-1.21)

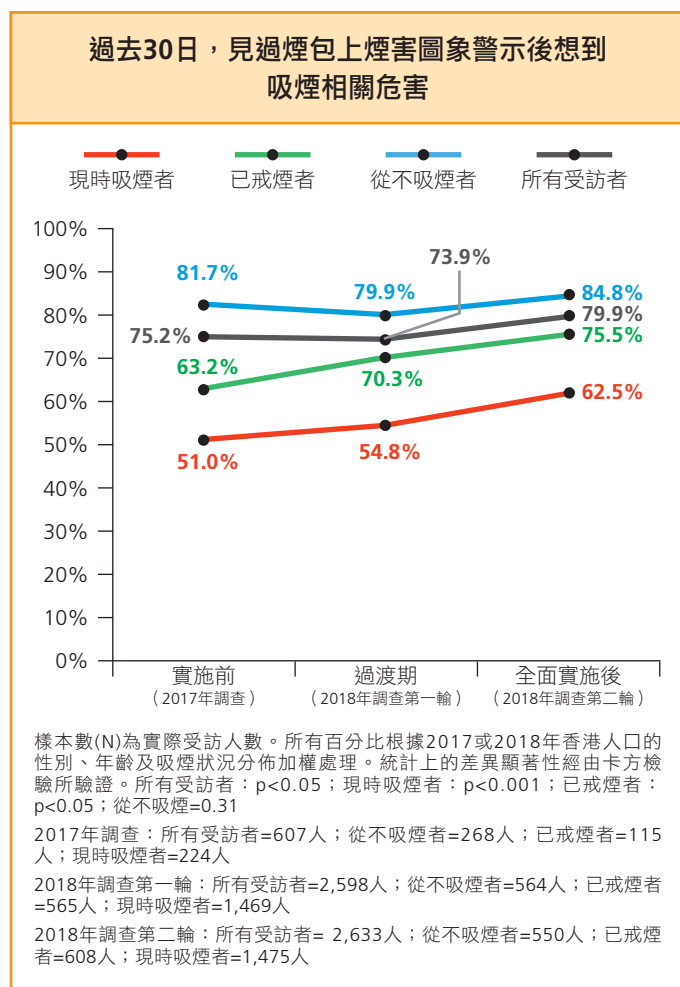
根據2017或2018年香港人口的性別、年齡及吸煙狀況分佈加權處理。  
\*p<0.05；\*\*p<0.01；\*\*\*p<0.001

無論是在所有受訪者中還是在每個吸煙狀況組別中，對煙害圖象警示認知的百分比在三次調查之間的差異均具有統計學顯著性（所有 $p<0.001$ ）。表二顯示，與實施前相比，過渡期內現時吸煙者及已戒煙者有更高機會見過煙害圖象警示。在全面實施後，所有受訪者及現時吸煙者見過煙害圖象警示的可能性比實施前分別高14%（95%信賴區間4%-26%）及15%（95%信賴區間7%-23%）。與過渡期相比，在全面實施後，所有受訪者見過煙害圖象警示的可能性高8%（95%信賴區間1%-16%）。

### 3.3 新款煙害圖象警示對與吸煙相關危害認知及行為的影響

圖四顯示，在實施新款煙害圖象警示前，75.2%的所有受訪者（51.0%的現時吸煙者，63.2%的已戒煙者及81.7%的從不吸煙者）在過去30日見過煙害圖象警示後曾想到吸煙的危害。此百分比在過渡期內大致相若（73.9%的所有受訪者），但在全面實施後增至79.9%。

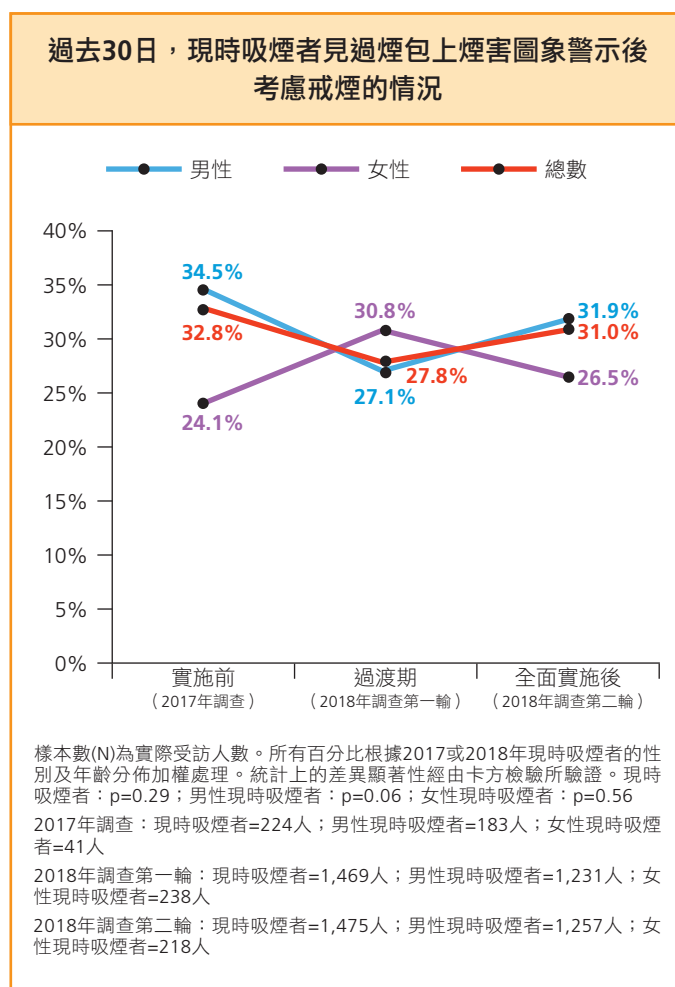
圖四



（62.5%的現時吸煙者，75.5%的已戒煙者及84.8%的從不吸煙者）。這三次調查之間的差異在所有受訪者（ $p<0.05$ ）、現時吸煙者（ $p<0.001$ ）、已戒煙者（ $p<0.05$ ）中具有統計學顯著性。表三顯示，在全面實施後，現時吸煙者在見過煙害圖象警示後想到吸煙的危害的可能性比實施前高23%（95%信賴區間6%-43%）。與過渡期相比，在全面實施後，所有受訪者及現時吸煙者在見過煙害圖象警示後想到吸煙的危害的可能性分別增加8%（95%信賴區間3%-13%）及15%（95%信賴區間7%-23%）。

圖五顯示，在實施新款煙害圖象警示前，32.8%的現時吸煙者在過去30日見過煙包上的煙害圖象警示後考慮戒煙。此百分比在過渡期內降至27.8%，但在全面實施後增至31.0%。三輪調查結果中並未觀察到顯著差異。表四顯示，在全面實施後，與過渡期或實施前相比，現時吸煙者見過煙包上的煙害圖象警示後考慮戒煙的可能性並未增加。

圖五





表三 實施前、過渡期及全面實施後，過去30日見過煙包上煙害圖象警示後想到吸煙相關危害的比較

相對風險 (95%信賴區間)				
	所有受訪者	現時吸煙者	已戒煙者	從不吸煙者
過渡期對比實施前	0.99 (0.92-1.06)	1.08 (0.93-1.25)	1.11 (0.95-1.31)	0.98 (0.91-1.06)
全面實施後對比實施前	1.06 (1.00-1.14)	1.23 (1.06-1.43) **	1.20 (1.03-1.40) *	1.04 (0.97-1.12)
全面實施後對比過渡期	1.08 (1.03-1.13) **	1.15 (1.07-1.23) ***	1.08 (1.00-1.16)	1.06 (1.00-1.12) *

所有百分比根據2017或2018年的香港人口性別、年齡及吸煙狀況分佈加權處理。  
\*p<0.05；\*\*p<0.01；\*\*\*p<0.001

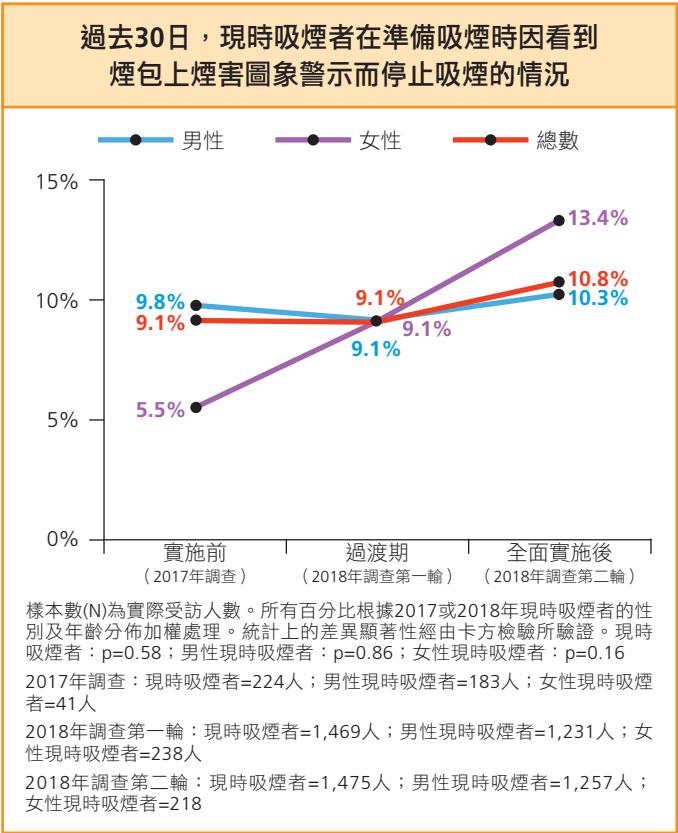
表四 實施前、過渡期及全面實施後，過去30日現時吸煙者見過煙包上煙害圖象警示後考慮戒煙的比較

相對風險 (95%信賴區間)			
	所有現時吸煙者	男性現時吸煙者	女性現時吸煙者
過渡期對比實施前	0.86 (0.68-1.08)	0.80 (0.62-1.02)	1.30 (0.72-2.34)
全面實施後對比實施前	0.96 (0.76-1.21)	0.94 (0.73-1.20)	1.12 (0.60-2.03)
全面實施後對比過渡期	1.12 (0.98-1.27)	1.18 (1.02-1.36) *	0.85 (0.61-1.19)

所有百分比根據2017或2018年現時吸煙者的性別及年齡分佈加權處理。  
\*p<0.05；\*\*p<0.01；\*\*\*p<0.001

圖六顯示，從新款煙害圖象警示實施前到過渡期內，過去30日在準備吸煙時因看到煙害圖象警示而停止吸煙的現時吸煙者維持在9.1%，但在全面實施後增加至10.8%。同期，該百分比在女性現時吸煙者中從5.5%大幅增至13.4%。這三次調查之間的差異並無統計學顯著性。表五顯示，在全面實施後，與實施前及過渡期相比，女性現時吸煙者在準備吸煙時因看到煙害圖象警示而停止吸煙的可能性分別高138%（95%信賴區間-30%-714%）及47%（95%信賴區間-20%-170%）。這些停止吸煙的行為及相對風險在女性現時吸煙者中的上升，雖然值得注意，但並無統計學顯著性，樣本量小可能是導致此結果的主要原因。

圖六



表五 實施前、過渡期及全面實施後，過去30日現時吸煙者在準備吸煙時因看到煙包上煙害圖象警示而停止吸煙的比較

相對風險 (95%信賴區間)			
	所有現時吸煙者	男性現時吸煙者	女性現時吸煙者
過渡期對比實施前	1.00 (0.63-1.58)	0.93 (0.57-1.52)	1.62 (0.47-5.58)
全面實施後對比實施前	1.18 (0.75-1.86)	1.05 (0.64-1.70)	2.38 (0.70-8.14)
全面實施後對比過渡期	1.18 (0.92-1.51)	1.12 (0.86-1.46)	1.47 (0.80-2.70)

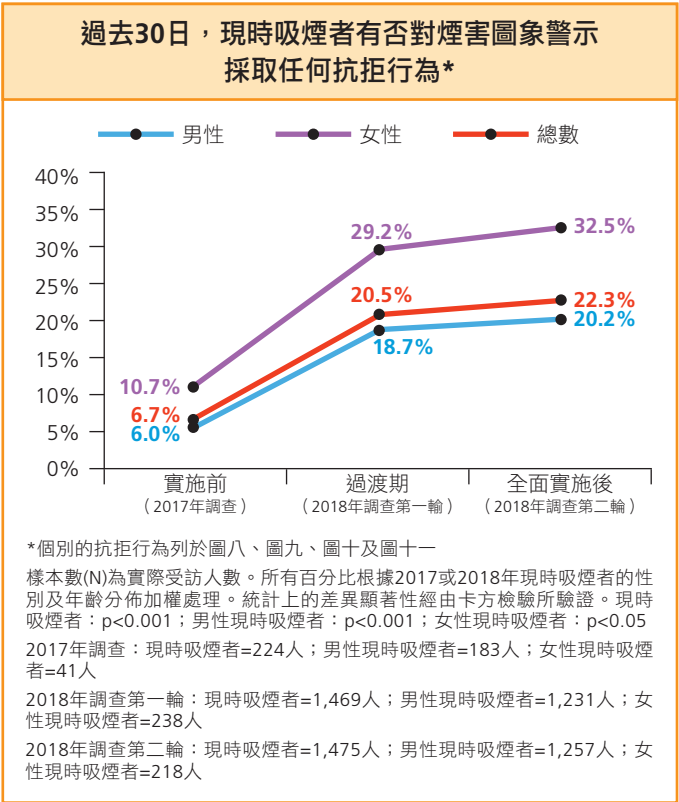
所有百分比根據2017或2018年現時吸煙者的性別及年齡分佈加權處理。  
\*p<0.05；\*\*p<0.01；\*\*\*p<0.001

3.4 現時吸煙者為避免看到煙害圖象警示而採取的抗拒行為

2017年調查（實施前）、2018第一輪（過渡期）及第二輪（全面實施後）調查都研究了現時吸煙者用以避免看到煙害圖象警示的四項可能的抗拒行為，包括：（1）遮蓋煙包、（2）把煙包放在看不到的地方、（3）轉用其他煙包、以及（4）避免購買特定圖象警示款式的煙包。

圖七顯示，在實施新款煙害圖象警示前，6.7%的現時吸煙者在過去30日內實行了上述四項抗拒行為中的至少一項。此百分比在過渡期內增至20.5%，並在全面實施後進一步增至22.3%。這三次調查之間在所有現時吸煙者中的差異具有統計學顯著性（p<0.001）。相似的顯著增加亦見於男性（p<0.001）及女性（p<0.05）現時吸煙者。表六顯示，現時吸煙者（無論男性或女性）在過渡期內比實施前更可能作出抗拒行為。在全面實施後，現時吸煙者實行了至少一項抗拒行為的可能性，較實施前增加231%（95%信賴區間104%-437%）。在男性及女性現時吸煙者中，相應的可能性分別增加235%（95%信賴區間89%-507%）及204%（95%信賴區間32%-599%）。

圖七



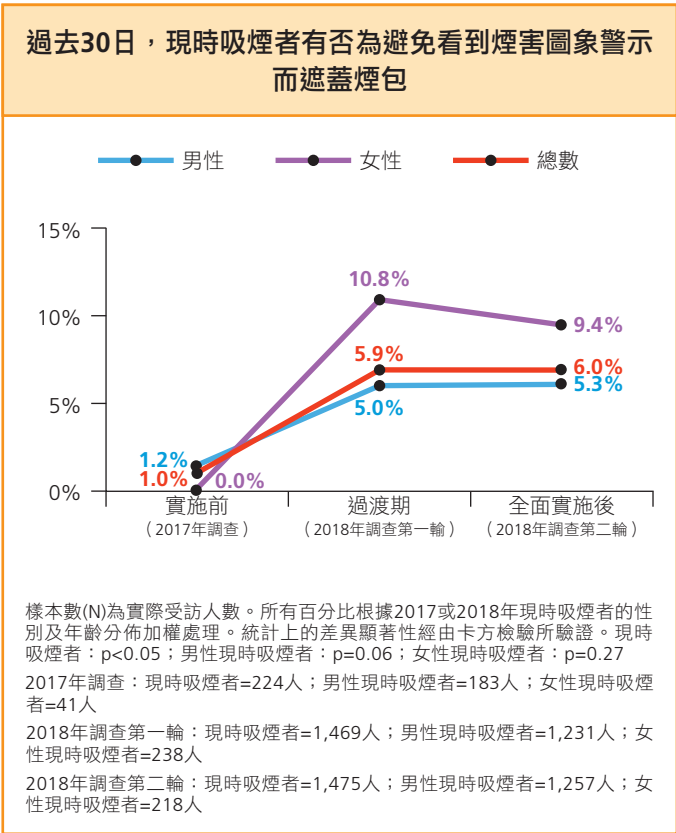
表六 實施前、過渡期及全面實施後，過去30日現時吸煙者有對煙害圖象警示採取任何抗拒行為的比較

相對風險 (95%信賴區間)			
	所有現時吸煙者	男性現時吸煙者	女性現時吸煙者
過渡期對比實施前	3.06 (1.89-4.96) ***	3.17 (1.77-5.68) ***	2.74 (1.20-6.26) *
全面實施後對比實施前	3.31 (2.04-5.37) ***	3.35 (1.89-6.07) ***	3.04 (1.32-6.99) **
全面實施後對比過渡期	1.08 (0.92-1.27)	1.07 (0.89-1.28)	1.11 (0.81-1.52)

所有百分比根據2017或2018年現時吸煙者的性別及年齡分佈加權處理。  
\*p<0.05；\*\*p<0.01；\*\*\*p<0.001

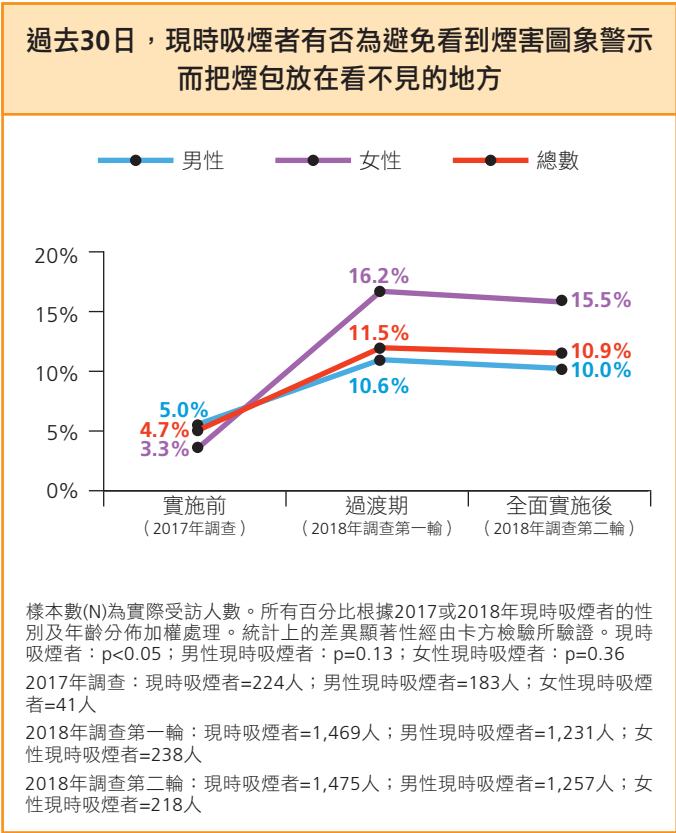
圖八顯示，在實施新款煙害圖象警示前，有1.0%的現時吸煙者在過去30日內遮蓋煙包以避免看到煙害圖象警示。此百分比在過渡期增至5.9%，並在全面實施後維持在相若的水平（6.0%）。這三次調查之間在所有現時吸煙者中的差異具有統計學顯著性（ $p<0.05$ ）。表七顯示，現時吸煙者在過渡期內及全面實施後遮蓋煙包的機會比實施前高逾5倍。過渡期內與全面實施後的結果相近。

圖八



圖九顯示，在實施新款煙害圖象警示前，有4.7%的現時吸煙者把煙包放在看不到的地方以避免看到煙害圖象警示。此百分比在過渡期增至11.5%，並在全面實施後維持在相若的水平（10.9%）。這三次調查之間在所有現時吸煙者中的差異具有統計學顯著性（ $p<0.05$ ）。表八顯示，現時吸煙者在過渡期內及全面實施後把煙包放在看不到的地方的機會比實施前高約1.5倍。過渡期內與全面實施後的結果相近。

圖九



表七 實施前、過渡期及全面實施後，過去30日現時吸煙者為避免看到煙害圖象警示而遮蓋煙包的比較

相對風險 (95%信賴區間)			
	所有現時吸煙者	男性現時吸煙者	女性現時吸煙者#
過渡期對比實施前	6.14 (1.89-19.97) **	4.32 (1.31-14.20) *	不適用
全面實施後對比實施前	6.19 (1.90-20.21) **	4.59 (1.40-15.09) *	不適用
全面實施後對比過渡期	1.01 (0.72-1.41)	1.06 (0.72-1.58)	0.88 (0.46-1.68)

所有百分比根據2017或2018年的性別、年齡及吸煙狀況分佈加權處理。  
#女性現時吸煙者的相對風險無法計算，因為在2017年並沒有女性現時吸煙者在過去30日為避免看見煙害圖象警示遮蓋煙包  
\* $p<0.05$ ；\*\* $p<0.01$ ；\*\*\* $p<0.001$

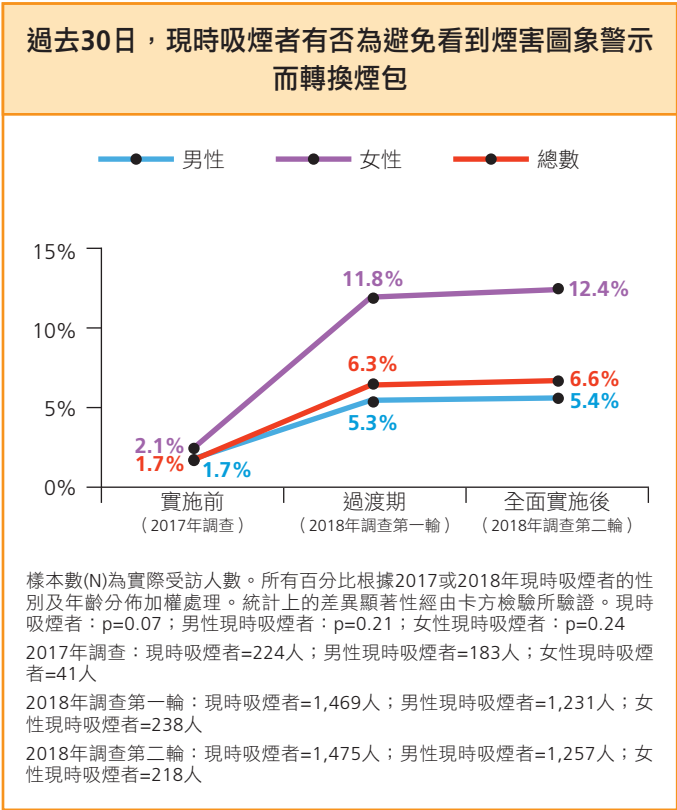
表八 實施前、過渡期及全面實施後，過去30日現時吸煙者為避免看到煙害圖象警示而把煙包放在看不見的地方的比較

相對風險 (95%信賴區間)			
	所有現時吸煙者	男性現時吸煙者	女性現時吸煙者
過渡期對比實施前	2.48 (1.34-4.58) **	2.16 (1.10-4.22) *	4.94 (1.20-20.38) *
全面實施後對比實施前	2.35 (1.27-4.36) **	2.03 (1.04-3.99) *	4.73 (1.13-19.83) *
全面實施後對比過渡期	0.95 (0.75-1.20)	0.94 (0.72-1.23)	0.96 (0.59-1.56)

所有百分比根據2017或2018年現時吸煙者的性別及年齡分佈加權處理。  
\*p<0.05；\*\*p<0.01；\*\*\*p<0.001

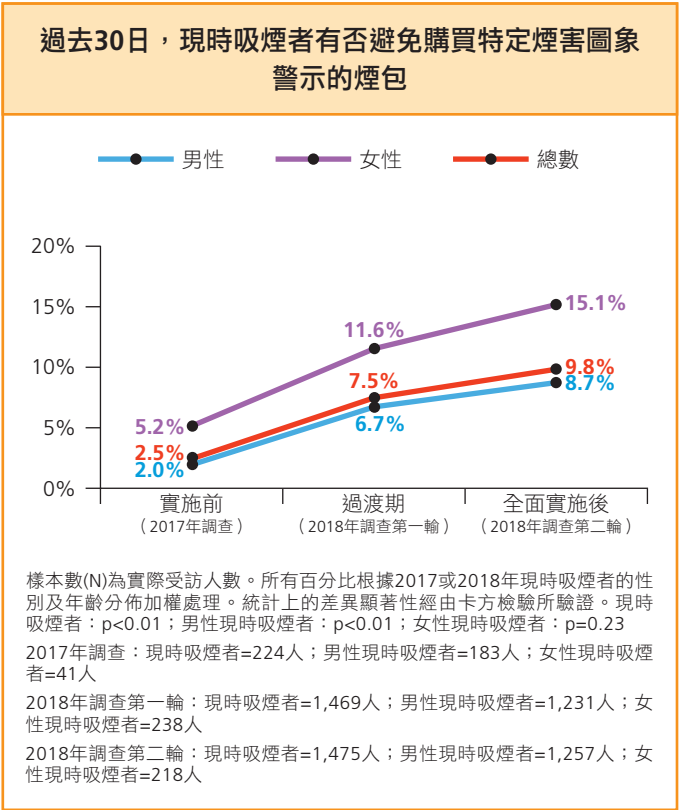
圖十顯示，在實施新款煙害圖象警示前，有1.7%的現時吸煙者在過去30日內轉換煙包以避免看到煙害圖象警示。此百分比在過渡期內增至6.3%，並在全面實施後維持在相若的水平（6.6%）。這三次調查之間在所有現時吸煙者中的差異的統計學顯著性為邊際水平（p=0.07）。表九顯示，在過渡期內及全面實施後，現時吸煙者轉換煙包的機會比實施前高逾2.5倍。過渡期內與全面實施後的結果相近。

圖十



圖十一顯示，在實施新款煙害圖象警示前，2.5%的現時吸煙者在過去30日內避免購買特定煙害圖象警示的煙包。此百分比在過渡期內增至7.5%，並在全面實施後進一步增至9.8%。這三次調查之間在所有現時吸煙者中的差異具有統計學顯著性（p<0.001）。表十顯示，現時吸煙者在過渡期內及全面實施後避免購買特定煙害圖象警示的煙包的機會比實施前高約2至3倍。過渡期與全面實施後的結果差異並無統計學顯著性。

圖十一





表九 實施前、過渡期及全面實施後，過去30日現時吸煙者為避免看到煙害圖象警示而轉換煙包的比較

相對風險 (95%信賴區間)			
	所有現時吸煙者	男性現時吸煙者	女性現時吸煙者
過渡期對比實施前	3.69 (1.28-10.63) *	3.22 (0.94-10.99)	5.46 (0.75-39.85)
全面實施後對比實施前	3.83 (1.33-11.03) *	3.30 (0.97-11.24)	5.75 (0.78-42.40)
全面實施後對比過渡期	1.04 (0.75-1.43)	1.02 (0.69-1.51)	1.05 (0.60-1.86)

所有百分比根據2017或2018年現時吸煙者的性別及年齡分佈加權處理。  
\*p<0.05；\*\*p<0.01；\*\*\*p<0.001

表十 實施前、過渡期及全面實施後，過去30日現時吸煙者有否避免購買特定煙害圖象警示的煙包的比較

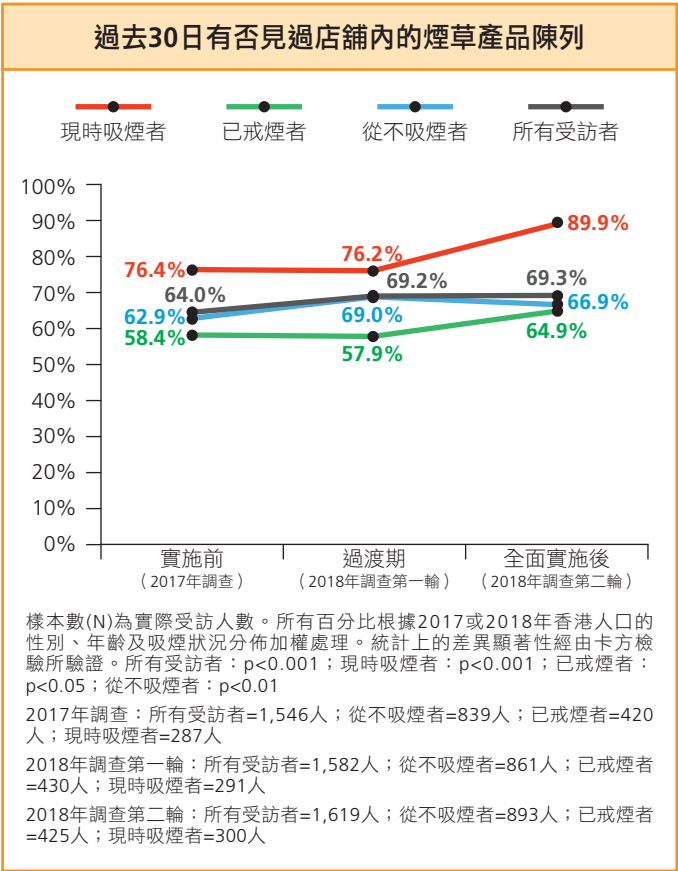
相對風險 (95%信賴區間)			
	所有現時吸煙者	男性現時吸煙者	女性現時吸煙者
過渡期對比實施前	3.00 (1.43-6.29) **	3.38 (1.34-8.52) *	2.23 (0.65-7.61)
全面實施後對比實施前	3.88 (1.86-8.11) ***	4.36 (1.74-10.92) **	2.88 (0.84-9.88)
全面實施後對比過渡期	1.29 (0.99-1.70)	1.29 (0.94-1.77)	1.29 (0.75-2.22)

所有百分比根據2017或2018年現時吸煙者的性別及年齡分佈加權處理。  
\*p<0.05；\*\*p<0.01；\*\*\*p<0.001

3.5 對店舖煙草產品陳列的認知

圖十二顯示，在實施新款煙害圖象警示前，64.0%的所有受訪者（76.4%的現時吸煙者、58.4%的已戒煙者及62.9%的從不吸煙者）在過去30日有見過店舖內的煙草產品陳列。此百分比在過渡期內增至69.2%，並在全面實施後維持相若的水平（69.3%）。始於過渡期，見過店舖內的煙草產品陳列的現時吸煙者及已戒煙者的增幅較從不吸煙者的更大。無論是在所有受訪者中（p<0.001）還是在每個吸煙狀況群組中（所有p<0.05），過去30日內見過店舖內的煙草產品陳列的受訪者的百分比在三次調查之間的差異均具有統計學顯著性。表十一顯示，所有受訪者及現時吸煙者在全面實施後，見過店舖內的煙草產品陳列的可能性比實施前分別高10%（95%信賴區間4%-17%）及19%（95%信賴區間10%-28%）。現時吸煙者在全面實施後見過店舖內的煙草產品陳列的可能性比過渡期高14%（95%信賴區間6%-22%）。

圖十二



表十一 實施前，過渡期及全面實施後，過去30日有否見過店舖煙草產品陳列的比較

相對風險 (95%信賴區間)				
	所有受訪者	現時吸煙者	已戒煙者	從不吸煙者
過渡期對比實施前	1.06 (0.99-1.13)	1.05 (0.96-1.15)	1.02 (0.91-1.14)	1.07 (0.99-1.15)
全面實施後對比實施前	1.10 (1.04-1.17) **	1.19 (1.10-1.28) ***	1.15 (1.04-1.28) **	1.08 (1.01-1.16) *
全面實施後對比過渡期	1.04 (0.98-1.10)	1.14 (1.06-1.22) ***	1.13 (1.02-1.26) *	1.02 (0.95-1.09)

所有百分比根據2017或2018年香港人口的性別、年齡及吸煙狀況分佈加權處理。

\*p<0.05；\*\*p<0.01；\*\*\*p<0.001

## 4. 討論

在2017年12月新款煙害圖象警示實施後不久，有超過十分之一的受訪者已經在過渡期內見過新款煙害圖象警示。他們表示所見過的煙害圖象警示大多數是新款的。在過渡期內（2018年調查第一輪），無論吸煙或非吸煙者都對煙害圖象警示的認知有所提高，並在全面實施之後（2018年調查第二輪）進一步提高。

煙害圖象警示向吸煙者及非吸煙者有效地傳達吸煙危害之訊息。與實施新款煙害圖象警示前相比，全面實施後有更多受訪者想到吸煙的危害。在現時吸煙者及已戒煙者中，增幅更為明顯。2018年第一輪（過渡期）及第二輪（全面實施後）調查結果顯示擴大及帶有更強烈的警嚇性內容及圖片的煙害圖象警示所帶來的短期效用。未來的控煙政策調查應該評估新款煙害圖象警示的長期效用。是次結果可用於推動其他正在考慮擴大煙包上的煙害圖象警示的國家和地區。

儘管有更多現時吸煙者在全面實施新款煙害圖象警示後想到吸煙的危害，但考慮戒煙或準備吸煙時因看到警示而停止吸煙的現時吸煙者並未顯著增加。這表明新款煙害圖象警示能否促進戒煙尚無定論，樣本量太小可能是其中一個原因。另一個原因可能是香港是世界上發達國家和地區中吸煙率最低的地方之一，其吸煙者是強硬的吸煙者。即使新款煙害圖象警示讓他們更多想到吸煙的危害，他們仍不願戒煙。新款煙害圖象警示對現時吸煙者的影響需更大的樣本量作進一步評估。

為避免看到煙害圖象警示，現時吸煙者的抗拒行為在過渡期（2018年調查第一輪）內大幅增加，並在全面實施新款煙害圖象警示後（2018年調查第二輪）再略有增加。一個可能的原因是，將近一半的現時吸煙者在過渡期內已經見過新款煙害圖象警示，並可能產生了反應，

因而全面實施後的增加不太明顯。先前有一研究顯示，這些抗拒行為會產生反向的作用，增加「不想要」的想法出現，例如激發想到吸煙的危害並增加戒煙的動機<sup>11</sup>。這些抗拒行為與隨後的戒煙行為之間的關係值得再作研究。

按照世衛《煙草控制框架公約》第11條<sup>1</sup>的建議，締約方應採用全煙害警示包裝，以進一步降低煙包的吸引力。目前，已有近20個國家實施了全煙害警示包裝（例如，澳洲、法國、愛爾蘭、泰國、加拿大、新加坡及烏拉圭）或通過相關法律（例如羅馬尼亞）<sup>12, 13</sup>。全煙害警示包裝是指禁止所有煙草品牌元素，包括標語、商標、顏色及促銷元素，只可使用統一字款顯示品牌名稱、不吸引的顏色及更大的煙害圖象警示。除了減少煙包的吸引力外，全煙害警示包裝還可以減少吸煙者對某些捲煙品牌危害較小的誤解，並使煙害圖象警示的顯眼度不被商標分散，從而增強其效力<sup>11, 14</sup>。

長期使用同一套煙害圖象警示而不轉換，警示的效力會隨時間而降低<sup>15, 16</sup>，因此香港特區政府應在適當時候考慮輪換交替。《煙草控制框架公約》第11條建議輪換交替煙害圖象警示以維持其效力<sup>1</sup>，並強烈推薦每1至2年交替一次<sup>11</sup>。香港特區政府應準備另一套煙害圖象警示，並儘快實施輪換。我們強烈建議新的警示應包括「兩個吸煙者，至少一個會被煙草殺害。」以進一步加強警示煙草產品的危害。

新款煙害圖象警示實施前（2017年調查）及在過渡期內（2018年調查第一輪），現時吸煙者對店舖煙草產品陳列的認知相似，但在全面實施後開始增加（2018年第二輪與第一輪調查相比）。這可能是由於煙草業採取了一些應對措施，以減少吸煙者在店舖內見到新款煙害圖象

警示。例如，一些店舖只展示煙包的底部或頂部，這些表面並無煙害圖象警示，但清楚地展示了捲煙品牌的商標、顏色及設計。煙草產品亦展示於華麗的陳列箱中。這些措施可以吸引吸煙者使用煙草產品<sup>17</sup>。先前的研究發現，移除店舖煙草產品陳列會減少煙草產品的使用並促進戒煙<sup>18, 19</sup>。我們倡議香港政府根據《煙草控制框架公約》第13條考慮移除店舖煙草陳列<sup>20</sup>。澳門自2018年1月起已實施該項政策<sup>21</sup>。《煙草控制框架公約》第13條申明全面禁止煙草廣告、促銷及贊助可減少煙草產品的消費，其中包括禁止店舖煙草產品陳列，避免成為一種銷售及分銷手段<sup>22</sup>。

為鼓勵戒煙，政府應實施更有效的控煙措施，例如大幅及每年增加煙草稅，以及進一步擴大禁煙區。還應投放更多資金進行公眾教育、免費戒煙服務、製定更有效的干預措施及各項檢控煙政策的嚴格評估。

## 5. 研究局限

本研究有些局限。首先，「現時吸煙者」既包括每日吸煙者，也包括偶爾吸煙者；「已戒煙者」包括過去每日及偶爾吸煙者。每日吸煙者及偶爾吸煙者之間的與吸煙有關的行為、認知及意見可能有所不同，但本次研究的目的並不需進行此區別。其次，所有數據都是通過電話訪問收集的，而訪問員並未核實受訪者的吸煙狀況。但是，此方法可以確保匿名性，以便收集更真實的數據。第三，橫斷面研究設計限制了我們測量同一組受訪者隨時間的變化。具有縱向數據的隊列研究或追蹤調查將更好地量度同一個人隨時間的變化。最後，所有數據都是自我報告的，可能會存在回憶偏差。

## 6. 結論

當新款煙害圖象警示逐漸取代舊款煙害圖象警示時，公眾對煙害圖象警示的認知逐漸增多。全面實施新款煙害圖象警示後，更多現時吸煙者想到吸煙的危害，但他們因此考慮戒煙或停止吸煙的證據尚無定論。這些結果顯示了新款煙害圖象警示的一些短期效果，但也提示有需要對其長期效果進行持續評估。為維持煙害圖象警示的效力，香港政府應準備一套新的煙害圖象警示，以便儘快作輪換交替。全面實施新款煙害圖象警示後，公眾對店舖煙草產品陳列的認知有所增加，這可能表明煙草業採取了應對策略以鼓勵吸煙。因此，店舖煙草產品陳列應被禁止。

## 7. 2018年第一輪及第二輪調查的其他主要結果

### 7.1 對電子煙及加熱非燃燒煙草製品（加熱煙）的認知及使用情况

- 在第一輪調查中，大多數受訪者（81.3%）（86.9%的現時吸煙者、83.2%的已戒煙者及80.5%的從不吸煙者）都知道電子煙。在第二輪調查中未問及對電子煙的認知。
- 在第一輪調查中，有3.6%的受訪者曾經使用過電子煙，在第二輪調查中，有2.9%的受訪者曾經使用過電子煙。在現時吸煙者中，電子煙曾經使用率分別為25.9%及27.0%。在已戒煙者中，分別為2.9%及2.3%。
- 在第一輪及第二輪調查中，均有0.7%的受訪者現時（過去30日）使用電子煙。在現時吸煙者中，電子煙現時使用率分別為5.2%及6.5%。
- 在第一輪調查中，有四分之一（24.5%）的所有受訪者（43.6%的現時吸煙者、23.4%的已戒煙者及22.3%的從不吸煙者）知道加熱煙。在第二輪調查中，此百分比增至27.4%（53.1%的現時吸煙者、23.3%的已戒煙者及24.5%的從不吸煙者）。
- 在第一輪調查中，1.7%的受訪者曾經使用過加熱煙。在第二輪調查中，曾經使用率為2.5%。在兩輪調查中，現時吸煙者的曾經使用率分別為14.5%及24.1%，已戒煙者的曾經使用率分別為1.6%及0.4%。
- 在第一輪調查中，加熱煙現時（過去30日）使用率為0.7%，在第二輪調查中為1.0%。在現時吸煙者中，加熱煙現時使用率分別為6.4%及9.8%。

### 7.2 在過去4週中，現時吸煙者使用單一及多種煙草產品的情況

- 在第二輪調查中，絕大多數（81.5%）的現時吸煙者在過去4週中僅使用過一種煙草產品（捲煙：76.0%、加熱煙：2.3%、電子煙：1.2%、其他煙草產品：2.1%）。在第一輪調查中未問及過去4週使用多種煙草產品的情況。
- 大約13.7%的現時吸煙者在過去4週中曾經使用過兩種或更多煙草產品。
- 使用多種煙草產品最常見組合包括「捲煙及加熱煙」（4.5%），「捲煙及電子煙」（2.8%），「捲煙、加熱煙及電子煙」（1.6%）及「加熱煙及電子煙」（0.2%）。

### 7.3 現時吸煙者的吸煙及戒煙的特徵

- 在第一輪及第二輪調查中，現時吸煙者在過去7天內平均每天分別吸食12.4（標準差8.3）及12.7（標準差8.3）支捲煙。
- 現時吸煙者中有近一半（第一輪調查為46.7%、第二輪調查為44.9%）在醒來後30分鐘內吸食第一支捲煙。
- 現時吸煙者中有一半（第一輪調查為50.9%、第二輪調查為54.7%）無意戒掉所有類型的煙草產品。很少現時吸煙者計劃在6個月內戒煙（第一輪及第二輪調查分別為18.7%及15.7%）。
- 在第一輪及第二輪調查中，分別有13.1%及13.2%的現時吸煙者曾經使用過戒煙服務。當中分別有20.5%及19.2%曾經使用過戒煙產品。

### 7.4 在家中接觸二手煙

- 在第一輪及第二輪調查中，分別有14.0%及14.2%的受訪者表示過去7日在家中接觸過二手煙。排除在過去7日沒有在家中接觸二手煙的受訪者，過去7日在家中接觸二手煙的平均日數分別為4.4及4.5日。

### 7.5 提高煙草稅

- 大多數受訪者（第一輪調查為81.4%、第二輪調查為79.6%）支持政府明年提高煙草稅，其中分別有51.6%及54.2%的人認為增幅應等於或高於通脹。
- 大多數受訪者（第一輪調查為75.6%、第二輪調查為70.9%）支持政府每年提高煙草稅，其中分別有51.0%及47.5%的人認為增幅應等於或高於通脹。

### 7.6 煙草促銷、廣告及贊助

- 超過三分之二的受訪者（第一輪調查為67.8%，第二輪調查為70.6%）認為店舖內的煙草陳列是煙草廣告及促銷。大約三分之二的受訪者（第一輪調查為66.8%、第二輪調查為65.0%）支持禁止店舖內的煙草產品陳列。

### 7.7 擴大禁煙區

- 超過90%的受訪者（第一輪調查為93.7%、第二輪調查為96.0%）支持將法定禁煙區擴大到所有公共交通車站，例如的士站、公共小巴士站、巴士站及電車站。

- 超過九成的受訪者（第一輪調查為94.7%、第二輪調查為93.7%）支持完全禁止在公共地方排隊的人吸煙。
- 超過八成的受訪者支持將法定的禁煙範圍擴大至行人路（第一輪調查為82.5%、第二輪調查為83.4%）及繁忙的街道（第一輪調查為84.0%、第二輪調查為83.1%）。
- 此外，超過八成的受訪者（第一輪調查為85.5%、第二輪調查為84.8%）支持提高禁煙區吸煙的罰款。

### 7.8 對未來控煙政策的意見

- 大多數受訪者（第一輪調查為83.3%、第二輪調查為79.5%）及現時吸煙者（第一輪調查為67.3%、第二輪調查為69.3%）支持將購買捲煙的合法年齡從18歲提高到21歲。
- 超過九成的受訪者（第一輪調查為90.1%、第二輪調查為92.7%）及超過四分之三的現時吸煙者（第一輪調查為75.6%、第二輪調查為83.6%）支持僅允許持有牌照的店舖出售煙草產品。
- 將近八成的受訪者（第一輪調查為79.0%、第二輪調查為79.4%）支持設定一個會逐年減少的捲煙銷售配額。第一和第二輪調查中分別有47.9%及39.7%現時吸煙者支持。
- 大多數受訪者（第一輪調查為65.9%、第二輪調查為68.0%）同意，當香港的吸煙率降至5%或更低時完全禁止吸煙。第一和第二輪調查中分別有39.7%及34.8%的現時吸煙者支持。
- 大多數受訪者（第一輪調查為65.9%、第二輪調查為70.8%）支持全面禁止銷售所有類型的煙草產品。第一和第二輪調查中分別有35.5%及33.1%的現時吸煙者支持。
- 超過三分之二的受訪者（第一輪調查為69.1%、第二輪調查為72.7%）支持全面禁止使用所有類型的煙草產品。第一和第二輪調查中分別有31.8%及33.6%的現時吸煙者支持。



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附件：新款煙包煙害圖象警示（自2017年12月21日起推出，2018年6月21日起全面實施）



圖象內容：爛腳趾



圖象內容：肺癌



圖象內容：殮房的屍體



圖象內容：喪禮中女人的遺像



圖象內容：燒鈔票



圖象內容：下垂的捲煙



圖象內容：使用氧氣罩的男人



圖象內容：插鼻胃管的女人



圖象內容：起皺紋的女人



圖象內容：有造口的喉嚨



圖象內容：使用助行器



圖象內容：患病的小童

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# Effectiveness of New and Enlarged Pictorial Health Warnings on Cigarette Packs

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## Effectiveness of New and Enlarged Pictorial Health Warnings on Cigarette Packs Tobacco Control Policy-related Surveys 2018

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### 1. Introduction

Under Article 11 of the Framework Convention on Tobacco Control (FCTC), the World Health Organization (WHO) highly recommends its signatories to adopt pictorial health warnings that large, visible, clear and legible messages on harms of tobacco use should be displayed on the principal areas of each tobacco pack<sup>1</sup>. Pictorial health warnings are a cost-effective channel to disseminate knowledge of harms of smoking. Previous studies have shown that pictorial health warnings effectively arouse negative emotional reactions (e.g. fears and worries), preventing smoking initiation in never smokers and promoting intention to quit in smokers<sup>2-5</sup>. As of 11 February 2020, 109 countries and jurisdictions have finalized pictorial health warnings that cover at least 50% of the principal areas of each tobacco product pack, with 8 having the warnings covering at least 85%<sup>6</sup>.

Pictorial health warnings on tobacco packages were first introduced in Hong Kong in 2007, after the adoption of text health warnings in 1983<sup>7</sup>. Each package was required to bear one of 6 pictorial health warnings that covered at least 50% of the area of the 2 largest surfaces<sup>8</sup>. A territory-wide study in Hong Kong found pictorial health warnings might have made the social environment less favourable for smoking, even in hardcore smokers<sup>9</sup>.

Remaining unchanged for a decade, these pictorial health warnings might have become less effective in discouraging smoking. The Smoking (Public Health) (Notices) (Amendment) Order 2017 (the Amendment Order), which aimed to amend the requirements on the pictorial health warnings, was passed in June 2017. The Amendment Order requires at least 85% of the 2 largest surfaces of each cigarette pack to be covered by one of the 12 new pictorial health warnings (including damaged toes, lung cancer, a body at mortuary, a funeral with a portrait of the deceased young lady, burning banknotes, a downward curving cigarette, a man using oxygen mask, a woman using nasogastric tube in hospital, a wrinkled woman, throat with hole, use of walker and an ill child)<sup>10</sup>(Appendix). The Integrated Smoking Cessation Hotline (1833 183) must also be shown. A 6-month transitional period (from 21 December 2017 to 20 June 2018) was granted, during which it was still legal to sell tobacco products with the old warnings. Tobacco products must be covered by the new pictorial health warnings from 21 June 2018.

The new and enlarged warnings with stronger images and warning messages aim to reduce tobacco use in Hong Kong, but the effectiveness has not been studied. Smokers may have counteractions in response to the new pictorial



health warnings, which were understudied. Effects of the new pictorial health warnings and the counteractions of smokers should be examined.

The Hong Kong Council on Smoking and Health (COSH) has commissioned the Tobacco Control Policy-related Survey (TCPS), a regular cross-sectional survey, to collect population-representative information on smoking and related public opinions since 2013. Since 2015, each survey recruits around 5,100 respondents, with oversampling of current smokers and ex-smokers. TCPS 2018 included 2 waves of surveys, conducted during the transitional period of the Amendment Order (Wave 1) and after full implementation (Wave 2). Together with TCPS 2017, effects of the new pictorial health warnings can be evaluated. The periods of TCPS 2017, TCPS 2018 Wave 1 and TCPS 2018 Wave 2 are hereafter referred to as pre-implementation, transitional period and post-full implementation, respectively.

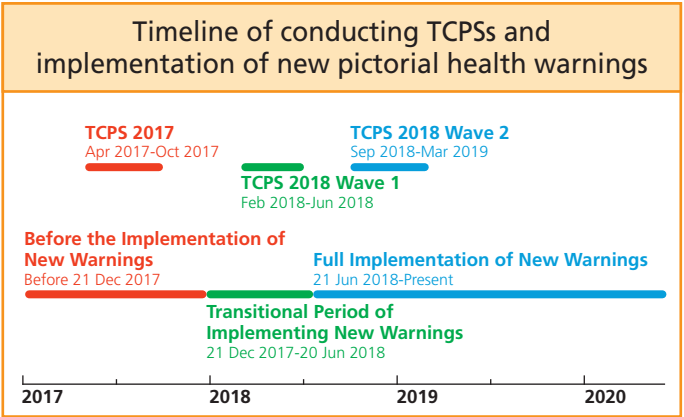
## 2. Methods

### 2.1 Study design and participants

Anonymous computer-assisted telephone interviews were conducted by the Public Opinion Programme, The University of Hong Kong (currently known as Hong Kong Public Opinion Research Institute Limited). Figure 1 shows the 3 survey periods of TCPSs in relation to the schedule of implementation of the new health warnings: April to October 2017 (pre-implementation), February to June 2018 (transitional period) and September 2018 to March 2019 (post-full implementation). Respondents aged 15 years or above and spoke Cantonese were recruited. They were divided into 3 groups: (a) current smokers, who smoked daily or occasionally at the time of survey; (b) ex-smokers, who smoked previously but did not smoke any at the time of the survey; and (c) never smokers, who had never smoked in their lifetime. Smoking referred only to using cigarettes in 2017, and using all types of tobacco products in the 2 waves of surveys in 2018. This renders the results between 2017 and 2018 less comparable. Telephone calls took place between 2:00 pm and 10:30 pm on weekdays and weekends to cover respondents of different occupations and working hours. Each randomly selected telephone number was called 5 times, at different hours and days of the week, before being considered as “non-contact”. All respondents provided oral consent before

the interview and could withdraw from the interview at any time. The protocol of this study, including respondent recruitment, oral informed consent procedures and data collection, was approved by the Institutional Review Board of The University of Hong Kong/Hospital Authority Hong Kong West Cluster.

Figure 1



### 2.2 Sampling methods and respondent selection

Telephone numbers were randomly selected from a sampling frame originated from the residential telephone directories. To capture unlisted numbers, another set of numbers was generated by a computer programme using the “plus/minus one/two” method and appended to the sampled numbers. After eliminating duplicated numbers, the remaining numbers were dialled in random order. When a telephone contact was successfully established with a target household, one eligible person would be selected from all eligible family members who were at home at the time of the interview, using the “next birthday” procedure.

### 2.3 Questionnaire development

The questionnaires used in TCPS 2017 (pre-implementation), TCPS 2018 Wave 1 (transitional period) and TCPS 2018 Wave 2 (post-full implementation) were modified from those in previous rounds of surveys, including core questions and random questions. Random question sets were designed for random subsamples of respondents with certain smoking status. Socio-demographic characteristics, such as sex, age, education attainment, monthly household income, and employment status were core questions for all respondents. Questions on pictorial health warnings in TCPS

2017 (pre-implementation) were mostly random questions for current smokers, and in TCPS 2018 Wave 1 (transitional period) and TCPS 2018 Wave 2 (post-full implementation) were mostly core questions for current smokers. Questions on point-of-sale tobacco displays were covered in various random subsets for all smoking status.

## 2.4 Weighting and statistical analysis

TCPS 2017 (pre-implementation) recruited 5,131 respondents, including 1,712 never smokers, 1,715 ex-smokers and 1,704 current smokers. TCPS 2018 Wave 1 (transitional period) recruited 5,132 respondents, including 1,713 never smokers, 1,707 ex-smokers and 1,712 current smokers. TCPS 2018 Wave 2 (post-full implementation) recruited 5,156 respondents, including 1,714 never smokers, 1,739 ex-smokers and 1,703 current smokers. Data of each survey wave were weighted against the projected sex and age distribution of the Hong Kong population and smoking status in the corresponding year to produce population-representative estimates. All percentages shown in this report are estimates for the general population.

Results presented in this report include: (a) socio-demographic characteristics of respondents, (b) awareness of pictorial health warnings (i.e. saw in the past 30 days), (c) impacts of new pictorial health warnings on smoking-related risk perceptions and behaviours, (d) counteractions of current smokers to avoid seeing pictorial health warnings, and (e) awareness of point-of-sale tobacco displays (i.e. saw in the past 30 days). The survey methods and statistical analysis used in these 3 surveys were similar.

Univariate analysis of variables of interest by smoking status was conducted using Chi-square tests. Poisson regression yielded relative risks (RRs) to estimate the effect size of the impacts of new pictorial health warnings (relative change) during the transitional period and post-full implementation. Statistical significance was set at  $p < 0.05$ . Statistical analysis was conducted using Stata (Version 15.1, TX: StataCorp LLC).

## 3. Results

### 3.1 Socio-demographic characteristics of respondents

Table 1 shows that males constituted 45.2% of TCPS 2017 (pre-implementation) sample, 45.1% of TCPS 2018 Wave

1 (transitional period) sample, and 44.9% of TCPS 2018 Wave 2 (post-full implementation) sample. Over half the respondents were aged 15-49 years in all waves (54.0% in TCPS 2017, 53.1% in TCPS 2018 Wave 1 and 53.3% in TCPS 2018 Wave 2). Most attained at least secondary education (88.1% in TCPS 2017, 88.6% in TCPS 2018 Wave 1 and 88.9% in TCPS 2018 Wave 2). About half were employed (49.0% in TCPS 2017, 54.9% in TCPS 2018 Wave 1 and 50.0% in TCPS 2018 Wave 2).

### 3.2 Awareness of pictorial health warnings

Figure 2 shows that before implementation of the new warnings, 39.0% of all respondents (77.6% of current smokers, 27.1% of ex-smokers and 35.3% of never smokers) were aware of (i.e. saw in the past 30 days) pictorial health warnings. The awareness increased to 41.8% (88.3% of current smokers, 34.6% of ex-smokers and 36.5% of never smokers) during the transitional period.

Figure 2 also shows that the awareness of the new pictorial health warnings further increased to 45.2% (88.6% of current smokers, 37.4% of ex-smokers and 40.3% of never smokers) after full implementation.

Figure 3 shows that 11.3% of all respondents and 45.6% of current smokers saw new pictorial health warnings in the past 30-days during the transitional period. Out of 100 cigarette packs they saw, the median proportion of new health warnings was 80% (IQR 50%-100%, not shown in the figure).

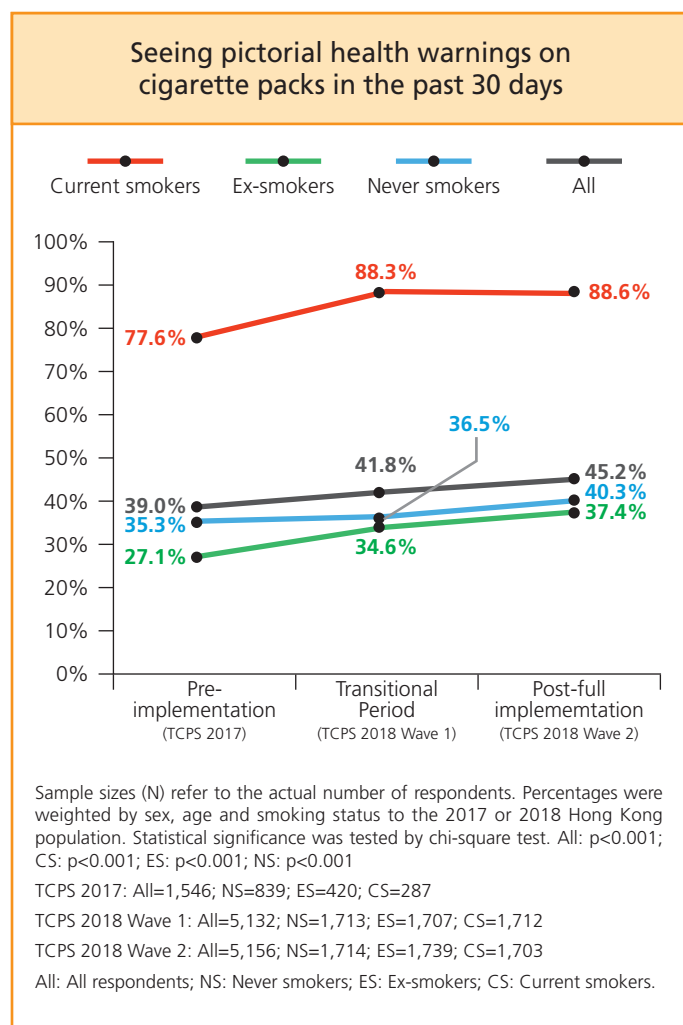
The difference among these 3 surveys was statistically significant for all respondents ( $p < 0.001$ ) and for each smoking status group (all  $p < 0.001$ ). Table 2 shows that current smokers and ex-smokers in the transitional period were more likely to be aware of pictorial health warnings than before implementation. After full implementation, all respondents were 14% (95% CI 4%–26%) and current smokers were 15% (95% CI 7%–23%) more likely to be aware of pictorial health warnings than those in the pre-implementation period. Compared with the population in the transitional period, respondents were 8% (95% CI 1%–16%) more likely to be aware of the pictorial health warnings after full implementation.

**Table 1 Socio-demographic characteristics of respondents in TCPS 2017 (Pre-implementation), TCPS 2018 Wave 1 (Transitional period) and TCPS 2018 Wave 2 (Post-full implementation)**

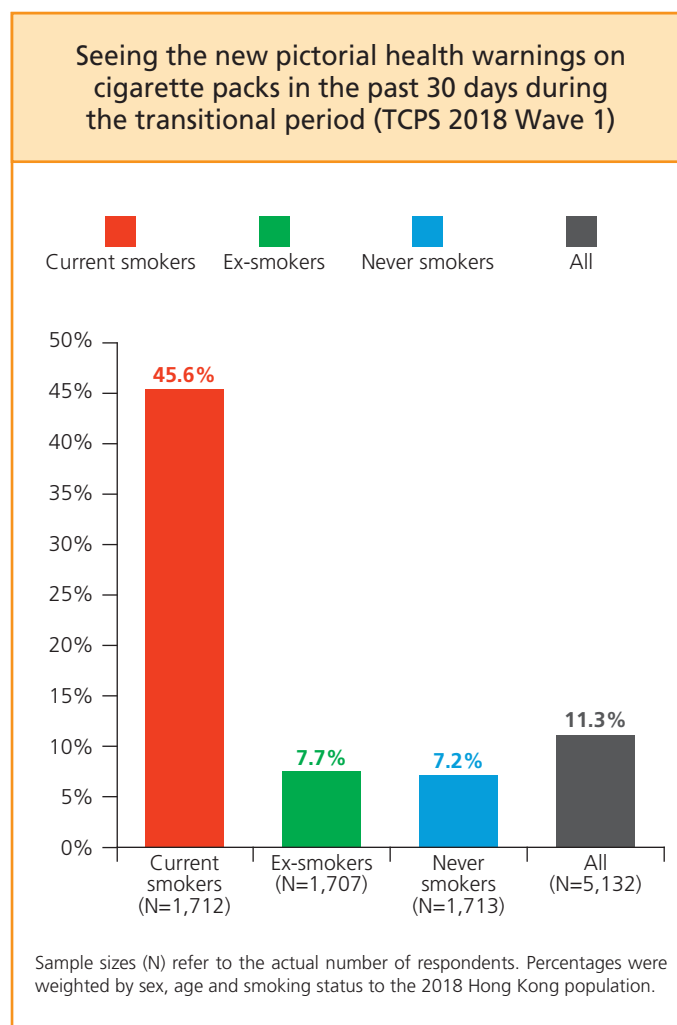
	TCPS 2017 (Pre-implementation)	TCPS 2018 Wave 1 (Transitional period)	TCPS 2018 Wave 2 (Post-full implementation)
Number of all respondents	(N=5,131)	(N=5,132)	(N=5,156)
Sex (%)			
Male	45.2	45.1	44.9
Female	54.8	54.9	55.1
Age group, years(%)			
15-29	19.2	18.5	18.6
30-39	17.5	17.4	17.5
40-49	17.3	17.2	17.2
50-59	19.1	18.6	18.7
60 or above	26.4	27.3	27.4
DK/RTA	0.5	1.0	0.6
Education attainment (%)			
Primary or below	11.6	10.7	11.1
Secondary	43.7	43.1	46.0
Tertiary	44.4	45.5	42.9
DK/RTA	0.3	0.7	0.0
Employment status (%)			
Employed	49.0	54.9	50.0
Student	10.6	8.7	9.6
Homemaker/Unemployed/Retired	39.5	35.6	40.1
DK/RTA	0.9	0.8	0.3

DK/RTA: Didn't know or refused to answer. Sample sizes (N) refer to the actual number of respondents. Percentages were weighted by sex, age and smoking status to the 2017 or 2018 Hong Kong population.

**Figure 2**



**Figure 3**



**Table 2 Changes in awareness of pictorial health warnings on cigarette packs, from pre-implementation to the transitional period and post-full implementation**

Relative Risk [RR] (95% Confidence Interval)				
	All	Current smokers	Ex-smokers	Never smokers
Transitional period vs. Pre-implementation	1.06 (0.97-1.17)	1.14 (1.06-1.23) ***	1.26 (1.05-1.51) **	1.03 (0.91-1.16)
Post-full implementation vs. Pre-implementation	1.14 (1.04-1.26) **	1.15 (1.07-1.23) ***	1.37 (1.14-1.63) ***	1.13 (0.99-1.27)
Post-full implementation vs. Transitional period	1.08 (1.01-1.16) *	1.00 (0.98-1.03)	1.08 (0.99-1.19)	1.10 (1.00-1.21)

Weighted by sex, age and smoking status to the 2017 or 2018 Hong Kong population.

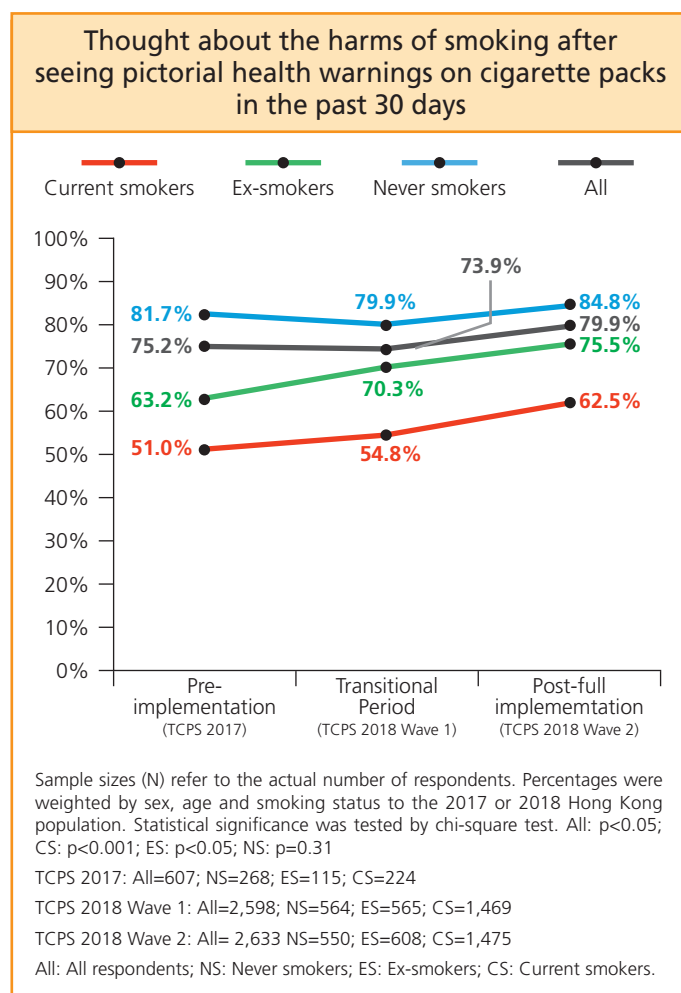
\* p<0.05; \*\* p<0.01; \*\*\* p<0.001



### 3.3 Impacts of new pictorial health warnings on smoking-related risk perceptions and behaviours

Figure 4 shows that 75.2% of all respondents (51.0% of current smokers, 63.2% of ex-smokers and 81.7% of never smokers) thought about the harms of smoking after seeing pictorial health warnings on cigarette packs in the past 30 days before implementation of the new warnings. The prevalence remained similar (73.9% of all respondents) during the transitional period but increased to 79.9% (62.5% of current smokers, 75.5% of ex-smokers and 84.8% of never smokers) after full implementation. The difference among these 3 surveys was statistically significant for all respondents ( $p<0.05$ ), current smokers ( $p<0.001$ ) and ex-smokers ( $p<0.05$ ). Table 3 shows that current smokers were 23% (95% CI 6%-43%) more likely to think about the harms of smoking after seeing pictorial health warnings post-full implementation than pre-implementation. Compared with the transitional period, all respondents were 8% (95% CI 3%-13%) and current smokers were 15% (95% CI 7%-23%) more likely to think about the harms of smoking post-full implementation.

**Figure 4**



**Table 3 Thought about the harms of smoking after seeing the pictorial health warnings in the past 30 days, from pre-implementation to the transitional period and post-full implementation**

Relative Risk [RR] (95% Confidence Interval)				
	All	Current smokers	Ex-smokers	Never smokers
Transitional period vs. Pre-implementation	0.99 (0.92-1.06)	1.08 (0.93-1.25)	1.11 (0.95-1.31)	0.98 (0.91-1.06)
Post-full implementation vs. Pre-implementation	1.06 (1.00-1.14)	1.23 (1.06-1.43) **	1.20 (1.03-1.40) *	1.04 (0.97-1.12)
Post-full implementation vs. Transitional period	1.08 (1.03-1.13) **	1.15 (1.07-1.23) ***	1.08 (1.00-1.16)	1.06 (1.00-1.12) *

Weighted by sex, age and smoking status to the 2017 or 2018 Hong Kong population.

\*  $p<0.05$ ; \*\*  $p<0.01$ ; \*\*\*  $p<0.001$

Figure 5 shows that, before implementation, 32.8% of current smokers thought about quitting after seeing the pictorial health warnings on cigarette packs in the past 30 days. The prevalence decreased to 27.8% during the transitional period but then increased to 31.0% post-full implementation. The difference among these 3 surveys was not statistically significant. Table 4 also shows no significant change across surveys, except that male current smokers were more likely to think about quitting after full implementation than during the transitional period.

**Figure 5**

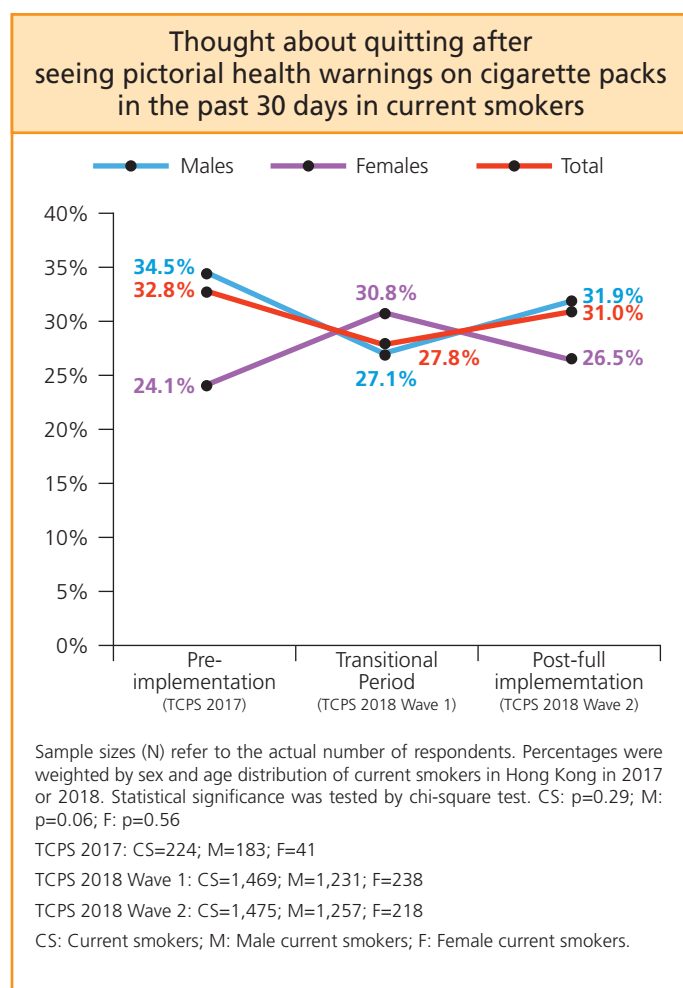
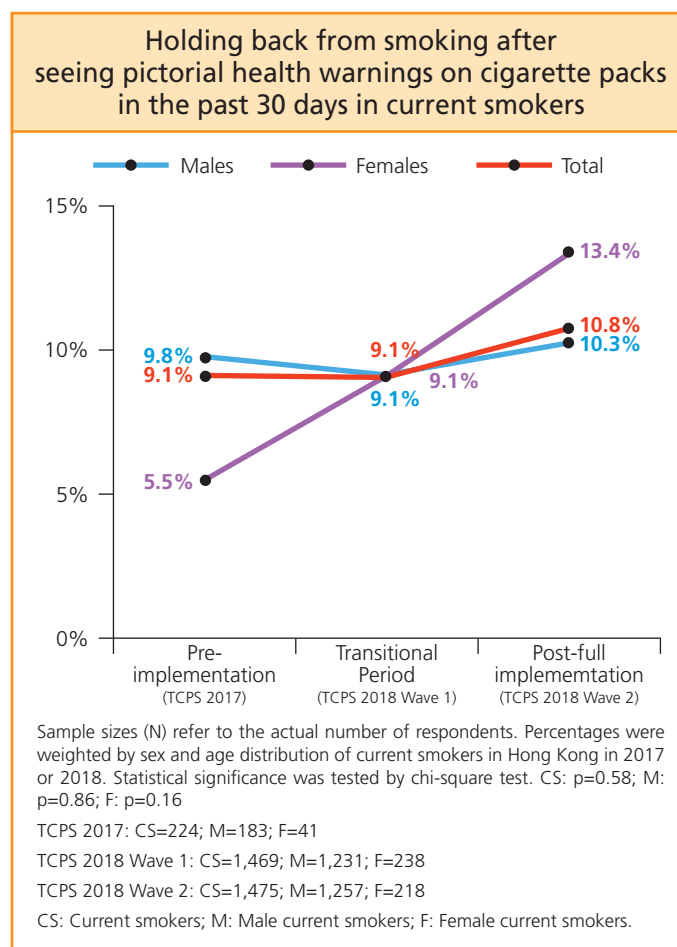


Figure 6 shows that the prevalence of current smokers holding back from smoking after noticing pictorial health warnings remained unchanged as 9.1% before implementation and during the transitional period, but increased to 10.8% after full implementation. A sharp increase was observed in female current smokers that the prevalence increased from 5.5% to 13.4% over the same period. The difference among these 3 surveys was not statistically significant. Table 5 shows that female current smokers were 138% (95% CI -30%-720%) and 47% (95% CI -20%-170%) more likely to hold back from smoking after full implementation of new pictorial health warnings than pre-implementation and during the transitional period, respectively. The difference in prevalence and RRs for female current smokers were remarkable but not significant, possibly due to the small number of them in the surveys.

**Figure 6**



**Table 4 Thought about quitting after seeing pictorial health warnings in the past 30 days in current smokers, from pre-implementation to the transitional period and post-full implementation**

Relative Risk [RR] (95% Confidence Interval)			
	All current smokers	Male current smokers	Female current smokers
Transitional period vs. Pre-implementation	0.86 (0.68-1.08)	0.80 (0.62-1.02)	1.30 (0.72-2.34)
Post-full implementation vs. Pre-implementation	0.96 (0.76-1.21)	0.94 (0.73-1.20)	1.12 (0.60-2.03)
Post-full implementation vs. Transitional period	1.12 (0.98-1.27)	1.18 (1.02-1.36) *	0.85 (0.61-1.19)

Weighted by sex and age distribution of current smokers in Hong Kong in 2017 or 2018.

\* p<0.05; \*\* p<0.01; \*\*\* p<0.001

**Table 5 Holding back from smoking after seeing pictorial health warnings on cigarette packs in the past 30 days in current smokers, from pre-implementation to the transitional period and post-full implementation**

Relative Risk [RR] (95% Confidence Interval)			
	All current smokers	Male current smokers	Female current smokers
Transitional period vs. Pre-implementation	1.00 (0.63-1.58)	0.93 (0.57-1.52)	1.62 (0.47-5.58)
Post-full implementation vs. Pre-implementation	1.18 (0.75-1.86)	1.05 (0.64-1.70)	2.38 (0.70-8.14)
Post-full implementation vs. Transitional period	1.18 (0.92-1.51)	1.12 (0.86-1.46)	1.47 (0.80-2.70)

Weighted by sex and age distribution of current smokers in Hong Kong in 2017 or 2018.

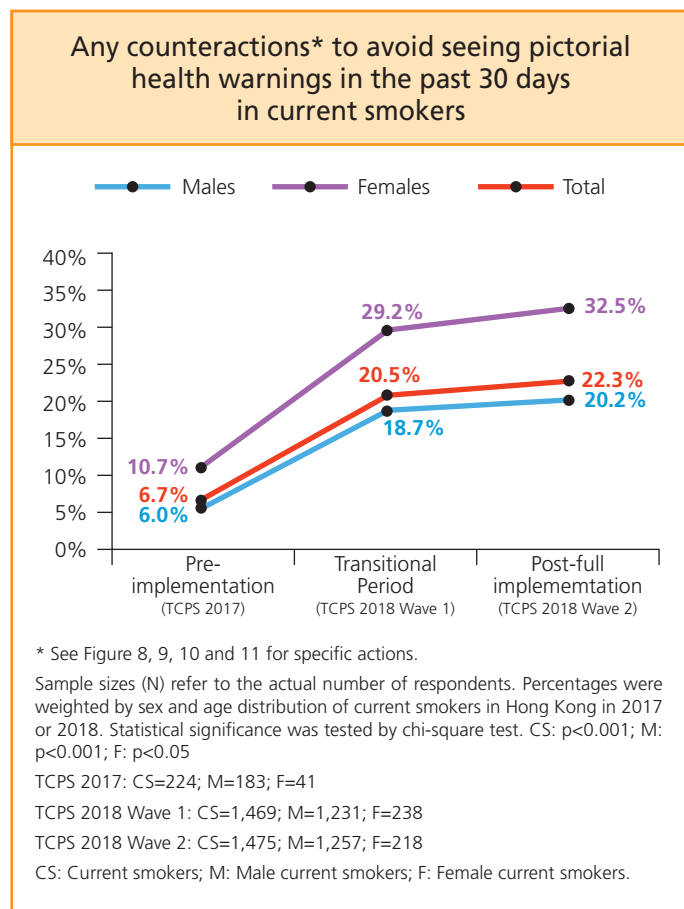
\* p<0.05; \*\* p<0.01; \*\*\* p<0.001

### 3.4 Counteractions of current smokers to avoid seeing pictorial health warnings

TCPS 2017 (pre-implementation), TCPS 2018 Wave 1 (transitional period) and TCPS 2018 Wave 2 (post-full implementation) explored 4 possible counteractions of current smokers to avoid seeing pictorial health warnings: (a) covering cigarette packs, (b) keeping cigarette packs somewhere out of sight, (c) changing to another cigarette package, and (d) avoiding buying specific cigarette packs.

Figure 7 shows that 6.7% of current smokers took at least one of these 4 counteractions in the past 30 days before implementation of new pictorial health warnings. The prevalence increased to 20.5% during the transitional period, and slightly further increased to 22.3% after full implementation. The difference among these 3 surveys was statistically significant for all current smokers ( $p<0.001$ ). A similar significant increase was observed in both male ( $p<0.001$ ) and female ( $p<0.05$ ) current smokers. Table

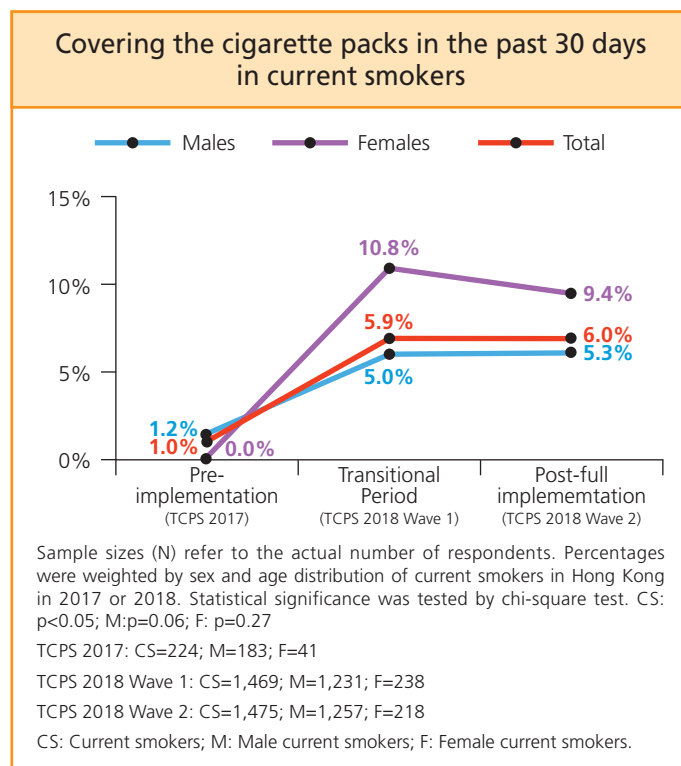
**Figure 7**



6 shows that current smokers (including both male and female) were more likely to take counteractions during the transitional period than before implementation. After full implementation, current smokers were 231% (95% CI 104%-437%) more likely to take at least one counteractions to avoid seeing pictorial warnings than those before implementation. A similar increase in likelihood was observed in both male (235%, 95% CI 89%-507%) and female (204%, 95% CI 32%-599%) current smokers. The results during the transitional period and post-full implementation were similar.

Figure 8 shows that 1.0% of current smokers covered the cigarette packs in the past 30 days before implementation of new pictorial health warnings. The prevalence increased to 5.9% during the transitional period and remained similar (6.0%) after full implementation. The difference among these 3 surveys was statistically significant for all current smokers ( $p<0.05$ ). Table 7 shows that current smokers were around 5 times more likely to cover cigarette packs during the transitional period and after full implementation, than before implementation. The results during the transitional period and post-full implementation were similar.

**Figure 8**





**Table 6 Any counteractions to avoid seeing pictorial health warnings in the past 30 days in current smokers, from pre-implementation to the transitional period and post-full implementation**

Relative Risk [RR] (95% Confidence Interval)			
	All current smokers	Male current smokers	Female current smokers
Transitional period vs. Pre-implementation	3.06 (1.89-4.96) ***	3.17 (1.77-5.68) ***	2.74 (1.20-6.26) *
Post-full implementation vs. Pre-implementation	3.31 (2.04-5.37) ***	3.35 (1.89-6.07) ***	3.04 (1.32-6.99) **
Post-full implementation vs. Transitional period	1.08 (0.92-1.27)	1.07 (0.89-1.28)	1.11 (0.81-1.52)

Weighted by sex and age distribution of current smokers in Hong Kong in 2017 or 2018.

\* p<0.05; \*\* p<0.01; \*\*\* p<0.001

**Table 7 Covering cigarette packs in the past 30 days in current smokers, from pre-implementation to the transitional period and post-full implementation**

Relative Risk [RR] (95% Confidence Interval)			
	All current smokers	Male current smokers	Female current smokers <sup>#</sup>
Transitional period vs. Pre-implementation	6.14 (1.89-19.97) **	4.32 (1.31-14.20) *	N/A
Post-full implementation vs. Pre-implementation	6.19 (1.90-20.21) **	4.59 (1.40-15.09) *	N/A
Post-full implementation vs. Transitional period	1.01 (0.72-1.41)	1.06 (0.72-1.58)	0.88 (0.46-1.68)

Weighted by sex and age distribution of current smokers in Hong Kong in 2017 or 2018.

<sup>#</sup> RR cannot be calculated as no female current smokers covered the cigarette packs in the past 30 days in 2017

\* p<0.05; \*\* p<0.01; \*\*\* p<0.001

Figure 9 shows that 4.7% of current smokers kept cigarette packs out of sight before implementation of new pictorial health warnings. The prevalence increased to 11.5% during the transitional period and remained similar (10.9%) after full implementation. The difference among 3 surveys was statistically significant for all current smokers ( $p<0.05$ ). Table 8 shows that current smokers were nearly 1.5 times more likely to keep cigarette packs out of their sights during the transitional period and after full implementation of new pictorial health warnings, than before implementation. The results during the transitional period and post-full implementation were similar.

**Figure 9**

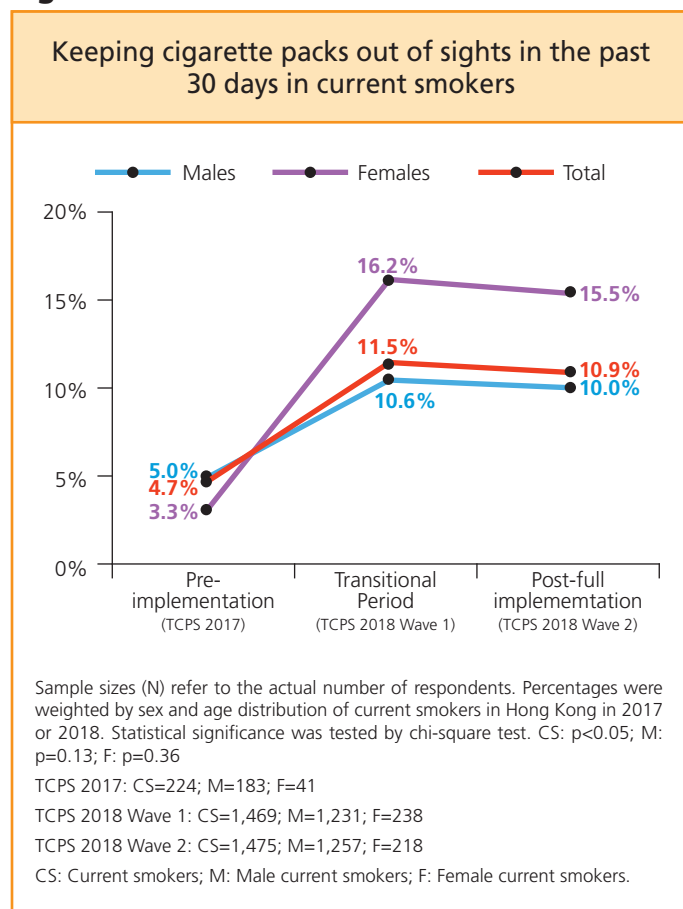
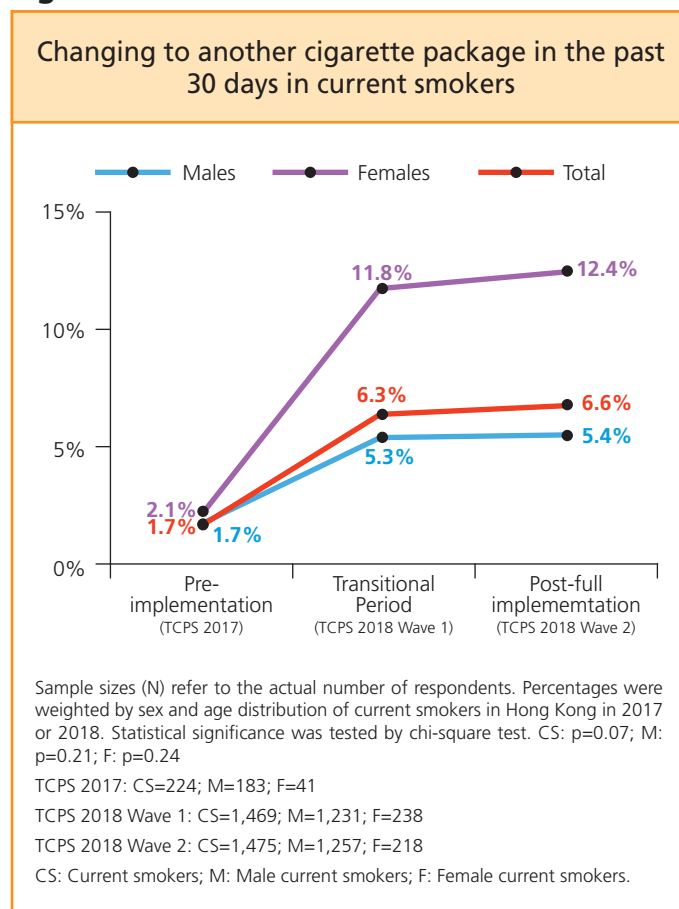


Figure 10 shows that 1.7% of current smokers changed to another cigarette package in the past 30 days before implementation of new pictorial health warnings. The prevalence increased to 6.3% during the transitional period and remained similar (6.6%) after full implementation. The difference among these 3 surveys was marginally significant for all current smokers ( $p=0.07$ ). Table 9 shows that current smokers were more than 2.5 times more likely to change to another cigarette package during the transitional period and after full implementation of new pictorial health warnings, than before implementation. The results during the transitional period and post-full implementation were similar.

**Figure 10**



**Table 8 Keeping cigarette packs out of sight in the past 30 days in current smokers, from pre-implementation to the transitional period and post-full implementation**

Relative Risk [RR] (95% Confidence Interval)			
	All current smokers	Male current smokers	Female current smokers
Transitional period vs. Pre-implementation	2.48 (1.34-4.58) **	2.16 (1.10-4.22) *	4.94 (1.20-20.38) *
Post-full implementation vs. Pre-implementation	2.35 (1.27-4.36) **	2.03 (1.04-3.99) *	4.73 (1.13-19.83) *
Post-full implementation vs. Transitional period	0.95 (0.75-1.20)	0.94 (0.72-1.23)	0.96 (0.59-1.56)

Weighted by sex and age distribution of current smokers in Hong Kong in 2017 or 2018.

\* p<0.05; \*\* p<0.01; \*\*\* p<0.001

**Table 9 Changing to another cigarette package in the past 30 days in current smokers, from pre-implementation to the transitional period and post-full implementation**

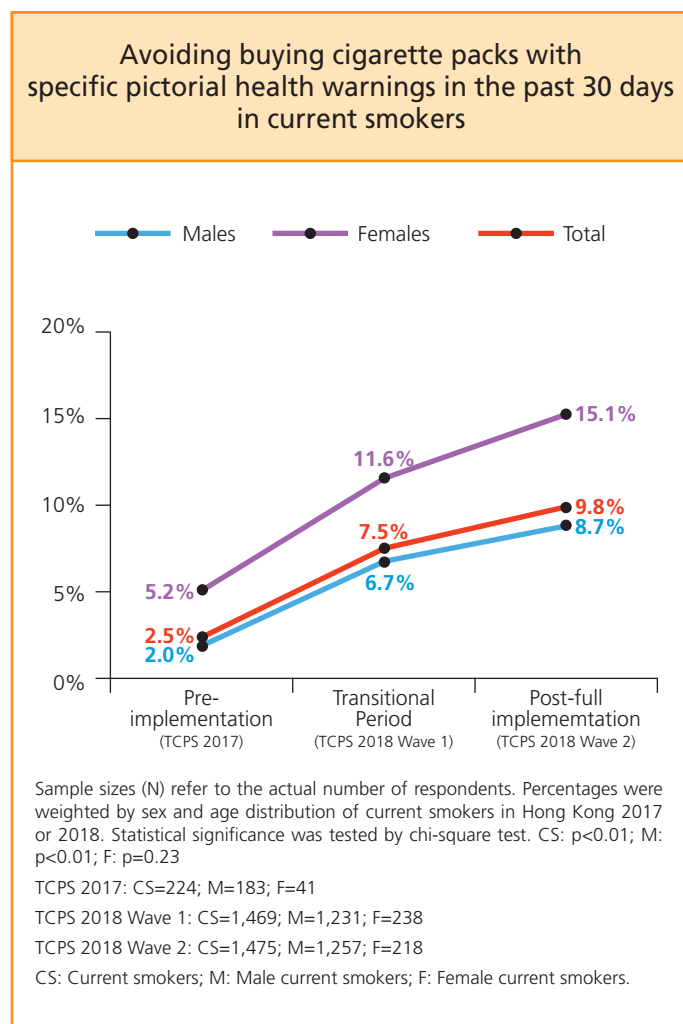
Relative Risk [RR] (95% Confidence Interval)			
	All current smokers	Male current smokers	Female current smokers
Transitional period vs. Pre-implementation	3.69 (1.28-10.63) *	3.22 (0.94-10.99)	5.46 (0.75-39.85)
Post-full implementation vs. Pre-implementation	3.83 (1.33-11.03) *	3.30 (0.97-11.24)	5.75 (0.78-42.40)
Post-full implementation vs. Transitional period	1.04 (0.75-1.43)	1.02 (0.69-1.51)	1.05 (0.60-1.86)

Weighted by sex and age distribution of current smokers in Hong Kong in 2017 or 2018.

\* p<0.05; \*\* p<0.01; \*\*\* p<0.001

Figure 11 shows that 2.5% of current smokers avoided buying cigarette packs with specific pictorial health warnings in the past 30 days before implementation of new pictorial health warnings. The prevalence increased to 7.5% during the transitional period and further increased to 9.8% after full implementation. The difference among these 3 surveys was statistically significant for all current smokers ( $p<0.001$ ). Table 10 shows that current smokers were about 2 to 3 times more likely to avoid buying cigarette packs with specific pictorial health warnings during the transitional period and post-full implementation than pre-implementation. The difference between transitional period and post-full implementation was not statistically significant.

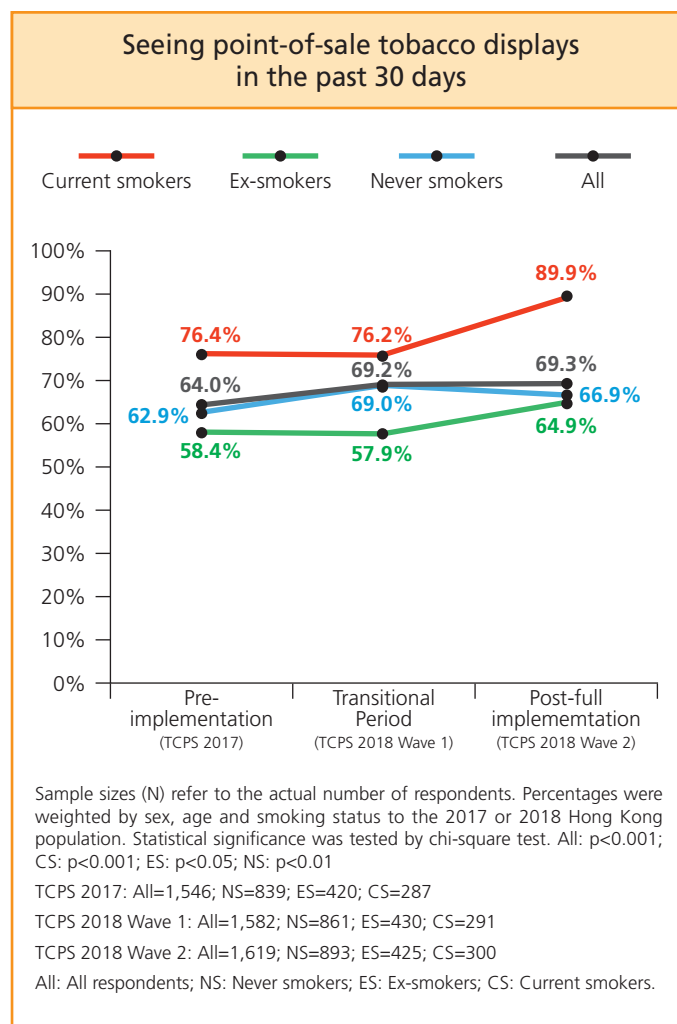
**Figure 11**



### 3.5 Awareness of point-of-sale tobacco displays

Figure 12 shows that before implementation of the new pictorial health warnings, 64.0% of all respondents (76.4% of current smokers, 58.4% of ex-smokers and 62.9% of never smokers) were aware of point-of-sale tobacco displays (i.e. saw in the past 30 days). The awareness increased to 69.2% during the transitional period and remained similar (69.3%) after full implementation. A greater increase was observed in current smokers and ex-smokers than in never smokers since the transitional period. The difference among these 3 surveys was statistically significant for all respondents ( $p<0.001$ ) and for each smoking status group (all  $p<0.05$ ). Table 11 shows that all respondents were 10% (95% CI 4%-17%) and current smokers were 19% (95% CI 10%-28%) more likely to be aware of point-of-sale tobacco

**Figure 12**





**Table 10 Avoid buying cigarette packs with specific pictorial health warnings in the past 30 days in current smokers, from pre-implementation to the transitional period and post-full implementation**

Relative Risk [RR] (95% Confidence Interval)			
	All current smokers	Male current smokers	Female current smokers
Transitional period vs. Pre-implementation	3.00 (1.43-6.29) **	3.38 (1.34-8.52) *	2.23 (0.65-7.61)
Post-full implementation vs. Pre-implementation	3.88 (1.86-8.11) ***	4.36 (1.74-10.92) **	2.88 (0.84-9.88)
Post-full implementation vs. Transitional period	1.29 (0.99-1.70)	1.29 (0.94-1.77)	1.29 (0.75-2.22)

Weighted by sex and age distribution of current smokers in Hong Kong in 2017 or 2018.

\* p<0.05; \*\* p<0.01; \*\*\* p<0.001

**Table 11 Change in awareness of point-of-sale tobacco displays in the past 30 days from pre-implementation to the transitional period and post-full implementation**

Relative Risk [RR] (95% Confidence Interval)				
	All	Current smokers	Ex-smokers	Never smokers
Transitional period vs. Pre-implementation	1.06 (0.99-1.13)	1.05 (0.96-1.15)	1.02 (0.91-1.14)	1.07 (0.99-1.15)
Post-full implementation vs. Pre-implementation	1.10 (1.04-1.17) **	1.19 (1.10-1.28) ***	1.15 (1.04-1.28) **	1.08 (1.01-1.16) *
Post-full implementation vs. Transitional period	1.04 (0.98-1.10)	1.14 (1.06-1.22) ***	1.13 (1.02-1.26) *	1.02 (0.95-1.09)

Weighted by sex, age and smoking status to the 2017 or 2018 Hong Kong population.

\* p<0.05; \*\* p<0.01; \*\*\* p<0.001

displays post-full implementation than pre-implementation. Current smokers were 14% (95% CI 6%-22%) more likely to be aware of point-of-sale tobacco displays post-full implementation than during the transitional period.

## 4. Discussion

Over one-tenth of respondents had already seen the new pictorial health warnings during the transitional period, soon after the new warnings were implemented in December 2017. These respondents reported that the majority of the pictorial health warnings they saw were the new ones. Public awareness of the pictorial health warnings, regardless of smoking status, increased during the transitional period (TCPS 2018 Wave 1) and further increased after full implementation (TCPS 2018 Wave 2).

Pictorial health warnings efficiently disseminate the harms of smoking to not only smokers but also non-smokers.

Compared with pre-implementation, the proportion of respondents who thought about the harms of smoking increased after full implementation. Such an increase was more prominent in current smokers and ex-smokers. The results of TCPS 2018 Wave 1 (transitional period) and Wave 2 (post-full implementation) indicated the short-term effects of enlarged pictorial health warnings with stronger images and warning messages. Future TCPSs should continue to evaluate the longer-term effects. The present results shall also support other countries and jurisdictions where proposals on enlarging pictorial health warnings on cigarette packs are under consideration.

Although more current smokers thought about harms of smoking after full implementation of new pictorial health warnings, no substantial increase in thinking about quitting or holding back from smoking after noticing pictorial health warnings was observed. This suggests the effectiveness of new pictorial health warnings in promoting quitting is not

conclusive. The small sample size might explain. Another possible reason was that many smokers in Hong Kong, with the smoking prevalence among the lowest in the developed world, were hardcore smokers and were reluctant to quit, even they had thought more about the harms of smoking after implementation. Further evaluations with a greater sample size are warranted to assess the effects of new pictorial health warnings on current smokers.

There was a sharp increase in counteractions of current smokers to avoid seeing the warnings during the transitional period (TCPS 2018 Wave 1), followed by a small increase post-full implementation (TCPS 2018 Wave 2). A possible reason was that nearly half the current smokers had already seen the new pictorial health warnings and might have reacted during the transitional period. The increase in counteractions post-full implementation was less obvious. A previous study suggested these counteractions often have the opposite effect of increasing “unwanted” thoughts, such as thinking about the harms of smoking, and can increase motivation to quit smoking<sup>11</sup>. Investigations on the association of these counteractions with subsequent quitting behaviours are warranted.

To further reduce the attractiveness of cigarette packs, plain packaging should also be introduced as recommended by WHO FCTC Article 11<sup>1</sup>. At present, nearly 20 countries have implemented plain packaging (e.g. Australia, France, Ireland, Thailand, Canada, Singapore and Uruguay) or passed the law (e.g. Romania)<sup>12, 13</sup>. Plain packaging means that all distinctive tobacco brand characteristics including slogan, logo, colour and promotional elements are not allowed while only brand names in standardized typeface, unattractive colour and large health warnings can be used. Apart from reducing the attractiveness of cigarette packs, plain packaging may also reduce smokers’ misperceptions that some cigarette brands are less harmful and increase the effectiveness of health warnings as the warnings without the distraction of the logos, etc., would be more noticeable<sup>11, 14</sup>.

Since the impacts of the same pictorial health warnings will decrease over time<sup>15, 16</sup>, the HKSAR Government should consider rotation in due course. FCTC Article 11 suggests rotation of pictorial health warnings to maintain the effects of pictorial health warnings<sup>1</sup>. Rotation every 1 to 2 years is highly recommended<sup>11</sup>. The HKSAR government should prepare another set of pictorial health warnings and implement rotation as soon as possible. We also strongly

recommend that the warnings should include “smoking kills at least one out of two smokers” to further emphasize the harms of smoking.

Awareness of point-of-sale tobacco displays in current smokers remained similar during the transitional period (TCPS 2018 Wave 1 vs. TCPS 2017), and started to increase after full implementation (TCPS 2018 Wave 2 vs. TCPS 2018 Wave 1). This might be due to counterbalance measures by the tobacco industry to reduce smokers’ exposure to the new pictorial health warnings at point-of-sale of cigarettes. For example, some shops only display the bottom or top side of the cigarette packs, which is not covered by the pictorial health warnings but clearly shows the logos, colours and designs of the cigarette brands. Glamorous boxes are also used to display tobacco products. These measures can attract smokers to use these products<sup>17</sup>. Previous studies found that the removal of point-of-sale tobacco displays reduces the use of tobacco products and promotes quitting<sup>18, 19</sup>. We advocate the HKSAR Government to consider banning point-of-sale tobacco displays in accordance with Article 13 of FCTC<sup>20</sup>, which has been implemented in Macau since January 2018<sup>21</sup>. The Article affirms that a comprehensive ban on advertising, promotion and sponsorship, which includes point-of-sale tobacco displays as a type of sale and distribution arrangement, would reduce the consumption of tobacco products<sup>22</sup>.

To encourage quitting, more effective tobacco control measures such as a substantial and annual tobacco tax increase, and further expansion of smoke-free areas should be implemented. More funding should be allocated to public education, free smoking cessation services, development of more effective interventions, and rigorous evaluation of all tobacco control measures.

## 5. Limitations

This study had several limitations. First, the term “current smokers” included both daily and occasional smokers, and “ex-smokers” included both ex-daily and ex-occasional smokers. Smoking-related behaviours, perceptions, and opinions may be different between daily and occasional users, but distinguishing the two is not an objective of the current study. Second, all information was collected by telephone interviews without verification of smoking status by the interviewer. However, this method can ensure anonymity that more truthful data might be collected. Third,

the cross-sectional design limited our ability to measure changes over time in the same group of respondents. A cohort study or panel survey with longitudinal data would be better in measuring changes within the same individuals over time. Finally, all data were self-reported, which may be subjected to recall bias.

## 6. Conclusions

Public awareness of pictorial health warnings progressively increased when the new pictorial health warnings gradually replaced the old ones. After full implementation, more current smokers had thought about the harms of smoking, but the evidence of more current smokers thinking about quitting or holding back from smoking was not conclusive. These results show some short-term effects of the new pictorial health warnings, but also suggest that continuous evaluation on longer term effects is warranted. To maintain the effects of pictorial health warnings, the HKSAR government should prepare a new set of pictorial health warnings for rotation as soon as possible. The increased awareness of point-of-sale tobacco displays after full implementation of new pictorial health warnings might indicate the tactics of the tobacco industry to counteract the new warnings and encourage smoking. Hence, a total ban on the displays is warranted.

## 7. Other key results of TCPS 2018 Wave 1 and Wave 2

### 7.1 Awareness (i.e. had heard of or seen) and ever use of electronic cigarettes (e-cigarettes) and heat-not-burn (HNB) tobacco products

- Majority (81.3%) of all respondents (86.9% of current smokers, 83.2% of ex-smokers and 80.5% of never smokers) in Wave 1 were aware of e-cigarettes. The awareness was not assessed in Wave 2.
- Ever e-cigarette use was reported by 3.6% of all respondents in Wave 1 and 2.9% in Wave 2. In current smokers, the prevalence of ever use was 25.9% and 27.0%, respectively (in Wave 1 and 2). In ex-smokers, it was 2.9% and 2.3%, respectively (in Wave 1 and 2).
- Current e-cigarette use (past 30-day use) was reported by 0.7% of all respondents in both Wave 1 and Wave 2. In current smokers, the prevalence of current use was 5.2% and 6.5%, respectively (in Wave 1 and 2).

- A quarter (24.5%) of all respondents (43.6% of current smokers, 23.4% of ex-smokers and 22.3% of never smokers) in Wave 1 were aware of HNB tobacco products. The awareness increased to 27.4% in Wave 2 (53.1% of current smokers, 23.3% of ex-smokers and 24.5% of never smokers).
- Ever HNB tobacco product use was reported by 1.7% of all respondents in Wave 1 and 2.5% in Wave 2. In current smokers, the prevalence of ever use was 14.5% and 24.1%, respectively (in Wave 1 and 2). In ex-smokers, it was 1.6% and 0.4%, respectively (in Wave 1 and 2).
- Current HNB tobacco product use (past 30-day use) was reported by 0.7% of all respondents in Wave 1 and 1.0% in Wave 2. In current smokers the prevalence of current use was 6.4% and 9.8%, respectively (in Wave 1 and 2).

### 7.2 Single and multiple tobacco product use in current smokers in the past 4 weeks

- Majority (81.5%) of current smokers in Wave 2 reported they had used only 1 tobacco product in the past 4 weeks (conventional cigarettes: 76.0%, HNB tobacco products: 2.3%, e-cigarettes: 1.2% and other tobacco products: 2.1%). Multiple use in the past 4 weeks was not assessed in Wave 1.
- About 13.7% reported they had ever used 2 or more tobacco products in the past 4 weeks.
- The most common combination of use of multiple tobacco products included “conventional cigarettes and HNB tobacco products” (4.5%), “conventional cigarettes and e-cigarettes” (2.8%), “conventional cigarettes, HNB tobacco products, and e-cigarettes” (1.6%), and “HNB tobacco products and e-cigarettes” (0.2%).

### 7.3 Smoking and quitting characteristics of current smokers

- In Wave 1 and Wave 2, current smokers consumed 12.4 (SD 8.3) and 12.7 (SD 8.3) cigarettes per day in the past 7 days on average, respectively.
- Nearly half (46.7% in Wave 1 and 44.9% in Wave 2) the current smokers smoked the first cigarette within 30 minutes after waking up.

- Half (50.9% in Wave 1 and 54.7% in Wave 2) the current smokers had no intention to quit using all forms of tobacco products. Few (18.7% and 15.7% in Wave 1 and Wave 2) planned to quit within 6 months.
- About 13.1% and 13.2% of current smokers in Wave 1 and Wave 2 had ever used smoking cessation services. About 20.5% and 19.2% of them, respectively (in Wave 1 and 2), had ever used smoking cessation products.

#### 7.4 Secondhand smoke (SHS) exposure at home

- In all respondents in Wave 1 and Wave 2, about 14.0% and 14.2% reported SHS exposure at home in the past 7 days, respectively. Excluding respondents who reported no SHS exposure at home in the past 7 days, the average number of days with SHS exposure at home in the past 7 days was 4.4 and 4.5, respectively (in Wave 1 and 2).

#### 7.5 Raising tobacco tax

- Most (81.4% in Wave 1 and 79.6% in Wave 2) respondents supported the Government to raise tobacco tax next year, in which 51.6% and 54.2%, respectively, thought that the increment should be equivalent to or higher than inflation.
- Most (75.6% in Wave 1 and 70.9% in Wave 2) respondents supported the Government to raise tobacco tax annually, in which 51.0% and 47.5%, respectively, thought that the increment should be equivalent to or higher than inflation.

#### 7.6 Tobacco promotion, advertising and sponsorship

- More than two-thirds (67.8% in Wave 1 and 70.6% in Wave 2) thought that point-of-sale tobacco displays were cigarette advertisements and promotions. Around two-thirds (66.8% in Wave 1 and 65.0% in Wave 2) supported a ban on point-of-sale tobacco displays.

#### 7.7 Expansion of smoke-free areas

- More than 90% of respondents (93.7% in Wave 1 and 96.0% in Wave 2) supported to extend the statutory smoke-free areas to all public transport stops such as taxi stands, public light bus stops, bus stops and tramways stops.

- More than 90% of respondents (94.7% in Wave 1 and 93.7% in Wave 2) supported to totally ban smoking from queueing lines in public areas.
- More than 80% of respondents supported to extend statutory smoke-free areas to pedestrian walkways (82.5% in Wave 1 and 83.4% in Wave 2) and busy streets (84.0% in Wave 1 and 83.1% in Wave 2).
- In addition, more than 80% of respondents (85.5% in Wave 1 and 84.8% in Wave 2) supported to increase the fines of smoking at smoking-free areas.

#### 7.8 Opinion on future tobacco control policies

- Majority of all respondents (83.3% in Wave 1 and 79.5% in Wave 2) and current smokers (67.3% in Wave 1 and 69.3% in Wave 2) supported to increase the legal age of buying cigarettes from 18 to 21.
- Over 90% of all respondents (90.1% in Wave 1 and 92.7% in Wave 2) and over 3 quarters of current smokers (75.6% in Wave 1 and 83.6% in Wave 2) supported that only shops with a licence can sell tobacco products.
- Nearly 80% of all respondents (79.0% in Wave 1 and 79.4% in Wave 2) supported to set a cigarette sale quota that decreased year by year. This measure was also supported by 47.9% and 39.7% of current smokers, respectively (in Wave 1 and 2).
- Majority (65.9% in Wave 1 and 68.0% in Wave 2) of all respondents agreed to totally ban smoking when the smoking prevalence in Hong Kong decreases to 5% or lower. This measure was also supported by 39.7% and 34.8% of current smokers, respectively (in Wave 1 and 2).
- Majority of all respondents (65.9% in Wave 1 and 70.8% in Wave 2) supported a total ban on the sale of all forms of tobacco products. This measure was also supported by 35.5% and 33.1% of current smokers, respectively (in Wave 1 and 2).
- Over two-thirds of all respondents (69.1% in Wave 1 and 72.7% in Wave 2) supported a total ban on using all forms of tobacco products. This measure was also supported by 31.8% and 33.6% of current smokers, respectively (in Wave 1 and 2).



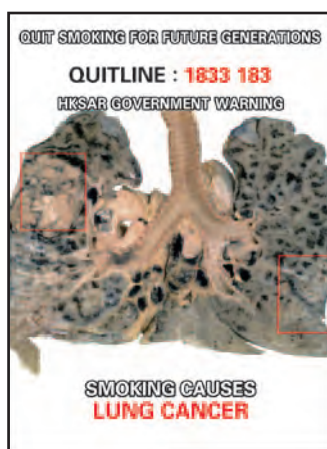
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**Appendix: The 12 pictorial health warnings in Hong Kong first introduced on 21 December 2017 and fully implemented on 21 June 2018**



Description:  
Damaged toes



Description:  
Lung cancer



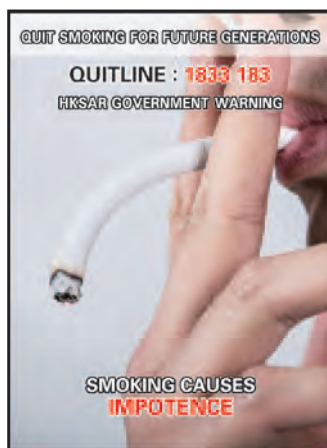
Description:  
A body at a mortuary



Description:  
A funeral with a portrait of the deceased young lady



Description:  
Burning banknotes



Description:  
A downward curving cigarette



Description:  
A man using an oxygen mask



Description:  
A woman using a nasogastric tube in hospital



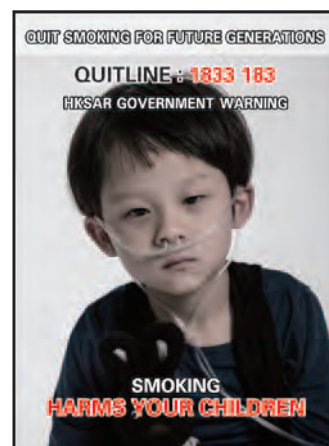
Description:  
A wrinkled woman



Description:  
Throat with hole



Description:  
Use of walker



Description:  
An ill child

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