BACKGROUND

The Global Adult Tobacco Survey (GATS) uses a global standard protocol to systematically monitor adult tobacco use (smoking and smokeless) and track key tobacco control indicators. This household survey collects data on persons 15 years of age or older. In Malaysia, GATS was first conducted in 2011 and repeated in 2023. The Institute for Public Health implemented GATS Malaysia 2023 in collaboration with the Disease Control Division, Ministry of Health Malaysia. Both

surveys used similar multistage stratified cluster sample designs to produce nationally representative data. There were 4,250 interviews completed in the 2011 survey, with an overall response rate of 85.3%. In 2023, 4,269 interviews were completed, with an overall response rate of 81.5%. For additional information, refer to the GATS Malaysia 2011 and 2023 country fact sheets.

GATS enhances countries' capacity to design, implement and evaluate tobacco control programs. It will also assist countries to fulfill their obligations under the World Health Organization's (WHO) Framework Convention on Tobacco Control (FCTC) to generate comparable data within and across countries. WHO has developed MPOWER, a package of six evidence-based demand reduction measures contained in the WHO FCTC.



Monitor tobacco use & prevention policies

Protect people from tobacco smoke

Offer help to quit tobacco use

Warn about the dangers of tobacco

Enforce bans on tobacco advertising, promotion, & sponsorship

Raise taxes on tobacco

KEY POLICY CHANGES

- Monitor tobacco use and prevention policies: Since the first GATS in 2011, Malaysia has consistently committed to regularly monitoring adult and
 adolescent tobacco and nicotine product use through national surveillance activities, as demonstrated by the adoption of the National Strategic Plan for
 Tobacco Control 2015-2020 followed by the National Strategic Plan for the Control of Tobacco & Smoking Products 2021-2030.
- Protect people from tobacco smoke: Through the 2013 amendment of Regulation 11 (1), Control of Tobacco Product Regulation (CTPR) on places where smoking is prohibited, smoke-free public places were expanded to include any areas of hospitals or clinics; government premises; educational institutions; shopping complexes; petrol stations; sports complexes; libraries; internet cafés; playgrounds and gardens; and public parks. In 2018, Regulation 11(1) was further amended to include open eateries. Additionally, the Malaysia Home without Smoking Environment (MyHOUSE) campaign conducted by non-governmental organizations, encouraged individuals to declare their homes as smoke-free areas voluntarily.
- Offer help to quit tobacco use: In 2015, the Malaysia Quit Smoking Services (mQuit) initiative was established to expand the smoking cessation program at private healthcare facilities, workplaces, and higher educational institutions. Commencing in 2019, mQuit offers online services through www.jomquit.com, providing convenient and accessible cessation support services to adults who use tobacco and seek assistance to quit.
- Warn about the dangers of tobacco: In 2013, a new set of six pictorial health warnings on cigarette packaging was adopted through an amendment of Regulation 15, CTPR 2004. The pictorial warnings now cover 50% of the front principal display area and 60% of the back principal display area. In 2021, a further amendment to Regulation 15 was made to include all tobacco product packaging.
- Enforce bans on tobacco advertising, promotion, and sponsorship: In 2013, an amendment of Regulation 5A, CTPR 2004, banned tobacco advertising, promotion, and sponsorship, enforce health warnings, and other features of packaging and labeling. The amendment also banned the sale of tobacco products through direct or indirect promotion, such as advertisements on the billboard, at the point of sale, and through the Internet. In 2015, the Ministry of Health initiated school-based programs such as KOTAK (*Kesihatan Oral Tanpa Amalan Merokok*), which allowed Dental Health teams to screen school children for smoking status and conduct intervention activities for those who were found to smoke. The mQuit program is also conducted at higher education institutions and workplaces.
- Raise taxes on tobacco: In 2015, the tobacco excise tax was increased from 28 Malaysian cents to 40 Malaysian cents per cigarette stick. The 2020 amendment to Regulation 8C, CTPR2004, raised the minimum price of 20 sticks of cigarettes to 12 Malaysian ringgit. In 2023, a 40 sen (cents) per milliliter excise tax on liquid or gel of electronic cigarettes containing nicotine was instituted through the Excise Duties (Amendment) Order 2023.

KEY FINDINGS

- Overall, the prevalence of current tobacco use decreased from 24.0% in 2011 to 19.5% in 2023, representing an 18.9% relative reduction. The prevalence of current tobacco smoking decreased from 23.1% in 2011 to 19.0% in 2023, representing a 17.7% relative reduction. The smoking prevalence also showed a reduction from 43.9% in 2011 to 35.7% in 2023 among men and remained relatively unchanged for women (1% to 1.5%).
- The prevalence of current electronic cigarette use increased from 0.8% in 2011 to 5.8% in 2023. Of note, the age group of 15 to 24 years showed an increase from 1.1% in 2011 to 8.6% in 2023 (data not presented in the figures).
- From 2011 to 2023, exposure to secondhand smoke decreased in homes, workplaces, and public transportation; however, it increased in government buildings, restaurants, and healthcare facilities.
- The percentage of adults who smoked and made a quit attempt in the past 12 months remained stable from 48.6% in 2011 to 49.3% in 2023. Similarly, the percentage of adults who smoked and received advice to quit from healthcare providers in the past 12 months remained stable (52.6% in 2011 vs. 66.6% in 2023).
- There was a significant decrease among adults who smoked in both the percentage of those who noticed health warning labels on cigarette packages (92.8% in 2011 vs. 70.9% in 2023) and in the percentage of those who thought about quitting because of the warning labels (45.8% in 2011 vs. 33.2% in 2023), in the past 30 days. Moreover, there was also a reduction in the proportion of adults noticing anti-cigarette smoking information during the past 30 days in various places from 94.0% in 2011 to 77.1% in 2023, except through the internet, that showed an increase (17.7% in 2011 vs. 59.3% in 2023) (data not presented in the figures).
- Exposure to any in-store cigarette advertisements or promotions among adults declined from 21.7% in 2011 to 8.8% in 2023. Similarly, exposure to any tobacco advertisements, promotion, or sponsorship among adults declined from 35.6% in 2011 to 18.3% in 2023.
- The inflation-adjusted average (mean) cost of 20 manufactured cigarettes was reduced from 13.2 Malaysian ringgit in 2011 to 10.8 Malaysian ringgit in 2023. The average (mean) monthly expenditure on cigarettes decreased from 234.0 Malaysian ringgit in 2011 to 177.7 Malaysian ringgit in 2023.

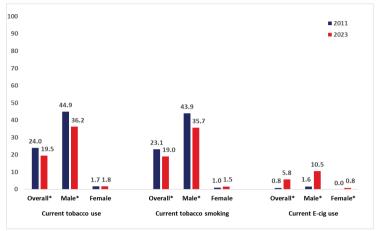




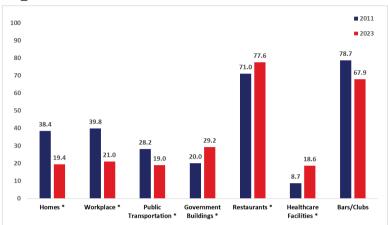


GATS GLOBAL ADULT TOBACCO SURVEY

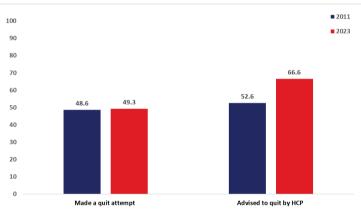
Prevalence of current tobacco use¹, current tobacco smoking, and current electronic cigarette (e-cig) use by gender, Malaysia 2011 and 2023



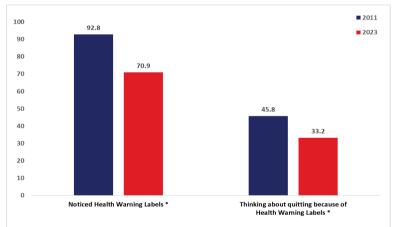
Exposure to secondhand smoke inside various places², Malaysia 2011 and 2023



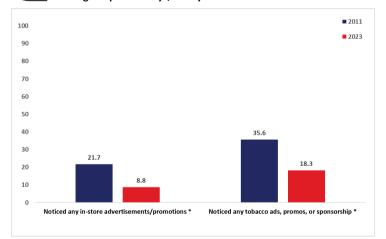
Quit attempts and advice to quit by a healthcare provider (HCP) among smokers in the past 12 months, Malaysia 2011 and 2023



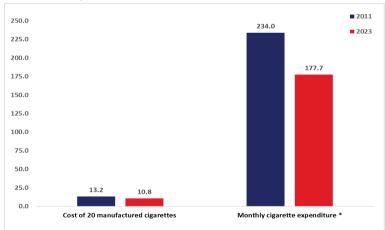
Noticing and effects of cigarette package health warning labels in the past 30 days among current smokers, Malaysia 2011 and 2023



Noticing in-store cigarette advertising or promotions³ and any cigarette advertisement, promotion, or public event sponsorship during the past 30 days, Malaysia 2011 and 2023



Average (mean) cost of 20 manufactured cigarettes and cigarette expenditure per month in Malaysian ringgit⁴, Malaysia 2011⁵ and 2023



NOTES: ¹ Current tobacco use includes current tobacco smoking, smokeless tobacco use, and/or heated tobacco product use. Heated tobacco product use was included in the 2023 questionnaire but not in 2011. ² Secondhand smoke indicators calculated as follows: Workplace: among those who outside of the home who usually work indoors or both indoors and outdoors; Home: exposure to tobacco smoke at home at least monthly; For all other places: among those who visited in the past 30 days. ³ Includes those who noticed any advertisements or signs promoting cigarettes in stores where cigarettes at sale prices; or free gifts or discount offers on other products when buying cigarettes. ⁴ Calculated among current manufactured cigarette smokers. ⁵ GATS Malaysia 2011 cost data were adjusted for inflation for direct comparison to 2023 using the Inflation Rate for Average Consumer Prices from the International Monetary Fund's World Economic Outlook Database April 2023. * Indicates the relative change between the two years is statistically significant at p<0.05. The relative change can be interpreted as the percentage of the estimate in year 2023 as it decreases or increases compared to year 2011.

Current use refers to daily and less than daily use. Adults refer to persons aged 15 years or older. Data have been weighted to be nationally representative of all non-institutionalized men and women aged 15 years and older. Percentages reflect the prevalence of each indicator in each group, not the distribution across groups. Results for prevalence estimates and averages are rounded to the nearest tenth (0.1), but relative changes are calculated using un-rounded estimates.

Funding is provided by the Ministry of Health Malaysia, and the Bloomberg Initiative to Reduce Tobacco Use through the CDC Foundation with a grant from Bloomberg Philanthropies

Technical assistance was provided by the U.S. Centers for Disease Control and Prevention (CDC), the World Health Organization (WHO), and RTI International. Program support was provided by the CDC Foundation.

The findings and conclusions in this fact sheet are those of the author(s) and do not necessarily represent the official position of the CDC.