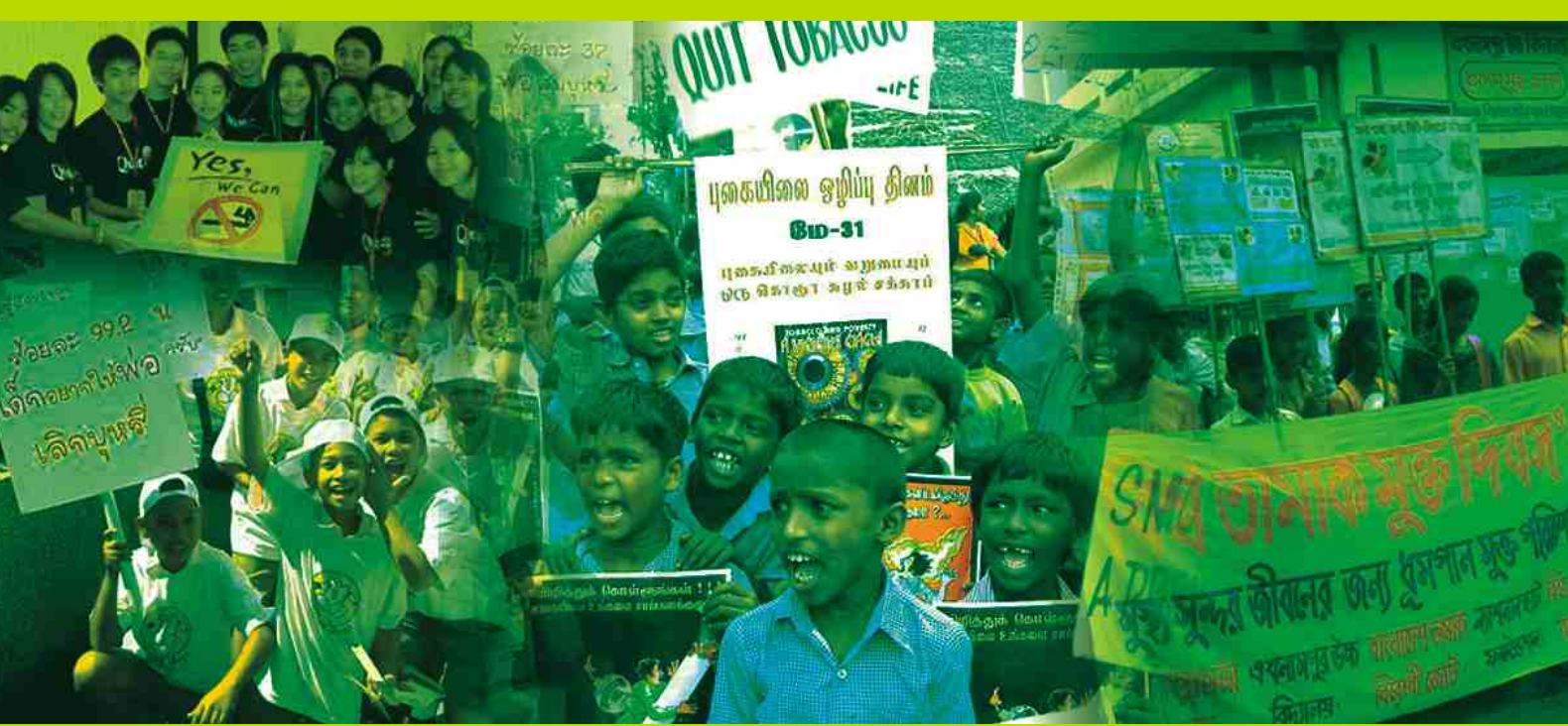


Brief Profile on Tobacco and Youth in the South-East Asia Region



Brief Profile on Tobacco and Youth in the South-East Asia Region



**World Health
Organization**

Regional Office for South-East Asia

WHO Library Cataloguing-in-Publication data

World Health Organization, Regional Office for South-East Asia.
Brief profile on tobacco and youth in the South-East Asia Region.

1. Tobacco use disorder – prevention and control.
2. Tobacco industry – legislation.
3. Tobacco use cessation.
4. Adolescent.
5. Bangladesh.
6. India.
7. Myanmar.
8. Thailand.
9. South-East Asia.

ISBN 978-92-9022-326-9

(NLM classification: WM 290)

© World Health Organization 2008

All rights reserved. Requests for publications, or for permission to reproduce or translate WHO publications—whether for sale or for noncommercial distribution can be obtained from Publishing and Sales, World Health Organization, Regional Office for South-East Asia, Indraprastha Estate, Mahatma Gandhi Marg, New Delhi-110 002, India (fax: +91-11-23370197; e-mail: publications@searo.who.int).

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use.

This publication contains the collective views of an international group of experts and does not necessarily represent the decisions or the stated policy of the World Health Organization.

Printed in India, May 2008

Contents

Foreword	v
Executive summary	vii
Introduction	1
Regional situation	3
Best practices on tobacco control among youth	7
Bangladesh.....	7
India	10
Myanmar	15
Thailand	17
Conclusion	19
Bibliography	20

Foreword



As in other parts of the world, youth are a key target of the tobacco industry in the South-East Asia Region. Alarmingly, more than half of tobacco users began using tobacco before the age of 10 years in our Region. Young people usually underestimate the risk of addiction to nicotine and its subsequent dangerous effects on health.

The focus of this year's World No Tobacco Day is to protect youth from tobacco use through a comprehensive ban on all forms of direct and indirect tobacco advertising, promotion and sponsorship. The WHO Framework Convention on Tobacco Control (WHO FCTC) provides legislative measures for a complete ban on advertising, promotion and sponsorship of all forms of tobacco products. It also stresses the need to counter the tactics of the tobacco industry to normalize tobacco use by portraying it as an ordinary consumer product and by spreading misleading information about the dangerous health hazards and other social and economic consequences of tobacco use.

The prevalence of tobacco use among youth in the Region is very diverse and ranges from about 1.6% (males) and 0.9% (females) in Sri Lanka to 50.6% (males) and 17.3% (females) in Timor-Leste for youth who are currently smoking cigarettes. The Region has also a huge prevalence of non-cigarette indigenous products like *bidi*, *kreteks*, *cheroots* and a variety of smokeless products, which the industry advertises, promotes and sponsors in a variety of ways to entice youth into tobacco use.

In order to face the reality of the tobacco epidemic, countries in the Region have initiated various tobacco control measures that aim to protect youth from tobacco. However, enforcement and compliance are still critical elements needed to be fully effective. Moreover, although advertisements of tobacco products are banned in many countries, these bans are not comprehensive. A complete and comprehensive ban on advertising, promotion and sponsorship is critical in order to stop marketing and promotional activities of the tobacco industry and to prevent youth from being enticed into tobacco use.

I hope that this Brief Profile on Tobacco and Youth will provide key information on tobacco consumption and control efforts among youth in the Region to governments, nongovernmental organizations and the general public to strengthen their efforts to develop measures, including legislation, policies and programmes for a comprehensive ban on advertising, promotion and sponsorship of all forms of tobacco products.

WHO will continue to work closely with the governments and other anti-tobacco entities, including NGOs, in providing support to national tobacco control efforts. Let us work together to make a better and healthier environment for youth that is free from all forms of tobacco products and their tantalizing advertising, promotion and sponsorship.



Samlee Plianbangchang, M.D., Dr.P.H
Regional Director

Executive summary

The tobacco industry spends a huge amount of financial resources in the Region on advertising, promotion and sponsorship each year. Partial bans on tobacco advertising, promotion and sponsorship do not work because the industry merely redirects its resources to other non-regulated marketing channels. Only a total ban can reduce tobacco consumption and protect people, particularly youth, from industry marketing tactics.

Most smokers in the Region start tobacco consumption before the age of 18. Surveys conducted to assess the situation of tobacco and youth in most countries of the Region have shown that there is a high prevalence of tobacco use among youth, including cigarettes and other forms of indigenous tobacco and smokeless tobacco products. In general, youth can easily buy tobacco products regardless of regulations prohibiting sale to minors; are exposed to second-hand smoke both at home and in public places; and are widely exposed to tobacco industry marketing tactics through advertising, promotion and sponsorship.

Article 13 of the WHO Framework Convention on Tobacco Control (FCTC) provides for comprehensive bans on all tobacco advertising, promotion and sponsorship. Ten out of eleven countries in the Region are party to the WHO FCTC. Five Member Countries have comprehensive tobacco control legislation and others have also taken some measures in this area.

Several countries of the Region have best practices on tobacco control among youth. In Bangladesh, a mobile court was set up in order to improve enforcement on specific provisions of the tobacco control law, such as the ban on advertisement, the smoke-free provisions and the ban on sale to minors. In India, a comprehensive tobacco control law and highly committed state and non-state actors have made possible the implementation of a variety of activities organized to protect youth from tobacco. In Myanmar, the "Control of Smoking and Consumption of Tobacco Control Law" has been coupled with counter-advertising and successful joint action between the Ministry of Health and the Ministry of Education in setting tobacco-free school policies and developing a series of publications and communication materials for teachers, students and parents. In Thailand,

the ban on advertisement at point of purchase was successfully implemented due to joint action between the government and anti-tobacco stakeholders and through extensive use of media to expose the marketing tactics of the tobacco industry.

However, enforcement of existing advertising, promotion and sponsorship bans is still weak and requires further attention in the Region. Therefore, Member Countries are encouraged to continue to assess the trends in tobacco consumption among youth, as well as their exposure to tobacco advertising, and to implement the needed policy change to ensure youth of the Region are adequately protected from tobacco and its grave health dangers.

tobacco & youth

Introduction

While globally most people start using tobacco before the age of 18, almost a quarter of these individuals practice this before the age of 10. Alarming, more than half of all tobacco users used their first tobacco before the age of 10 years in the South-East Asia (SEA) Region. Young people in the Region face a huge threat from tobacco. The findings of the Global Youth Tobacco Survey (GYTS) reveal a high prevalence of tobacco use among youth in Member Countries. While one in ten youth surveyed smoked cigarettes, one in ten used other forms of tobacco products. Tobacco use among girl students is also on the rise in the Region. Half of the school students are exposed to second-hand smoke in public places. In many countries, more than three in five minor students are sold tobacco products in violation of law. Eight in ten students support a ban on smoking in public places and nearly seven in ten smoker students want to quit. But only four in ten schools have a tobacco-free policy in most of the countries in the Region.

On the other hand, the Global Health Professional Student Survey (GHPSS) reveals that nearly 15% of third-year medical and dental health professional students smoke cigarettes and 10% use other tobacco products. Over nine in ten health professional students want to have formal training in tobacco cessation. Eight in ten health professional students do not receive formal tobacco cessation training.

Faced with this situation, Member Countries in the Region have undertaken a number of measures for tobacco control among youth. These include policies to protect young people from exposure to advertising, promotion and sponsorship of tobacco products; measures to educate them about harmful effects of tobacco use and to protect them from exposure of

second-hand smoke; and measures to reduce access to tobacco either by raising tax of tobacco products or by banning sale of tobacco products to minors. However, among all these measures, a ban on advertising, promotion and sponsorship of all forms of tobacco products and its implementation are found most effective.

Tobacco advertising through various media creates positive product imagery or associations in the minds of young people. Clearly, exposure to direct and indirect advertising together with other marketing strategies used by the tobacco industry leads to an increase in experimentation by young people that finally makes them regular tobacco users. Studies in the Region revealed that exposure to tobacco advertisements and receptivity to tobacco marketing is significantly associated with increased tobacco use among students, and a close response relationship has been observed between exposure to tobacco advertising and current tobacco use. Marketing tactics of the tobacco industry include varied activities designed to increase the sale of tobacco products. The tobacco industry spends a huge amount of money every year to effectively market its products and make them as attractive as possible. Intensive and sustained efforts to counter their strategies and to spread anti-tobacco messages among young people are essential to negate the “friendly familiarity” of tobacco products that the industry cultivates, and to communicate instead the nefarious health and social costs of tobacco use.

There are also other determinants of tobacco use among youth that need to be addressed, which include cultural and religious norms, easy availability and access to different types of tobacco products. In addition to its aggressive promotional strategy and tactics, the tobacco industry also tries to undermine national tobacco control strategies through their misleading information campaigns. This needs careful scrutiny and appropriate redress, because efforts undertaken by governments and Non Governmental Organisations (NGOs) to control tobacco use among youth get diluted through promotional tactics of the tobacco industry. There is an urgent need to counter the industry tactics and misleading images created by its promotional and advertising strategies. Tobacco counter-marketing campaigns should be seriously considered, including communication approaches like tobacco prevention and cessation messages. NGOs can play an important role in monitoring the marketing and promotional tactics of the tobacco industry and should work closely with government to counter them in every possible way and to sustain the tobacco control efforts.

tobacco & youth

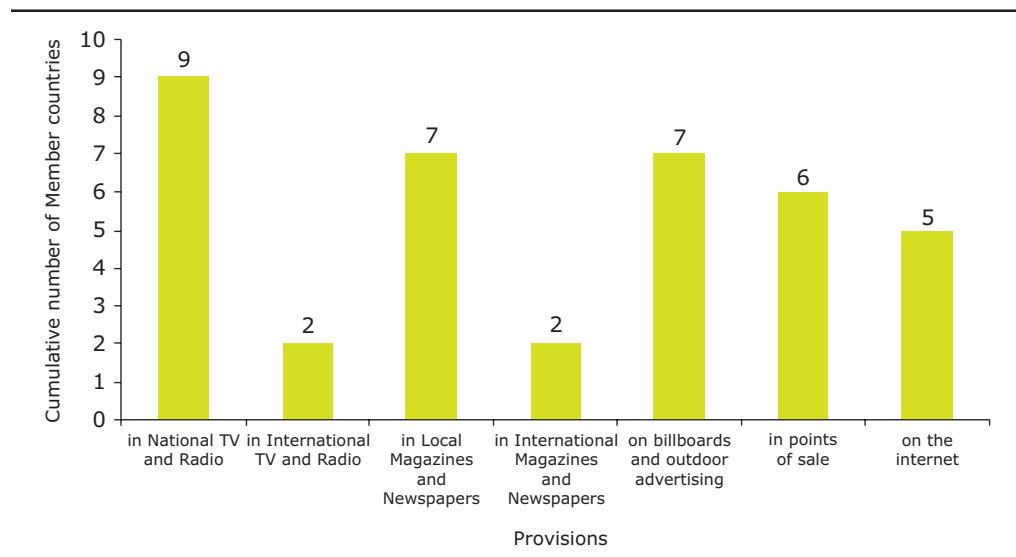
Regional situation

The South-East Asia Region has around 325 million youth aged between 15 and 24. The tobacco industry targets young people in general and young females in particular through advertising, promotion and sponsorship of tobacco products. Marketing strategies targeted to youth, especially girls, encourage them to use tobacco products. This is weakening cultural inhibition to smoke in many countries in the Region, where women have traditionally not used tobacco. The rise in the use of tobacco products among young girls is one of the most ominous developments of the tobacco epidemic. Countries in the Region have undertaken numerous tobacco control measures including legislation on tobacco control to prevent tobacco use. While some of this legislation has some kind of weakness in effectively dealing with tobacco use among youth, most of the laws are not enforced effectively. This encourages and gives an opening to the industry to entice youth into tobacco use through their sophisticated marketing and promotional strategies and tactics.

Article 13 of the WHO Framework Convention on Tobacco Control (FCTC) provides provision for a comprehensive ban on all tobacco advertising, promotion and sponsorship. Ten out of eleven countries in the Region are party to the WHO FCTC. Bangladesh, India, Myanmar, Sri Lanka and Thailand have comprehensive tobacco control legislation, including provisions on tobacco control among youth. Other Member Countries have also taken some measures in this area, in the form of executive orders, cabinet orders, acts and regulations pending finalization of their national tobacco control legislation.

Direct advertisement of tobacco is banned in national TV and radio, local magazines, newspapers and billboards in most of the Member Countries. Ban at point of sale and on the Internet exists in half the countries. Bans on advertisement in international TV, radio and magazines exists only in two countries.

Figure 1: Cumulative number of Member countries exercising complete bans on direct advertising on national and international media in the South-East Asia Region



The GYTS data reveals that over two-thirds of students are exposed to advertisements through billboards and newspapers in many countries. This high-level exposure to tobacco advertisements is due to the weakness in policies and poor implementation of the existing measures.

Figure 2: Percentage of students who have seen pro-tobacco advertisements on billboards, GYTS 2006-2007



Indirect advertisement through free distribution and sponsored events, brand stretching and promotional discounts are also banned in a majority of Member Countries. However, in most of the countries of the Region, GYTS data reveals that one in ten students has been offered free samples of cigarettes and has objects with cigarette-brand logos such as bags, T-shirts.

Figure 3: Percentage of students offered free samples of cigarettes, GYTS 2006-2007

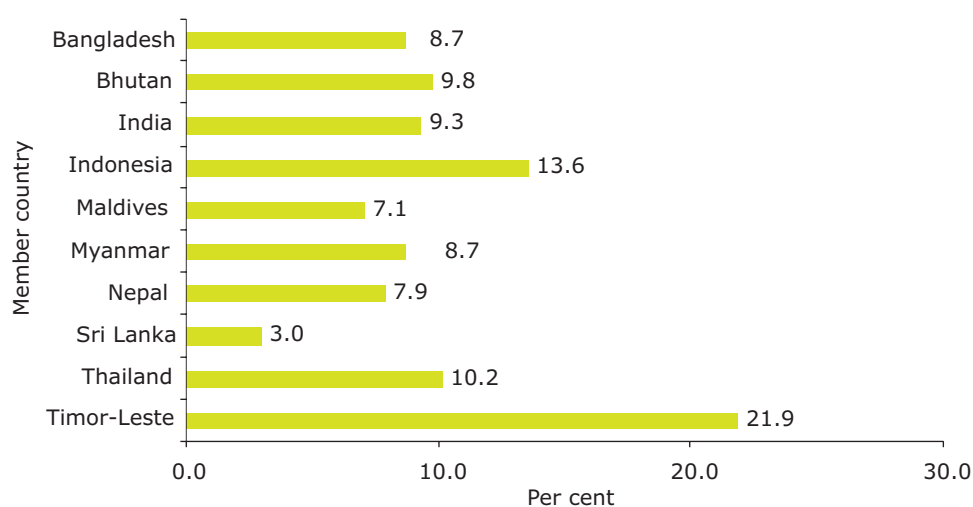
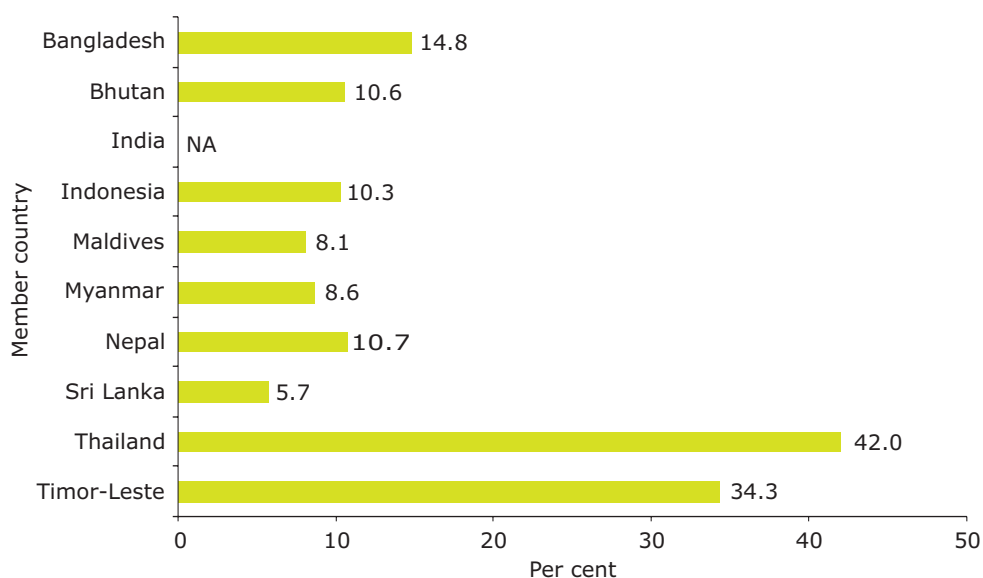


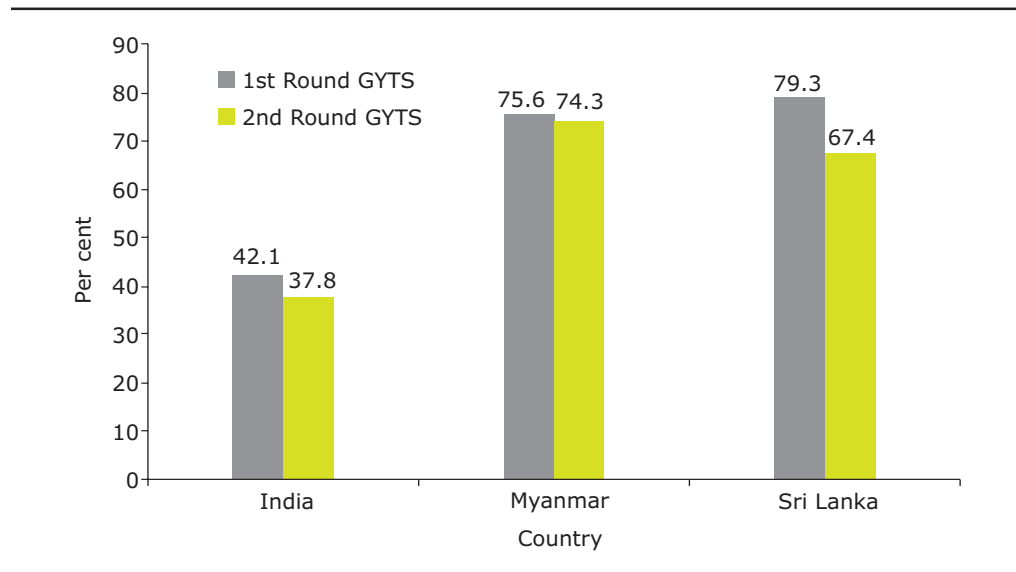
Figure 4: Percentage of students having an object with a cigarette brand logo, GYTS 2006-2007



Repeat GYTS findings in India and Myanmar show that exposure to tobacco advertisement through billboards has not changed; however, in Sri Lanka it shows a decreasing trend.

A number of Member Countries in the Region have also taken initiative to restrict the sale of tobacco products to minors. Bhutan has banned sales of tobacco products across the country. Sri Lanka has restricted sales of tobacco products below the age of 21 years and India and Thailand have banned the sale of tobacco products to those below the age of 18 years.

Figure 5: Exposure to direct advertisement on billboards, GYTS 2001-2007



However, implementation and enforcement of the measures and legislation are weak and inadequate. The tobacco industry has been trying to exploit the shortcomings of these measures and has been continuously trying to entice young people to begin using tobacco. Survey data from the Region show that nearly half of students aged between 13 and 15 and nearly 70% of third-year medical and health professional students are exposed to second-hand smoke in public places.



WHO-SEARO has been supporting Member Countries by providing guidelines and other technical support in the area of tobacco control among youth. SEARO was the first regional office to hold a regional policy workshop on GYTS in 2005. As a recommendation of the workshop, SEARO developed a Regional Strategy for Utilization of GYTS Data and a Manual on Tobacco Control in Schools. These documents have been shared with the Member Countries for their appropriate use and guidance. SEARO also supported translation and printing of the manual in local languages in a number of countries. SEARO is also supporting wide dissemination of GYTS data for advocacy in support of change in policies and programmes on tobacco control among youth in the Region and to raise public awareness about this issue. SEARO is working closely with Member Countries in bringing change in school curriculum to address tobacco control issues among school students. SEARO is encouraging ministries of health to work closely with ministries of education in this area to ensure multisectoral collaboration for tobacco control.



tobacco & youth

Best practices on tobacco control among youth

Bangladesh

The Government of Bangladesh has undertaken several initiatives to reduce tobacco use among all sections of population. The Government passed a comprehensive tobacco control law and made necessary rules to implement it. The law provides for bans on advertising, promotion and sponsorship, smoking in public places and public transports and requirements for warnings on cigarette packets. However, direct tobacco advertising has been banned only for smoking products. Advertisement through points of sale, Internet, international TV and radio, international magazines and newspapers has not been fully covered. Indirect advertisements are banned, for example through free distribution and sponsored events. However, indirect advertising through promotional discounts and through the use of brand name of non-tobacco product used for tobacco product has not been covered. In addition, a National Strategic Plan of Action for Tobacco Control has also been approved and is being implemented currently, which deals with issues relative to tobacco control among youth. There is a strong NGO network in the country in support of tobacco control. Bangladesh is the first country in the Region that established a National Tobacco Control Cell (NTCC) under the Bloomberg Initiative. NTCC is projected as a model tobacco control infrastructure and is working as a national hub for tobacco control.

Bangladesh is one of the countries in the developing world that conducts mobile courts across the country to enforce tobacco control law. Violators of the law, in particular of the ban on advertisement, are fined, and



Youth rallying on the occasion of the World No Tobacco Day 2007

billboards and other promotional materials were removed from many places, including fast-food corners, snooker-playing places and restaurants. Commercial firms who violated the law were fined and people smoking in public places were arrested and fined for violating the provisions of the law. These drives were conducted in all 64 districts to enforce the tobacco control law. The metropolitan, district and sub-district magistrates led the drives.

Youth groups are playing a pivotal role in the implementation of tobacco control programmes. Youth groups actively participate in implementing the law for banning advertisement. During the drives of mobile courts for enforcement of the law, young people participated voluntarily in removing billboards, signboards and other promotional objects.

**ধূমপান ও তামাকজাত দ্রব্য ব্যবহার (নিয়ন্ত্রণ) আইন ও বিধিমালা অনুসারে
তামাকজাত দ্রব্যের বিজ্ঞাপন নিষিদ্ধ**

কোন মোড়কপুর্বে বা সরবরাহী ও বিক্রেতারী পরিচিতি এবং টেলিভিশন স্ক্রিনে তামাকজাত দ্রব্যের বিজ্ঞাপন প্রচার, অসংলগ্নভাবে প্রকাশনা বা প্রচারিত্যের কর্তব্যে না বা করাটাবে না।

তামাকজাত দ্রব্যের বিজ্ঞাপন পরিচিতি এমন কোন কিছু বা চিত্রিত টোপ বা অনুরূপ অন্য কিছু বিজ্ঞাপন কর্তব্যে না বা করাটাবে না।

তামাক জাত দ্রব্য বিক্রয়ে উপকার প্রদান বা প্রত্যাশিতব্যের উদ্দেশ্যে কোন শার্ক ট্রাক প্রদর্শন কোন নতুন সিনেমাসে জ্ঞানবাহক কোন বা জনসংগত স্থানে কর্তব্যে পরিচিতি না।

কোনোদেশে প্রকাশিত কোন বই, ম্যাগাজিন, সিনেমাসে, হ্যাণ্ডবিল, বিজ্ঞাপন, খবরের সংস্করণ বা ছাপাখানা বাগানে তামাকজাত দ্রব্যের বিজ্ঞাপন মুদ্রা বা প্রকাশ কর্তব্যে না বা করাটাবে না।

কোনোদেশে সিনেমা প্রদর্শন কোন সিনেমাসে, হ্যাণ্ডবিল বা চলচ্চিত্র বিজ্ঞাপন বা সর্বস্বত্ব কর্তব্যে যাহা তামাকজাত দ্রব্যের প্রচারে নাম, বা, সঙ্গত প্রতিক্রম, চিত্র, প্রতিক্রম বা বিজ্ঞাপন পরিচিতি।

কোন ব্যক্তি তামাকজাত দ্রব্যের ব্যবহার উৎসাহিত করার উদ্দেশ্যে কোন নাম, পুরস্কার, কৃতি বা অনুরূপীয় প্রদান সিনেমা সিনেমা বিজ্ঞাপন মোড়ক মুদ্রিতব্যি অযোগ্যভাবে অন্য অন্য কোন ব্যক্তির সর্বিত কোন কৃতি বা সর্বস্বত্ব কর্তব্যে পরিচিতি না।

আইন অমান্যে অনূর্ধ্ব তিনমাস বিনাশ্রম কারাদন্ড বা অনধিক এক হাজার টাকা অর্থদন্ড বা উভয় দন্ডে দন্ডনীয় হইবেন

স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয়

বিশ্ব তামাকমুক্ত দিবস, ৩১মে ২০০৭
সুস্থ সুন্দর জীবনের জন্য ধূমপানমুক্ত পরিবেশ গড়ুন।

মুদ্রাসংস্কার নানবরনের কাশা, স্টেইক, মুরগিমাংস, খাদ্য-প্রদানের নীতিসূত্রী সমস্যা ও অস্বাস্থ্যে বিভিন্ন ধরনের প্রোগ্রামসী রোগের অন্যতম প্রধান কারণ।
ধূমপান ও অন্যান্য তামাক সেবনে

এছাড়াও পত্রিকা ধূমপানের ফলে অকাল মর্ত্যাংক, মৃত শিশু রোগের সঞ্জননা থাকে।
নিষ্কারে ক্যান্সারে শিকার হয়।

বিক্তি-সিপারেটেরে ধোয়া ধূমপায়ী-অধূমপায়ী সকলের জন্য জড়িতকর

পাবলিক প্লেস, পাবলিক পরিবহন এবং কর্মস্থলে ধূমপান থেকে বিরত থাকুন;
আপনার বাড়ীকেও ধূমপানমুক্ত রাখুন।

স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয়

Counter advertisements jointly by Government and WHO Bangladesh

Thikana initiatives: Gangni and Meherpur

A team consisting of members of the subdistrict level task force on tobacco control and local NGOs, took active part in implementation of the Tobacco Control Law 2005 in a drive in Gangni and Meherpur districts. A total of 53 shops were visited during the month of November and illegal advertisements including signboards, leaflets, posters and stickers were removed from these shops. Similar drives are going on in other parts of the country.

A consultative meeting of the Upazilla (subdistrict) Committee for Implementation of the Tobacco Control Law and local representatives of the national and multinational tobacco companies was held in November 2007, wherein the representatives apologized for displaying such illegal advertisements and promised not to repeat such activities in future.

A project was initiated to sensitize the school authorities to declare local schools smoke-free through the Upazilla Primary and Secondary School Education Officers in Gangni. Technical assistance and support has been provided to effectively conduct the mobile courts to enforce the tobacco control law in the areas of bans on advertising, promotion, sponsorship, packaging and labelling.



Mobile court taking action

Best practices on tobacco control among youth

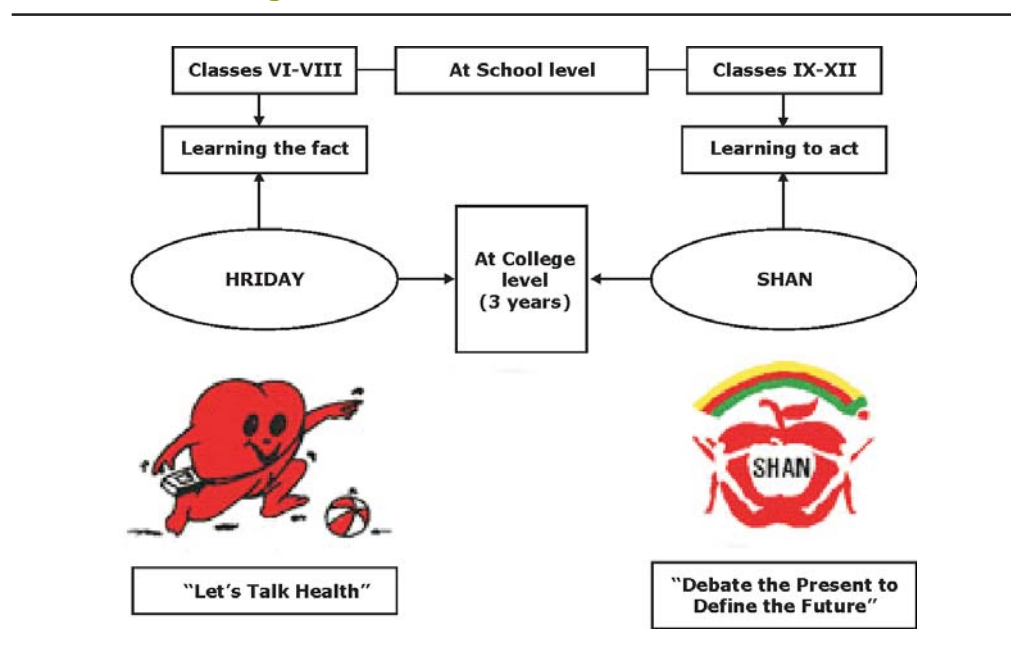
India

India has one of the most comprehensive tobacco control laws in the world, which prohibits direct and indirect advertising of all tobacco products. It has made strong provisions to protect youth from tobacco, including a ban on smoking in all public places, the sale of tobacco products by minors, sale of tobacco products within a radius of one hundred yards of any educational institutions etc. The Ministry of Health and Family Welfare has undertaken various youth-targeted interventions to create awareness among school/college children, parents, teachers, policy-makers, civil society and various other stakeholders. WHO has been a partner in these initiatives.

Awareness and advocacy through school-based interventions

Health Related Information Dissemination Amongst Youth – Student Health Action Network (HRIDAY–SHAN) developed a school-based intervention model to diffuse health information through the school from a few Student Peer Leaders to the whole student community, and from the school into family and community settings. Conducting advocacy by the youth on policy issues related to health, the model extends the outreach to the whole nation and transforms knowledge into social change – a process led by youth and on issues owned by them.

Figure 6: School based intervention model

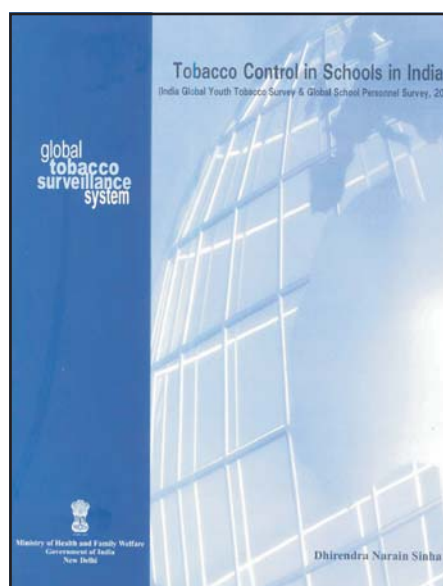
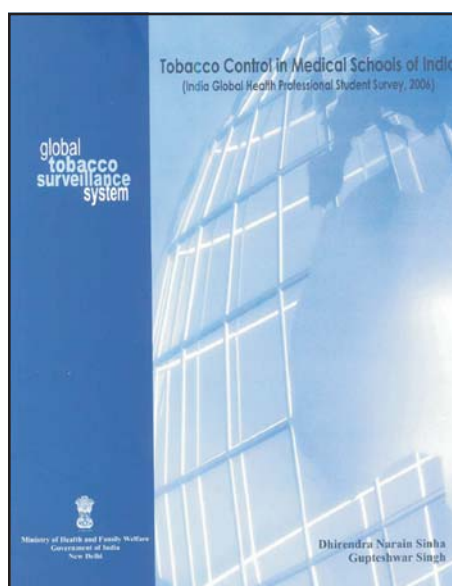




Student peer leaders as role models on posters used as IEC Material by HRIDAY in its school health promotion campaigns

Dissemination of data on tobacco and youth

The Ministry of Health and Family Welfare released data of Global Youth Tobacco Survey, 2006, Global School Personnel Survey and Global Health



Youth-led initiatives on tobacco avoidance and watchdogging of tobacco control laws

Professional Students Survey 2006 in collaboration with WHO. On the occasion of the release ceremony on 20 March 2008, the Union Health Minister Mr Anbumani Ramadoss stated that the Government of India would set up a national authority to implement the Anti-Tobacco Act and that an amount of Rs 4.5 billion would be spent for the anti-tobacco campaign to spread awareness among people, especially school children, about the harmful effects of smoking and other tobacco use.

HRIDAY-SHAN implemented an activity to mobilize the community by creating three advocacy groups, TAT (Teachers Against Tobacco), PAT (Parents Against Tobacco) and SAT (Students Against Tobacco) in 100 schools and 10 colleges in Delhi. The goal of this project was to mobilize students to form action groups in their schools and neighbourhood community to support issues related to tobacco control and to ensure effective enforcement of tobacco control law in Delhi.



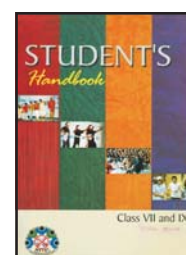
Youth rallying against tobacco (HRIDAY-SHAN activity)

Global Youth Meet

HRIDAY-SHAN also organized a Global Youth Meet (GYM) in 2006 in Delhi and Agra in which a total number of 225 youth from 35 countries from around the world participated, along with eminent resource persons from various organizations. WHO provided technical support for this activity. The participants were oriented towards health issues including tobacco control, using innovative health education strategies. This initiative empowered youth through enhanced health awareness and strengthened health advocacy skills among youth leaders. GYM resulted in a worldwide movement of health advocacy by young change agents and Y4H (Youth For Health) was launched. It will evolve into a powerful global platform of advocacy for health-promoting policies.

Health messaging: Effective use of celebrities' quotes

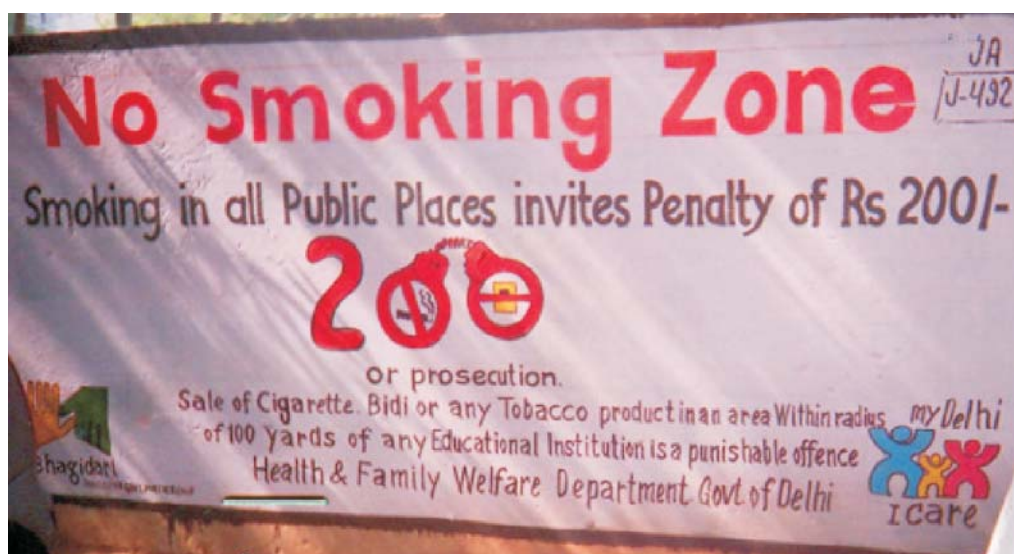
Through its information, education and communication (IEC) material, HRIDAY-SHAN used one of the interviews conducted by BBC with the Bollywood star Mr Aamir Khan to sensitize



students that there is nothing glamorous or star-like about being addicted to tobacco. This motivating interview details how he started smoking, serious ill-effects of smoking on his health and also highlighted health benefits after he successfully quit smoking. This activity is listed in the student's handbook provided to students under the Project Mobilizing Youth for Tobacco-Related Initiatives (MYTRI) of HRIDAY.

School intervention programme

State Tobacco Control Cell, Delhi has developed and distributed anti-tobacco IEC materials for school intervention programmes among government schools of East Delhi and New Delhi.



Display of billboards to raise awareness about the provisions of the law

The cell has also developed billboards displaying the provision for prohibition of sale of tobacco products within the radius of 100 yards of any educational institution, which is a punishable offence. These boards have been distributed among government schools. As of now, 270 schools have been provided with these boards to display on their main gates. The State Tobacco Control Cell has collaborated with the Delhi Police for effective enforcement of tobacco control law and has displayed "No Smoking" boards at police stations also.

Counseling services

Cancer Institute, Chennai undertook an intervention focusing on the prevention of tobacco use among college students through life skills training. Peer counselors from various colleges of Chennai were trained in counseling skills to prevent substance abuse. A structured proforma was also used to collect



Poongothai Aladi Aruna, Minister for Social Welfare, delivering the inaugural address at Cancer Institute, Chennai, 20 July 2007.

the demographic details and tobacco use pattern among youth. Based on their needs, the college students were sensitized about the harmful consequences of acquiring high-risk behaviours and crucial leadership skills to fight for tobacco control.

Best practices on tobacco control among youth

Myanmar

Myanmar has a comprehensive tobacco control legislation. Due to the absence of tobacco control legislation until 2006, youth had easy access to tobacco



Anti-tobacco signboard at school

products, which were sold in loose forms without any age limitation. Cigarette consumption increased rapidly among adolescent males and young adults before 2006. However, the Ministry of Information prohibited advertisement of tobacco on television and radio and from all electronic media in 2000. Tobacco advertising billboards were banned from the vicinity of schools, hospitals, health facilities, sports stadiums and maternity homes in May 2002, and from other places in April 2003. Tobacco

advertising was also banned from newspapers, journals and magazines in early 2003. Smoking was prohibited at all hospitals and health departments, at all basic education schools, all sports stadiums and sports fields and at some workplaces. The "Control of Smoking and Consumption of Tobacco Product Law" was enacted in May 2006 and came into effect in May 2007. This comprehensive law prohibits all forms of advertisement; smoking at public places, public transport, health facilities and educational institutions; and bans sale to and by minors under the age of 18 years. It also prohibits sale of cigarettes in packages less than 20. However, advertising through international media has not been covered under the current law. Cigarette advertising billboards had totally disappeared. Sponsorship by cigarette industry was no longer permitted. Counter-marketing measures are also implemented by the Ministry of Health in collaboration with the Ministry of Information, Ministry of Education, Myanmar Music Association and Myanmar Film Association, Myanmar Maternal and Child Welfare Association, Myanmar Red Cross Society and the community.



Counter-advertisement

The Ministry of Education and the School Health Project of the Department of Health, Ministry of Health worked together to establish “Tobacco-Free Schools”. Schools set policies that prohibit smoking and chewing tobacco within school compounds. For awareness of the danger of narcotic drugs, tobacco, HIV/AIDS and amphetamine-type stimulants, teachers, parents and officials from the Health Department and Myanmar Anti-Narcotics Association join to give lectures in schools at least once a month. Competitions of elocution, singing, role play, composition, posters, cartoons, paintings, essays and poems on drug prevention in schools are conducted yearly.

Dangers of tobacco are included in the lifeskills curriculum. With the support from WHO-SEARO, the Manual on Tobacco Control in Schools was translated into the local language and is being used in schools.

For propagation of knowledge on substance abuse including use of tobacco, a teacher’s manual, handbooks, pamphlets, posters, post cards – ‘Request to Parents’ and ‘Smoking is a Gateway to Drugs’ were compiled and published by the Ministry of Education.



Best practices on tobacco control among youth

Thailand

Thailand has comprehensive tobacco control laws and measures to protect youth from tobacco, including a total ban on direct advertising, promotion, and sponsorship, point of sale advertising, product placement in all media and trademark diversification; free giveaways, exchanges, rebates, discounts, free premiums etc; prohibition of sales to minor of less than 18 years of age; ban on cigarette vending machines; required labeling of cigarette packages with nine rotating pictorial health warnings; and ban on smoking in public and workplaces. There is also a strong presence of civil society organizations, including foundations, institutes and NGOs for advocacy for tobacco control. Taxes from tobacco are being used for anti-tobacco and other health promotion activities.

Nil cigarette display at all 500 000 points of sale in Thailand

Thailand had banned point of purchase (POP) advertisements in 1992. Thailand Health Promotion Institute (THPI) initiated a movement called "Nil cigarette display at all 500 000 points of sale in Thailand" in 2004 for enforcing the ban on POP advertisements of tobacco products. In response to this initiative, the Department of Disease Control (DDC) held a meeting of retailers asking to comply with the Tobacco Product Control Act 1992 and relevant rules prohibiting POP advertisement. The Coalition Protecting Thais from Dangers of Tobacco (CPTDT) also joined the movement and pursued the matter with the Minister of Public Health, requesting a ban on POP advertisement. DDC also organized a meeting of tobacco control officials and academics to decide on how the ban should be enforced. The meeting decided to set 24 September 2005 as the deadline to terminate display of tobacco products at the retail stores. Meanwhile, the National Committee for the Control of Tobacco Use (NCCTU) endorsed the decision of the Government through a resolution.

The network of health professionals and school students also supported the decision of the Government to ban POP advertisement. Representatives from different groups of the Network of Health Professionals for Tobacco Control and other tobacco control stakeholders led a signature campaign and submitted a signed letter to the Government supporting the ministry's stance on the ban. THPI also mobilized the support of Family Network of Secondary Schools, Youth Leader Group, Single Parents Family Network, and a Thai convenience store chain in support of the ban on POP advertisement. A total of 32 341 school students also strongly supported the decision of the Government on the ban.

A chain of convenience stores along with other pro-industry groups were opposing the proposed ban on POP advertisement and refused to comply with the ban. In response to their opposition to the ban, THPI revealed the profits

by convenience stores from POP advertisement in the media. They also made public the details of the business relationship between convenience stores and one of the major tobacco industries in Thailand. A copy of the contract between them and revealing the financial transaction was also provided to the media. This information was widely reported in various television channels and daily newspapers. Wide media coverage was used in support of the ban. A full -page color advertisement was run in newspapers saying: "From 24 September 2005 cigarette display at the points of sale is illegal. Thank you for your cooperation. If you find a violation please register your complaint with DDC on the given telephone number". Following the wide dissemination of this information, DDC again informed retailers to follow the ban.



Rallies and advocacy campaign in support of the ban on POP advertising

Finally, the convenience store chain gave up. Cigarette packages were removed totally from the shelves and as of 17 November 2005, the store announced that its convenience outlets would put cigarette packets out of sight. The company informed all its branches to cover cigarette packets on the shelves with phone refill cards.

The enforcement of the ban on POP advertisement was possible due to active involvement and participation of NGOs, other anti-tobacco civil society organizations, social groups and other relevant national authorities. Support from a huge number of school children to the decision of the Government acted as a huge social pressure for the ban's effectiveness. Their active participation proved again that youth can make the difference in tobacco control issues.

tobacco & youth

Conclusion

Youth are the main target of the tobacco industry, which constantly tries to entice youth in every possible way to use tobacco. The tobacco industry spends considerable financial resources in the Region each year on advertising, promotion and sponsorship. Technology and financial resources available to the industry have made the tobacco control efforts all the more difficult. Partial bans on tobacco advertising, promotion and sponsorship do not work because the industry merely redirects its resources to other unregulated marketing channels. Only a complete ban on all kinds of advertising, promotion and sponsorship of all tobacco products can prevent the tobacco industry from luring youth to take up tobacco through their sophisticated marketing strategies and tactics. Tobacco marketing bans are highly effective; national-level studies before and after advertising bans found a decline in consumption of up to 16%. Creating and sustaining 100% smoke-free environments is another strategy that governments and all anti-tobacco stakeholders should seriously consider to protect youth in particular, and the public in general from dangers of tobacco. At the same time, research and generation of evidence should continue to assess trends in tobacco consumption among youth for necessary policy and programme change. All tobacco control policies and programmes should ensure multisectoral collaboration, public education and awareness-raising against tobacco as an intersectoral approach for sustaining tobacco control efforts.

Bibliography

- (1) Arora M, Reddy KS, Stigler MH, Perry CL. Associations between tobacco marketing and use among urban youth in India.. *Am J Health Behav.* 2008 May-Jun; 32(3): 283-94.
- (2) World Health Organization, Regional Office for South-East Asia Region. *Global Youth Tobacco Survey Bangladesh 2004.* New Delhi, 2004. New Delhi, 2004. (http://www.searo.who.int/EN/Section1174/Section2469/Section2480_14228.htm - accessed 22 May 2008).
- (3) World Health Organization, Regional Office for South-East Asia Region. *Global Youth Tobacco Survey Bhutan 2006.* New Delhi, 2006. (http://www.searo.who.int/EN/Section1174/Section2469/Section2480_14195.htm - accessed 22 May 2008).
- (4) World Health Organization, Regional Office for South-East Asia Region. *Global Youth Tobacco Survey India.* New Delhi. (http://www.searo.who.int/EN/Section1174/Section2469/Section2480_14169.htm - accessed 22 May 2008).
- (5) World Health Organization, Regional Office for South-East Asia Region. *Global Youth Tobacco Survey and Global School Personnel Survey Indonesia 2006.* New Delhi, 2006. (http://www.searo.who.int/EN/Section1174/Section2469/Section2480_14189.htm - accessed 22 May 2008).
- (6) World Health Organization, Regional Office for South-East Asia Region. *Global Youth Tobacco Survey Maldies 2007.* New Delhi. 2007. (http://www.searo.who.int/EN/Section1174/Section2469/Section2480_14236.htm - accessed 22 May 2008).
- (7) World Health Organization, Regional Office for South-East Asia Region. *Global Youth Tobacco Survey Survey and Global School Personnel Survey Myanmar 2007.* New Delhi, 2007. (http://www.searo.who.int/EN/Section1174/Section2469/Section2480_14190.htm - accessed 22 May 2008).
- (8) World Health Organization, Regional Office for South-East Asia Region. *Global Youth Tobacco Survey Nepal 2007.* New Delhi, 2007. (http://www.searo.who.int/EN/Section1174/Section2469/Section2480_14191.htm - accessed 22 May 2008).
- (9) World Health Organization, Regional Office for South-East Asia Region. *Global Youth Tobacco Survey and Global School Personnel Survey Sri Lanka 2007.* New Delhi, 2007. (http://www.searo.who.int/EN/Section1174/Section2469/Section2480_14192.htm - accessed 22 May 2008).
- (10) World Health Organization, Regional Office for South-East Asia Region. . *Global Youth Tobacco Survey Thailand.* New Delhi. (http://www.searo.who.int/EN/Section1174/Section2469/Section2480_14193.htm - accessed 22 May 2008).
- (11) World Health Organization, Regional Office for South-East Asia Region. *Global Youth Tobacco Survey Timor-Leste.* New Delhi. (http://www.searo.who.int/EN/Section1174/Section2469/Section2480_14194.htm - accessed 22 May 2008).
- (12) World No Tobacco Day, 31 May 2008 Geneva: World Health Organization, 2008. (<http://www.who.int/tobacco/wntd/2008/focus/en/index.html> - accessed 07 May 2008).
- (13) *WHO report on the global tobacco epidemic, 2008 - the MPOWER package.* Geneva: World Health Organization, Geneva, 2008). (<http://www.who.int/tobacco/mpower/en/> - accessed 07 May 2008).
- (14) United Nations. *World population prospects: The 2006 revision.* New York, 2007. (<http://esa.un.org/unpp/index.asp?panel=2> - accessed 22 May 2008).
- (15) *WHO framework convention on tobacco control (WHO FCTC).* Geneva: World Health Organization 2004-2005. (http://www.who.int/tobacco/framework/WHO_FCTC_english.pdf - accessed 22 May 2008).

This brief profile on "Tobacco and Youth in the South-East Asia Region" depicts the situation with respect to tobacco use prevalence among youth, as well as accessibility to tobacco products, exposure to second-hand smoke and exposure to advertising, promotion and sponsorship tactics of the tobacco industry. It also describes the tobacco control measures in place to protect youth from exposure to the diverse marketing tactics used by the tobacco industry. Finally, it presents best practices from South-East Asian countries that have successfully implemented tobacco control measures to protect youth from tobacco use.



**World Health
Organization**

Regional Office for South-East Asia

World Health Organization

Regional Office for South-East Asia

World Health House,

Mahatma Gandhi Marg

New Delhi - 110002, India

Website: www.searo.who.int/tobacco

ISBN 978-9-290223-26-9

