

# ALTERNATIVE RESEARCH INITIATIVE NEWSLETTER

March 2021

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## Pakistan's fight for tobacco control far from over

One of the targets of Sustainable Development Goal 3 is to “strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control (FCTC) in all countries, as appropriate.” The indicator for measuring the implementation of FCTC is “age-standardized prevalence of current tobacco use among persons aged 15 years and older.”

According to the SDG Report 2020, an estimated 8.1 million people died of tobacco-related illnesses in 2017. The global prevalence of tobacco use among men was 38.6% in 2018, compared to 8.5% among women. According to the SDG Report 2019, “The prevalence of tobacco use declined from 27% in 2000 to 20% in 2016. Prevalence fell faster for women, from 11% in 2000 to 6% in 2016, compared with men: prevalence in men only fell from 43% to 34%.” However, it still pointed out to 8.1 million fatalities per year from tobacco use.

This is a grim picture, which gets grimmer as 80% of the 1.1 billion tobacco users are in Low- and Middle-Income Countries (LMICs). As such, the tobacco use crisis is far from over for LMICs despite achievements made over the last two decades under the FCTC.

Pakistan is a case in point in this regard. The country has come a long way from the days when tobacco advertisements grabbed widespread visibility to now being non-existent in the print, electronic, social and outside media. This is indeed a huge success. Other successes include ban on smoking in public places, ban on sale of open cigarettes to minors, and a gradual increase in the size of the public health warning on cigarette packs. Although originally planned to cover 85% of the cigarette pack, the warning now covers 60% of the space.

These successes, however, are eclipsed by worrying facts. According to the Global Adult Tobacco Survey (GATS) 2014, almost one in five adults—around 25 million—in Pakistan use tobacco in some form. Of the one-fifth (191%) adult users (15+) of tobacco in Pakistan, 31.8% are men and 5.8% women.

## Hard Facts

- Nearly 8 million people die from smoking-related diseases every year.
- The estimated total number of smokers globally—at 1.1 billion—is static, the same number as in 2000 and predicted to be the same in 2025, disproportionately affecting poor and marginalised groups, especially in LMIC, where 80% of the world's smokers live.
- The immediate way to reduce smoking-related deaths is to focus on current smokers. The evidence for SNP demonstrates that they are substantially safer than combustible tobacco, both for smokers and bystanders, and contribute to helping those wishing to stop smoking.
- Progress in the adoption of Safer Nicotine Products (SNP) has been slow. An estimated 98 million people globally use SNPs—including 68 million vapers—amounting to only 9 per 100 smokers (fewer in LMIC). There is an urgent need to scale up Tobacco Harm Reduction (THR).
- THR is embedded in nearly every field of WHO's work except tobacco. Traditional tobacco control interventions elaborated in the WHO FCTC are not enough. THR policies should therefore be regarded as complementary rather than inimical to reducing global death and disease from smoking.

***(Burning Issues: The Global State of Tobacco Harm Reduction 2020)***

Big tobacco companies continue to thrive in Pakistan. In the year of the pandemic, Phillip Morris Pakistan registered 53% year-on-year growth to Rs. 8.2 billion in gross turnover for the post-budget quarter, which ended on September 30, 2020. Similarly, during the July-September quarter, Pakistan Tobacco Company registered 27% increase in turnover growth and a net 41% year-on-year growth. In July, August and September 2020, Pakistan produced 4.8 billion, 3.9 billion and 4.2 billion cigarettes, respectively. Annual cigarette production is around 57 billion.

The above facts show that the fight for tobacco control in Pakistan is far from over. In fact, it may be turning into a losing cause. Over the last two decades, the country has ignored the importance of smoking cessation in its tobacco control efforts. Only in 2017-18 was Nicotine Replacement Therapy (NRT) made part of the Essential Drugs List; its availability on affordable rates still remains a challenge. Additionally, the primary tobacco control law in Pakistan—the Prohibition of Smoking in Enclosed Places and Protection of Non-smokers Health Ordinance 2002—does not talk about smoking cessation.

Tobacco control actors continue to place emphasis on reducing the demand for cigarettes and making access to cigarettes difficult—a strategy that has not worked. They insist on increasing taxes on cigarettes so that the resultant increase in prices would render them beyond the purchasing power of ordinary smokers. In the presence of a huge illicit cigarette market in Pakistan, this may not work as most of the smokers may switch to cheap and easily available illicit brands. If Pakistan has to achieve a decline in the rates of combustible smoking, it has to make

cessation and innovation the main planks of its tobacco control policy over the next ten years. Tobacco Harm Reduction (THR) is based on the idea that people smoke for nicotine but die from tar. It works because almost all disease risks attributable to smoking arise from smoke—the particles of tar and toxic gases inhaled from burning tobacco. Nicotine creates dependence while smoke contains thousands of toxic agents, many of which are formed as a reaction during combustion. If smokers can find satisfactory alternatives to cigarettes that do not involve combustion but do provide nicotine, they would avoid almost all of the disease risks.

In the last five years, Pakistan has witnessed THR in the form of e-cigarettes. Today, the country has 100-odd e-cigarette outlets. Most of the e-cigarette users are aged 18-35 years, and are urbanites, educated, and well-off. E-cigarettes are legally imported in Pakistan though there is no policy governing their regulation; the government has only imposed taxes and duties on their import.

Pakistan's performance on the SDG targets is clearly disappointing. The country ranks 134 out of 166 countries, with an index score of 56.2. More disappointingly, under SDG 3, there is no mention of the FCTC indicator. Pakistan needs to institute urgent measures to curb the prevalence of combustible smoking. The first is a national strategy on reduction of combustible smoking. Despite two decades of work on tobacco control, the country still lacks a national strategy, which needs to be prepared in consultation with relevant stakeholders including smokers; should be based on scientific evidence; and should look at THR as an essential part of the solution.

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## FCTC Secretariat Relaunches Plan For Accelerated Tobacco Control, Highlighting WHO's Bureaucratic Inaction

*Ehsan Latif*

In 2018, the World Health Organization (WHO) adopted the Global Strategy to Accelerate Tobacco Control 2019-2025 (GS2025). Described as “a blueprint for the global tobacco control community,” this strategy sought to accelerate implementation of the WHO Framework Convention on Tobacco Control (FCTC). Two years later, one cannot help but notice the absence of any report on progress toward this goal—an absence that was made all the more glaring when the WHO relaunched GS2025 last month. Intended to coincide with what would have been the Ninth Session of the Conference of the Parties to the FCTC (COP9), this relaunch only highlighted ongoing failures in policy implementation.

The GS2025 itself recognizes the uneven implementation of several FCTC articles. And the “WHO Report on the Global

Tobacco Epidemic 2019: Offer to help quit tobacco use” finds that only 23 nations have introduced comprehensive cessation programs, “even though in many countries, many tobacco users report wanting to quit.” These findings can be attributed to, among other things, inadequate funding and government inaction. For example, countries have hesitated to include nicotine replacement therapy on their National Essential Medicines Lists—a step that could make a tangible difference in cessation rates. Likewise, many countries have resisted adoption of tobacco harm reduction (THR) strategies, despite evidence suggesting that such a move could substantially reduce death and disease caused by the use of toxic tobacco products.

Indeed, the WHO narrative on tobacco control excludes important progress in the area of THR, including: the

adoption of a THR approach in the United Kingdom; United States FDA authorization to market heated tobacco products and snus as “Modified Tobacco Risk Products;” and success stories from countries that have used THR to decrease the smoking-related health burden, such as Japan and South Korea. These developments all occurred in the time since the GS2025 was initially released.

Of course, the outbreak of the coronavirus pandemic may have a role to play in the GS2025 reporting delay; however, now is not the time for the WHO or FCTC Secretariat to drop the ball. Rather, it is an opportunity to bolster and shift the lens through which the tobacco pandemic is viewed, and to make truly meaningful progress towards ending smoking in this generation.

## Accelerating An End To Smoking

A recent article by Derek Yach demonstrates the potential for a dramatic reduction in deaths from tobacco via measures that improve cessation and harm reduction support. The article highlights that, though there is general agreement that cessation is the fastest way to reduce tobacco deaths, FCTC implementation has tended to focus on articles with negligible impact on this outcome. Yach writes: “52% of the world is ‘covered’ with respect to pack warnings, which do little to reduce smoking rates. By contrast, the implementation of cessation assistance is quite weak.”

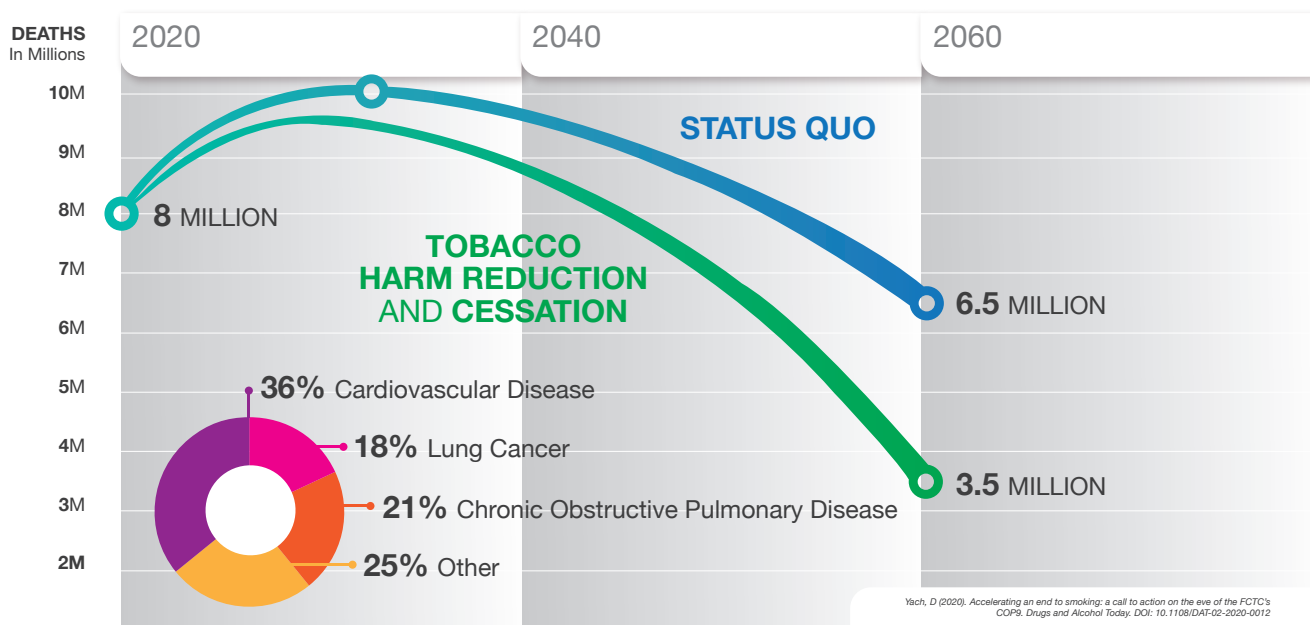
The article goes on to emphasize the value of new approaches to cessation, including THR. Such approaches, argues Yach, could save millions of lives by 2060,

representing an unprecedented public health gain. Yet, again, the WHO has failed to afford this approach the attention and resources it warrants.

Though FCTC implementation has been slow, there is now an opportunity to disrupt this stagnation. Given the delay of COP9, we have an extra year in which to discuss high priority action areas in tobacco control. Yach has deftly defined some of these priorities (summarized below), which include filling critical gaps in knowledge and funding. Ahead of COP9, parties should further consider these priorities and develop evidence-based recommendations for the meeting next year. We needn’t accept bureaucratic inaction; and, in fact, we have a moral imperative to demand change.

Top Issues	FCTC text or alternative reference
<b>1. <i>Moderize and amend (Article 28)</i></b> <ul style="list-style-type: none"> <li>Harm reduction</li> </ul>	Article 1 (need elaboration) Articles 9-16
<b>2. <i>Accelerate actions to end smoking</i></b> <ul style="list-style-type: none"> <li>Cessation</li> <li>Women</li> <li>Evidence-based taxation policies</li> </ul>	Preamble, Article 14 Preamble Article 6
<b>3. <i>New initiatives to address needs</i></b> <ul style="list-style-type: none"> <li>Alternative livelihoods</li> <li>National and global research</li> <li>Address funding gaps</li> </ul>	Article 17 Part VII: Articles 20-22 Preamble, Articles 4, 5, 23, 26
<b>4. <i>Shift in philosophy</i></b> <ul style="list-style-type: none"> <li>Promote multi-sectoral engagement</li> <li>Increase transparency</li> <li>Respectful dialogue</li> </ul>	Articles 4 and 25 Article 3 and Jacob (2018) Dukes et al. (2019)

## Estimated Trends in Tobacco-Related Deaths 2020-2060



“In a globalized world where boundaries between countries are becoming less rigid every day, outcomes in one place can have a global impact. From this perspective, tobacco control is everyone’s business.”



# FSFW sees new report as undermining progress needed to end smoking

The Foundation for a Smoke-Free World (FSFW) has expressed reservations over omissions in the Report of the 10th Meeting of WHO Study Group on Tobacco Product Regulation (TobReg).

In an analysis addressed to the Executive Board of the World Health Organization (WHO), FSFW says the document will undermine progress needed to end smoking because of its failure to highlight the potential benefits of tobacco harm reduction—an approach which could save 3 million lives annually by 2060.

FSFW analysis maintains the TobReg study group, mandated to advise WHO about evidence-based interventions that can enable Member States to fill the regulatory gaps on tobacco control, should have ensured that its 10th meeting also deliberated on issues related to the regulation of new and emerging tobacco products, including Electronic Nicotine Delivery Systems (ENDS) and Heated Tobacco Products (HTPs). “Yet, the report indicates that any discussions on this topic were incomplete and their evidence base wanting.”

FSFW noted significant oversights in the report—deficiencies that are troubling given the potential for TobReg to influence regulatory narratives ahead of the 9th Conference of the Parties (COP9) to the WHO FCTC. However, the three critical oversights relate to harm reduction, evidence base, and product differentiation.

The report has failed to explicitly address the benefits of harm reduction as a strategy to achieve a decline in death and disease caused by combustible cigarettes. It has painted Harm Reduction Products (HRPs) as a threat to tobacco control, and has missed offering a balanced assessment of the potential of HRPs to reduce smoking rates.

Secondly, the report lacks an impeccable evidence base. “Many of the report’s statements are contradicted by other sources including those used by FDA and Cochrane reviews in their assessments of heated tobacco products and e-cigarettes.... The study group’s report can hardly be characterized as providing helpful guidance if the scientific basis of their recommendations is not provided.” Thirdly, the report does not differentiate between emerging and novel products such as ENDS, Electronic Non-Nicotine Delivery Systems (ENNDS), and HTPs. This distinction is important because the risks and benefits of each product can greatly vary. Its recommendations primarily focus on HTPs. “Indeed, clear recommendations for e-cigarettes



and other products are difficult to glean from the report,” the statement maintains.

While encouraging focus on evidence-based measures, the report cautions against being distracted by the promotion of novel tobacco products. FSFW sees this recommendation as promoting the status quo in tobacco control despite the fact that existing tobacco control approaches are yet to yield the desired reduction in smoking rates. “Its vague allusion to novel products also disregards the almost 100 million people who use such products across at least 40 countries,” the analysis points out.

Another recommendation talks about raising public awareness about the risks associated with HRPs. FSFW argued that just as it is critical to inform the public about the risks of using a certain product, it is equally important to share information about positive outcomes associated with it. “In the case of HRPs, TobReg assesses the negative consequences of adoption but fails to consider the potential benefits among smokers,” the analysis states.

In another recommendation, the report underlines the need to rely on independent data, and to critically analyze and interpret tobacco industry-funded data. In this context, FSFW believes TobReg needs to consider strategies that enhance public access to research funded by the tobacco industry as such research is routinely used by regulatory bodies like the USFDA because of its scientific merit and potential utility.

The FSFW statement sees TobReg’s treatment of HRPs as marking a departure from emerging consensus regarding the promise of these products. “The recommendations imply that HRPs threaten health, undermine tobacco control policy, and provide no benefits to combustible users. This stance, if absorbed by governments, will reinforce use of combustible products and ultimately subvert efforts to curb deaths caused by smoking,” it concludes.

Established in 2018, ARI is an initiative aimed at filling gaps in research and advocacy on ending combustible smoking in a generation. Supported by the Foundation for A Smoke-Free World (FSFW), ARI established the Pakistan Alliance for Nicotine and Tobacco Harm Reduction (PANTHR) in 2019 to promote innovative solutions for smoking cessation.

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