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Cessation clinics helping smokers quit in Qatar

Qatar: A recent study by the Primary Health Care Corporation (PHCC) has revealed that 63.5% of the visitors to smoking cessation clinics successfully quit the habit, local Arabic daily *Arrayah* reported.

Significant differences in smoking cessation rates were noted based on the nationality and educational level of the participants, though.

The study pointed out that 23.3% of those who initially quit smoking relapsed and resumed smoking within six months of completing the cessation programme. The relapse rate increased over time to 38.7%, 47.2%, and 51.1% at 12, 24, and 36 months, respectively.

Eventually, within 42 months, 45.8% of the participants were able to maintain their non-smoking status. The study stressed that the smoking cessation services provided by PHCC achieved significant success, indicating that the vast majority of individuals seeking help from the health centres managed to quit smoking.

The published study is titled 'Investigating the socio-demographic characteristics and smoking cessation incidence among smokers accessing smoking cessation services in primary care settings of Qatar, a Historical Cohort Study.'

The study found that the smoking cessation services at PHCC were effective in both the short and long term. Researchers discovered that young smokers with higher incomes and educational levels are the at-risk group.

The study also suggested that to reach a larger local audience, the corporation should promote its services more broadly. The primary goal of the study was to examine the background, characteristics, and frequency of smoking cessation among

individuals receiving help from smoking cessation services at Primary Health Care Centers in Qatar. It also focused on the number of people who started smoking again after initially quitting.

The study included a large sample of 490 participants, selected through simple random sampling from those attending the PHCC smoking cessation clinics, providing a comprehensive view of smoking cessation outcomes.

The study explained that 43% of the survey participants were aged between 30 and 39, followed by the 40-49 age group, comprising 28% of the respondents. Most participants (90.2%) were male and had a smoking history of more than 10 years, with the majority (96.3%) being cigarette smokers. It pointed out that smoking cessation clinics are managed by trained and certified doctors who provide effective counseling and medication prescriptions to help individuals successfully quit tobacco use. These clinics can be accessed through a doctor's referral or by calling 107 directly to schedule an appointment.

The study concluded "there is a need to target high risk individuals and upscale the accessibility to the service among the local population by active community engagement, promoting a multi-sectoral approach strengthening legislative and policy measure for smoking cessation services and further advertisement of the existing services."

It was conducted by a number of researchers and doctors from the PHCC's Department of Clinical Research and others.

<https://www.gulf-times.com/article/686433/qatar/phcc-smok->

[ing-cessation-clinics-reveal-high-success-rate?fbclid=IwY2xjawEmwGxleHRuA2F1bQlxMAABHRDncPmyRMbesjm3EAvJav-44NKGgUxmlEp7n7DR-Xoq0B3zjQ2MCMW75g_aem_h3cHw9V3FKMiaPTLe7gWag](https://www.gulf-times.com/article/686433/qatar/phcc-smoking-cessation-clinics-reveal-high-success-rate?fbclid=IwY2xjawEmwGxleHRuA2F1bQlxMAABHRDncPmyRMbesjm3EAvJav-44NKGgUxmlEp7n7DR-Xoq0B3zjQ2MCMW75g_aem_h3cHw9V3FKMiaPTLe7gWag)



Illegal cigarettes cost country Rs310b

Karachi: Tax evasion resulting from the illegal cigarette trade alone causes an immense loss of over Rs310 billion to the national exchequer each year, according to market sources. These sources are urgently calling for immediate actions against illicit trade to meet the country's tax goals instead of further burdening common citizens. The government must take immediate and decisive measures against illicit trade to enhance revenue collection and reduce the tax burden on the populace, they stressed.

"It's been almost six weeks since the budget was announced, and there are still heaps of illicit items in the market," said Fawad Khan, Spokesperson for Mustehkam Pakistan, an advocacy firm dedicated to curbing illicit trade and tax evasion in the country.

While expressing concern over the pressing issue of illegal trade and its detrimental impact on the country's

economy and marginalized communities, Khan warned that without expanding the tax base and implementing a comprehensive track and trace (T&T) system alongside effective curbing policies, the government will find it challenging to increase the tax-to-GDP ratio to its target of 13%.

A recent report from a foreign research institute reveals that approximately Rs1 trillion is evaded annually in Pakistan across major sectors, including real estate, pharmaceuticals, tyres and lubricants, tea, and cigarettes. "Tax evasion due to the illegal cigarette trade alone results in an annual loss of over Rs310 billion to the national exchequer, a figure expected to rise this year," Khan noted.

He cautioned that if all cigarette brands are not brought under digital monitoring, the volume of illegal trade could reach 65%



this year, further complicating matters for both the legitimate industry and the government. Around 50-60% of cigarettes in the country are being sold illegally, causing billions of rupees in losses to the economy. Billions of rupees are openly stolen due to the sale of illicit cigarettes in the country, and government authorities are too weak to collect taxes from these illegal cigarette manufacturers.

If the government fails to implement the track and trace system effectively this time, it will be exceedingly difficult to achieve the tax target for the financial year 2024-25. This shortfall in tax revenue will likely force the government to resort to more borrowing, leading to further economic imbalance and an increased debt burden.

According to market sources, it is not a tall order to apprehend those involved in this illegal trade. One kilogram of tobacco makes 1,000 cigarettes, and growers cannot sell tobacco without adhering to rules and regulations. Once a factory purchases tobacco, it can be debriefed about the end-product of cigarettes to carry out a crackdown against tax dodgers and collect proper excise duty, as at least 60% tax is imposed on a single packet of cigarettes. Two multinational companies (MNCs)—Philip Morris Pakistan Limited and Pakistan Tobacco Company Limited—contribute 99% of revenue while holding the major market share of around 60%. In contrast, there are over two dozen local tobacco companies, which retain only a 40% market share, mostly located in Khyber-Pakhtunkhwa (K-P) and Punjab.

https://tribune.com.pk/story/2483480/illegal-cigae-tes-cost-country-rs310b?fbclid=IwY2xjawEmvrJleHRuA2FibQixMQABHd05QKBR7dniYpGnmDZD_llyVGTsDX7xulcmhNRUCZMD9NT9W7mpxB5grw_aem_3UpPK1x2p1jQSbjg-0a_5g

Supreme Court decision jeopardizes public health and regulatory protections

By Cliff Douglas

The U.S. Supreme Court's decision to overturn the Chevron defense represents a significant threat to public health, as well as a wide array of environmental and consumer protections. Weakening federal agencies' ability to use objective science based on their own hard-earned expertise and that of the broader scientific community to evaluate products in an evolving regulatory landscape threatens to harm the American public.

The U.S. Food and Drug Administration (FDA) has left much to be desired in its regulation of tobacco products. The current pre-market tobacco product application process is opaque, expensive, and cumbersome, and the agency has essentially created a de-facto ban on novel, risk-minimizing nicotine products that millions of consumers have turned to as life-saving options. Even with the recent, welcome decision to authorize a handful of menthol-flavored e-cigarettes, these products make up only a minuscule fraction of the total e-cigarette market, most of which is illicit.

But the solution is not to weaken the FDA's authority; on the contrary, the future of public health in this country is for that agency to fully embrace the concept of the continuum of risk in its tobacco product authorizations. It's time the agency to follow through on its own comprehensive plan from 2017 to build a robust off-ramp for adults who smoke while protecting youth and minors from initiating nicotine use.

I fear the FDA will not be able to make regulatory decisions that are appropriate for the protection of public health now its ability to make nimble science-backed decisions has been further jeopardized.

<https://globalactiontoendsmoking.org/news-and-press/press/su-preme-court-decision-jeopardizes-public-health-and-regulatory-protections/>

Taken from globalactiontoendsmoking.org



New Zealand on track to achieve its smoke-free target by 2025

Following in the footsteps of other countries with progressive tobacco harm reduction (THR) strategies, such as Sweden and Japan, New Zealand aims to reduce the local smoking rate to below 5% by 2025.

Like vaping products, heated tobacco products (HTPs) produce nicotine vapour without combustion, making them substantially safer than cigarettes. More specifically, studies have shown that while the products are less harmful than cigarettes, they are more harmful than vaping. However, experts agree that the more combustion-free options are available on the market, the easier it is for smokers to find an alternative product which suits them and helps them quit smoking.

Meanwhile New Zealand has just cut the local excise tax on HTPs by half, a move which many experts in the field of public health are considering a significant step towards leadership in tobacco harm reduction. This 50% tax cut not only makes HTPs more affordable but also sends a strong public message. In fact, Japan's successful adoption of HTPs, leading to a significant decline in cigarette sales, may serve as a successful model for New Zealand to follow.

Reducing the local smoking rate to below 5% by 2025

NZ's Associate Health Minister Casey Costello set in effect this change in tax last month, aiming to incentivize smokers to switch to these safer alternatives. New Zealand has already embraced nicotine vapes as harm reduction tools, which has accelerated the decline in smoking rates to 6.8% by 2023. Costello aims to further reduce this rate to below 5% by 2025, aligning with the national "smoke-free" target. She noted that vaping may not work for everyone, and HTPs offer a similar risk profile as vapes and are legally available, making the tax cut an important experiment in harm reduction. In fact, a June report by Smoke Free Sweden titled "Quitting Strong: New Zealand's Smoking Cessation Success Story" provided a detailed analysis of the innovative strategies New Zealand has implemented to reduce smoking rates. The report highlighted that New Zealand has successfully halved its smoking rates within five years, primarily by encouraging

adult smokers to switch to vaping. This achievement positions New Zealand among the first countries to reach an official smoke-free status, defined as having less than 5% of adults smoking cigarettes. The report offered valuable insights and recommendations which could be applied globally to reduce smoking rates and enhance public health outcomes. It emphasized the importance of New Zealand's approach for policymakers, health professionals, and public health advocates worldwide, suggesting that the lessons learned from New Zealand's experience could be instrumental in formulating effective smoking cessation strategies globally.

The more safer nicotine alternatives available, the better

In line with arguments by smoking cessation professionals worldwide, the experts argue that making safer alternatives accessible is crucial, especially for low-income populations with high smoking rates. In line with this, to further support smoking cessation efforts Minister Costello is also considering lifting the current bans on snus and nicotine pouches.

How can Australia ignore its neighbor's success in comparison to its failure?

Sadly, New Zealand's approach contrasts greatly with Australia's outdated one, which based on harsh restrictions and prohibition, has led to a booming black market for vapes and tobacco. New Zealand's strategy of engaging with stakeholders, including nicotine users, is proving to be a more effective public health policy. The country's recent consultation on the Smoke Free Aotearoa 2025 Action Plan and its evidence-based policy-making, have positioned it as a leader in reducing tobacco harm. If current trends continue, New Zealand is likely to achieve its 2025 smoke-free target, demonstrating the effectiveness of harm reduction over prohibition.

<https://www.vapingpost.com/2024/08/07/new-zealand-is-well-on-its-way-to-reach-its-smoke-free-target/?fbclid=IwY2xjawEmvPVleHRuA2FibQlxMAABHRDncPmyRMbesjm3EAvJav-44NKGgUxmEpf7n7DR-Xoq0B3zjQ2MCW7>

Gratitude linked with reducing desire to smoke

Gratitude appears to play a role in helping smokers reduce their urge to smoke, according to a new study co-authored by researchers from Harvard T.H. Chan School of Public Health and colleagues from Harvard Kennedy School.

The study also found that gratitude can increase the likelihood that a smoker will enroll in a smoking cessation program.

The paper was published in Proceedings of the National Academy of Sciences. Harvard Chan School co-authors included Vaughan Rees, senior lecturer on social and behavioral sciences and director of the Center for Global Tobacco Control, and Ichiro Kawachi, John L. Loeb and Frances Lehman Loeb Professor of Social Epidemiology.

Using evidence from several types of studies, the researchers found consistent links between feelings of gratitude and lower rates of smoking. For instance, in nationally representative samples from the U.S. and in a global sample, those with higher levels of gratitude were less likely to smoke. Experi-

mental studies revealed similar connections, showing that inducing feelings of gratitude in adult smokers was linked with reducing their craving to smoke and increasing their enrollment in an online smoking cessation program.

"The evidence was striking," said Rees. "Inducing gratitude influences decisions on smoking that are consistent with smoking less and higher motivation to quit. Unfortunately, gratitude is seldom evoked in anti-smoking communication campaigns, which often induce sadness—an emotion that increases cravings to smoke. These findings offer new theory-guided strategies to enhance the impact of public health communication campaigns."

https://www.hsph.harvard.edu/news/hsph-in-the-news/gratitude-linked-with-reducing-desire-to-smoke/?fbclid=IwY2xjawEmvZNeHRuA2FibQlxMAABHZ8CZYRUhcBeo-TZ_BcHs0HI053IUUFDq9zQNzBnZnd41HhYM6JAE3g_aem_xDzVb3nN-OWx5FEx5w50ig

Financial incentives double smoking cessation rate for people with socioeconomic challenges, study finds

A study published by a University of Oklahoma researcher shows that financial incentives can make a big difference in helping smokers quit. The study found that when people with low socioeconomic status are offered small financial incentives to stop smoking (in addition to receiving counseling and pharmacotherapy, primarily nicotine replacement therapy), they achieve higher quit rates, with some measures doubling the quit rates, when compared to study participants who received the same treatments without incentives. This finding is particularly important because adults with socioeconomic challenges are more likely to smoke, experience more difficulty quitting, and suffer from more tobacco-related health problems and deaths than the general population. The study, published in *JAMA Network Open*, a journal of the American Medical Association, was led by Darla Kendzor, Ph.D., co-director of the TSET Health Promotion Center at OU Health Stephenson Cancer Center and a professor of family medicine in the OU College of Medicine.

"It's an amazing finding that smoking quit rates were doubled at final follow-up simply by offering small incentive payments for quitting," Kendzor said. "This is especially important for the counties in Oklahoma that have high levels of poverty and where many people don't have health insurance and face other socioeconomic challenges. Smoking rates are as high as 30% in some Oklahoma counties, which is much higher than national estimates."

The study's findings come from a clinical trial in which adults were randomly assigned to one of two groups: those who received pharmacotherapy and counseling with a tobacco treatment specialist, and those who received the same treatments in addition to financial incentives for smoking abstinence.

Participants could earn up to \$150 through weekly incentives if they were not smoking during the first several weeks after a quit attempt. The incentives started at \$20 and increased by \$5 each week, and there were additional \$50 booster payments for smoking cessation at eight- and 12-week follow-ups. To verify that they had quit smoking, participants were required to blow into a carbon monoxide monitor. Twenty-six weeks after the start of the trial, an estimated 23.5% of participants receiving financial incentives were smoke-free, compared to 12.1% of those who did not receive incentives.

"People may be motivated to quit smoking because of the financial incentive, which can also increase their motivation to complete their counseling sessions and take their medication as directed," she said. "Incentivizing early success can potentially increase people's self-efficacy for quitting. People may be ambivalent about quitting smoking, or they may not be

sure they will be able to quit. But when there's an incentive on the line and people have some initial success, that success can build from week to week. Incentives can also help people get back on track. When people lapse and restart smoking, they might be more likely to try to quit again because an incentive is available the next week."

Although the clinical trial began in 2017 before the arrival of COVID-19, it continued until 2022, two years into the pandemic. Study results reflect the upheaval caused by the pandemic: People in the incentivized group who participated in the trial before COVID-19 arrived had much higher cessation rates than those in the same group whose participation began after COVID-19.

"It was much harder for people to quit smoking during the worst time of the pandemic, and we had more attrition during that time as well," Kendzor said. "If this study had finished before COVID-19, we might have had even higher rates of cessation."

Efforts are underway to translate the study's findings to cessation strategies available to the public at large. Kendzor is collaborating with the Oklahoma Tobacco Settlement Endowment Trust (TSET), which funds the Oklahoma Tobacco Helpline (1-800-QUIT NOW), to evaluate and implement financial incentives for people calling the helpline. TSET is the state grantmaking trust established by voters in 1998 with payments from the Master Settlement Agreement with tobacco companies. In 2000, Oklahoma became the first state where residents voted to constitutionally protect the funds for the prevention of cancer and cardiovascular disease. Kendzor is also enrolling participants in a new study to compare the same treatments with and without financial incentives, but, this time, delivered through a smartphone app. Participants will complete counseling by phone and receive nicotine replacement therapy in the mail. A portable carbon monoxide monitoring device will be connected to their phones to verify smoking cessation, and facial recognition will confirm their identity. Incentives will be added to participants' credit cards.

"In our newly published study, we worked with Oklahomans who could come into the clinic, but that is a huge barrier for some people," she said. "We can reach a much broader range of people in the new study that uses smartphone-delivered treatment. Because the majority of people have smartphones, we believe that approach, combined with incentives, can bypass some of the obstacles that people face and help them reach their goals of tobacco cessation."

https://ou.edu/news/articles/2024/july/financial-incentives-double-smoking-cessation-rate-for-people-with-socioeconomic-challenges?fbclid=IwY2xjawEm3ORleHRuA2FibQlxMAABHZdDZlxcxouAl0qsOtJ2M9Y8Lz-D2D0vNPxeFLrG64AagP7_boEdomOo_KQ_aem_HbO5_kLXHAQF0uJRWYBhQ

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 Global Action on Ending Smoking (GA), 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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