

The 11th Asia Pacific Conference on Tobacco or Health

Welcome Message

Dear Distinguished Guests and colleagues:

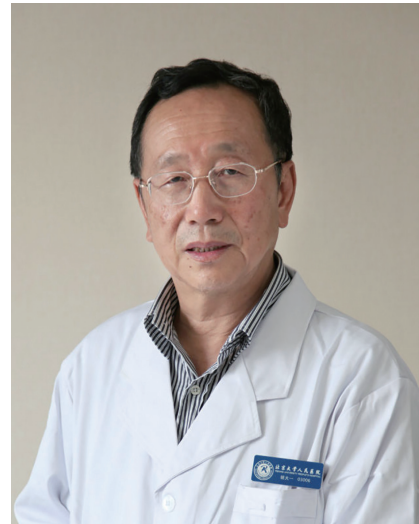
The Asia Pacific Conference on Tobacco or Health (APACT) is a premier tobacco control conference in Asia Pacific Region, aiming to encourage tobacco control and public health advocates. It's an exchange platform for researchers, practitioners, policy makers, and especially youth leaders, to share experiences and discuss strategies for implementation of the FCTC. The APACT was successfully held ten times in different Asian countries since the first session in 1986, and improved the pace of tobacco control performance of all countries in Asia Pacific Region has played a positive role,

It's my great privilege, on behalf of the organizing committee, to invite more than 800 delegates all of you from 27 countries and regions all of the world to participant in the 11th APACT in golden season of Beijing. The theme of the conference is "Eradicate Tobacco Caused Hazards, Protect the Right to Live Healthy" within the two days.

With guidance of the Board of APACT and strong support of The national health and family planning commission of PRC, The APACT is cosponsored by Chinese Association on Tobacco Control, Chinese Center for Disease Control and Prevention, Chinese Health Education Center, we invite international authority organization on tobacco control, such as WHO, Bill & Melinda Gates Foundation, and Campaign for Tobacco-Free Kids, as well as other supporting resource. The invited distinguished speakers will contribute a wonderful speech to all attendees.

We wish this conference will improve the progress of global implementation of FCTC, enhance the cooperation and exchange among the Asian Pacific region, increase the public awareness of tobacco harm, and advocate the sprint of sharing with my participation, enjoying with my contribution and devoting to the smoke-free environment and green world.

Finally, wish you have pleasure learning, healthy life and happy stay in Beijing,



Dayi HU
Chairman

Dayi HU

Dayi HU
Chairman
The 11th APACT
China Association on Tobacco Control (CATC)

第十一届亚太控烟大会 大会主席致辞

尊敬的嘉宾及同仁们：

大家好！

亚太烟草或健康大会（英文缩写“APACT”）是亚太地区的控烟会议，致力于推动亚太各国和地区控烟研究与干预活动，是亚太地区从事控烟的人士进行学术交流，分享控烟经验的平台。自1986年举办首届以来，会议已在亚太国家和地区成功举办十届，为推动亚太各国控烟履约的步伐发挥了积极作用。

在此，我们很荣幸地代表第十一届亚太烟草或健康大会组委会，欢迎来自全球27个国家和地区的800余名参会专家和代表，相聚在金秋北京，围绕着“消除烟草危害，保护健康权益”的大会主题，进行为期2天的学术交流。

此次大会，得到了亚太执委会的悉心指导，中国卫生计生委的大力支持，由中国控制吸烟协会、中国疾病预防控制中心、中国健康教育中心和中华预防医学会联合组织，邀请了国际权威控烟组织，如世界卫生组织、盖茨基金、布伦伯格、和国际著名控烟领域的专家，他们将为我们奉献一场精彩的演讲和学术报告。

我们希望通过此次大会促进全球控烟立法和控烟履约进程、增进亚太地区先进经验的交流与合作、提高公众对烟草危害的认识，倡导我参与、我分享、我奉献、我快乐的精神，为创建绿色世界、无烟环境而共同努力奋斗！

最后，预祝大家在北京生活、学习愉快，身体健康、快乐！



胡大一

第十一届亚太烟草或健康大会执行主席
中国控制吸烟协会会长

The 11th Asia Pacific Conference on Tobacco or Health

Welcome Message

Dear distinguished guests and colleagues:

On behalf of the Scientific Program Committee (SPC), we warmly welcome all of you from 27 countries and regions to participant in the 11th APACT which is held on 23-25 September, 2016 in Beijing, China.

With guidance of the Board of APACT and strong support of The national health and family planning commission of PRC is cosponsored by Chinese Association on Tobacco Control, Chinese Center for Disease Control and Prevention, Chinese Health Education Center and Chinese Preventive Medicine Association, as well as set up the SPC of 11th APACT, invite more than one hundred tobacco control experts and renowned speakers around world and Asian region attend the conference.

The theme of the congress is “Eradicate Tobacco Caused Hazards; Protect the Right to Live Healthy” and the topics in the 12 forums are focused on MPOWER, Smoking and Related Disease; Smoke-free Legislation and Smoke-free Environment; Surveillance and Evaluation on Tobacco Use and Prevention Policies; From Graphic Health Warnings to Plain Packaging; Banning Tobacco Advertisement, Promotion and Sponsorship; Smoking Cessation Service; Tobacco Control and Adolescent Health; Tobacco Price, Trade and Tax; Health Education and Media Promotion, etc. 278 abstracts reviewed by the experts and accepted into the Abstract Book, among them oral presentation 40, 238 for posters.

I believe that all of you will not only update your knowledge and meet new and old friends, but also further promote exchanges in the field of tobacco control as well as to push the progress in Smoke-free legislation and implementation process of FCTC in Asia-pacific region.

Hereby, we sincerely appreciate the SPC experts for their hard work, thanks for all speakers and attendees for your support. You are the pioneers leading the tobacco control in Asia-pacific region. We hope the well-organized meeting and golden Beijing will leave you a beautiful memory.



Jiang Yuan
Executive Chairman

A handwritten signature in black ink, appearing to read 'Jiang Yuan', written in a cursive style.

Jiang Yuan
Executive Chairman
SPC of 11th APACT

第十一届亚太控烟大会 学术委员会执行主席 致辞

尊敬的嘉宾及同仁们：

大家好！

我谨代表大会学术委员，热烈欢迎来自全球 27 个国家和地区的参会代表，出席于 2016 年 9 月 23-25 日在中国北京举办的第十一届亚太烟草或健康大会。

本次大会，得到了亚太执委会的悉心指导，中国卫生计生委的大力支持，由中国控制吸烟协会、中国疾病预防控制中心、中国健康教育中心和中华预防医学会联合组织承办，并成立了由著名专家组成的学术委员会，邀请到了国际和亚太地区的百余名国际和亚太地区著名控烟专家和讲者。

大会以“消除烟草危害，保护健康权益”为主题，设置 12 个专题，分别为 MPOWER、吸烟与相关疾病、烟草危害与青少年控烟、健康产业与烟草替代、控烟与烟草业干扰、控烟与健康促进和媒体传播等。经过专家评审，大会共收录合格文章摘要 278 篇，其中口头发言 40 篇、壁报 238 篇。

我们相信通过两天的学术交流，与会代表不仅能增长知识、相约新老朋友，同时也会进一步增进亚太地区控烟领域的交流，推动各国控烟立法和履约进程。在此，我们衷心地感谢为本次大会学术组织工作所付出努力的专家们，感谢参与大会交流的讲者和代表们，你们是引领亚太控烟事业的先锋，希望本次会议的丰富内容和金色的北京能给您留下美好的回忆。



姜垣

第十一届亚太烟草或健康大会
学术委员会执行主席

ORGANIZATION

Hosted by Chinese Association on Tobacco Control
Chinese Center for Disease Control and Prevention
Chinese Preventive Medicine Association
Chinese Health Education Center

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大会主办方 中国控制吸烟协会
中国疾病预防控制中心
中国健康教育中心
中华预防医学会

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P- 保护人们免遭烟草烟雾危害（无烟环境、立法、政策）

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W- 警示烟草危害

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议题 (一)

M-Monitoring tobacco use and prevention policies

M- 监测烟草流行与戒烟服务

1-004

浙江省 2013 年成人烟草流行现状调查分析

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【目的】了解浙江省 2013 年成人烟草使用的流行现状。

【方法】采用多阶段、按地理位置进行整群随机抽样, 在浙江省 15 个县区对 2779 名年龄在 15 ~ 69 岁的居民进行面对面问卷调查。

【结果】浙江省 15 ~ 69 岁的人群现在吸烟率为 25.62%, 常吸烟率为 21.85%, 男性现在吸烟率为 50.88%, 女性为 0.78%。40.56% 的每日吸烟者每天醒后 30 min 以内吸第 1 支烟。95.19% 的吸烟者尚无戒烟的意愿。64.04% 的调查对象报告有人在自己家中吸烟。67.48% 的吸烟者认为烟草价格上涨对他没有影响。21.09% 的人通过商店和电视看到过烟草广告。知晓吸烟会导致中风、心脏病和肺癌三种疾病的为 42%。89.69% 的人不知道低焦油卷烟的危害与一般卷烟相同。同意在公共场所完全禁烟的人达 73.92%。

【结论】浙江省男性人群水平依然处于高平台期, 总吸烟人群中戒烟率低, 家庭二手烟暴露严重, 人们对吸烟的认识模糊不清, 烟草控制措施有待加强。

Keywords: 烟草控制, 成人, 多阶段整群随机抽样

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1-006

广州市大学生戒烟影响因素分析

Analysis on the related facts of quitting smoking among undergraduate students in Guangzhou city

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【目的】了解广州市大学生戒烟情况及影响因素。

【方法】采用分层随机整群抽样的方法, 于 2012 年 5 月对广州市 6 所大学一到四年级学生进行问卷

调查, 数据统计分析采用 SAS9.1, 运用 2 检验、单因素、多因素非条件 logistic 回归分析戒烟的影响因素。

【结果】共调查 11593 人, 戒烟人数 360, 戒烟率 33.77%; 女性戒烟率为 43.24%, 高于男性的 32.24%; 家庭平均月收入、学生月生活费及父亲文化程度越高, 学生戒烟率越低; 城职户籍学生戒烟率低于农村户籍; 多因素 logistic 回归分析结果显示戒烟的影响因素为: 性别 (OR=0.362, 95 % CI: 0.240-0.547)、学校 (OR 医学类 VS 理工类 =5.275, 95 % CI:2.872-9.689)、月生活费 (OR<500VS \geq 2000=7.115, 95 % CI:2.538-19.945)、户籍所在地 (OR 本省外市 VS 本市 =1.597, 95 % CI: 1.044-2.442)、吸烟知识 (OR=1.407, 95 % CI: 1.047-1.891)、压力 (OR 无 VS 中、重 =0.503, 95% CI:0.278-0.912)。

【结论】吸烟大学生戒烟与否受多种客观因素的影响, 需要社会、学校和家长联合对大学生开展控烟宣传教育以及加强管理工作, 促使吸烟学生尽早改变吸烟行为。

Keywords: 戒烟, 影响因素, 大学生

1-007

广州市医疗机构戒烟服务现状与能力评估

The evaluation of medical institutions quitting smoking service actuality and capability In Guangzhou city.Guangzhou , china

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【目的】了解广州市各级医疗机构戒烟服务提供情况。

【方法】分层随机抽取广州市十二个区 (县级市) 53 间医疗卫生机构, 采用暗访和问卷调查相结合的方法了解戒烟服务开展情况。

【结果】56.6% (30/53) 的医疗机构设有戒烟门诊, 三级医院戒烟门诊的设立率最高, 达 81.8% (9/11); 接受过控烟培训的医护人员总是会询问病人吸烟情况的比例 (72.0%) 高于未接受过控烟培训的医护人员 (46.2%) ($\chi^2=19.65, P=0.000$); 71.5% (319/446) 医护人员遇到吸烟的就诊者总是会建议其戒烟; 38.3% (171/446) 医护人员表示非常熟悉如何对吸烟者进行简短戒烟干预; 接受过控烟培训的医护人员进行尼古丁依赖程度评估的技能水平 (39.2%) 明显高于未接受培训的医护人员 (10.3%) ($\chi^2=30.58, P=0.000$)。

【结论】各级医疗机构开设戒烟门诊比例总体不高, 大多数医务人员不能对自己诊疗的病人提供专业和详尽的戒烟指导, 开展控烟相关知识与技能培训能增强医务人员戒烟服务意识与能力。

Keywords: 医疗机构, 戒烟服务, 评估

1-008

深圳市公立医院戒烟门诊状况调查研究

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【摘要】

【目的】为了解深圳各医疗卫生机构设置戒烟门诊设置及运作情况。

【方法】采用普查方法, 利用统一的自制问卷对深圳市全部 59 家公立医院进行了调查, 问卷回收合格率为 94.92%。

【结果】当前深圳公立医院戒烟门诊设有率为 78.57%, 没有开设的原因主要是医护人员不足 (占比 45.45%)。戒烟门诊挂靠在呼吸内科居多 (占 55.81%)。戒烟门诊开设时间为主要是全天 (占 58.93%)。仅有 1 家三级医院对戒烟门诊医务人员进行补贴。戒烟门诊每周平均服务时间为 22.3 小时。戒烟门诊人员配置以医生为主, 主要为兼职人员 (89.29%), 有 23 家医院没有设置护理人员 (占 45.10%)。一氧化碳检测仪 (6.89%) 和体重计 (51.16%) 设有率偏低。宣传教育材料设有率以宣传折页 (76.74%) 最高, 器官模型和影像资料最低 (11.63%)。过去一个月每个门诊平均接诊 68 人, 其中二级医院最多, 为 97 人。服务对象主要是门诊病人 (81.82%) 和医院工作人员 (70.45%)。服务类型面谈辅导 (100%) 较高, 而电话辅导 (34.09%) 较低。仅有 9.09% 的戒烟门诊能够提供药物治疗。共有 12 家医院 (占 27.27%) 收费, 其中只有 1 家医院可完全由医保支付。

【结论】戒烟门诊运行存在配置不全和政策支持不足等诸多困难, 政府部门应出台相应的戒烟服务优惠政策, 增加医务人员戒烟服务补贴, 将戒烟药物纳入医保支付, 开展综合性的戒烟干预方能有效提高戒烟门诊就诊率和烟民戒烟成功率。

Keywords: Smoking Cessation Clinic, Hospital, Tobacco Control

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1-010

Is Equal Selection Probability Sample Design a Better Design for Tobacco Surveillance? A Case Study of Tobacco Surveillance in Thailand

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Monitoring tobacco use in tobacco surveillance is one of the key tobacco control strategies proposed by the World Health Organization in order to implement the Framework Convention on Tobacco Control. For most of the tobacco surveillance in the world, population based probability sample surveys are used. Two common sample designs for these surveys are multi-stage stratified cluster sampling, either with equal selection probability (ESP) or unequal selection probability (UESP). For the ESP sample design, the first stage applies selection probability proportional to size sampling to select enumeration areas (EA), and the second stage applies simple random sampling of equal number of households from previously selected EAs and all household members are included in the sample. ESP design assures that all individuals are being selected with equal probability and therefore have the smallest sampling errors. But interviewing all household members introduces large under reporting from the proxy responses in practice. UESP design has an additional stage to ESP design, randomly selecting one individual from all included household members. Although the UESP design has larger sampling errors than the ESP design, it has no nonsampling errors caused by proxy responses like the former since only person is interviewed from the selected household. This is demonstrated by comparing current smoking prevalence estimated from the National Cigarette Smoking and Alcoholic Drinking Behavior Survey (CSADBS) and the Global Adult Tobacco Survey (GATS), which have both been used for Thailand tobacco surveillance. Both surveys adopted the same

tobacco-use questions and were conducted by the same statistical agency. The only difference between two surveys was the design (ESP vs. USEP) and the number of members in the selected households being interviewed (all vs. one). In this presentation, we will discuss the nonsampling errors caused by proxy responses in CSADBS.

Keywords: Tobacco Surveillance, Nonsampling Error, Proxy Response

1-013

Capacity Building for Female Community Health Workers – An Effective Tool for Tobacco Control and Empowerment

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Background Tobacco is a significant public health concern in rural India. In Maharashtra, India's second largest state, 31.4% of adults report tobacco use. In rural villages, tobacco use is endemic – tobacco use is ingrained in social and cultural norms. Poor rural health care infrastructure means diagnosis and treatment of tobacco-related diseases is a challenge. Intervention An initial needs assessment was conducted in 9 villages across Chandrapur, a rural district in eastern Maharashtra, in 2007. At that time, 45% of all village residents in Chandrapur reported tobacco use – including children as young as two years old. Salaam Mumbai Foundation began capacity building sessions with 60 female community health workers to empower them to implement tobacco control health messaging in rural villages. Follow up sessions to assess progress and provide guidance were conducted. Staff also visited villages and met with village residents and the Sarpanch (village leader). Results Community health workers implemented tobacco control activities using a variety of methods – songs, street plays, puppet shows and anti-tobacco rallies. They also incorporated anti-tobacco messages into their regular health activities. To date, this program has reached 28,000 residents in 60 villages and schools. One year after the program awareness of the harmful effects of tobacco use increased up to 90% among village residents of the intervention villages and tobacco consumption had reduced. Conclusions Community health workers can be trained to implement tobacco control efforts in villages and work with all village stakeholders. Community health workers are uniquely situated to implement tobacco control programmes due to their access to community members, their role as trusted sources for health information, and their ability to understand the unique issues faced in their communities.

Keywords: capacity building, rural, India, community mobilization

1-017

Changes in Smoking Behaviour after Major Floods in Thailand

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Background: In 2011, major flood occurred in Thailand and clearly affected Thai people's way of life almost nationwide. Thai people became more stressful and poorer. However, It is not known how smoking behavior will be altered by major disasters like this in developing countries, and what factors would trigger the changes in smoking behavior.

Methods: A 51-item questionnaire, including demographic data, severity of floods, Fagerstrom Test for Nicotine Dependence (FTND), smoking behavior, and major depression score, were used. Smokers living in Nakhon Nayok province were interviewed 4 months after the crisis.

Results: Total of 1,212 flood victims were interviewed, compared with 1,092 non-flooded smokers. 90.8% of smokers were male. Most of victims had moderate to severe damage from the floods. Most victims were heavily addicted to nicotine. Although 52.4% of victims smoked <10 cigarette per day, almost 75% of them smoked their first cigarette within 30 minutes after awakening. Average FTND score among victim group was 4.18, whereas that of non-victim group was 3.89 ($p < 0.001$). Factors significantly associated with increased cigarette smoking during and after disaster include heavy nicotine addiction, major depression, concomitant use of alcohol, male gender, education below university level, farming.

Conclusions: Major floods can change smoking behavior of Thai smokers. FTND significantly increased during and after floods, especially among those who are heavy smokers, have major depression, use alcohol concomitantly, male, poorly educated, and farmers.

Keywords: Smoking, Flood, Fagerstrom test

Acknowledgement:

This study was funded by project grants from Thai Health Professional Alliance Against Tobacco (ThaiPAT) & Thai Health Promotion Foundation

1-020

对烟草业追踪监测的探索和实践

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对烟草业追踪监测的探索和实践（摘要）新探健康发展研究中心 李金奎

【目的】掌握烟草业对干扰控烟的策略及行动，并采取有效的措施。

【方法】全方位监测有关烟草业动向的新闻、网站、社交媒体、出版物等，密切关注烟草政策、营销、促销以及其他干扰控烟的活动。

【结果】新探中心致力烟草追踪八年，对烟草业违背《公约》的各种活动及时进行揭露。与公益律师合作，向相关执法部门投诉，制止和查处了多起烟草业的违法活动，相关信息通过媒体进行公布和传播。揭露、打击一切淡化烟害，误导公众的行动。（一）编辑刊物，民间发声 1. 烟草追踪简报、快报及特刊专辑：追踪烟草企业生产、供应、广告、营销等情况；观察和点评烟草业违背《公约》的举措。2008 年创刊共发布季刊 27 期，快报 20 期，特刊专辑 6 册。专辑主题：《评双对——中国烟草业究竟为了谁的利益》、《警惕烟草业的干扰》；《谁在营销死亡？》、《我们绝不放弃——禁止烟草广告促销和赞助》、《灾难——如果允许 540 万售烟点做广告》等。2. 民间视角报告：连续 7 年撰写《中国控烟观察——民间视角》报告，从民间立场观察中国的控烟进程，分析其进展与不足。（二）全媒体倡导传播 每年召开十几次媒体发布会，传播监测中发现的热点、焦点。如：揭露减害降焦骗局、科技奖退评、烟草院士、烟草博物馆等；投诉烟草广告、促销、赞助活动，如烟草冠名希望学校等几十起案例。（三）建立烟草业监测信息数据库 建立烟草业监测专业网站：中国烟草控制资源中心网、控烟之声网，对突发事件和重点信息进行快速传播、免费供控烟人士查询。

【结论】新探中心烟草追踪的探索和实践，具有综合性、纪实性、及时性、针对性的特点。作为民间机构的追踪监测，对烟草业的反控烟活动给予了强力反击！呼吁建立全国性的全面、系统的烟草业监测系统。

Keywords: 烟草追踪；监测；简报；专辑；民间视角；媒体发布；投诉；揭露；监测信息数据库

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1-023

西安市卫生系统控烟工作暗访结果分析及对策

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【目的】监测西安市卫生系统控烟现状，修改完善控烟策略，探索行之有效的监管机制，总结推广控烟先进经验。

【方法】2014 年、2015 年采取实地走访、隐蔽拍摄、调查问卷等形式对西安市百余家卫生行政部门、医疗机构及公共卫生机构控烟工作进行暗访。

【结果】2015 全市卫生系统暗访综合评分 57.11 分，高于 2014 年的 53.66 分（满分 100 分）。

在连续暗访的 81 家单位中，2015 年工作人员吸烟比例及穿工作服吸烟职工的构成比（37.04%、50%）较 2014 年（53.09%，53.49%）明显下降；卫生机构产权房售烟比例（37.04%）居高不下；控烟监督员设置由 2014 年的 16.05% 大幅缩减至 2015 年的 7.41%，固定宣传栏设置情况呈萎缩态势。

【结论】西安市卫生系统控烟长效机制基本形成，但相关监管处罚机制有待完善，控烟工作落实困难并有所反弹。出台地方性控烟法规、进行更广泛的社会动员、加大监管处罚力度将是控烟工作顺利推进的有力保障。

Keywords: 控烟, 暗访, 医疗卫生机构, 立法

1-024

The ASEAN Tobacco Control Atlas: Advocacy Resources for Promoting Policy Change

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Background: This paper emphasizes the need for illustrating regional comparison of each country's progresses and achievements in implementing tobacco control measures. The ASEAN Tobacco Control Atlas provides up-to-date resources by consolidating information of various tobacco control issues from the ASEAN region. It serves as a useful resource tool for countries to advocate and pushing for stronger policy change in the respective country. Method: Country questionnaires templates were developed based on key tobacco control issues, assessing their status and implementation. The questionnaires were filled by both governmental and non-governmental organizations in each ASEAN country. The data are then consolidated, analyzed and presented in graphic snap shot of facts and resources. Results: The compiled information is presented using graphics to present regional updates according to its status and implementation at country level. They include a wide range of topics: tobacco consumption (adult and youth smoking), tobacco industry (TI), tobacco and poverty, costs of smoking, and progress in tobacco control in terms of national tobacco control coordinating mechanism, ending TI interference, tobacco prices and taxes, establishing sustainable funding, smoke-free environments, packaging and labelling of tobacco products, tobacco advertising, promotion and sponsorship, shifting of tobacco farming to alternative livelihood and protecting future generation. A summary table of all chapters is included. Conclusions: SEATCA continues to collaborate with all country partners to provide timely and regular up-to-date resources besides identifying the research gap and the need for new evidence. The Atlas is designed to be an invaluable resource to facilitate the effective use of regional evidence in fighting for stronger tobacco control policies. A regional comparison of neighbouring countries in the atlas can be used to put pressure on policy makers for policy change in a country.

Keywords: ASEAN, Tobacco Control Atlas, Advocacy Resources, Policy Change

Acknowledgement:

Thanks to our country partners and coordinators, as well as tobacco control focal points in the ten ASEAN countries

Reference:

Tan YL. and Dorotheo U. (2016). The ASEAN Tobacco Control Atlas (3rd Edition), September 2016. Southeast Asia Tobacco Control Alliance (SEATCA), Bangkok. Thailand.

1-025

天津市公共场所空气中尼古丁污染水平的研究

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大量研究表明，二手烟不存在安全暴露水平，只有完全无烟才能真正保护公众的健康。天津市于2012年5月31日起正式实施《天津市控制吸烟条例》，以法律手段约束公共场所吸烟行为的管理，保护公众免遭二手烟危害。尼古丁作为烟草烟雾的主要污染物之一，监测其浓度是目前评价室内烟草烟雾等重要方法。为了解天津市目前烟草烟雾污染状况及条例实施效果，于2016年3-4月份选取15家机构进行环境空气中尼古丁含量监测。为控烟工作的继续开展提供科学依据和参考。

【方法】使用气相尼古丁被动式采样器在选取天津市区的15家机构（60个点位）进行环境空气中尼古丁含量监测。其中涉及了客运站（3家）、餐馆（4家）、医疗卫生机构（4家）和政府机构（4家）这四类场所。各场所分别从大厅（办事、售票、候车、挂号等场所）、其它监测点（包间、楼道、办公室或病房）、男卫生间等几类潜在吸烟者的点位实施监测。

【结果】本次监测尼古丁浓度范围为0.00-25.59 $\mu\text{g}/\text{m}^3$ ；四类场所中餐馆尼古丁浓度最高，中位数为5.11 $\mu\text{g}/\text{m}^3$ 。不同场所尼古丁浓度差异具有统计学意义（ $H=24.04$, $p < 0.01$ ）；各点位中，尼古丁浓度最高的点位为男卫生间，其中位数是4.39 $\mu\text{g}/\text{m}^3$ ，不同点位尼古丁浓度差异具有统计学意义（ $H=14.47$, $p < 0.01$ ）。与以往数据相比，《条例》实施以来，各场所尼古丁污染水平有不同程度的下降。

【结论】餐馆及各个场所的男卫生间是尼古丁污染的重点场所，应加强对其监管力度。

Keywords: 公共场所, 尼古丁, 二手烟暴露

Reference:

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1-028

2011-2015 年上海市金山区部分公共场所相关人员吸烟情况调查分析

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【目的】了解金山区公共场所相关人员的吸烟现状, 为开展公共场所控烟工作提供依据。

【方法】2011-2015 年每年抽取金山区学校、卫生机构、餐饮场所、互联网场所、娱乐场所、星级酒店等六种类型公共场所共 69 家, 每家公共场所选择 1 名管理者、10 名员工及 10 名拦截人员 (年龄在 15-69 岁) 进行问卷调查, 人数不满的, 则按最大人数进行调查。

【结果】六类公共场所相关人员的总吸烟率为 30.29%, 男性 (50.71%) 高于女性 (3.53%), 差别有统计学意义 ($\chi^2=1574.80, P<0.001$); 不同年龄组人员吸烟率差别有统计学意义 ($\chi^2=44.14, P<0.001$), 其中 50-69 岁组吸烟率最高 (36.02%); 各类公共场所吸烟率差别有统计学意义 ($\chi^2=288.93, P<0.001$), 吸烟率从高到低依次是互联网场所 (48.26%)、娱乐场所 (41.44%)、餐饮场所 (30.96%)、星级宾馆 (29.19%)、卫生机构 (22.48%)、学校 (14.91%)。

【结论】公共场所相关人员吸烟情况较严重, 需加大对重点公共场所吸烟危害健康及戒烟方法的宣传和监管, 减少吸烟行为。

Keywords: 公共场所, 吸烟, 调查分析

1-029

2015 年北京市通州区成年居民吸烟状况分析

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【摘要】

【目的】了解北京市通州区成年居民的吸烟状况。

【方法】采用 PPS 抽样和配额抽样，对通州区 15 个乡镇（街道）、66 个行政村（居委会）的 7319 名常住成年居民进行吸烟情况问卷调查，内容包括人口学特征、吸烟率、烟龄、平均每天吸烟支数、有无戒烟打算等。

【结果】北京市通州区 18 岁及以上常住居民吸烟率为 37.7%；男性吸烟率 70.5%，女性吸烟率为 4.8%，男性吸烟率明显高于女性，差异有统计学意义（ $P < 0.01$ ）；吸烟率最高的年龄段为 50 ~ 59 岁，其次为 40 ~ 49 岁；初中文化、离婚、生产运输人员吸烟率较高；在吸烟的人中，平均每日吸烟支数 15 ~ 24 支居民的比例最高；女性吸烟者吸烟支数在 5 支以下比例明显高于男性，10 支以上比例明显低于男性，差异均有统计学意义（ $P < 0.05$ ）。多因素 Logistic 回归分析显示，影响成年居民吸烟的因素主要为性别、年龄、婚姻状况、学历、职业。女性是吸烟行为的保护因素；随着年龄的上升发生吸烟行为的危险升高，其中 50 ~ 59 岁风险最大；随着文化程度的升高发生吸烟行为的危险降低。

【结论】通州区成年居民吸烟率较高，烟草控制仍然面临着巨大挑战，应加强健康教育工作和采取有针对性的干预措施控制烟草消费。

Keywords: 【关键词】成年人；居民；吸烟；吸烟率

1-030

A Project to empower village health volunteer (VHV) to promote smoke-free home in Thailand.

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The Global Adult Tobacco Survey Thailand report 2011 show that 90.2% of smokers and 95.2 % of non-smokers believed second-hand smoke (SHS) exposure is dangerous to non-smokers. However, 11.58 million Thai non-smokers are still exposed to tobacco smoke at home. Exposures lowest in Bangkok at 13.2 %, in the central region 27.6 %, northern region 25.1 %, north-eastern region 29.0% and highest in the southern region at 43.5 %. Village health volunteers (VHV) are community residents acting as health promoters. Each volunteer advise 10 to 15 families .VHV make regular home visits about chronic diseases, such as self - care and prevention of diabetes and hypertension. With a male smoking rate of almost 50 % in rural Thailand, VHV advise many families with smokers. ASH Thailand initiated a project, funded by Thai Health to empower the VHV to serve as smoke-free (SF) home promoters. VHV participate in a one day training course to learn about smoking as a causes of chronic diseases

and the hazards of SHS. VHV learn the benefits of SF homes, the importance of family as role model to young, potential smokers, and how to give 5A brief advise for smoking cessation. A Committee for a SF community is established. Often an agreement is signed between the chair of the committee, the village head, teachers, religious leaders and others to support the SF home project. Four goals are usual: 1) no-smoking in the home, 2) if smoking outside the home, ensure tobacco smoke will not disturb neighboring home, 3) post SF home signage, and 4) motivate smokers to quit smoking. So far 3,558 VHV from 6 districts , 46 sub-districts and a 42,476 homes in northeastern Thailand have joined the SF home project. All VHV have declared their homes SF, as well as 80% of communities household declared their homes SF in project villages.

Keywords: empower village health volunteer (VHV) to promote smoke-free home

Reference:

ASH Thailand

1-031

Monitoring the Monitor: Assessing the Effectivity of Public Participation in Tobacco Control Efforts

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Pursuant to Art 5.3 and its Guidelines, the Civil Service Commission (CSC) and the Department of Health issued Joint Memorandum Circular 2010-01 (JMC) on the Protection of the Bureaucracy against Tobacco Industry Interference (TII). The policy, which covers all government officials and employees, prohibits seven types of acts, 2 of which are:(1) Unnecessary interaction with the tobacco industry (TI); and (2) Accepting gifts, donations. The JMC also provides ways to implement the policy, one of which is through the participation of civil society. To empower the public to support the policy, the CSC even allows any individual to anonymously file a complaint against any erring government official. Despite clear prohibitions in the JMC however, there have been a number of reports of TII. While there have been reports, the gentle punishment and unhurried resolution of the same seem to undervalue the public's part in implementing the JMC. This research reviews the implementation of the

JMC, and evaluates its effectiveness in preventing TII. This paper focuses on the participation of civil society, through the complaints filed by them, as an instrument to deter the government from unnecessary interaction with the TI. It analyzes the value of public participation in the implementation of the JMC. The CSC acts on the complaints by admonishing the erring official or employee through letters strictly reminding them of the JMC. In appropriate cases, the CSC forwards the complaints to the proper authorities such as the Ombudsman. Words of reproach, however, are insufficient penalty. The resolutions also take a longer time than necessary. While the public are doing their part in exposing TII, their interest in pursuing violators will wane if they see little return on their effort. Engaging public action is instrumental in reducing TII. However, filing complaints is not the end. By showing that complaints are promptly resolved, the JMC is ensured stronger public participation.

Keywords: Tobacco control, Monitoring, Public participation, Prevention policies

1-032

Estimating the Burden of Cancers Attributed to Smoking using Disability Adjusted Life Years (DALYs) in Indonesia

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Tobacco use is a well-established risk factor for many types of cancers. Recent data on selected cancers incidence and mortality related to smoking in the Indonesian population are provided in this study. Morbidity and mortality data were derived from GLOBOCAN 2012 and population attributable fraction (PAF) was estimated using the standard methodology developed by the World Health Organization. Using these data, we calculate disability adjusted life years (DALY) values for smoking-related cancer. The DALY was estimated by summation of the years lived with disability (YLD) and years life lost due to premature death (YLL). The cancer cases related to smoking accounted for 45,132 cases in Indonesia and the mortality of cancer caused by smoking is accounted for 35,580 cancer deaths. The morbidity and mortality of lung cancer is considered as the highest priority both in men and women. Furthermore the YLD due to smoking in Indonesian

men and women were pancreas cancer and lung cancer. The years lost due to premature deaths (YLL) of cancers related to smoking among men, the highest years lost were lung cancer and liver cancer. On the other hand, the YLL among women were attributed by lung cancer and lip, oral cavity cancer. Based on DALY indicator, burden priorities for Indonesian men were lung cancer (298,980), liver cancer (60,367), and nasopharynx (46,185). While among Indonesian women were lung cancer (34,119), cervix uteri (9,213) and pancreas cancer (5,433). In total, Indonesian burden of cancers attributed to smoking was 638,682 DALY. This study provides evidence about the burden of cancers caused by smoking for rational basis of initiating national tobacco control policies in Indonesia.

Keywords: burden of disease, cancer, tobacco, DALY, Indonesia

1-033

Evaluation on the National Strategic Plan for Tobacco Control 2012-2014

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The cross-sectional study was conducted to summative evaluation of the National Strategic Plan for Tobacco Control 2012-2014. Data were collected from October to December 2014 and compared with targets indicated in the National Strategic Plan for Tobacco Control. Two groups of respondents were enrolled and interviewed. The first group with 4,009 respondents were persons who aged 15 years old and over from Tak, Mukdahan, Kanchanaburi, Surath Thani as representatives of the four regions of Thailand and Bangkok. The second group with 32 respondents was policy makers working in government agencies and ODPCs located in the same provinces with the first group. The results of the evaluation focused on the main target of the national strategic plan found that the current smoking rate of population ages 15 years and over was 20.9 percent with 39.9 percent and 3.7 percent were male and female respectively. The results were higher than expected targets in the National Strategic Plan for Tobacco Control which were

18.7 percent, 37.5 percent and 2.01 percent respectively. There was an increasing tobacco consumption per capita per year which was higher than target set from 547 to 720 (cigarette/person/year), however the consumption of smokeless tobacco was decreasing from 3.9 percent to 3.3 percent. There were 74.1 percent of smokers were likely to quit smoking. The main reasons to quit smoking included concerning of their own health as well as their connected persons accounted for 59.6 percent. There were 70.3 percent of those who to quit attempt smoking. Therefore, to increase accessibility to services-related for smoking quitting for smokers, the universal health care coverage system should include those services in all health facilities. Furthermore, the quit smoking medications should be included in the Thai National List of Essential Medicines. Most importantly the tobacco control policy should be issued as the main agenda of provincial and local authorities.

Keywords: evaluation, strategic plan, tobacco control

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1-034

Perceptions and experiences with electronic cigarettes among Chinese adults

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Background: Electronic cigarette (EC) use has increased rapidly worldwide, particularly among young people. It is of concern that EC use may renormalize tobacco use behavior and prevent smokers from quitting. The appealing flavors may be attractive to youth. China is the global production and export center of EC, but EC is not regulated in China. Little is known about Chinese people's beliefs and attitudes toward EC, and their experiences with EC.

Objective: This qualitative study explored the perceptions and practice related to EC use among Chinese adults.

Methods: In-depth face-to-face interview was conducted with 30 EC users (aged 22-65) living in Shenzhen and Guangzhou. Participants included 2 women and 28 men; 1 never cigarette smoker, 13 former cigarette smokers, and 16 current cigarette smokers. Participants discussed their perceptions and experiences with EC. Audio recordings were transcribed, and data were analyzed using NVivo.

Results: EC had many features that were attractive to both smokers and nonsmokers, including the flavors, smell, novel technological design, and big vapor clouds. Male participants described the device as “men’s toy”. They used EC to show that they were cool, independent and masculine. Participants perceived the use of EC in smokefree environment as an attractive feature. Overall, participants had limited knowledge about EC, and their favorable perceptions about the harm of the device and its aerosol reflected the EC marketing messages. Most participants disagreed that EC could help smokers quit cigarette smoking. Some people expressed a concern about being addicted to a new tobacco product.

Conclusions: Public health interventions should educate the public about EC. Regulations are urgently needed to prohibit EC use in statutory smokefree venues and to prohibit the misleading marketing claims, especially the health and smoking cessation efficacy messages. Public health campaigns deglamorizing EC use may help prevent the uptake.

Keywords: Electronic cigarette; perception; experience; adult; China

1-035

Tobacco and electronic cigarette use among Thai adolescents, Global Youth Tobacco Survey, 2015

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Tobacco use often starts in adolescence, and is a leading cause of premature mortality. To monitor trends in tobacco use among the youth, we conducted the third round of Global Youth Tobacco Survey (GYTS) in Thailand during 2015. We first selected 31 public and private secondary schools using random sampling based

on probability proportional to school enrolment. In each school, we selected 1-3 classes (grades 7–9) by random sampling. All students in the selected classes from 30 schools (one school declined) were invited to complete a self-administered questionnaire in Thai language. Of 1876 students who completed the questionnaire (overall response rate 86.1%), data from 1721 aged 13–15 years were analysed. Overall, 15% students [95% confidence intervals: 11.2–19.8%] used tobacco; boys 21.8% [16.8–27.8%], girls 8.1% [5.1–12.5%]. The prevalence of cigarette use was 11.3% [8.2–15.3%] among all students—17.2% [12.9–22.5%] among boys and 5.2% [3.1–8.6%] among girls; 3.3% [2.2–5.1%] of students currently used electronic cigarettes. Exposure to second-hand smoke at home, school and enclosed public places was 33.8% [29.6–38.3%], 47.9 [41.9–54.0%] and 38.6% [33.5–44.0%], respectively. The majority (72.6% [69.0–75.9%]) had noticed someone using tobacco in media, and 30.9% [27.4–34.6%] had noticed tobacco advertising at points-of-sale. Among current smokers, 67.4% [58.5–75.3%] reported that they were easily able to buy cigarettes from stores; 44% [31.7–57.1%] smokers were not declined cigarettes despite being underage. Though 72.2% [59.8–81.9%] students wanted to quit smoking, only 29.3% [22.5–37.2%] had ever received help. Similar to earlier two GYTS, tobacco use among Thai adolescents remains high. This round reported electronic cigarette use among youth. Youth are frequently exposed to tobacco advertising and have easy access to tobacco. Strong steps are needed to curb youth’s access to tobacco, enforce ban on tobacco advertisement and denormalize tobacco use in all media.

Keywords: GYTS, prevalence, Thailand, tobacco, youth, electronic cigarette

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1-038

Youth Involvement in Tobacco Control Law Implementation in Bangladesh

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Introduction: Bangladesh is an over populated country. The current population of Bangladesh is 159.1million.

Here, the number of youth is one third of its total population which refers more than 53 million. Youth has a great potentiality to do something better for the nation.

Description: In Bangladesh, youth plays a vital role to make revolutionary change in every sphere of life. There are number of youth and youth organizations are involve on tobacco control movement since formation of the Bangladesh Anti-Tobacco Alliance (BATA). In tobacco control law implementation, the role of youth involvement is far-reaching. Undoubtedly, youth had already involved the movement against tobacco and they raised their voice to stop tobacco as well as to make a law.

Methodology: Youth based organization ‘Pratysha’ Anti-Drug’s Club is one of founding organization of BATA that has involved hundreds of youth on tobacco control. These youth organize various public events and monitor tobacco control law implementation; report to the authority if there is any violation. Youth also support to the mobile courts operated by the executive magistrates to ensure effective implementation of law. Youth initiative and involvement has encouraged social movement on tobacco control law amendment as well. Bangladesh is a first signatory of the FCTC in 2003. After rectifying it in 2004, Bangladesh introduced the ‘Smoking and Tobacco Products Uses (Control) Act 2005’ and developed rules under this law in 2006. This law further amended in 2013, which has ensured 50% graphic health warnings in all tobacco packets.

Success: Youth has already brought about the success of having 50% pictorial health warnings on tobacco product packaging from March 19, 2016. Definitely, it is the success of the youth to involve with the tobacco control law implementation.

Keywords: youth, tobacco-control, tobacco control law monitoring, tobacco control law implementation, youth against tobacco

1-039

Body-building: innovative idea for tobacco control in Bangladesh

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Introduction: Body-building is an effective way to promote healthy life. It has a great role to change the mentality avoiding tobacco or other addictions. As Bangladesh is a poor country, it has a few infrastructures to make as many body-builders. Undoubtedly, it has a great potentiality to raise the number of bodybuilders who are conscious about the harmless affect of smoking.

Methodology: People are always looking for something better for their health. Unfortunately, they are misguided. That is why they are addicted to smoking and tobacco use. But body-building is a great weapon to give the youth recreation as well as body fitness. 'Pratyasha' Anti-Drug's Club is youth based organization that dedicated to tobacco control and prevention of drug abuses and alcohol use in Bangladesh. 'Pratyasha' is also founder member of the Bangladesh Anti-Tobacco Alliance (BATA) since it's established in 1999. 'Pratyasha' is only organization that promotes tobacco free body-building and established bodybuilding center in old Dhaka where both male and female get all the facilities. Also organized tobacco free bodybuilding competition and involved Ministry of Sports & youth into tobacco control, which encourage tobacco control movement as well. This is innovative idea on tobacco control which has massive influence among youth.

Success: These bodybuilders have succeeded of having tobacco free environment in all kinds of competitions and it also enables to include Ministry of Sports & youth to consider tobacco free sports in Bangladesh. Lesson learnt: This idea can be replicable any cities in developing countries in the World through involving youth and to promote healthy lifestyle.

Keywords: body building, youth, healthy life, Bangladesh, youth against tobacco

1-045

Trends in the prevalence of tobacco use among adults and adolescents in South Korea

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Background: This study was conducted to analyze the trends in the prevalence of tobacco use among adults and adolescents in South Korea.

Methods: The Korea National Health and Nutrition Examination Survey (KNHANES) from 1998 to 2014 and Korea Youth Risk Behavior Web-based Survey (KYRBS) from 2006 to 2015 were used to estimate national adults and adolescents smoking prevalence. KNHANES included approximately 10,000 individuals from 3,840 households in 192 primary sampling units. KYRBS included approximately 75,000 students from 800 sampled schools.

Results: In South Korea, 24.2% of adults (≥ 19 years) smoked cigarette and male adults (43.1%) were higher than female adults (5.7%) in 2014. Trends in the prevalence of current cigarette smoking among male adults did not change from 2008 (47.7%) to 2011 (47.3%) and decreased in 2014 (43.1%). For female adults, there were no significant difference between 1998 and 2014. Current use of electronic nicotine delivery system (e-cigarette)

among adults was doubled from 1.1% in 2013 to 2.4% in 2014. Especially, male adults (4.4%) was higher than female adults (0.4%) in 2014. 7.8% of adolescents (grades 7-12) was cigarette smokers, and smoking by boys (11.9%) was higher than by girls (3.2%) in 2015. The boys did not change from 2007 (17.4%) to 2011 (17.2%) and then decreased from 2012 (16.3%) to 2015 (11.9%), whereas the girls, there decreased from 9.2% in 2006 to 3.2% in 2015. Ever use of e-cigarette was 10.1% (boys 15.9%, girls 3.7%) and current use of e-cigarette was 4.0% (boys 6.2%, girls 1.5%) in 2015. There were no significant difference between 2013 and 2014.

Conclusions: The prevalence of current cigarette smoking among male adults has declined since 2011, whereas among female adults, there were no statistically significant annual changes. In adolescents, its prevalence among boys has decreased since 2012 and that among girls has decreased since 2006. The use of e-cigarette among adolescents was higher than that of adults.

Keywords: South Korea, Tobacco use, adults, adolescents

1-046

Sociodemographic factors associated with quitting intention among Eastern Inner Mongolia current adult cigarette-only smokers, China: A cross-sectional survey study

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OBJECTIVE: This paper reports finding on sociodemographic factors influence quitting intention among Eastern Inner Mongolia current adult cigarette-only smokers based on Eastern Inner Mongolia tobacco survey.

METHODS: The study employed a cross-sectional, multi-stage sampling design. Data from Eastern Inner Mongolia tobacco survey during October 2013 to May 2014, survey of adult ≥ 15 , cigarette-only and living in their primary residence prior to the survey date. Face to face survey was using uniform-printed questionnaire. Survey design analysis (SUDAAN) was used to provide robust estimation of SEs using sample weights ,and adjusts for potential clustering due to complex sampling. Binary logistic regression was used to model the association between smokers' quitting intention and social-demographic factors.

RESULTS: From univariate and multivariate analysis after weighted, among quitting intention within 1 year and education background, age group, chronic disease, occupation, knowledge background, BMI level, residence league had strongly relationship. Further say, people who is overweight (Adjusted OR(AO):11.93(95% CI:1.11~127.72)),

age at 55-64(AO: 1.64 (95% CI: 1.12~ 3.43)), have knowledge of ‘second-hand smoking can cause cardiovascular disease’ (AO: 1.79 (95% CI: 1.02~ 3.15)), have hypertension disease (AO:1.53 (95% CI:1.12~ 2.10)) and live in Xilin Gol league (AO:1.40 (95% CI:1.01~ 1.94)) are more likely to quit within 1year. While, smokers at middle school education level (AO:0.51 (95%CI:0.29~ 0.57)), occupation is farmer (AO: 0.23(95% CI:0.08~0 .62)), age at 45-54 (AO: 0.39 (95% CI:0.25~0 .62))are less likely intention to quit within 1 year.

CONCLUSIONS: Quitting intention rate among smokers in Eastern Inner Mongolia are lower than those found among current smokers in the whole country. The determination of quitting intention furnishes possibilities for effective policies and programs for increasing quitting among smokers in Inner Mongolia.

Keywords: Smoking survey, Eastern Inner Mongolia, Quitting intention, Health promotion

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1-047

The usage and awareness survey on e-cigarette in Japanese workers

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Background: E-cigarette use has risen exponentially because many vapers mistakenly believe that its use is healthier than smoking both for themselves and bystanders, and that it can help them quit smoking. However, many carcinogens are included in e-cigarettes, and health hazard risks were noted. This study investigated the use and awareness of e-cigarettes among Japanese workers.

Methods: We distributed questionnaires to all workers (N = 3,553) in a Japanese company in 2015. The questionnaire including personal background (age, sex, etc.), family composition, education level, anamnesis, smoking situation, and usage and awareness of e-cigarettes.

Results and Discussions: All 3,553 workers (3,396 men and 157 women) answered the questionnaires (response rate = 100%). The average age was 32.8 and the overall smoking rate was 57.4%. There were 2,056 workers (57.9%) knew about e-cigarettes, and most workers' knowledge came from friends or family (39.2%) and television or radio (38.1%). Of all workers, 63.3% thought the e-cigarette were safe. Therefore, it is necessary to disseminate accurate and reliable information on e-cigarette to workers. 143 workers (4.0%) had the experience of use of e-cigarettes, including 134 smokers (6.6% of all smokers) and 9 non-smokers. There are only 11 workers were regular users. A total of 114 (2 were non-smokers) were willing to use e-cigarette; these workers were those who wanted to use it as a tobacco substitute and to quit smoking. Proper guidance must be provided to help them use the correct smoking-cessation programs to quit smoking. Also 2 non-smokers showed interest in e-cigarettes. Creation and dissemination of accurate information are important to prevent them from becoming new cigarette users. After this survey, a new type of heat-not-burn e-cigarette (iQOS) became commercially available in Japan from September 2015. We will also show the results of exhaled PM2.5 of heat-not-burn e-cigarette compared to usual cigarettes.

Keywords: E-cigarettes, Heat-not-burn, Surveillance, PM2.5

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1-049

A comparative study of National Adult Tobacco Survey in Lao PDR: 2012 and 2015

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Background: Lao PDR ratified the WHO Framework Convention on Tobacco Control (FCTC) in 2006, the country has attempted the implement tobacco control activities through its national laws. For instance, the tobacco control national law on smoke-free, tobacco taxation and tobacco advertisement and promotion ban. Nevertheless, the smoking continues to cause high deaths. In Lao PDR, according to WHO in 2013, cigarettes have a mortality rate of more than 4000each year or 13per day. A prevalence of tobacco use in is the major public health worldwide. The study aimed to collect tobacco use data on a large nationally representative sample of Lao adults that will aid in comparison of the current prevalence and burden of tobacco use in the country, identify the trends in prevalence and consumption of tobacco for prioritizing action and evaluating tobacco control progress, permit the country in making comparison with other neighboring countries regarding the prevalence of tobacco used.

Methods: The NATS2015 survey used a multi-stage stratified cluster sampling and was designed to produce key indicators for the country as a whole stratified by genders and places of residences classified by urban and rural. This study provides information on tobacco use includes smoked and non-smoked (smokeless) tobacco to compare with the previous study of 2012.

Result: As a result, the prevalence of smokers is 27.9%, 50.8% among males and 7.1% among females. The tobacco use in adult increased comparing with data of the survey 2012 from 25.5% to 27.9%, and among male 43% to 50.8%.

Conclusion: Lao PDR has the highest prevalence of the tobacco consumption in Southeast Asia and the tobacco use increased particularly in male from 43% to 50.8% in 2012 to 2015. while many activities of tobacco control has been implemented but the tobacco consumption is still increasing, other measure need to be considered like increasing the tax etc.

Keywords: Tobacco use in Lao PDR, National tobacco survey

1-051

厦门市成人烟草流行情况调查

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厦门市成人烟草流行情况调查 戴龙、黄仕杰、张一中、王继江、陈敏、陈国伟、王竞

【 论文摘要 】

【 目的 】为了加快推进厦门市烟草控制工作，对厦门市的吸烟情况做一个科学、客观的评估，为厦门市控烟规划提供指导方向和理论依据。

【 方法 】本次调查按照中国城市成人烟草调查的方法和要求进行。目标人群是 15 岁及以上的非集体

居住的常住居民。遵循 GATS 抽样设计手册中的原则和程序，采用多阶段整群抽样设计，基本的抽样程序是：选择居委会（行政村）作为 TQS 调查的初级抽样单位。采用按容量比例方法（PPS）抽取厦门市 25 个居委会或行政村，从中各抽取 1 个片区。每个片区采用系统抽样方法，随机选择 100 户家庭。抽取家庭前，采用绘图、列表的方式以获得该片区中完整的家庭信息。在每个抽中的家庭采用简单随机抽样方法，从每个抽取的家庭中抽取一个个体。总共抽取样本量为 2,500 户。调查采用标准中国城市 TQS 问卷。调查由居委会（村委会）和社区卫生服务中心（卫生院）共同完成。中国疾病预防控制中心专家对调查员和督导员进行了培训和考核。使用 SPSS 和 SAS 进行数据清理和数据管理，并应用 SUDAAN 统计软件进行数据分析，具有较好的代表性。

【结果】1. 调查对象基本情况：在 2500 个抽样家庭中，2227 完成了住户调查，2174 完成了个人调查，总体应答率为 92.5%。52.2% 为男性，47.8% 为女性。年龄 25-44 岁的应答者所占比例最高。大部分应答者为高中以上学历，本科以上学历的应答者约占 32.8%。2. 人群吸烟情况：调查结果显示，厦门市成人人群总体吸烟率为 20.9%，估算吸烟者的数量约为 68.9 万人，其中男性的现在吸烟率为 39.6%，女性为 0.5%。大部分现在吸烟者为每日吸烟，总体比例为 17.7%。45-64 岁年龄组的现在吸烟率最高，达到 28.3%；15-24 岁人群现在吸烟率为 10.7%。从教育水平比较，初中学历的人群吸烟率最高，为 34.2%，大专以上学历人群的吸烟率最低，为 15.7%。20.9% 的成人吸烟人群中有 20.8% 吸的机制卷烟，吸其他可燃烟草制品的比例仅为 1.3%。现在吸烟者平均每天吸 19.3 支卷烟，男性平均为 19.3 支，女性平均为 21.1 支。每天吸 15-24 支卷烟的人所占比例高达 44.8%。3. 戒烟尝试：调查发现所有现在吸烟者中，31.4% 在过去 12 个月中至少尝试一次戒烟，其中男性为 31.3%。仅有 8.7% 打算在未来 12 个月内戒烟，而高达 66.1% 的吸烟者对戒烟不感兴趣。4. 二手烟暴露：在厦门市，44.5% 的成人在室内工作场所暴露于二手烟，其中男性为 52.6% 的和，女性为 34.9%。46.6% 的成人在家中暴露于二手烟，其中男性为 48.8%，女性为 44.3%。调查对象暴露于二手烟的比例最高的场所是酒吧，为 91.4%；比例最低的场所是公共交通工具，为 7.6%。中小学校的二手烟暴露达 33.4%。5. 控烟信息的关注度：调查结果显示厦门市 37.3% 的成人在报纸和杂志上看到控烟信息，50% 的成人在电视上看到控烟信息。90.7% 的现在吸烟者在卷烟包装上注意到健康警示信息，然而仅有 30.5% 的人因此考虑戒烟。

【结论】本次调查采用了中国城市成人烟草调查（TQS）的方法和要求，具有较好的科学性和可比性。调查显示，厦门居民的吸烟率和工作场所及家庭二手烟的暴露率均低于全国的暴露水平。说明厦门市的烟害程度低于全国大多数地区。然而在厦门的吸烟者中，仅有 8.7% 打算在未来 12 个月内戒烟，而高达 66.1% 的吸烟者对戒烟不感兴趣，说明厦门吸烟者对烟草危害认识还不够高。厦门居民在电视上看到控烟信息的比例低于全国的水平。大部分现在吸烟者在卷烟包装上注意到健康警示信息，然而仅有 30.5% 的人因此考虑戒烟。因此建议：1. 尽快制定出台厦门市全面控烟法规。根据厦门现在的控烟现状和其他城市的控烟工作经验，有必要制定出台《厦门市公共场所禁止吸烟规定》更科学更全面的开展控烟工作。2. 通过拓展控烟宣传渠道，丰富控烟宣传内容，进一步强化控烟宣传。调查结果显示，厦门市民对烟草危害的知晓情况不尽如人意，因此，有必要加强大众媒体的控烟宣传。同时要利用网络媒体，将宣传重点转移到微信、微博、自媒体等新兴宣传渠道。3. 加强戒烟服务网络建设，提高戒烟能力。调查显示，很多烟民不愿戒烟。因此，卫生部门要进一步加强戒烟有益的宣传以外，还应通过医生宣传戒烟，推行医院将“吸烟史”列入必须问诊范围。扩大完善戒烟服务工作，将戒烟药物纳

入社保范围。4. 进一步推动多部门共同协作控烟。城市的无烟环境建设是一个系统工程，涉及到群众生活的方方面面，需要政府卫生、教育、旅游、市场管理、媒体等多部门的协同工作，才能控制烟草危害，建设无烟厦门。

Keywords: 烟草, 流行病学调查, 厦门

Aknowledgement:

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1-052

Associated factors of electronic cigarette use in Korean smokers - Findings from International Tobacco Control Policy Evaluation Survey 2016

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Background: Use of electronic cigarettes (ecigs) among smokers is increasing in Korea. The aim of this study is to investigate the prevalence of ecig use among current cigarette smokers and to analyze the association factors of using eigs.

Methods: Nationwide random ized telephone survey called International Tobacco Control Policy Evaluation Survey (ITC) was performed with targeting current adult smokers in 2016. Participants who have awareness of ecigs were divided into three groups; never users, ever users and current users of ecigs. Stepwise nominal logistic regression analysis was performed using the variables of socio-demographic factors and smoking-related factors.

Result: Among 737 total participants, 685 (92.9%) have ever heard about ecigs. Current ecig users were 8.7% among current smokers. The rate of ever users and current users are significantly higher in younger group than older group. Of respondents who answered that ecigs help smokers to quit, more current users reported than never users (27.0% vs 13.1%, $p<.00$). The prevalence of current users reporting that ecigs are less harmful than normal cigarettes was 66.7% yet only 41% for never users ($p<.00$). Quitting attempts were associated with a higher likelihood of ever use (OR=1.62, 95% CI: 1.11-2.38) and intention to quit was significantly related to the current use (OR=2.07, 95% CI: 1.09-3.92) compared to never use. Agreement of ecig regulation law was related to a lower likelihood of current users (OR=0.90, 95% CI: 0.84-0.98) compared to never users.

Conclusions: This study shows ecig use tend to be higher in the current smokers who have an intention to quit and experiences of quitting attempts and more current users than other smokers think ecigs help smokers stop smoking.

It seems current ecig users accept ecigs more positively as a cessation device. Further studies are need to prepare the effective regulating rules for ecigs and provide the appropriate information of ecig use for smoking cessation.

Keywords: Electronic cigarettes, E-cigarettes, Intention to quit, Quitting attempts, Agreement of e-cigarette regulation law

1-056

Validity of tobacco use survey for adolescent

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This study aims to evaluate the validity of tobacco use prevalence among adolescents in Korea investigated through self-report in the Korean Youth Health Risk Behavior Web-based Survey. Among the target schools that participated in the 2015 Korean Youth Health Risk Behavior Web-based Survey (primary survey), we selected 13 high schools in Daegu and Gyeongsangbuk-do through convenience sampling; between June and July 2015, we conducted repeated surveys and measured the urine cotinine concentrations. 1,058 students that completed both primary and secondary surveys were selected as the final subjects, and the validity was evaluated through sensitivity, specificity, and kappa values. The gold standard of current smokers was the following: when the students responded in the secondary survey that they smoked or when the urine cotinine concentration was 50ng/ml or higher. The current smoking rate assessed through the gold standard, which was 11.3% (male 21.9% and female 3.7%), was higher than the 8.0% smoking rate assessed through the primary survey (male 16.5% and female 1.8%). The sensitivity was 62.5%, the specificity was 99.0%, and the kappa value was 0.708; in particular, the sensitivity of female students (43.5%) was lower than that of male students (67.0%). 57.8% of students responding unfaithfully that they do not smoke worried about leakage of survey results, and this proportion was higher than that in smoking students that responded faithfully (48.0%); in particular, a larger difference was observed in female (69.2% vs. 50.0%) than in male students (53.1% vs. 47.7%). The anonymous self-reported smoking rate estimated through surveys supervised by school officials was

underestimated in comparison to the actual rate. The survey environments, including perceived risks of leakage of survey results, that do not sufficiently guarantee the confidentiality acted as the most crucial factor resulting in false responses.

Keywords: Validity, Youth Smoking Prevalence, Repeated Survey, Korean Youth Health Risk Behavior Web-based Survey

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1-057

Factor Associated with Cigarettes Smoking among High School Students in Jakarta, Indonesia

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Tobacco epidemic is in alarming situation in Indonesia. More than one-third of people reported as active smoker. The trend of cigarette smoking has been vastly growth during since past decades particularly among adolescent. The study aims to find out factor associated with cigarette smoking among high school students in Indonesia. The study design was cross-sectional. A self-administrated questionnaire was constructed for data collection. A total of 1,318 students from 14 schools all over Jakarta were participated. The data was examined by multiple logistic regressions. The study revealed the prevalence of cigarettes smoking among high school students was 21.5% of experimental and 16.2% of past 30 days smoker. Gender, smoking history of mother and brother were found as significant predictors. Being male were five times (AOR: 5.323, 95% CI: 4.143-6.838) more likely to become cigarettes smoker than female. The study shows cigarette smoking is one of public health threat in Indonesia. Government must issued a stronger regulation immediately in order to lessen increment prevalence of smoking behavior.

Keywords: cigarettes, high school students, smoking

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1-059

Secondhand Smoke Exposure among Wuhan Residents: A City-Wide, Representative Household Survey

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Background: Secondhand smoke (SHS) causes numerous health problems, and smoke-free policies have been proven effective at protecting non-smokers from SHS exposure. The objectives of this study include assessing SHS exposure and knowledge of harms of SHS and evaluating the associations between SHS with demographic status in Wuhan.

Methods: Using the Tobacco Questions for Surveys (TQS), a city-wide, representative household survey conducted in Wuhan in 2015, multiple logistic regression analysis was applied to model the SHS exposure variables and assess knowledge of health risks.

Results: 60.0% and 52.6% of adults are exposed to SHS in public places and workplaces respectively. Even though smoking prevalence among women (2.0%) was significantly lower than men (48.9%), the prevalence of SHS exposure in public places was similar between the two groups. Exposure to SHS in the workplace was lower for women than men [OR=0.41, 95% CI (0.29, 0.58), p<0.01]. Controlling for gender, age, education and occupation, SHS exposure in all public places did not differ by urban/rural status. Perceived health risks of exposure to SHS were significantly higher among urban residents than rural residents. The difference was primarily driven by differences in education level. Wuhan adults were less knowledgeable about health risks of SHS for diseases other than lung diseases and cancer.

Interpretation: The high SHS exposure in public places and workplaces can lead to a host of health problems. The results also showed a lack of knowledge of harms of SHS, particularly among lower

educated adults. Comprehensive smoke-free policies in public places and workplaces should be considered to protect the non-smokers from SHS. In addition, implementation of health education campaigns on the effects of SHS, especially targeted toward rural, less educated adults and with more emphasis on health risks for diseases other than lung diseases, would be beneficial in increasing the knowledge of harms.

Keywords: secondhand smoke exposure, public places, perceived health risks

1-060

2015 年武汉市成人二手烟暴露现状分析

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【目的】了解武汉市成人遭受二手烟暴露的水平、主要暴露场所,为制定相关的控烟措施提供有力依据。

【方法】采用全球成人烟草调查(GATS)统一的抽样方法和调查问卷,在全市14个区的50个监测点选取调查样本(n=4 311)。调查的主要内容包括烟草使用、戒烟、二手烟暴露、烟草制品获得与价格、控烟宣传、烟草广告和促销、对烟草的认知和态度等内容。对数据加权后,采用SAS 9.3复杂调查设计分析程序进行数据分析。

【结果】在过去30天内,非吸烟者中有43.1%在室内工作场所暴露于二手烟,2.3%的非吸烟者在家中暴露于二手烟,其中男性21.9%,女性37.9%。在过去30天内到过不同公共场所的成人中,36.9%在政府大楼或办公室暴露于二手烟,在医疗机构为24.3%,饭店为72.4%,公共交通工具3.5%,中小学校37.7%,大学25.9%,酒吧/夜总会(歌舞厅)96.8%。

【结论】二手烟暴露现状严峻,酒吧和餐馆二手烟暴露情况尤其严重,建议尽快出台《公共场所控制吸烟条例》要求室内公共场所、主要室外公共场所以及公共交通工具100%无烟。

【abstract】 objective To analyze secondhand smoking exposure among the residents in wuhan, and provide evidence for smoking control measurements. Methods The global adult tobacco survey (GATS) uniform sampling method and questionnaire was used to select participated aged above 15 in 50 sizes (n =4 311) . TQS was developed using the standard GATS questionnaire with additional questions. It includes information on respondents' background characteristics, tobacco use (smoking and smokeless), cessation, secondhand smoke, economics, media, and knowledge, attitudes and perceptions towards tobacco use. The data are weighted, using SAS 9.3 complex

survey design and analysis program for data analysis. Results in the past 30 days, 43.1% of nonsmokers exposed to secondhand smoke in indoor workplaces, 2.3% of nonsmokers exposed to secondhand smoke at home, 21.9% of men and women 37.9%. In the past 30 days to public places adults, 36.9% exposed to secondhand smoke in government buildings or office in medical institutions was 24.3%, the hotel was 72.4%, 3.5% of public transportation, schools is 37.7%, 25.9%, at the university of bars/clubs (ballroom) 96.8%. Conclusion Secondhand smoke exposure situation grim, bars and restaurants, the situation is worsening. It is necessary to establish tobacco control legislation.

Keywords: 成人, 二手烟, 暴露

1-061

2015 年武汉城市与农村成人吸烟现状比较与分析

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【摘要】

【目的】掌握武汉城市与农村 15 岁及以上成人吸烟现状的差异, 为探索城市与农村 15 岁及以上成人不同的控烟干预策略提供理论依据。

【方法】采用多阶段分层整群概率抽样法, 在全市抽取 50 个监测点, 其中城市、农村各 25 个监测点, 每个点抽取 100 个家庭户, 5000 个家庭的 5000 名 15 岁及以上城市和农村居民进行入户调查, 有 4311 人完成个人问卷, 其中城市有 2163 人, 农村有 2148 人。采用总吸烟率、现在吸烟率、戒烟率、“二手烟”暴露率等指标, 根据 2015 年武汉市普查人口进行加权计算。

【结果】武汉城市成人现在吸烟率为 23.5%, 男性现在吸烟率 44.1%, 2.4% 的女性吸烟, 有 54.1% 的吸烟者每天吸烟超过 15 支; 农村成人现在吸烟率为 29.6%, 男性现在吸烟率为 56.9%, 有 71.8% 的吸烟者每天吸烟超过 15 支。

【结论】武汉农村成人吸烟率、男性吸烟率及吸烟者的吸烟量均高于城市成人, 要制定并运用针对农村成人的综合控烟干预策略, 降低其吸烟率。

【关键词】城市; 农村; 成人; 吸烟现状比较 Survey on smoking prevalence among urban and rural adults In wuhan 2015 li Junlin Huang Yuanxia Li Yilin Lu Yanhua Zhang ling Wang lei Zeng Fanjie Peng Li Chen man Zhou Wang

【abstract】 objective To understand the smoking prevalence of urban and rural adults in wuhan , and provide evidence for smoking control measurements. Methods Stratified multi-stage cluster probability sampling method was carried to extract 50 monitoring stations in the city, including urban, rural, each 25 posts, each point extraction

of 100 families, 5000 families of 5000 aged 15 and above in urban and rural residents on household surveys, there are 4311 people to complete personal questionnaire, the city has 2163 people, 2148 people in the countryside. Results The current smoking rate of urban adults were 23.5% , the current smoking rate (44.1%) in males were significantly higher than those (2.4%) in females ,54.1% of the smokers to smoke more than 15 cigarettes a day. The current smoking rate of rural residents was 29.6% , 71.8% of the smokers to smoke more than 15 cigarettes a day. Conclusion wuhan rural adults smoking rates, male adult smoking and smoking were higher than cities, to develop and use comprehensive tobacco control intervention strategy for rural adults, reduce the rates of smoking.

【key words】 urban; ;rural; Adult; Smoking prevalence;

Keywords: 城市 , 农村 , 成人 , 吸烟现状比较

1-064

2015 年武汉市成人烟草流行现状调查

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【目的】描述 2015 年武汉市成人烟草使用、戒烟、二手烟暴露和对烟草使用知识与态度及其不同教育水平、职业和地区分布特点，判断烟草的变化趋势。

【方法】采用分层多阶段整群概率抽样法，对武汉市 14 个区的 50 个监测点 5000 名 15 岁及以上城乡居民进行入户调查，其中有 4311 人合格问卷进行分析。采用吸烟率、现在吸烟率、戒烟率、“二手烟”暴露率等指标，根据 2015 年武汉市统计局提供的全市人口数据加权计算。

【结果】武汉市 15 岁及以上成人吸烟率为 25.8%，现在吸烟率为 23.5%，男性和女性吸烟率、现在吸烟率分别为 48.9%、44.1%，2.0%、2.4%；仅有 24.1% 的现在吸烟者尝试戒烟；在室内二手烟暴露者中，酒吧 / 夜总会（歌舞厅）最高为 96.8%，其次是饭店为 72.4%；人群对吸烟及二手烟危害的认知较低，仅 15.5% 成人认为吸烟导致 4 种疾病的任意一种。

【结论】武汉市烟草流行状况严重，男性吸烟率处较高水平。酒吧和餐馆二手烟暴露情况严重，公众对吸烟及二手烟危害的认知较低，对吸烟危害的教育亟待加强。

Keywords: 成人 , 烟草流行 , 现状调查

Aknowledgement:

武汉市各区疾病预防控制中心

Reference:

2015 中国成人烟草调查报告

1-066

The Effect of MPOWER Scores on Smoking Prevalence and Cigarette Consumption

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Background: In order to assist the implementation of Framework Convention on Tobacco Control (FCTC) policies in Party countries, the World Health Organization (WHO) has introduced the MPOWER measures to evaluate the progress. This study aims to examine the effect of MPOWER policies, measured using a composite score on smoking prevalence and cigarette consumption in a global context.

Methods: Data from WHO's Reports on the Global Tobacco Epidemic, 2007-2008, 2010, 2012, and 2014 were linked to Euromonitor International data using country and year identifiers to analyze the effect of MPOWER score on smoking prevalence and cigarette consumption. Fractional logit regressions were employed to examine the effect of MPOWER score on smoking prevalence and OLS regressions were employed to examine the effect on cigarette consumption. All analyses were clustered at the country level and controlled for other covariates such as price, country-level GDP per capita, population aged 15-64, time fixed effects, and country fixed effects.

Results: The results suggest that countries with higher MPOWER composite scores experienced greater decreases in smoking prevalence and cigarette consumption during the years 2007-2014 and that this association was seen in both genders. The prevalence of smoking decreased (1.1 percentage point overall ($p < 0.05$), 1.3 percentage points for males ($p < 0.05$), and 1.4 percentage points for females ($p < 0.05$) with each unit increase in the composite MPOWER score. Cigarette consumption decreased 580 sticks (approximately 29 packs of cigarette: $p < 0.05$) per capita per year for each unit increase in the composite score.

Conclusions: The study provides evidence to support the implementation of the MPOWER measures and the WHO FCTC guidelines.

Keywords: MPOWER, Smoking prevalence, Cigarette Consumption

1-067

2016 年湖北省临床医生控烟服务现状分析

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【目的】了解湖北省临床医生控烟服务现状，为进一步制定临床医生控烟能力干预措施和更好地开展医院控烟工作提供依据。

【方法】2016年1月开始对湖北省34家医院869名临床医生开展了控烟服务问卷调查工作

【结果】本次调查临床医生的吸烟率为12.8%，90.9%的临床医生认为有必要为病人提供戒烟服务，实际工作中每次都主动向患者提供戒烟服务的只占45.0%；在医生控烟服务技能得分上，女性得分显著高于男性、工作年限在11~20年之间的医生得分显著高于其他医生、呼吸科医生得分显著高于其他科室；接受调查的临床医生中有546人(62.8%)认为自己的收入低于工作量，且仅有20人(2.3%)的医生认为自己没压力。

【结论】医院必须加强有关医生控烟服务工作能力及观念方面的培训，本次调查仅是湖北省临床医生控烟服务推广的初步工作，为下一步制定提高临床医生控烟服务工作能力干预措施提供了依据与方向。

Keywords: 控烟服务, 临床医生, 能力

1-068

LC-MS/MS 法测定人唾液中可替宁和 3-羟基可替宁的浓度

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【摘要】

【目的】建立 LC-MS/MS 法测定人唾液中可替宁和 3-羟基可替宁的浓度。方法：人唾液样本以甲醇沉淀蛋白后，选用 ACE5 C8 色谱柱 (100 mm × 4.6 mm, 3.5 μm)，以甲醇-水为流动相进行分离；选用 API5500 型三重四极杆串联质谱仪的多重反应监测 (MRM) 扫描方式进行监测，电喷雾离子化源，正离子方式，选择监测离子反应分别 m/z 177.2 → m/z 80.1 (可替宁)， m/z 193.1 → m/z 80.1 (3-羟基可替宁) 和 m/z 180.1 → m/z 80.1 (可替宁-d3, 内标)。结果：可替宁，3-羟基可替宁和可替宁-d3 同位素内标的保留时间分别为 1.84 min, 2.27 min 和 2.27 min；唾液中可替宁和 3-羟基可替宁的线性范围分别为 0.1~1000 ng·mL⁻¹, 0.10~2500 ng·mL⁻¹，定量下限：可替宁为 0.1 ng·mL⁻¹，3-羟基可替宁为 0.1 ng·mL⁻¹；日内、日间相对标准差 (RSD) 均小于 12.95%；相对偏差 (RE) 均在 ±10% 的范围以内；平均提取回收率：可替宁为 95%，3-羟基可替宁为 102%。结论：该方法快速、灵敏高、专属性强、重现性好，适用于临床人唾液中可替宁和 3-羟基可替宁的快速检测。

【关键词】可替宁；3-羟基可替宁；人唾液；液相色谱-串联质谱联用法。



议题 (二)

P-Protect people from tobacco smoke (smoke-free environment, non-smoking legislation, policy)

P- 保护人们免遭烟草烟雾危害(无烟环境、立法、政策)

1-022

To achieve a healthy China, starting with a non-smoking Beijing

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To achieve a healthy China, starting with a non-smoking Beijing Abstract: Beijing's "most stringent smoke control regulation" received widespread attention and praise. But its presence is a product of history, we have experienced a tortuous development process, in which the experience and lessons we obtained can be some reference for China to develop national tobacco control regulations in 2016. The important lesson is that tobacco control in indoor public places can't leave loopholes, and the best experience is to not allow the tobacco industry to participate in the process of tobacco control legislation. Only in this way can tobacco control regulations with accurate wording and rigorous text be formulated and play a supporting role in law enforcement. Zhang jianshu Cui xiaobo Beijing Tobacco Control Association

Keywords: Beijing, legislation, experience and lessons

Acknowledgement:

Thanked the participation and support of smoke-free legislation Beijing experts, scholars and friends.

1-058

The annual evaluation results of Beijing tobacco control regulations

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To assess the changes before and after the implementation of , intensifying law enforcement as well as provide evidence for the government. We took unannounced visits and questionnaire survey on the public attitudes changes, indoor smoke-free status in the public places as well as the tobacco sales point within 100 meters near those primary and secondary schools before and after the implementation of . Investigation content: Awareness of "the regulations", the attitude towards the regulations, and the satisfaction degree to the smoke-free environment among 600 citizens.500 public places are selected into the survey: consists of restaurants, hotels, hospitals, Internet cafes, public transportation station. Observation indexes includes identification on smoking bans, smoke sets, cigarette butts, smokers, tobacco advertising, call report, discourage smoking and so on. Results: after the implementation of the regulation, the support rates of the public of the regulation and indoor smoking ban is as

high as 92%, 94%; women showed a more supported attitude than men in general, non-smokers is higher than smokers, group aged 15 to 29 ranked the highest, the lowest approval rates appeared at the citizens aged from 50 to 69. Non-smoking logo post had risen by 28.77%; “no smoking set to be found” rates had edged up by 15.82%; the proportion of informants’ complaints call report rose by a percentages of 53.56; no found of cigarette butts hiked 26.1%; no found of smokers rate tumbled by 1.8%; discourage smoking rate rise 13.65%. Conclusion: the regulations have obtained successful implementation; Support is attained from more than 90 percents of the smokers and non-smokers; smoke-free environment construction in public places was strengthened; public satisfaction with a smoke-free environment improved obviously.

Keywords: public places regulations

2-001

Effective community based programs can enhance the tobacco control interventions and compliance of TC Laws

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Action In Development-AID has been working since 2009 for reducing tobacco consumption and the second hand smoking in Bangladesh. AID took a lots of varieties activities, e.g. conducted legal enforcement with government administration and agencies, organized awareness raising sessions like meetings, seminars, workshops with responsive civil society organizations, local government authorities and students’ communities of colleges and universities. Results: After five years, all most 93.1% displayed of signage in public places, e.g., shopping malls, cinema halls, educational institutions, government offices and public transports, 80% no active smoking and 88.4% absences of smoking aids in public place and transports’.

Keywords: Advocacy, smoke free, public places, policy, public transport, mobile court, campaign, meeting, seminar, workshop, law enforcement, community participation

Acknowledgement:

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2-003

‘Education on the Dangers of Tobacco Products Use in Bangladesh: The Role of Non-State Actors’

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This research is about education on the dangers of tobacco use in Bangladesh. Though there is a law for tobacco control in Bangladesh, however, tobacco control policy is comparatively less prioritized in the country compared to other issues. Tobacco control law in Bangladesh has failed to check tobacco control and to change the behavior of people towards tobacco use. This research is going to develop an argument that alongside the government’s initiatives, the role of non-state actors in order to educate the people about the danger of tobacco use is highly significant. The research will investigate how non-state actors can play a better role to educate people of the country about the dangers of tobacco products use based interviews of different stakeholders.

Keywords: non-state actors, Education on Dangers of Tobacco, social norms

2-004

Ensure Smoke Free Public Places and Public Transports with the Voluntarism of Students

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In Khulna Division, Bangladesh many NGOs are working for the Smoke Free Public Places and Public Transports but direct involvement of the students are rarely seen in those initiatives, on the contrary Tobacco Industries are involved students with their activities to promote their products among the young groups because they are the potential customers. Sometimes students’ acceptance in the community is higher than other Community Based Organisations. Activities with Students: - Provided information about the negative impact of Tobacco. - Sensitised workshop with the students - Formation institution based group Those initiatives have been promoted primarily in Khulna Division with the assistance of AID Foundation.

Keywords: Smoke Free Public Places, Smoke free Public Transports, smoke free public Universities

Acknowledgement:

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2-005**Impact of Smoke-free Restaurant Establishment Project in Kunming China**

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Objective: Implement smoke-free restaurant establishment project in downtown Kunming between 2013 and 2014 and evaluate the impact.

Methods: Established smoke-free restaurants through integrated ways such as media campaign, decorating smoke-free environment, providing trainings to employees of the restaurants and inviting citizens to experience dining in smoke-free restaurants. Non-random sampling questionnaire surveys of the restaurants 'employees and observation of the restaurants were carried out prior and after the implementation of the project.

Result: Percentage of the restaurants putting no-smoking signs at the entrances increased ($P < 0.05$) but percentage of not putting ash trays remained no change. Awareness of second-hand smoke (SHS) among the female employees increased ($P < 0.01$) but it remained no change among the male. Exposure to SHS among the male and female employees did not improved and client-smokers were still main contributors of SHS. Both the male and female employees' knowledge on health harms of SHS and their tolerant attitudes towards behaviours of clients smoking inside restaurants didn't change (however more employees who received the trainings showed dissatisfactions to such behaviours). More employees indicated dissatisfactions to their fellows smoking inside the restaurants. The majority of employees welcomed the restaurants for which they worked to become smoke-free.

Conclusion: The restaurants 'employees have faced great obstacles when they take actions to protect themselves and clients from SHS. Providing relevant trainings to them may change their tolerant attitude towards smoking behaviours in public places. Advocating no-smoking in indoor public places is an arduous task and long-term efforts while tobacco control legislation and compliance to law are essential.

Keywords: Smoke-free Restaurant Establishment, Second-hand Smoke, Impact

2-006

Participation Networking Model of Smoke Free District

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Developing smoke free district is one strategy plan of Thai Nurses Network on Tobacco Control.

Objective: Integrating five actions included tobacco prevention among youth, cessation services, expand smoke free environment based on Thai Tobacco Protection Act B.E. 2535, expanding tobacco control leader network at district level, and capacity building. By participating process providing an opportunity for citizen in the selected district to be a part of developing and volunteer to take responsibility in various actions. These processes let them learn tobacco control knowledge and raise high awareness regarding tobacco harmfulness. Core leaders were participated in all process.

Research methodology: Applying survey and participation action research in this study. Smoke free leaders include 120 youths, district health professional providers, health volunteers and district leaders. Brain storming and tobacco control workshop was set. All leaders take responsibility to expand their knowledge to their family members or neighborhood. Leaders were participating in various action for smoke free district. Then, smoke free volunteers club was set for supporting and encourage smokers to quit as long as possible. Smoke free members had chance to share their quitting experience to their peers.

Results: At least 120 smoke free leaders were capacity building and raise awareness regarding tobacco harmfulness and gain confidence to share knowledge to their family members or peers or neighborhoods. All leaders were cooperated developing smoke free district networking via five actions above.

Recommendation and implication: District tobacco control leaders should be empowerment continuously and provide a chance to expand knowledge and experience as much as possible. In addition, they should be trained either individual or group for raising self-esteem and confident on tobacco control. Then empower them to active involvement in smoke free district club or smoke free volunteer group.

Keywords: Participation, smoke free environment, capacity building model

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2-007

Compliance Level Monitoring of Smoke Free Policies: Critical Evidence-based for Policy Advocacy

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Smoke free regulation in Jakarta as enacted on Governor Regulation No. 88/2010 and No. 50/2012 mandates that public places, work places, education places, worship places, children playground, health facilities, and public transport are smoke free. Based on Global Youth Tobacco Survey 2014, 3 out of 5 students exposed to secondhand smoke in public places. A public opinion poll that conducted in 2013 in Jakarta shows that 30% people exposed to secondhand smoke at home, 29% in public transportation, 25% exposed in work places, and 16% exposed at public places. Since there is no safe level of secondhand smoke exposure, protecting people by enforcing the law is mandatory. Compliance level data of the enforcement regulation is needed to regularly monitor implementation of the regulation. 1.000 building randomly selected out of 50.000 building in Jakarta. The buildings had been randomized with the geographical mapping which is spread in five cities of Jakarta. Capacity building was conducted to strengthen enumerator's knowledge on compliance monitoring process as per Governor Regulation No. 50/2012. 8 compliance monitoring indicators which mandates on Governor Regulation No. 50/2012 monitored at selected buildings. The indicator are: the absence of people smoking, the availability of designated smoking rooms, no smoking signage availability, smells of cigarette smoke, ashtray availability, presence of cigarette butts, hotline service availability, and supervisory team availability. Providing indoor smoking area in Jakarta is against the law. As the result of study, it was found that overall compliance level in Jakarta on September 2015 is 34% which shows increasing trend from previous monitoring. In conclusion, at this stage compliance level is not yet adequate. Regular compliance level data is a critical evidence-based finding as policy advocacy tools to support the government to have a regular and intensive enforcement and advancing the law.

Keywords: compliance, evidence-based, monitoring, tobacco

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2-008

濮阳市强化政府干预控烟工作的实践与思考

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【摘要】

【目的】了解濮阳市实施政府干预控烟工作的措施和问题，为今后强化政府责任，推动控烟工作提供指导和依据。

【方法】从组织建设、制定政策、组织活动、领导支持、完善机制等方面介绍政府干预控烟的各项工作内容，从而分析存在的不足和总结控烟经验。

【结果】强化政府干预控烟是推动控烟工作深入开展的有效途径，但在组织建设、控烟立法、领导执行力、搭建控烟平台等方面还有很多难题，还有很多工作需要社会各界的共同努力。

【结论】强化政府责任，将控烟上升为国家战略是今后控烟工作的必由之路。

Keywords: 政府, 控烟, 实践, 思考

2-009

Secondhand smoke point source exposures in high-density beach settings in Thailand

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Background: Thailand has legislation restricting smoking in outdoor areas like open markets, parks and bus stops but not at public beaches which are very popular and often crowded with families who spend all day lounging in beach chairs under a roof of beach umbrellas. Smoking is common in this setting, but little attention has been given to outdoor exposures from smoking at beaches.

Method: The aim of this study was to characterize secondhand smoke exposures through PM_{2.5} measurements unobtrusively collected in close proximity to smokers crowded into beach lounging areas on two Thai beaches. Two teams used measuring instruments placed downwind from burning cigarettes of smokers in these lounge areas on the beach. Established practices from past experimental and field research were used with second by second measures over 10 minutes in each location with a total of 88 samples collected on the two public beaches sampled. The density of people, smokers and children in each sampling

area was also recorded according to a validated sampling protocol.

Results: Peak level of PM_{2.5} from point sources at beach one was 716 µg/m³ with a mean level of 260 µg/m³. Peak level of PM_{2.5} from beach two was even higher at 1,335 µg/m³, with a mean level of 504 µg/m³. Only 5 of the 88 samples were below the outdoor standard for PM_{2.5} in Thailand of 50 µg/m³. These extremely high levels resulted from a high number of smokers in areas that averaged 400 square meters. The highest counts were: 101 persons, 4 lighted cigarettes (smokers), and 15 children under 12 present.

Conclusion: Because peak levels of PM_{2.5} almost always exceeded the outdoor standard in Thailand and are known to pose a danger to health-compromised adults and to children vulnerable to respiratory conditions, action should be taken to prohibit smoking on Thai beaches as in other outdoor settings.

Keywords: Secondhand Smoke, Beach, Point Source, Thailand

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2-010

“Establish Smoke-Free Jurisdiction in Big Tourism City of Ha Long, Vietnam and Build Ha Long into a Smoke-Free City Model”. Conducted by the Center for Research and Community Development Services (CDS)

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Objectives: 1. To advocate and support Ha Long People’s Committee to issue a smoke- free policy with a clear enforcement mechanism 2. To design an effective communication strategy with appropriate materials and channels to stimulate behavior change 3. To raise awareness on smoking harms and enhance compliance of leaders and the public with the smoking ban 4. To build Ha Long into a smoke-free city model

Methodology: Social marketing Activities: • Ha Long Project Steering Committee headed by the Vice-Chair of City People’s Committee (PC) was established • Ha Long PC issued its own smoke-free policy • Enforcement Group was set up and regularly carries its task • Eye catching advocacy and communication materials with short and strong messages on harms of smoking and benefits of smoke free policy were carefully researched, designed and produced. • Smoke free signs: billboards, posters... • Communication activities in multi-forms conducted to raise people’s awareness on harm of smoking and the importance of smoke free environment to stimulate policy compliance of Ha Long people and tourists. • Monitoring and evaluation regularly and randomly done.

Results: • The project implementation enjoyed big support from Ha Long leaders • All Ha long stakeholders

participated and closely coordinated in project implementation. • Many leaders quit smoking to serve as role models, 95% of smokers no longer smoke inside workplaces, number of people smoking in public places noticeably reduced; tourists support and comply by the smoke free policy, ... • Ha Long becomes the leading city in Vietnam in implementing smoke-free policy

Conclusion: With commitment from leaders and warm response from all strata of people, the project has got very positive results. Smoke- free Ha Long- a World Heritage city, a World Wonder- is a model that has been widely shared nationally and regionally.

Keywords: Smoke- free Ha Long- a World Heritage city, a World Wonder- is a model that has been widely shared nationally and regionally.

2-011

深圳市民参与控烟意愿及其影响因素分析

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【摘要】

【目的】了解深圳市民参与控烟的意愿，并探讨其影响因素。

【方法】采用多阶段随机抽样方法进行在全市 10 个区抽取 15 个街道，30 个社区，对 1867 名居民以不记名方式进行问卷调查。

【结果】深圳 15 岁及以上常住居民的吸烟率为 23.25%，过去一个月内二手烟接触率为 73.75%，知晓控烟条例的比例为 65.61%；92.07% 的市民都支持公众参与控烟监督，65.77% 的市民愿意参与控烟督导，63.10% 的市民希望可以使用控烟随手拍进行投诉。多元线性回归分析显示，文化程度、职业、是否吸烟、是否听说控烟条例等都是影响市民参与控烟督导的重要因素。

【结论】深圳市民控烟积极性较高，但是政府仍需继续努力，通过加强宣传教育，加大控烟执法力度等措施进一步提高人群的控烟督导意愿。

Keywords: 市民, 控烟, 意愿, 影响因素

Aknowledgement:

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2-012

Evaluation of 100%Smoke-Free Hospital Development in Thailand based on Hospital Accreditation Guidelines

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Objective: To evaluate smoke free hospital in Thailand based on the eight standards guideline, which modified from the standard guidelines of Thai Medical Network on Tobacco Control. Research methodology: Prospective survey was applied to 1,040 hospitals under authorized of Ministry of Public Health. All hospitals were encouraged to filled self -reported questionnaires. Three hundred and forty seven hospitals (33.24%) including community, secondary, and tertiary hospitals in Thailand had reported their status and structure on smoke free hospital development. All data had analyzed by descriptive statistic. Results showed that health professional staffs reduced smoking rate significantly when compared with the last 4 years survey. In addition, supportive staffs in hospital were gradually decreasing their smoking habit. Finally, patients and caregivers were increase a chance to be educated and advised

to quit or at least did not smoke in hospital area. Most of hospitals were established smoke free hospital committee and announced to be smoke free environment. They also set various action plans for cessation services; promote tobacco prevention in hospital and communities and among risk groups. Some hospital extended their activities to be capacity-building center in the regional level to share their knowledge and experience to nearby hospital staffs and partnership. Some provide mobile cessation services in community clinic. Some set tobacco campaign to raise awareness and set as a part of public relation and marketing. For community around hospital area, they were also educated and advocated to be a part of smoke – free environment. School or college teachers, local government officers, community’s leader and health volunteers were encouraged to participate in smoke free hospital in Thailand. Implication and recommendation: Smoke free hospital in Thailand should expand their experiences on smoke free environment to the public.

Keywords: smoke free hospital 100%, hospital accreditation guidelines

Acknowledgement:

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2-013

The Localized Policy-Driven for Tobacco Control at Chumporn Province, Thailand : Situation Analysis and Successful Policy Implementation

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This study was a mixed research aimed to explore smoking situation and tobacco control strategies at Ban Pak Bo of Talaesup sub-district, Pathew, Chumporn Province. The patterns of the National Health Assembly (NHA) of the tobacco control resolution to the actions in the area were also examined. The semi-structure questionnaires about tobacco control strategic plan, action process, outcome, and attainment state were carried out by In-depth interviews and focus group discussion with 25 informants. The Nicotine level assessment questionnaire was administered among 129 participants at pre-post after implementing the NHA of the tobacco control resolution to the actions. Content analysis and descriptive statistics were applied data analysis. The results demonstrated (i) Fifty eight stores had ever sold tobacco to youth less than 18 years of age. Some of smokers were chronically ill persons (215 persons). Currently, there is no substantial tobacco enactment enforced in this area. Additionally, a campaign for tobacco-free and alcohol-free has been launched together among children and youth by provincial and district associations. (ii) The tobacco control strategies including 1) the operational network collaboration for tobacco control, 2) participatory strategic planning meeting, and 3) empowerment village leader and family achieving smoking cessation. Moreover, 10 participants quit smoking within 3 months after implement the tobacco control strategies. The Nicotine level among majority of participant was declined. (iii) The accomplishment factors consist of (1) consistent cooperation among public and private organizations; (2) quit or non-smoker prototype of community leaders; and (3) proficient human resource that can cooperate all connection to implement the tobacco control resolution in community. Thus, Pathew's model of the NHA tobacco control resolution strategies should be replicated and implemented other areas in Chumporn province.

Keywords: Network, The National Health Assembly, tobacco control, localized policy, successful

Acknowledgement:

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2-014

Impelling the National Health Assembly resolution on tobacco control into community action

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This action research aims to propel the National Health Assembly resolution on tobacco control into practice in the community. The target groups: 1) a vocal community, health volunteers (HV) and people of the village, 156 persons 2) school director, teacher, and students 400 persons and 3) the staffs of hospital, 3 persons. The process operations: 1) preparatory step, meeting of leaders in the area to explain the project and Health Assembly Resolution on Tobacco Control and recruiting volunteers to study the situation related to tobacco control to assess community capital; 2) action step, a forum plan measures for tobacco consumption and approach to practice in the area; and 3) evaluation step, leader conference consistently every month. Data were collected by survey, group discussion and in-depth interviews. The descriptive statistics, content analysis and summary descriptive essay were used for data analysis. The results showed that the action of the Ban Nang Phaya community, there are three measures: 1) preventive measures include defining the restriction area, campaign non-smoking temple, label do not selling cigarettes to youth under 18 years, and the team setup to detect justify violating of the tobacco control in community; 2) proactive treatment measures by health volunteers and staffs from Hospital to visit who want to quit smoking and the village chief / vocal encouragement to smokers who want treatment, and 3) reinforcing measures by added non-smoker features into an outstanding individual and appreciation to the family or individual quit smoking, as well as promoted in the broadcast media, community forum, information board and discusses the various legal measures, in order to carry out surveillance continues. Operating results showed that people in the community who have been addicted to smoking dramatically from 55 persons (69.62%) can reduce to 20 persons (27.78%), including school students from 30 persons (7.94%) to 10 persons (2.64%).

Keywords: National Health Assembly resolution, tobacco control, impelling into action

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Reference:

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2-015

Compliance with SF law in Thailand

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Background: The level of compliance reflects the effectiveness of smoke free law enforcement and tobacco control strategies. The assessment of compliance continuously will support jurisdiction to consider the new law. Objective: to assess the compliance with smoke free legislation, Ministerial Notification No.19 by non-participant observation. Comparative data analysis between the year 2012 and 2014 has been done to explore the change of compliance.

Method: Stratified single-stage cluster sampling and a systematic random sampling have been adopted to select the enumeration areas (EAs), 0.5% of overall EAs over 50 Districts in Bangkok Metropolis, Thailand, at totally 100 EAs were drawn in 2012 and 2014. The target areas of smoke free public places by the law divided into five types. The 2,181 and 2,190 public places units in 2012 and in 2014 were obtained. Descriptive statistics were used to describe the compliance with the smoke free law.

Results: According to the conditions and appearance of non-smoking areas by law in Thailand, the findings showed 21.2% of the overall observed venues were compliance with the law in 2014. The highest rate of compliance found at the education establishments, 65.9%. The least rate of compliance was at the public transportation stations, 7.6%. Between 2012 and 2014, the rate of compliance identified by three indicators; 1) posted a non-smoking sign, 2) no activity or any sign of smoking and 3) absence of facilities items of activity supporting smoking. The findings showed 10.6% increase of no smoking activity (79.5% to 88.9%), 55.2% increase of posting a non-smoking sign (11.7% to 26.1%), and 1.3% increase of an absence of facilities for smoking activity (94.4% to 95.7%).

Conclusion: Even the trend of compliance with smoke free law was improved, especially on the smoking activities in various public places according to smoke free law. However, the compliance rate was quite low in “public places where people use together”.

Keywords: Compliance, smoke free legislation, assessment

Aknowledgement:

1. THE INTERNATIONAL UNION AGAINST TUBERCULOSIS AND LUNG DISEASE (The Union)
2. Thai Health Promotion Foundation
3. Tobacco Control Research and Knowledge Management Center (TRC)

Reference:

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designating names or types of public places where non-smokers' health is under protection and designating a zone or all areas of such places to be a smoking area or a non-smoking area pursuant to the Non-smoker's Health Protection Act B.E.2535 (A.D. 1992). Available at: http://btc.ddc.moph.go.th/cms/uploads/content/doc/Notification_No19_English.pdf

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2-016

Increase the Productivity of the Members in University Student Organization with Smoke-Free Area rules

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Smoke is one of the cause of the existing health problem in Indonesia. In Indonesia smoking cause 9.8% of deaths due to chronic lung disease and emfisima in 2001. Smoking is also the cause of about 5% of stroke in Indonesia. Responding to the issue, as the public health student, students of the Public Health Faculty of Hasanuddin University make a tobacco control movement through the Smoke-free Area Rules. The Smoke-free Area Rules, then called Aturan Kawasan Tanpa Asap Rokok (AKTAR) is a regulation or a rule that arranged by the legislative institution of the university student called MAPERWA for making the secretariat of the student organization become a smoke-free area. In this rules explain about the ban of activities that can produce the cigarette smoke in the area that has determined. MAPERWA made this rules in effort of clean the environment around the secretariat, creat a health condition with a healthy air quality too,and also to increase the productivity of the members of the student organization. By the observation has done by the members of MAPERWA, showed that the liveliness and the productivity of the members of student organization in Public Health Faculty of Hasanuddin University, Indonesia is increase after this rules being enacted. Throught the interviews, there were opinions that they can work maximally with the anacted of the rules because they feel their work environment become cleaner and healthier. AKTAR also increase the students awareness about their role as a public health student to make a tobacco control movement that can start from the small things, like protect the people around us with the smoke-free area rules.

Keywords: cigarette, smoke-free area, productivity, tobacco control

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I wish especially thank to the almighty God, parents, friends and all the lectures, and also this work was made possible throught the hard work of all the members of MAPERWA as the student legislator who made the rules.

2-017

Evaluation of smoke-free policies in China: Findings from the ITC China Survey, 2007-2015

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Background: Previous studies by the ITC (International Tobacco Control) Project and others have shown that China's partial smoke-free (SF) laws have been ineffective. This study adds new ITC China Survey data (2013-2015) to determine whether there has been any improvement in the impact of China's SF laws on reducing smoking in key public venues and in public support for comprehensive SF laws.

Methods: Data were from smokers (aged 18+) of the ITC China Survey in 7 cities from Waves 2-4 (2007-2012) and 5 cities and 5 rural areas at Wave 5 (2013-15). Generalized estimating equations with logit link were conducted to test changes in prevalence of smoking in key public venues and support for SF laws over time and across cities/rural areas.

Results: Although smoking in restaurants has decreased over time (from 88-97% at Wave 2 to 55-83% at Wave 5 across cities) and indoor workplaces (from 68-86% to 38-80%), smoking prevalence is still much higher in China than in all other ITC countries with comprehensive smoke-free laws (as low as 1-5%). Smoking prevalence in bars continues to be very high (60-98% across waves). Support among smokers for comprehensive SF laws has increased overall, although as in other ITC countries, support is still lowest for bars. Home smoking bans have also increased over time, although China has the lowest percentage of SF homes among all ITC countries. At Wave 5, smoking in bars was less likely in rural areas than in cities (73% vs. 88%, $p < .05$); smoking in workplaces was more likely in rural areas (73% vs 56%, $p < .001$).

Conclusions: Partial SF laws in China continue to be ineffective in reducing the threat of tobacco smoke in public places, and there is a still urgent need for China to finally implement truly comprehensive SF laws. Support among even smokers for such laws is higher now than in Ireland before that country's successful comprehensive law. All of the evidence points to the conclusion that China is ready for a strong national SF law.

Keywords: public venues, public support, partial smoke-free laws, comprehensive smoke-free laws

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2-018

Tobacco Time Salary (TTS) of Civil Servants (CV) in Japan

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PURPOSE: Ban of smoking of CS during work time by the estimation of TTS of CS in Japan.

METHOD: On June & July 2015, the number of SMCS during work time at the designated smoking places (DSP) outside two city main office buildings, Amagasaki & Nishinomiya, was counted and revealed 547 & 400 per day respectively. The assumption and calculation of TTS of Amagasaki are as follows. One Smoking Time; 10 minutes including walking time to & from DSP. Total Smoking Time per Day is 5,470 minutes (=91.2 hours). Actual Working Time per Year; 216 days (=1728 hours). Average Salary of CS per Year is 67,610 US\$ and Actual Salary per Working Hour (ASPWH) is 39.13 US\$. Therefore, TTS is 3,568.6 US\$ (=39.13US\$ X 91.2hours) per Day, and 770,830 US\$ per Year (TTSPY). There are more than 10 branch offices all over the city in addition to City Office Main Building. Therefore, TTSPY of all SMCS of Amagasaki should be more than 1 Million US\$. For that of Nishinomiya City, the same calculation is conducted and also estimated to be more than 1 Million US\$. So, TTSPY of both cities is estimated to be more than 2 Million US\$. Total number of CS of both cities is 6,764 (Amagasaki 3,198 + Nishinomiya 3,566). The number of CS all over Japan is 3,111,785 (= Japanese Government 339,785 + Local Government 2,772,000) and is approximately 460 times of that of two cities. Therefore, TTSPY of SMCS of Japan is estimated to be more than 920 Million US\$ (More than 2M US\$ X 460).

CONSIDERATION: Smoking leave during work time seems a loaf on the job and a burden for colleagues to cover the task of SMCS. The resource of salary of CS is tax and the huge amount of TTS of SMCS is not acceptable from tax payer's point of view.

CONCLUSION: Ban of smoking of CS should be implemented.

Keywords: Tobacco Time Salary, Civil Serva

2-019

Developing Multilevel Intervention in Reducing in-home Secondhand Smoke Exposure among Pregnant Woman in North Lombok District,Indonesia

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Introduction: Indonesia Basic Health Survey 2013 reported that 67% of men >15 y.o are smoker, more than 80% of them smoke at home. Almost all people are exposed to secondhand smoke (SHS) in their homes. SHS exposure among pregnant women is highly correlated with low birthweight (LBW), a major cause of neonatal mortality and associated with other neonatal health problems. SHS exposure in homes can be reduced by a package of “smoke-free home” (SFH) interventions, particularly in the high prevalence of LBW area as North Lombok, Indonesia. Objective: to explore ANC practices, smoking behaviors, norms, perceptions, gender roles, as well as media mapping and local policy availability on tobacco control.

Methods: we conducted a series of semi structured interviews among health provider, FGD and indepth interviews among midwives, pregnant mothers, and smoker husband. In addition, we documented any health education media available in the site and carried out a simple survey to do media mapping. Simple survey data was analyzed descriptively and qualitative data was analyzed using meta matrices.

Results: majority of pregnant women, but few of husbands attend ANC class purposed for couple. Husband and wife have understood harm of smoking, but little knew the harm of SHS. Unlike in Java, Lombok’ women rarely have community or religious meeting. Majority have not seen or heard about passive smoking messages and rarely listening radio, nor watching TV. Printed media was preferable, including outdoor media. Both mother and smoker husband agreed to make their house as SFH. Man and woman gather in a “berugak” or small gazebo outside their house. According to men and women group, gender equity has been applied. Local regulation of smoke free area has been issued by the provincial government. Conclusion: Intervention should be developed, start from individual and small group health. Moreover, community agreement for implementing SFH can be offered, as well as advocate the local government to issue Smoke Free Area regulation

Keywords: second hand smoke exposure, pregnant woman, multi-level intervention

2-020

深圳市禁烟场所控烟执行情况调查 (Investigation the implementation of non-smoking places in Shenzhen)

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【目的】调查 2014 年和 2015 年深圳市禁烟场所控烟执行情况。

【方法】采用分层随机抽样和方便抽样相结合的方法，从深圳市 10 个管辖区分别抽取 2162 个和 1095 个禁烟场所进行暗访调查。

【结果】2015 年禁烟标识张贴率为 79.1% 高于 2014 年的 75.6% ($\chi^2=5.02$, $P=0.03$)，标识合格率由 41.1% 上升到 51.6% ($\chi^2=32.59$, $P<0.01$)；2014 年和 2015 年烟草广告的设置率分别为 3.0% 和 2.7%，违法设置烟灰缸 / 烟具的比例分别为 17.3% 和 16.8%，差异均无统计学意义；发现吸烟者的比例由 9.9% 提高到 17.8% ($\chi^2=40.85$, $P<0.01$)，发现有烟头 / 烟味 / 吸烟者的比例从 20.6% 上升到 31.0% ($\chi^2=42.82$, $P<0.01$)。

【结论】2014 年和 2015 年深圳市禁烟场所控烟执行情况较好，违法吸烟现象有所上升，应采取相关措施，进一步保障《控烟条例》长期有效执行。

Objective: To investigate the implementation of non-smoking places in Shenzhen in 2014 and 2015.

Methods: 2162 and 1095 non-smoking places were observed in secret, which were chose from 10 jurisdictions in Shenzhen, by using stratified random sampling and convenience sampling methods.

Results: The rate of posting non-smoking signage was 79.1% in 2015 which was higher than 75.6% in 2014 ($\chi^2=5.02$, $P=0.03$), the qualified rates rose from 41.1% to 51.6% ($\chi^2 = 32.59$, $P<0.01$); 3.0% and 2.7% of surveyed places had tobacco advertising in 2014 and 2015, the percentage of providing ashtray or other smoking sets were 17.3% and 16.8%, both of them had no statistically difference; observed smoking increased from 9.9% to 17.8% ($\chi^2=40.85$, $P<0.01$), The proportion of finding cigarette butts or smell of smoke or smokers rose from 20.6% to 31.0% ($\chi^2=42.82$, $P<0.01$).

Conclusions: Tobacco control regulations are effectively executed in non-smoking places in Shenzhen in 2014 and 2015, smoking rate presents a rising tendency, it should take valid measures to guarantee the long-term implementation of “Smoking Control Regulations”.

Keywords: 禁烟场所, 控烟, 执行, Non-smoking places, Tobacco control, Implement

2-021

Transtheoretical Model after the Implementation of Smoke Free Area Policy on the Employees of pt. Kaltim Prima Coal

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Background: Cigarettes lead to pollution of passive smoking and the surrounding environment. Smoke-Free Area policy has been implemented in public places such as workplaces to protect the passive smoking. PT. Kaltim Prima Coal (PT. KPC) is one of workplaces that have implemented the Smoke-Free Area policy since 2014. An evaluation needed to see if the policy is considered effective.

Objective: To determine the attitude and readiness to quit smoking according to transtheoretical model after the implementation of smoke-free area policy on the employees of PT. Kaltim Prima Coal.

Methods: This study was cross-sectional designed descriptive quantitative. Out of 404 participants that were taken using multi stages sampling, this study selected 108 respondents who were active smokers. Data were collected using modified Transtheoretical Model Measures Questionnaire by The University of Rhode Islands and analyzed using descriptive method.

Results: Most smoker employees of PT. KPC were in the contemplation stage (37.5%). Majority of smoker (68,5%) said that smoke free policy program considered as helping them to stop smoking
Conclusions: Smoke free area policy considered as effective to support smoking cessation among smoker in KPC.

Keywords: Smoke-Free Area, Attitude, Stage of Readiness

2-022

Worker's Attitude and Compliance toward Smoke-Free Policy Implementation in pt. Kaltim Prima Coal

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Background: The establishment of the smoke-free area is one of the efforts for health and safety in workplace. East Kalimantan Province has the regulation regarding smoke-free area. In January 2014, the management of PT. Kaltim Prima Coal (KPC), the largest coal mining in the area, increased the commitment and re-launched a more aggressive comprehensive smoking control program targeting to make all areas of PT. KPC and all the facilities free from smoking activity.

Objective: This research aims to find out worker's attitudes and compliance toward smoke-free policy implementation in PT. KPC and knowing any relationship between worker's attitudes with compliance toward smoke-free policy implementation in PT. KPC.

Methods: Samples were employees of PT. KPC totaling 404 people. Samples were taken using multi-stage sampling. Instruments used in the form of a questionnaire. Analysis data use statistical tests and analysis bivariate use chi-square test. Results: A total of 216 (53.5%) of respondents give supportive attitude toward the smoke free workplace policy. Then for smoker respondents, a total of 64 (59.3%) of respondents comply with smoke-free policy implementation in PT. KPC. There was a significant relationship between smoker's attitudes with compliance toward smoke-free policy implementation ($p < 0,003$) Conclusion: Most employees have a supportive attitude and compliant to the smoke-free policy implementation in PT. KPC. Indeed, smoker's attitudes related to compliance toward smoke-free policy implementation in PT. KPC

Keywords: smoking, smoke-free policy, attitude, compliance

2-023

Rail stations smoke free: an example from Bangladesh

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Dhaka is the capital city of Bangladesh with 18 million people and one of most dense city in world. It has 5 rail stations and Kamalapur rail station is central station in Bangladesh. At least 50 trains come and leave station every day with 60,000 visitors, and majority of them are non-smokers (including children, women). It is largest and most important terminal for transportation between Dhaka and rest of the country (except Barisal division). As important public place, Rail station is smoke free by the law titled Smoking and Tobacco Products Control (uses) Act 2005 (amended in 2013). By this law, authorities should put no-

smoking signboards in entrance and inside of any public places, including rail station. To find out the current scenario after 10 years of law is passed, we have observed Kamalapur rail station. We found that 87 persons were smoking within two hours (morning and evening). In each hour, average 2500 people visit, while 43 persons were smoke in each hour. Only 6 no-smoking signboards were found that provided by an anti tobacco organization (Pratysha). None of signboards hang-on by the station authority themselves. Smoking in the smoke free Kamalapur rail station is not only violation of law, it also causes to second hand smoke to a large number of non-smoker every day. 80% of smoker felt guilty while asked them, why they are smoking in smoke free place? However, but they informed that they don't know much about tobacco control law as there is no sufficient no-smoking signboards. We have informed this situation to rail authority, met Director General of the Department of Rail and Secretary and Minister of the Ministry of Rail and requested them to ensure smoke free environment at the all rail station. Locally, many rail stations became smoke free already and are monitoring well by themselves. As they are sensitized enough and many station master also issued formal commitment to ensure implementation of law under their specific jurisdiction.

Keywords: Smoke free, rail station, Bangladesh, smoke free rail station, passive smoking, second hand smoke, tobacco control law

Aknowledgement:

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2. Bangladesh Anti Tobacco Alliance (BATA)
3. Pratysha Anti Drug's Club
4. Masud Rana

Reference:

Bangladesh Railway

2-024

大数据下——中国十年的控烟成效

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大数据下——中国十年的控烟成效 蔡光云 1【综述】许浦生 2【审核】1. 广州医科大学第二附属医院呼吸内科 广东 广州 510000; 2. 广州医科大学第二附属医院呼吸内科 广东 广州 510000;

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13802525927@139.com 摘要 中国作为烟草大国于2003年11月10日签署《烟草控制框架公约》现已10余年,在10年中,我们在控烟之路上做了大量工作,包括国家出台及完善法律法规、组建控烟志愿者服务队义务宣传,也进行了大量的科学研究,然效果并不理想。吸烟既是个人问题,也是社会、国家问题,本综述旨在利用大量研究数据从多角度来分析中国十年的控烟成效。

Keywords: 中国,控烟成效,国家,社会,医院,个人

2-025

Analysis of Secondhand Smoke in the Smoking Room and Public Perception of Its Harm in Public Transport Sites, Shanghai

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Abstract

[Objective] To analyze the effectiveness and public perception on smoking room in public transport sites, to provide evidence supporting for smoke free policy.

[Methods] Passengers in five major public transport places(Shanghai Hongqiao Railway Station, Shanghai South Long-Distance Bus Station, Shanghai South Railway Station, Shanghai Railway Station, Shanghai Long-Distance Bus Terminal) of Shanghai were randomly interviewed using a uniform questionnaire. Meanwhile, AM510 Aerosol monitor was used to measure the fine particle (PM_{2.5}) concentrations in these places with smoking room.

[Results] A total of 699 questionnaires were retrieved. There were 95% of respondents agreed that secondhand smoke was harmful, while 1.6% of them said it was harmless and 3.4% were not clear about it. In all, 64.0% supported canceling the smoking room in public transport places, while 21.1% opposed it and 14.9% had no idea. Comparing to smokers, Nonsmokers were more likely to support the cancellation of smoking room. Multivariate logistic regression model showed that factors associated with support for cancellation of smoking room were whether people can smell the smoke coming out of the smoke room and think comprehensive smoke-free indoor public places will enhance the image of the city. Monitoring data showed that PM_{2.5} levels in interior, doorway and outdoor 5 meters of the smoking room was gradually decreased with significant differences.

[Conclusion] The smoking room in public transport places cannot completely insulate secondhand smoke, and passengers showed high support for the cancellation of the smoking room. The implementation of the 100% indoor smoke free policy is necessary and feasible.

Keywords: smoking room, secondhand smoke, PM_{2.5}, indoor public sites

2-026

Homocysteine and Lipid Peroxidation in Passive Smoking

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Introduction: Disease risk due to smoking is not limited to smokers only. Passive smoking is associated with adverse health effect and increase risk of several diseases especially cardiovascular disease.

Objectives: To investigate the cardiovascular effects of tobacco smoking on serum cholesterol (C), HDL-C, LDL-C, malondialdehyde (MDA), conjugated diene (CD), and homocysteine (Hcy) in healthy smokers, passive smokers and non-smokers.

Method/Design: 100 male (50 industrial tobacco smokers and 50 passive smokers) from a military unit in BKK and 50 local handmade tobacco smokers from a village in Phitsanulok who participated in the study, were investigated. 50 male non-smokers from the same unit were selected as controls. Fasting blood samples were collected for investigation of lipid profile, MDA, CD, and Hcy. Results: Hcy levels of smokers were significantly higher than non-smokers while C, LDL-C, and TG (all groups of smokers) were significantly lower than non-smokers. More detail of smoking groups, the industrial tobacco smokers had HDL-C lower than non-smokers whereas passive smokers and local handmade tobacco smokers had HDL-C higher than non-smokers. The industrial tobacco smokers had MDA significantly higher than non-smokers but lower in passive smokers and local handmade tobacco smokers. The industrial tobacco smokers and passive smokers had Hcy significantly higher than non-smokers but local handmade tobacco smokers had Hcy lower than non-smokers.

Conclusions: The results of this study suggested that there were high MDA and Hcy in the industrial tobacco smokers compared with non-smokers, which might contribute to develop of vascular and cardiovascular diseases especially in the industrial tobacco smokers.

Keywords: ACTIVE AND PASSIVE SMOKING: LIPID PEROXIDATION

Acknowledgement:

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2-027

Up-scaling national implementation of smoke-free policy in the Philippines: Policy agenda and prospects for the new Duterte administration

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CONTEXT: With the recent victory of Rodrigo R. Duterte as the new president of the Philippines, the prospects for up-scaling smoke-free (SF) policy implementation in the country are brighter considering his steadfast support and unwavering commitment for SF policy implementation while he was the mayor of Davao City—considered a model SF city within and outside the country.

OBJECTIVE: To identify policy agenda and prospects for up-scaling smoke-free policy implementation in the Philippines based on the president’s policy experience in Davao City. **METHOD:** Examination of policy-implementation agenda and prospects at the national level under the new Duterte administration.

RESULTS: In view of his staunch support and policy pronouncements for tobacco control, the new president is expected to provide strong leadership and political will in SF implementation, ensuring stakeholder “buy-in” and involvement, effective planning, resource mobilization, and full backing for SF operations and services. He will likely set up an inter-agency body to oversee policy implementation, tap various SF networks, intensify media campaigns, and step up policy enforcement (e.g., stricter enforcement, stiffer fines and penalties for violators), taking into account best practices and lessons learned from Davao’s experience.

CONCLUSION: Davao City’s SF model, best practices, policy-implementation ingredients, and lessons learned will feed into the new administration’s SF implementation strategies for the whole country. Local government units, which are in the frontlines of policy implementation at the community level, are expected to be fully capacitated to replicate Davao City’s successful experience in their respective jurisdictions.

Keywords: smoke-free policy, policy implementation, up-scaling, Philippines

2-028

Content Analysis of Newspaper Coverage of the Regulation of 2015 Macau's Tobacco Control Law

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Abstract The impacts of news media on the attitude and beliefs on the public and policy makers about public health and smoking cessation policy have already been identified in many studies. The Legislative Assembly of the Macao Special Administrative Region passed the 2015 Tobacco Control Laws on 10th July, 2015, stimulating a heated discussion and debate in society. In the study, a content analysis of news coverage appearing in Macao Daily between 1st January 2015 and 19th November 2015 was conducted. The study applied PEST method for analyzing the public's opinions, aiming at gaining a better understanding of the current situation of tobacco control work in Macao and the challenges lay ahead. Moreover, Knowledge-Attitude-Practice (KAP) model is used to propose further enhancement and improvement of government's tobacco control work.

Keywords: Newspaper coverage, Macau, Knowledge-Attitude-Practice model, PEST analysis

2-029

Evaluation of Smoke Free Area Implementation in University of Indonesia on 2015, Logical Framework Approachment

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Indonesia in the third position country with the world's largest tobacco consumption. Exposure to cigarette smoke will harm to others, passive smokers will become victims of smoking behavior is arbitrary. Smoking Area is a rule that should be applied based on Law Number 36 Year 2009 on

Health. University become one of the smoke free area decided by the Government. University of Indonesia as an educational institution have a regulation to be smoke free campus. The purpose of this study was to analyze the implementation Smoking Area in the university of Indonesia Year 2015. This is qualitative research with in-depth interviews the stakeholders and observations methods with the logical framework approach. Results of this study were smoke free area in UI doesn't have indicators in accordance with the rules and the health ministry has not been optimal in practice. The main limiting factor is the lack of commitment, consistency and the clear of responsibility and authority of the "Pelaksana Tugas Harian KTR UI" so that it will have an impact on the budget allocation, the activity in the implementation of non-smoking area as well as the output achieved.

Keywords: Smoke Free Area, Smoke Free Campus, Evaluation, Logical Framework Approachment, Universitas Indonesia

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2-030

Children's exposure to secondhand smoke during Ramadan in Jakarta, Indonesia

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Exposure to secondhand smoke (SHS) causes a disproportionate health burden for children, yet existing smoke-free laws that would provide protection often allow exemptions or are poorly enforced. To demonstrate the impact of current smoke-free laws in Jakarta, Indonesia, we monitored

air quality and SHS exposure during Ramadan, a period of Muslim religious observance marked by family social gatherings, and compared findings with the same venues sampled post-Ramadan. Indoor air quality was measured after 6 pm during and after Ramadan (July-August 2014), in 43 restaurants in each of five districts of Jakarta in which indoor smoking occurred, and in five smoke-free control venues. Air quality was measured by sampling fine particulate matter of 2.5 microns or less (PM_{2.5}). The number of children and visitors present in each venue during each visit was also observed. PM_{2.5} levels were significantly higher during Ramadan (mean 88.9 µg/m³) compared with post-Ramadan (mean 64.8 µg/m³), in venues where smoking occurred. During Ramadan, there were significantly more active smokers and children observed in venues where smoking occurred, compared with the same venues post-Ramadan. Poor enforcement of the smoke-free law in Jakarta has failed to protect children from SHS exposure, and this exposure may be heightened when families attend popular religious and cultural events, such as those associated with Ramadan. Collaboration between government, NGOs, religious leaders and venue owners and managers must be developed to ensure that comprehensive smoking bans apply to all venues, and that smoke-free laws are enforced.

Keywords: Secondhand smoke, tobacco, children, policy, Indonesia, Behavioral Ecological Model

Acknowledgement:

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2-031

Indonesia Women Smokers and Death Caused by Stroke

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BACKGROUND Increased prevalence of female smokers in Indonesia is very worrying, from 1.7% (1995) to 6.7% (2013). Stroke is a major killer in the community and is largely associated with cigarette consumption. Its impact 25,524 of women aged over 30 years died of a stroke, 64.4% because of current smokers and the remaining of passive smoking. Over 90% of the global burden of stroke is linked to modifiable risk factors. Women and children under five years is the most exposed group due to the second hand smoke. The most successful efforts related tobacco control in Indonesia was developing policies of smoke free area. Until December 2014 there are 49 Local regulations at the district / city, 102 regulations of the mayor and 13 provinces in Indonesia which has a Smoking Free Policy. The impact that occurred death cases of stroke among women will be analyzed, if exposure to hand smoke be eliminated. **METHODS** Using data GBD 2013 (IHME) to estimate the population-attributable fraction (PAF) of stroke-death associated with potentially behavioral risk factors (tobacco consumption). The extreme plan for implementation of 100% No Smoking Area in Indonesia on public facilities and environment throughout the residence. **FINDINGS** About 35.5% of the total deaths strokes women over 30 years as a result of smoking-related can be reduced (4,976 cases of hemorrhagic stroke and 4,098 women with ischemic stroke). As many 2,869,095.51 YLL (IU 194,099.37 to 337,924.35) productive years lost due to premature mortality can be saved for strengthen the family and build the nation.

Keywords: smoking, stroke, women, YLL

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2-032

Experiences in smoke free restaurant implementation in Hanoi, Vietnam

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Background: Vietnam has high prevalence of tobacco use and highest secondhand smoke exposure in restaurant compared to other settings. In 2013, Vietnam National Tobacco Control Law took effect, including a ban on indoor smoking at restaurant. However, the enforcement and compliance of this ban remains weak.

Objective: To reinforce smoke free restaurant (SFR) implementation in Hanoi city.

Method: Implementing two year intervention project in 2015-2016 through comprehensive approach which includes generating evidence to support SFR implementation, capacity building for local authority and restaurant owners and managers, conducting media campaign to raise public awareness and support, and monitoring to improve the enforcement.

Results: •High support of restaurant owner (80%) and customer (82%) for SFR implementation. •Regular meetings of the city taskforce and multi-sectoral workshop were organized to build capacity, reinforce the commitment of local authorities and develop action plan. •Series of trainings were conducted for the taskforce and restaurants managers of four districts in Hanoi. The district authorities expressed high political will and was active in implementing SFR models. Nearly 400 restaurant's owners and managers and 110 health staffs participated in the trainings on SFR. Over 300 owners and managers signed the commitment on SFR implementation. Fifty restaurants were monitored by health division. •Media actively involved and supported to SFR by sharing evidences and best practice models in different media channels.

Lesson learners: •Political will plays an important role in implementing SFR •Health division at district level is the key local authority in implementing SFR •The involve of SFR good models in sharing experience in the training workshop helps to improve awareness and attitude of other restaurants in implementing SFR •Monitoring could be implemented effectively by both multi-sectoral inspection and health sectoral inspection.

Keywords: smoke free, restaurant, Hanoi

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2-033

Best practices in tobacco control among Thai nurses

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This article was developed from nurses who were outstanding awardee from Nurse Network on Tobacco Control of Thailand from 2013-2016 on developing non-smoking community/organization. The total of 56 nurses, 41 nurses working in hospitals, 3 community health nurses, 4 nurses from correctional facilities, and 8 nurse instructors. The results were explored into 6 aspects : 1) The beginning of tobacco control nursing practice, 2) Nursing practice guideline for tobacco control, 3) Sustainability of tobacco control activities, 4) Key success factors on tobacco control. 5) Problems and barriers, and 6) Nurses' pride. This lesson Learned provide a basic understanding on tobacco control nursing practice for each social context to promote smoke-free community which could promote smoke-free society and reduce morbidity and mortality of tobacco toxicity. Moreover, it can prevent new smokers and protect second hand smokers, especially, children, pregnant women and older adults

Keywords: Best practices, Thai nurses, tobacco control

2-034

《北京市控制吸烟条例》实施周年评估结果

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为评估《条例》实施前后的变化，为政府加大执法力度提供依据。《北京市控制吸烟条例》颁发前后，公众对《条例》和全面禁烟的态度以及公共场所室内无烟环境状况以及中小学校周边 100 米范围内烟草销售点等情况进行了暗访和问卷调查。调查内容：对 600 名公众对《条例》的知晓度、态度、对无烟环境的满意度。调查 500 个公共场所，包括：餐馆、宾馆、医院、网吧、公共交通站等五类。观察指标包括禁烟标识、烟具、烟蒂、吸烟者、烟草广告、举报电话、劝阻吸烟等要素的情况。结果：《条例》实施后，公众对《条例》和“室内全面禁烟”的支持度高达 92%、94%；女性普遍高于男性，非吸烟者高于吸烟者，15-29 岁年龄段最高，50-69 岁支持率最低。张贴禁烟标识上升了 28.77 个百分点；无烟具摆放上升 15.82 个百分点；有举报电话的比例上升 53.56 个百分点；未发现烟蒂上升 26.1 个百分点；

未发现吸烟者上升 1.8 个百分点；发现吸烟劝阻的比例上升 13.65 个百分点。结论：《条例》得到较好实施，得到吸烟者和非吸烟者九成以上的支持度，公共场所的无烟环境建设得到加强，公众对无烟环境的满意度提高。

Keywords: 公共场所法规, 公众支持度

2-035

Monitoring Particulate Matter 2.5 in Smoke-Free Area and Smoking Restricted Area in Surabaya city

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Since 2008, Surabaya city had regulation regarding smoke-free area and smoking restricted area. Smoke-free area includes children's play facilities, learning facilities, health facilities, worship place, and public transportation. While smoking restricted area includes workplace and public places. In "Preventing disease through healthy environments: a global assessment of the burden of disease from environmental risks" report stated that mortality due to non-communicable disease mostly resulted from air pollution includes secondhand smoke exposure. An unhealthy environment contributed to mortality about 60%. Environmental measurement as a monitoring indoor quality is required to evaluate the implementation of regulation. This study aimed to measure particulate matter 2.5 micron in indoor at seven facilities based on regulation. Samples were 106 places divided into five areas which center Surabaya, west Surabaya, east Surabaya, north Surabaya, and south Surabaya. The instrument to measure particulate matter 2.5 micron was dylos. It took sixty minutes continuously measurement at each place. The result showed that particulate matter 2.5 micron 53% was above WHO standard concentration which $> 25 \mu\text{g}/\text{m}^3$. According to seven facilities, the highest particulate matter 2.5 micron concentration was public places, followed by children's play facilities and health facilities respectively. It can be concluded that measurement of air quality were often found at several places in Surabaya. It is suggested to establish 100% smoke-free area includes workplace and public places in seven facilities in Surabaya city.

Keywords: monitoring air quality, particulate matter 2.5, smoke-free area, smoking restricted area

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2-036**The Association of Tobacco Control Policy with Trends in Smoking in 33 Provinces of Indonesia between 2007 and 2013**

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Smoking is a substantial public health issue in Indonesia, as in many other developing countries. Though progress has recently been made in tobacco control policy, there are important differences between provinces in the extent of tobacco control, e.g. regarding smoke-free public places. This study aimed to assess whether such differences are related to province-specific levels of smoking between 2007 and 2013. Regional trends in smoking were estimated by using the regionally representative data from nation-wide survey carried out in 2007, 2010, and 2013. A review of both national and provincial policies was made to identify tobacco control policies during 2004–2013. Based on this review, the Tobacco Control Scale (TCS) was calculated for each region in 2013. A regression analysis was used to assess the association of provincial TCS with prevalence of current smoking (decomposed into ever smoking and ex-smoking) and heavy smoking. Provinces with a high TCS score in 2013 had a higher level of current smoking prevalence in 2013 (OR=0.89; CI95%:0.88-0.9). The same association, though weaker, was observed for previous years (e.g. OR=0.95; CI95%:0.94–0.97 for 2007). In 2013, these provinces had lower rates of ever smoking (OR=0.92; CI95%:0.91-0.94) and higher rates of ex-smoking (OR=1.16; CI95%:1.13–1.19). A significant association was also found among heavy smoking status (OR=0.92; CI95%:0.88-0.96 in 2013). Stronger tobacco control policy at provincial level was associated with lower prevalence of current and heavy smoking, and high prevalence of ex-smoking. This study suggests that tobacco control at provincial levels, in addition to national levels, are important to reduce prevalence of smoking.

Keywords: Tobacco Control, Tobacco Policy, TCS

2-037

Evolution of Hong Kong smoke-free policy and its executive efficiency from 1982 to 2013 - An institutional economics analysis and evaluation based on game theory modeling

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Tobacco epidemic is now one of the biggest public health threats the world has ever faced: Tobacco related illnesses are killing nearly 6 million people a year, while more than 10% are result of non-smokers being exposed to second-hand smoke (SHS). World Health Organization (WHO) report confirmed there is no safe level of exposure to SHS and applying 100% smoke-free environment in regulated areas is the only effective strategy to reduce health risks of SHS for non-smokers. However, there are still one-third of adults and nearly half of the children all around the world suffering from breathing air polluted by SHS. Even covered by strict enforcement of smoke-free law in the whole territory of Hong Kong, five years after the complete smoking ban in public places, there are still 8193 convicted cases of breaking the law confirmed by Hong Kong Tobacco Control Office in 2012, indicating smoke-free policy execution is particularly critical both at present and in the future. This paper applied game theory modeling into smoke-free policy evolution in Hong Kong during 1982 to 2013, simulating the conflict and cooperation between smokers, managers, non-smokers and law-enforcer, aim to find the solution for 100% smoke-free in all regulated areas via control of active smoking. The results show that in the case without risk-free authorization for non-smokers to stop active smokers breaking the law, site manager tend to be concerned about their potential economic loss instead of health risks, which will lead them cooperate with active-smoker instead of non-smoker. While Hong Kong smoke-free policy improved by reference to separation of powers, encouraging non-smokers to prosecute non-compliant site managers, and adding business qualification revocation as punishment, can improve executive efficiency of smoke-free policy.

Keywords: Smoke-free, Game theory, Hong Kong, Institutional economics

2-038

The Beginning of Smoke-Free Sichang Island

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Creating 100 percent smoke-free environment is one of the obligations on the Parties to the WHO FCTC under the Article 8 Guidelines. The purpose of this study is to present a case-study of Smoke-Free Sichang Island project that aims to raise public awareness and encourage community involvement to reduce second hand smoke exposure. The Smoke-Free Sichang Island project was funded by Chulalongkorn University, under One functional One Community (OFOC) strategy which reflects the University's commitment in social responsibility. To achieve the objectives, the network organization participating in the project included Koh Sichang school, Koh Sichang hospital, the Thailand National Quitline, and ASH Thailand. The project was implemented at Sichang Island, an important historical island in Chonburi, during May – June 2016, consisting of two parts: 1) provide training capacity to promote cessation of tobacco use and 2) raise awareness among junior high students. In part one, a two-day workshop covering harm of tobacco use and brief advice for cessation was carried out: the participants included five nurses, ten health volunteers, and six community representatives. A brainstorm session was used to design a stop-smoking service at Sichang Island. In part two, 34 junior high school students joined a two-day workshop. The students were educated about harm of tobacco use, second-hand smoke, and smoke-free law. A brainstorm session was also offered to increase students' participation to design supporting activities for smoke-free environment in the island. Two-thirds of the students also reported that there were smokers living in their families and the majority agreed that more community involvement is needed to create Smoke-Free Sichang Island. The students also joined the campaign for smoke-free Sichang that they designed. There will be more challenging tasks, especially getting community involvement to carry on for achieving the Smoke-Free Sichang Island.

Keywords: Smoke-Free, Community Involvement, second-hand smoke

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2-040

台灣履行 FCTC 的現況及展望 Current Status and Future Prospect of FCTC Implementation in Taiwan

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台灣在 2009 年 1 月 11 日開始執行大部分的室內公共及工作場所禁菸、菸品容器印製面積 35% 的警示圖文、全面禁止菸品廣告促銷及贊助等菸害防制措施，但相較國際趨勢，仍有諸多不足之處。特別是多年來吸菸率雖有下降，但菸品消費量卻是呈上升趨勢。因此，為有效維護國人健康、降低菸品消耗量及預防青少年吸菸，董氏基金會自 2011 年上半年起即結合 215 個民間團體推動修法，而面對 2016

年新政府上任，以消費者文教基金會、台灣國際醫學聯盟、台灣醫界菸害防制聯盟以及董氏基金會為主的民間團體將重新調整控菸目標及推動策略，提出台灣修法範圍至少應包含：1. 菸品容器印製至少 80% 警示圖文並採素面包裝。2. 禁止菸品陳列展示。3. 電子菸同納入菸害防制法管制。4. 室內公共及工作場所全面禁菸。5. 禁止加味菸。6. 菸草產業違法廣告、促銷，應增訂累犯者罰則。7. 每包菸品至少再加徵 60 元菸稅。同時將運用結合認同拒菸的民間團體、不與擁菸商團體正面衝突，以及加強揭露菸商欺騙及違規行徑的宣導等策略，以促成修法之落實。

Taiwan has implemented a new regulation in 2009 that bans smoking in most indoor public places and workplaces. The regulation also requires graphic health warnings to cover more than 35% of the cigarette containers. But comparing to international tobacco control status, these measures are still far from adequate; especially considering the smoking rate is slowly going down while the cigarette consumption is going high in these years. In order to prevent youth smoking, reduce total tobacco consumption, and to advance the public health, John Tung Foundation, joined by other 215 non-governmental organizations, has been pressing the government to amend tobacco control regulations. The effort was called off due to the general election held in 2011. In 2016, to continue the endeavors, John Tung Foundation will again invite NGOs such as Taiwan International Medical Alliance, Consumers' Foundation, Formosa Cancer Foundation to jointly push forward the established policy goals in refining tobacco control regulations. The policy goals are as follows: 1. health warnings on cigarette packaging should increase to 80%, and requires plain packaging for tobacco products; 2. Ban all tobacco products display; 3. E-cigarettes should be included in the TOBACCO HAZARDS PREVENTION ACT; 4. 100% smoking ban in all indoor public and work places; 5. ban flavored tobacco; 6. Repeat-offenders-penalty should be taken when the tobacco company violate the law of ban tobacco advertising and promotion; and 7. tax on tobacco should be increased to NT 60 dollars.

Keywords: FCTC, 菸草控制框架公約

2-041

以 NGO 為首所打造的無菸環境菸害防制政策推動 – 以董氏基金會為例 How NGOs Confront Tobacco Industry and Press Government to Effectively Enforce the Tobacco Hazards Prevention Act

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董氏基金會為華人地區最早全心投入推動菸害防制的非營利組織，致力於菸害防制的社會倡議，政策

推動、媒體傳播、教育宣導、鼓勵戒菸及國際合作等議題，並結合 100 餘民間團體，以「室內公共及工作場所百分百全面禁菸」為前提，促成菸害防制法之立法、修訂與執行之監督。以三十二年菸害防制的實際經驗，董氏基金會發展出六大行銷策略：(1) 善用名人代言、請託媒體公益協助；(2) 勇於國際聯結，積極相互交流；(3) 取得產官學界支持，推展社會倡議及法案政策；(4) 蒐集各國菸害防制資訊轉換並跟進；(5) 設置「華文戒菸網」、舉辦「戒菸就贏」比賽；(6) 維護民眾免於菸害，提供申訴及解決菸害的重要管道。董氏基金會以民間團體之姿在菸害防制工作上耕耘逾三十年，透過各種不同行銷策略，創造無數菸害防制工作上亮眼的成績。現階段除透過國際發達的資訊、亞太地區拒菸協會、兩岸四地交流與參與，加入與串聯各國力量、共同支援和相互扶持對抗菸害；更依循 FCTC 規範，進一步在臺灣力促修正「菸害防制」相關法令，持續倡導百分百的無菸室內環境、全面禁止菸草產業的廣告促銷及贊助、提高菸稅、菸品容器印製大幅警示圖文並採素面包裝、禁止菸品陳列等。為達成目標，董氏基金會雖僅幾位專職工作人員的小小組織，但持續以小博大，運用現代行銷知識、發展適當行銷組合，與國際接軌，向前邁進。

Keywords: FCTC, 菸草控制框架公約, 菸害防制法, 控菸



议题 (三)

O-Offer help to quit tobacco use

O- 提供戒烟帮助

3-001

浙江省四城市备孕男性吸烟者的戒烟意愿及影响因素分析

徐越

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【目的】探讨备孕人群中男性吸烟者的戒烟意愿及相关影响因素,为找寻该人群有效地戒烟行为促进提供科学依据。

【方法】分别在浙江省绍兴柯桥区、台州路桥区、诸暨市和温岭市等4城市的婚姻登记处,拦截调查计划备孕的男性吸烟者各120人,实际调查555人。

【结果】浙江省四城市备孕男性吸烟率为39.82%,吸烟者中6.88%的吸烟者存在尼古丁高度依赖现象;近期有戒烟意愿的比例为50.73%,戒烟的主要原因依次是:妻子计划生孩子(62.50%)、将来为孩子做榜样(47.70%)、妻子/家人反对(45.22%);备孕男性吸烟者对烟草危害认知程度较低,认知8题以上仅占49.82%;88.75%的备孕男吸烟者的配偶希望丈夫能戒烟;影响因素分析发现:烟草知识知晓程度较低的备孕男性吸烟者戒烟意愿较低(0.46倍);自我健康评估非常好、配偶对丈夫的戒烟意愿强烈的备孕男性吸烟者的戒烟意愿较高,分别是1.84倍和3.33倍。

【结论】备孕男性吸烟者戒烟意愿较一般人群高,可通过加强烟草危害的健康教育宣传和开展妻子介入备孕男性吸烟者戒烟活动以促进其戒烟。

Keywords: 戒烟意愿;吸烟;戒烟;备孕人群

Aknowledgement:

感谢浙江省绍兴柯桥区、台州路桥区、诸暨市、温岭市等4个调查点近20人现场工作人员的辛勤劳动,感谢调查对象的理解和支持。

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3-002

Development of workplace smoking cessation services training program in Thailand

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Although smoking cessation services in the workplace could increase the chance for smoking employees to quit smoking successfully, literature reviews show that workplace health practitioners still lack of skills and confidence for providing smoking cessation services (SC services). The objectives of this study were to develop and implement SC services training program for occupational health nurses, front-line practitioners providing workplace health services in Thailand. The UNDP concept of capacity building development process and self-efficacy enhancement were applied in order to develop the SC services training program. A group of stakeholders were invited to develop the program. The training consisted of both lecture and practice sessions. The program content includes 1) cigarette and health of employee, 2) roles of nurses for providing workplace SC services, 3) principles of SC services (5A) with emphasis on medical and behavioral therapy, 4) smoking cessation counseling for the employee, and 5) development of SC services in the workplace. The practice session includes 1) attentive listening, 2) individual counseling, and 3) group counseling. Two days

training was organized by the stakeholders and the researcher. Fifty occupational health nurses who work in the workplaces located in Bangkok Metropolitan area were recruited as participants for implementation of the training. Changes in knowledge, attitude, and self-efficacy, related to SC services were measured at post test and 3 months after training. The process evaluation illustrated that all of the participants very satisfied with the training. The program improved nurses' attitude toward smoking employee and tobacco control in the workplace, nurses' knowledge and self-efficacy in SC services ($p < 0.00$). The SC services training program was feasible and effective in enhancing the nurses' capacity in providing the workplace SC services.

Keywords: Nurses, Self-efficacy, Smoking cessation services (SC services), Smoking cessation services training program

Acknowledgement:

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3-003

Predictors of making quit attempts among adult smokers in 4 Asia-Pacific countries: Findings from the ITC Australia, China, Korea, and Thailand Surveys

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BACKGROUND: Identifying the predictors of smoking cessation can lead to evidence-based strategies to increase cessation outcomes among smokers. This study was designed to identify individual-level predictors of quitting behaviours of adult smokers in four Asia-Pacific countries (Australia, China, Korea, and Thailand) that have very different histories of tobacco control. We analyzed data on predictors of cessation from the ITC Project surveys to examine the similarity vs. differences in the predictors.

METHOD: In each country, we analyzed longitudinal cohort survey data collected by the ITC Project of representative samples of adult smokers of ITC survey data: the two most recent survey waves in Australia

(2013-2014), China (2012-2015), Korea (2008-2010) and Thailand (2011-2012). Survey logistic regression models were conducted to identify the predictors of subsequent quit attempts.

RESULTS: The percentages reporting having quit intention at the first chosen survey wave (defined as having planning to quit in the next 6 months) in these 4 countries were 36% in Australia, 18% in China, 38% in Korea and 17% in Thailand. The percentages reporting having made at least a quit attempt between the two study-waves in these four countries were 57%, 31%, 58% and 57%, respectively. Having quit intention, previous quit attempts, higher levels of self-efficacy for quitting and health concerns about smoking were positively associated with subsequent quit attempts in all four countries, controlling for demographics and time in sample. Lower levels of perceived addiction were associated with quit attempts among Chinese and Thai smokers, while stronger overall negative opinions about smoking were associated with quit attempt in China and Korea.

CONCLUSIONS: There are similarities and differences in the predictive power of quit intentions and other factors on quit attempts in these four Asia-Pacific countries. Future studies will explore the reasons for these differences.

Keywords: intention to quit, quit attempt, longitudinal study, survey, cross-country comparison

Acknowledgement:

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Reference:

N/A

3-004

Characteristics of female smokers and the predictors of quitting in a clinic based smoking cessation program in Hong Kong

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Objective: This study aimed to explore the characteristics of local female smokers and the predictors of quitting. Design: Retrospective case review.

Subject: 2,222 female smokers who volunteered to come to Tung Wah Group of Hospitals Integrated Centre on Smoking Cessation during the period 01.01.2010-30.06.2013 for quitting smoking. Main outcome measures: Self-reported 7-day point prevalence abstinence rate at week 26 week was taken as the outcome measure

Results: 2,222 cases were analysed. 67.6% were between aged 25-44 years. 50.8% smoke 11-20 cigarettes per day. 54.4% had high FTND scores. Perceived high risk situations were mainly smokers around, pressure (time, work, personal relationship, finance), feeling sad and when arguing with others. Independent predictors of quitting were coexisting mental illness, number of cigarettes smoked per day, time pressure, sad and despair, smokers around, insomnia, perceived importance of quitting.

Conclusion: This study provides information for the service providers to match gender specific interventions. We need to screen for depression during smoking cessation and to offer behavioural treatment to deal with depressed mood and anxiety so as to increase their chance of abstinence apart from medical treatment of nicotine dependence.

Keywords: female, smokers, characteristics, predictors, quitting

Acknowledgement:

1. Dr. Ho Kin Sang
2. Dr. Ching Kam Wing
3. Choi Wah Chi

Reference:

Reference list is too long to attached

3-005

Why some Dentists still Smoke?? A Qualitative Study

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Background: The aim of this study was to assess dentists who were smokers in terms of their reasons to initiate smoking, barriers to quit, perception as a smoker, attitudes towards tobacco cessation counselling, nicotine replacement therapy and tobacco control policies.

Methods: Current Smokers were recruited from the dental community comprising of 10 in each, undergraduate and postgraduate categories. In depth interviews and four focus group discussions were held. These were recorded and various themes were generated depending on the responses.

Results: The initiation of the habit was between 16-18 years for all the participants. The main reasons to continue were due to peer influence and smoking was perceived as a stress buster. The undergraduates were in moderate dependence and low motivation state, while the postgraduates in low dependence and high motivation. The knowledge regarding the ill effects, tobacco cessation counselling and methods to use nicotine replacement therapy also seemed to be inadequate. Most of them also felt they did not require any professional help to quit smoking. Enforcement of tobacco control laws in the institutions and information regarding the various laws was also lacking.

Discussion: Dental professionals play a significant role in identifying smokers, as they may notice intraoral signs earlier than other healthcare professionals. Initiation of the habit from school level needs attention. The negligible attitude towards the habit requires emphasis of the hazards, both health and economic at each level of the dental curriculum. The personal behaviour change needs to be addressed, along with tobacco cessation counselling, to help dentists to play as role models for the community.

Keywords: dentist, smoking, qualitative study

Aknowledgement:

1. Dr.P.D.Madankumar
2. Dr.Sadhana Kandavel

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3-006

Success rate of combined tobacco cessation counseling in the line of treatment in patients with non-communicable diseases.

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BACKGROUND: Non-communicable diseases (NCDs) result in enormous burdens for either low or high income country. Tobacco use is considerable risk factor of NCDs with poor prognosis. To strengthen multidisciplinary staffs, THPAAT smoking-cessation initiative was designed as one-stop service in existing NCDs clinics, including chronic obstructive pulmonary disease (COPD), cardiovascular disease (CVD), stroke (ST), diabetes mellitus (DM). All hospitals were invited to register with THPAAT on voluntary basis. The registered hospitals received free-of-charge 4 workshops / year, covering counseling, implementing smoking cessation strategies, and techniques in daily practice.

MATERIALS AND MEDTHODS: To evaluate the effectiveness of smoking-cessation clinics, we conducted a survey on all registered hospitals during 18-month period (November 2014 - April 2016). Numbers of the patients and frequency of referral to smoking cessation team were collected. Clinical abstinence of tobacco for 6 months or longer was considered successful smoking quit.

RESULTS: All 29 registered general hospitals returned the questionnaires. There were 180,334 patients enrolled, including 7,054 (3.9%) COPD; 101,993 (56.6 %) CVD; 7,775 (4.3 %) ST; and 63,512 (35.2 %) DM cases. Only 11,097 patients (7.0%) of total NCD patients reported tobacco dependence. A total of 2,980 cases (26.9%) were transferred to smoking cessation team. The overall success rate of smoking quit was 35%. Subgroup analysis revealed tobacco dependence rate as follow: 15% in COPD, 6% in CVD, 10% in ST, and 6% in DM group. The frequency of consultation for smoking cessation were 60% in COPD, 24% in CVD, 32% in ST, 22% in DM group. Success rate of smoking quit were 54% in COPD, 30% in CVD, 36% in ST, 28% in DM group.

DISCUSSION: Our data suggest that integrating smoking cessation unit into every single NCD clinic is essential for improving patients' quality of life and cost less national health expenditures during the next decades.

Keywords: Tobacco cessation team, NCDs, COPD, Cardiovascular diseases, Stroke, DM

Aknowledgement:

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3-007

Comparison of the Effectiveness of Thailand National Quitline

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Thailand National Quitline (TNQ) provides reactive and proactive counseling without nicotine replacement therapy as well as information to callers to help persons quit smoking. TNQ began providing service on 2009. Since 2011, the TNQ call system and data-base system have been continuously developed for service improvement. Therefore, the purpose of this study was to compare the effectiveness of the TNQ service before and after its development. Analysis of retrospective data for callers to the TNQ from 1) September 2009 to July 2010, and 2) February to July 2013 randomly selected. There were 366 smokers in period 1 and 194 smokers in period 2. In both periods, the majorities of participants were males, and aged between 25 and 44 years. Data were analyzed using Chi-square, t-Test, and binary logistic regression. A p-value < 0.05 was considered statistically significant. Results of Chi-square revealed that the smoking characteristics included amount of cigarettes, duration of smoked, and nicotine dependence level were not significantly different. Compared with participants in both periods, callers in the developed service were twice as likely to achieve continuous abstinence rates at 6 months as those calling in first period (50% vs. 32%, odd ratio 2.07; confidence interval 1.45-2.96, p<0.05). However, a difference in significance did not show on t-Test analysis of caller's satisfaction with the TNQ service in period 1 and 2 (4.70±0.65 and 4.74±0.53). In conclusion, the developed TNQ service was effective for helping smokers were able to change their behaviors and attitudes after receiving quit smoking advice. However, the body still needed to work more on reaching out to people as not many people knew about the service or had access to it.

Keywords: Effectiveness, Quitline

3-009

The effects of brief smoking cessation education program and social network intervention in Thai industrial workers

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Industrial workers are at a greater risk of exposure to health hazard environments than other people. If workers smoke, the risk of health problems could be increased. The objective of this quasi-experimental study was to examine the effects of a brief smoking cessation education program and social network intervention. Male smokers working in 2 roofing products manufacturing plants with intention to quit were recruited. The experimental group (n=25) received 2 sessions of the brief smoking cessation education along with social network intervention. In the first session, health information linked to the level of exhaled carbonmonoxide of each individual was provided. Participants also set their quit date and were prepared on how to manage nicotine withdrawal symptoms. Two weeks later, group members were asked to share experiences on their management of smoking withdrawal in the second session. The Line Application was used to follow-up the participants during their cessation period for 6 weeks. The contents and number of messages were associated with severity of nicotine withdrawal. Group chat between worker and researcher was also set to help participants manage withdrawal symptoms. The control group (n=27) was measured for exhaled carbonmonoxide and received the self-help material for smoking cessation. Participants were then measured on number of cigarettes smoked per day, nicotine dependence level and exhaled carbon monoxide level at posttest and at 1 month follow-up. Results reveal that after the intervention, the experimental group had number of cigarettes smoked per day, nicotine dependence level and exhaled carbon monoxide level lower than the pre-test and lower than those of the control group ($p < .05$). Finding suggested that the brief smoking cessation education program with social network intervention could help the industrial workers modify their smoking behavior and quit smoking. This program could be applied to other worker populations.

Keywords: smoking cessation, social network, industrial workers

3-013

Predicting Factors of Quit Attempt in Schizophrenic Smokers

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The purpose of this cross-sectional study was to identify the predicting factors of quit attempt in schizophrenia smokers. A multistage random sampling was used in all regions of Thailand. Six psychiatric hospitals were randomly selected, and 400 schizophrenic smokers were recruited by the purposive sampling technique. Data were collected by using the questionnaires, i.e., the Household smoker scale, the Intensity of smoking

cessation intervention scale, the Reasons for Quitting scale (RFQ), the Readiness to Quit Ladder, the Alcohol Use Disorders Identification Test (AUDIT), the Fagerstrom Test for Nicotine Dependence (FTND), the Positive symptom rating scale (PSRS), the Negative symptom assessment (NSA-4), the Calgary Depression Scale for Schizophrenia (CDSS), and the Quit attempt form, with reliability ranging from 0.72 to 1.00, and S-CVI ranging from 0.86 to 1.00. Data were analyzed by using descriptive statistic and Multiple regression analysis, with statistical level at $\alpha = 0.05$. The results revealed that around 40% of the subjects were 30-39 years old (38.30%). The age of subjects when they began smoking ranged from 8-45 years old. Nearly half of the subjects had smoked 1-10 cigarettes per day (49.30%). Moreover, four of nine variables, readiness to quit ($r = .64$; $p < .01$), nicotine dependence ($r = -.28$; $p < .01$), motivation to quit ($r = .26$; $p < .01$), and intensity of smoking cessation intervention ($r = .16$; $p < .01$) – had a significant correlated to quit attempt in schizophrenia smokers. The model summary illustrates that, from the predictors could explained variance of quit attempt and accounted for 47.30 ($R^2 = .473$). Mental health care providers should be aware of the significant effects of readiness to quit, nicotine dependence, motivation to quit, and intensity of smoking cessation intervention on Quit attempt, and develop appropriate smoking cessation interventions to promote smoking cessation in psychiatric smokers.

Keywords: Predicting factors, Quit attempt, Schizophrenic smokers

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3-014

Smoking Cessation Practice among Thai Nurses: A national Survey

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Abstract Background: World Health Organization recommends health care providers to play a key role in fighting tobacco use. Nurses are on the front line in promoting and supporting smoking cessation. However, knowledge about patient smoking cessation provided by Thai nurses is limited.

Objectives: To describe frequency of Thai nurses' delivery smoking cessation interventions and to determine factors associated with the 5 A's (ask, advise, assess, assist, arrange)

Design: A descriptive cross sectional design was used.

Method: The Helping Smoking Quit Questionnaire designed by Sarna and colleagues was used as a tool. The

survey was translated to Thai language. Participants were Thai nurses from 203 hospitals under the Ministry of Public Health (MPH). The surveys were mailed to 1579 nurses, and 706 questionnaires (44% response rate) were returned.

Results: Sixty-six percent of nurses asked about tobacco use, 43.3% advice about smoking cessation whereas 26.7% assessed with cessation, 21.1% assisted patients with smoking cessation, and 22% arranged patients to a smoking cessation clinic service. Nevertheless, only 6% of nurses advised patients to use the quitline. About 22.7% of nurses knew smoking cessation guidelines for health professionals, and 29 % engaged in smoking cessation training. Advanced practice nurses/ case management nurses were more likely to report delivery of all aspects of interventions including asking about tobacco use (OR = 1.97; 95% CI 1.39-2.86), advising (OR= 3.21; 95% CI 2.28-4.51), assessing (OR = 4.72; 95% CI 3.28-6.77), assisting with cessation (OR = 5.25; 95% CI 3.56-7.45), and arranging patients to a smoking cessation clinic service (OR= 4.20; 95% CI= 2.26-7.79).

Conclusion: The minority of nurses provide smoking cessation intervention. Therefore, training and providing guidelines are crucial to facilitate practice nurses to promote smoking cessation for the patients. Keyword: Smoking cessation, Thai nurse, Practice, 5A's

Keywords: Smoking cessation, Thai nurses, Practice, 5A's

3-015

Starting From Scratch To The Largest Nationwide Cessation Network Using A Franchise Approach

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Background: In 2008, the National Capacity Assessment for Tobacco Control was conducted in Thailand by World Health Organization (WHO). It was clearly stated that Thailand does not have national systematic, smoking cessation service, integrated into the primary care system. Moreover, a population-level treatment system is lacking. Establishing the cessation service delivery network was promptly needed.

Methods: A non-profit franchise approach was used to develop the smoking cessation service network. The service chain under the brand of "Fah-Sai (clean sky)" clinic, supporting by Thai Health Professional Alliance Against Tobacco (ThaiPAT), and Thai Health Foundation, was firstly introduced in 2011. The franchise program offers free-of-charge training, medications, exhaled CO monitors, performance-based incentives, and awarding to clinics with outstanding performance. In return, all clinics need to collect and submit data to the program. Routine site monitoring and auditing visits were done by the franchise team.

Results: During the first year of franchise operation, there were 5 clinics in Bangkok metropolitan area that participate the program. Total of 1,212 smokers were treated. The successful quit rate (CAR) at 6 months was 6.1%. The number of franchised clinics has constantly expanded, in accordance with interventions & campaigns that were implemented. Number of patients and CAR also significantly increased to 2,287, 6,837, 14,011 patients with CAR of 25.2%, 28.3%, and 34.5% in the respective year. More strikingly, in 2015, there were total of 257,082 patients from 342 clinics nationwide, both healthy, and NCD patients were treated. CAR at 6-month in 2015 went up to 45.1%, and 38.6% for those without NCD and with NCD, respectively.

Conclusions: In developing countries, like Thailand, non-profit franchise approach, funding by the civil society organization, could be helpful in both expanding the service network, as well as improving the quality of care.

Keywords: smoking cessation service, network, franchise approach, CAR, NCD

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3-016

Patterns of Smoking and Successful Cessation: An Analysis of the Largest Database in Thailand

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Background: Since 2011, national smoking cessation service system was developed through a non-profit franchise program, called “Fah-Sai” clinic, with the support of Thai Health Professional Alliance Against Tobacco (ThaiPAT), and Thai Health Promotion Foundation. All clinics entering the program have to submit database to the program administration. Currently, this program becomes the largest smoking cessation delivery network & database in Thailand.

Methods: This is the retrospective analysis of preliminary data retrieved from “Fah-Sai” clinic program. Demographic data & smoking patterns of all smokers received the service in all franchised clinics in 2015 were analysed.

Results: Total of 28,363 smokers from 342 clinics nationwide have participated the program in 2015. Mean age was 43 years. 94% of them were male. About 60% of them used alcohol concomitantly. 72% of them smoked factory-made cigarettes. Average number of cigarette smoked per day was 13, and duration of

smoking was 23 years. Median time to first cigarette was 14 minutes. It was found that smoking patterns significantly affected the success of quitting. For every increasing number of cigarette smoked per day, the success rate drops by 0.5%. Time to first cigarette (TTFC) is also associated with successful cessation. Every 1 hour delay in smoking the first cigarette helps improve the success by 0.02%. Moreover, quit rate increases by 0.4% for every 1 additional year of smoking duration. Most interestingly, the results of smoking cessation services will be best if physicians actively participate the team (RR 1.0 VS 0.8; 95%CI 0.69-0.93: p=0.003). **Conclusions:** According to Thailand national database of cessation service, smoking patterns, particularly number of cigarette smoked per day, TTFC, and duration of smoking, are important risk factors to determine success of quitting. More importantly, the result will be best if physicians actively take part of the cessation service too.

Keywords: Patterns of smoking, success, cessation, risk factors

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3-017

Randomized controlled trial of the effect of the symptom management program on smoking cessation in smokers with chronic obstructive pulmonary disease

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Background: Cigarette smoking is a chronic relapsing disorder with secondary complications including Chronic obstructive pulmonary disease (COPD). The most important risk factor for the development of COPD is cigarette smoking, with 80-90% of deaths from COPD feature to smoking. Therefore, smoking cessation and disease management is the most effective means of slowing the progress of COPD. The purpose of this study was to examine the effect of the symptom management program on smoking cessation in Thai smokers with COPD.

Method: A two-group randomized controlled trial with a pretest-posttest design was used. A total of sixty-six COPD patients' smokers were included. Sixty-six smokers with COPD of all ages and both genders were randomly assigned to either an experimental group or a control group. Participants in the experimental group participated in the program through five sessions of group discussion, education and training about smoking

cessation method and disease management, and two weekly sessions of telephonic counseling. The control group received conventional care. Smoking cessation was measured through the smoking cessation record form.

Result: Twelve weeks after participated in the program, the experimental group was found to have quit smoking 66.67 %, and the control group was found to have quit smoking 6.06 %. The results revealed that the experimental group was found to have significantly higher in smoking cessation than the control group ($\chi^2 = 22.091, p < 0.001$).

Conclusion: The findings of this study support the symptom management program is effective for increasing smoking cessation in smokers with COPD.

Keywords: symptom management program, chronic obstructive pulmonary disease, smoking cessation

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3-021

Community Based Tobacco Cessation Programme among Women in Mumbai, India

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Background: Globally, the tobacco epidemic kills nearly 6 million people annually. Consumption of tobacco products has been increasing in low and middle income countries. Tobacco is addictive; hence, tobacco users need support in quitting.

Aims: To provide tobacco cessation services to women in community to help them quit tobacco and identify factors associated with tobacco quitting. The overall goal was to document the processes involved so as to establish a model tobacco cessation programme which could be replicated elsewhere.

Methods: This is a community based tobacco cessation programme conducted over a period of one year in a low socio-economic area of Mumbai, India. Initial survey showed that 14.92% women residing here consumed tobacco in some form or the other. They were interviewed to record the socio-demographic and risk factor history followed by interactive health education session. This was followed by three interventions conducted at three monthly intervals and a post intervention follow-up. The interventions were in the form of health education, games and counseling sessions.

Results: The average compliance to participation in programme in the four rounds was 93.31%. The mean age at initiation of tobacco was 17.31 years. Use of tobacco among family members and in the community were important reasons for initiating tobacco while addiction to tobacco was an important reason for continuation of tobacco use. The quit rate at the end of the cessation programme was 33.46%. The multivariate logistic regression analysis shows that younger age and consumption of tobacco only at home were significantly associated with tobacco quitting.

Conclusions: Changing the cultural norms associated with smokeless tobacco use in the community and providing cessation services are important measures in preventing initiation and continuation of tobacco among women in India.

Keywords: health education, counseling, tobacco cessation, tobacco quit rates, women

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3-022

Active Referral to Smoking Cessation Services in Hong Kong “Quit to Win” Contest

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According to Hong Kong’s latest Thematic Household Survey Report, quit intention of smokers was low (37%) and only 30.8% have ever tried giving up smoking. Among the current smokers who were aware of the smoking cessation (SC) services, only 16.1% had tried the SC services. In view of this, Hong Kong Council on Smoking and Health (COSH) has introduced the “Quit to Win” Contest since 2009 to provide a community platform for SC, increase the quit attempt and use of SC services for hardcore smokers by prizes and creating a positive social atmosphere for SC. From June to September 2015, 35 community-based smoke-free promotion activities were organized with the 15 district organizations and 66 recruitment sessions were held to recruit smokers to join the contest. Totally 1,306 smokers were recruited in which 1,266 consented to join the randomized controlled trial study. 402 participants received active referral to SC services with a referral card and a health warning leaflet (intervention Group A). 416 participants received a health warning leaflet (intervention Group B). Both groups received brief SC advice using AWARD model (Ask, Warn, Advise, Refer and Do-it-again). 408 participants received general advice with a self-help booklet (control

Group C). Those joined the ambassador group with special prizes (travel coupons) and did not consent granted were excluded from the trial. The contest have attracted a large numbers of smokers to try to quit and promote the smoke-free messages to local community across the territory. Using intention-to-treat analysis, the self-reported 7-days point prevalence abstinence at 3 months follow-up was 14.4%. Group A (18.9%) had a significantly higher quit rate than the Group B (8.9%) and Group C (14.0%). The results show that the active referral combining brief advice can effectively motivate more smokers to quit smoking. The ambassador group had a self-reported quit rate of 23.9%.

Keywords: Quit to Win, smoking cessation, active referral, quit contest, smoke-free community

3-023

Train to Quit: training of action tendencies and selective inhibition in Chinese smokers over the internet

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Effective smoking cessation aid are urgently needed in China. Automatically activated action tendencies, and positive memory associations toward smoking-related cues (i.e., cognitive biases) have been found in smokers, and have been related to smoking. Cognitive Bias Modification (CBM) might be potential smoking cessation aid (e.g., Machulska et al., 2016). Here we will test the effects of two types of CBM: action tendency re-training aimed at training smokers to avoid smoking-related cues, and selective inhibition training aimed at training smokers to devalue smoking-related cues. The study describe in the protocol will test the effects of the two types of CBM over the internet in a randomized controlled trial (RCT) with a 2×2 factorial design. Chinese adult smokers, who want to quit will be recruited. Participants will be randomly assigned to one of four CBM conditions and are requested to finish 9 sessions of training after quit day. Besides, brief motivational support aids will be offered before quit day and each training session. Effects on the primary outcome measure, successful quitting, are tested halfway-treatment, post-treatment, at 3-month and 6-month follow-up measure. Halfway-treatment and post-treatment measure test the change in secondary outcome measure: action tendencies, positive memory associations, cigarette consumption, craving, and nicotine dependence. We also will test interaction effects between the CBM conditions and possible moderators (action tendencies and positive memory associations at pre-treatment measure, heavy/light smoker, participants are trained successfully/not), and mediators (change in action tendencies and positive memory associations) of the primary outcome measure. This RCT is the first to test the effects of a combined web-based CBM treatment in

smokers. Results will extend our current knowledge to understand and prevent smoking behaviors, especially in China where empirically validated smoking cessation aid are lacking.

Keywords: Cognitive Bias Modification, Smoking cessation intervention, E-health intervention, Smokers, Action tendencies, Implicit memory associations, Selective inhibition, Randomized clinical trial

3-024

Effects of the smoking cessation program for quit smoking among smokers at Bangkaew subdistrict, Muang Angthong district, Angthong Province

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The purpose of this quasi – experimental study was to examine the effects of self-efficacy theory and social support – based smoking cessation program for quit smoking among current smokers. The samples comprised of 68 current smokers living at Bangkaew subdistrict, Muang Angthong district, Angthong Province. Simple random sampling was used to select the control group and the experimental group. There were equal sample in the two groups, 34 current smokers. The study was conducted over a period of 10 weeks with an intervention period of 6 weeks and a follow up period of 4 weeks. Interview data were collected by questionnaires at three phases, pre-intervention phase, post intervention phase on the 6th and follow up phase on the 10th week. Statistical analysis was performed by using descriptive statistics and inferential statistics such as Paired Samples t-test, Independent t-test and Repeated measures ANOVA. The results revealed that after the smoking cessation program, the experimental group, 26 current smokers completed participate over the intervention program, had significantly increased in knowledge and perceived on self-efficacy to quit smoking at post intervention on the 6th week and 10th week than pre-intervention phase ($p < 0.001$). Over the three phases for data collection, the experimental group had got a score of outcome expectation to quit smoking at high level. So, the study did not found a significantly changed on outcome expectation to quit smoking ($p > 0.05$). In addition, the experimental group had significantly higher score of knowledge, perceived on self-efficacy and outcome expectation to quit smoking than the control group at post intervention on the 6th week and 10th week ($p > .05$), except at the pre-intervention phase ($p > 0.05$). After completing the intervention program on the 6th week, 10 in 26 current smokers of experimental group were able to stop smoking for 4 weeks, at 38.5 percent.

Keywords: Smoking cessation program, Self Efficacy Theory, Social Support, Quit smoking

3-025

Health providers' adherence to a tobacco use treatment guidelines in community health centers in Vietnam: impact of a tobacco cessation program

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Background: There is substantial evidence that health providers can help smokers quit by adhering to WHO endorsed tobacco use treatment guidelines (TUTG) that recommend asking all patients about tobacco use, advising them to quit, assessing readiness, and offering cessation assistance (4As). We are conducting a NIH funded randomized controlled trial comparing two system-level strategies for implementing TUTG in commune health centers (CHCs) in Vietnam. This paper presents data on the effect of the intervention on provider practice patterns and attitudes towards TUTG.

Methods: We examined changes in adherence to TUTG before and 6 months after the intervention with 99 health providers working in 18 CHCs in Vietnam. Adherence to each of the 4As was measured using a 5-point likert scale ranging from 1-none (did not ask any patients in past month if they smoke), to 5-all or most of patients. Response scales of questions measuring attitudes and self-efficacy range from 1-strongly disagree to 4-strongly agree. Factor analysis was used to form two scales measuring attitudes and self-efficacy.

Results: The mean adherence level to each of the TUTG increased significantly: Asking tobacco use increased from 1.75 ± 0.64 to 3.15 ± 1.21 ; advising to quit from 1.75 ± 0.70 to 3.09 ± 1.36 ; assessing readiness to quit from 1.46 ± 0.64 to 2.96 ± 1.30 ; assisting (offer brief counseling) from 1.26 ± 0.57 to 2.71 ± 1.37 . Perceived barriers to treating tobacco use decreased significantly (e.g. lack of knowledge). Self-efficacy and attitudes towards TUTG improved significantly. Increased adherence to TUTG was associated with male gender, physician status, higher education, and positive attitudes towards TUTG.

Conclusion: The implementation strategies were effective in improving health providers' adherence to TUTG in CHCs in Vietnam. Combining training with system changes can close knowledge gaps and reduce perceived barriers to treatment.

Keywords: health providers, adherence, tobacco use treatment, tobacco cessation, Vietnam

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3-026

中药穴位贴敷与心理疏导结合戒烟疗法临床观察

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【摘要】

【目的】总结中药穴位贴敷与心理疏导结合戒烟疗法的临床疗效，探讨结合疗法的优势和发展前景。

【方法】通过对 900 例吸烟成瘾患者的戒烟过程进行观察（其中 100 例以心理干预单一意志戒烟法，另 800 例采用以中药穴位贴敷为主结合心理疏导的综合戒烟法），总结和分析戒烟过程中戒断症状的严重程度和戒断成功率。

【结果】治疗组总戒断成功率为 83%，明显高于对照组之 16%，两组比较差异有统计学意义（ $P < 0.01$ ）。

【结论】中药穴位贴敷与心理疏导结合戒烟疗法疗效佳，疗程短，尼古丁依赖消失，且不易复发。中药穴位贴敷与心理疏导结合戒烟疗法具有其自身的优势，应在临床得到推广和更深的研究。

Keywords: 戒烟, 中药, 穴位贴敷, 心理疏导, 综合疗法

3-027

“Group Intervention method to quit” promote the use and effect evaluation

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“Group Intervention method to quit” promote the use and effect evaluation PENG Nan, LIU Xi, ZHAO Yanting, YE Xiaoge (Chengdu Center for Disease Control and Prevention Chengdu 610041, China)
Abstract Purpose Exploration “group intervention method to quit” promote the use of smokers in the community, and evaluate the intervention effect. Methods “Group Intervention method to quit” is the Chinese Center for Disease Control and Prevention’s chief health education specialist Professor Tian Benchun proposed a comprehensive tobacco control health promotion behavior patterns, This method uses a comprehensive approach to education and a variety of one-way two-way communication, mass communication methods such as education and partnership. Through community mobilization has recruited 104 smoker, In three batches “group intervention method to quit” training, Three-month

and six- month follow-up surveys were engaged after intervention to evaluate the effectiveness of the training. Results Six months after the cessation rate remained at 35.7% of the participants. The numbers of daily cigarette consumption in the intervention group decreased by 7.8 cigarettes ,A general increase student otivation to quit, self-efficacy has improved significantly. Understanding the causes of the dangers of smoking and lack of willpower are student self-summary of quitting success and failure of the most important. Logistic regression analysis showed that the factors influencing smoking cessation at six-month follow-up could be associated with diseases related to smoking, the change in self-efficacy scores and home smoke -free policy. Conclusion “Smoking cessation group intervention” approach is an effective method, it is worth in community outreach. Key words: quit smoking intervention group Project: ADRA (CHINA) funded projects About the author: Peng Nan, deputy chief physician of undergraduate major in health education and health promotion

Keywords: quit smoking, intervention group

3-028

Use of a Smartphone App as an Adjunct to a Residential Stop Smoking Program

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Multiple approaches are used to help people stop smoking, with varying degrees of success. Our residential tobacco dependence treatment program, Smoke-Free Life, at the St. Helena Lifestyle Medicine Institute in California, started in 1969. Non-medication components of the St. Helena residential program include behavioral counseling, educational sessions, and understanding the potential role of spirituality, regular exercise, and good nutrition. Teaching the individual attempting to stop smoking how to use medications to suppress nicotine withdrawal symptoms , which can be intense, long-lasting, and the cause of dysfunctional behavior and serious discomfort, is crucial to achieving successful tobacco abstinence. A report describing the outcomes of the patient-centered approach to helping individuals stop smoking in the St. Helena program has been published.* 305 smokers, who participated in the 1 week residential program over a 3 year period, had a 7-day point prevalence tobacco abstinence rate at 1 year of 57%. QUIT RIGHT, a stop smoking app for smartphones we developed with some colleagues, became available in June 2015. This was offered as an option for attendees of the St. Helena program. Eighteen individuals participated in our

Smoke-Free Life program between July 2015 and January 2016. Eleven (61%) had not smoked or used any tobacco during the 6 months following the program. Three individuals acknowledged that they were smoking at 6 months, and we were not able to contact 4 individuals at 6 months. The 4 individuals we could not contact were considered to have returned to smoking. Ten (55.5%) used the QUIT RIGHT app after completing the 1 week program. Eight (80%) of those who used the app were abstinent from tobacco at 6 months. Three (37.5%) of those who did not use the App were tobacco abstinent at 6 months. This preliminary report suggests that a stop smoking app for smartphones can assist individuals who want to eliminate the use of tobacco.

Keywords: Smartphone, Stop Smoking, Residential, Tobacco Abstinence

Reference:

*Mayo Clinic Proceedings 2013; 88:970-976.

3-029

The potential of automated tailoring of smoking cessation assistance: The case of the QuitCoach

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Effective smoking cessation services range from face-to-face counselling, pharmacotherapy, telephone/Quitline services to computer-assisted automated cessation assistance. All can play useful roles in providing a comprehensive range of services, with intensity of help triaged to smoker needs. Computer tailored personalised advice programs can be delivered as blocks of advice and/or as streams of messages to phones or other devices. The QuitCoach program (www.quitcoach.org.au) is a demonstrably effective web-based automated tailored advice program, which has the capacity to do both. It is designed to help smokers from any point in the behaviour change cycle: from any thoughts of change to consolidating a new smoke-free lifestyle. The QuitCoach has undergone continual improvement based on both empirical evidence and the tenets of CEOS theory, has become even more effective. The tailored advice provides a guide to help the quitter with strategies and ways to maintain motivation, while the text messaging component provides regular reminders to help keep the person alert to temptations to relapse and remind them of strategies to cope. This paper reviews research demonstrating the effectiveness of automated programs in general, and on the QuitCoach in particular. These programs can be used in conjunction with quit smoking medication and, when used this way, have an additive effect. In countries with limited

resources, but high levels of basic literacy, programs like the QuitCoach can play a significant role in helping smokers quit. Ideally they should be part of a more integrated set of supports, including provision of Quitlines and some face to face programs targeted at those who need more than the average amount of support.

Keywords: smoking cessation, web-based, counselling, QuitCoach

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3-030

Cigarette cessation of Buddhist monks done in PRIEST Hospital, Bangkok, Thailand

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Though the Prevalence of cigarette smoking among Thai Buddhist monks have been on the decline from 90% ten years ago to about 50% five years ago, data from the Out-patient registration of the PRIEST Hospital between BE 2546 and BE 2547 (2013-2014) showed that about 30% (18,000 of 59,000 sick monks) reported being past or present smokers. This study described the quit success rate of the program implemented in 2015 (between January and September) 197 smokers voluntarily enrolled into the NON-SMOKING program In summary, 17 of those 197volunteers (about 8%) could quit smoking Key strategies in the PRIEST Hospital included: 1) The use of Carbon monoxide breath testing device (carbon monoxide monitors) to help objectively assess the success outcome of the program in addition to self reporting. 2) Intense mass campaign for the recruitment of participants were done in May which is the month of the World NO-smoking Day 3) Multi-disciplinary team approach the team members included a psychologist, a pharmacist, registered nurses, and various medical physicians led by a dentist to facilitate this program using WHO 5A's Clinical practice guideline. (This program was supported by Thai Health Promotion Foundation Fund (Thai Dentists for NO Smoking Working Group # 6 in 2014-2015)

Keywords: Cigarette cessation, Quit smoking in Buddhist monks

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3-031

Tobacco cessation clinic in Nayoong hospital, Nayoong district, Udon-thani, Thailand

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This study 1) described the key role of each multi-health professional team members at the sub-district level (smallest health service unit) and 2) showed the net outcome of the team effort using WHO 3A's Clinical practice guideline as well as associated factors to those outcome In 2015 A survey in Nayoong District showed 107 self-reported past or present smokers. Those who wished to quit smoking were referred to smoking cessation clinic in Nayoong Hospital, related history taking and face-to-face interview (Ask& ASSESS) were performed either by a registered Nurse, a Pharmacist or a Traditional doctor and according to the consent of an individual, s/he would be referred to receive mouth cleaning performed by a dental nurse together with a relevant choice to quit smoking (Cold turkey or gradually quit). Gradually quit measures included having Little ironweed spray (locally produced in the Pharmacy lab of Nayoong Hospital) or using available commercial Nicotine gum. One-week follow-up were done for all participants by each team member during the first month after their first consent. After six weeks, 8 of 18 COPD patients reported quit smoking Initial interviews showed main reasons to quit were: health-related symptoms, e.g., coughing reduction.; socio-economic factors were being separated while sleeping, bad body odor while socialization were getting better, increased saving for domestic expenses were also noted. Long-termed effect (three, six, 12, 18 and 24 months, of this program in each NCD patient category will be further monitored, analyzed, and reported.

Keywords: Tobacco cessation clinic, Little ironweed

Aknowledgement:

1. Tobacco Control Research and Knowledge Management

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[2] Thai Health Promotion Foundation

3-032

Supply and demand factors influencing adherence to tobacco use treatment guidelines among health care providers working in community health centers in Vietnam

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Background: The Preventive Health Service Guideline on Treating Tobacco Use and Dependence is found to be evidence-based and highly cost-effective but its recommended treatments are underused by smokers and health providers. The purpose of study was to examine the supply-and-demand factors associated with adherence to tobacco use treatment guidelines (TUTGs) of health providers in Vietnam.

Method: The present paper used endline survey data with 24 health providers at 8 community health centers (CHCs) and 396 current smokers. Data were collected immediately after the smokers had completed a primary care visit under an ongoing NIH-funded randomized controlled trial comparing two system-level strategies for implementing TUTGs in CHCs.

Results: The smokers reported medium to high levels of health provider's adherence to each of the TUTGs: 73.4%, 70.5%, 60.3% and 49.4%, for being asked about tobacco use, advised to quit, assessed for readiness to quit, and assisted, respectively. Multiple logistic regressions showed that dual use of cigarettes and water pipe was a key factor determining health providers' likelihood of advising, assessing and assisting. Higher education of patients was associated with higher rates of being asked, advised and assessed. Patients who had attempted to quit in last 12 months had greater odds of being asked, assessed and assisted, and older age was associated with higher levels of being assisted. Among supply factors, physician status and health providers' age were the key factors associated with providers' adherence to TUTGs.

Conclusion: Our study provides evidence that both demand and supply factors affect the adherence to TUTGs of health providers in CHCs. Dual user, higher education levels in patients and physician status were the most important factors that are positively associated with health providers' adherence to TUTGs. Improvement of these supply and demand factors could markedly increase providers' adherence to TUTGs in Vietnam.

Keywords: supply and demand, health providers, adherence, tobacco use treatment, community health centers, Vietnam

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3-033

The Impact of Medicaid Coverage for Tobacco Cessation Treatment on Smoking AMONG Pregnant Women and Birth weight

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Introduction: Smoking prevalence is 50 percentages higher in Medicaid enrollees than in the total population in the United States. Pregnant women on Medicaid are 2.5 times more likely to smoke than general population. To reduce smoking in pregnancy in low income group, Medicaid has covered tobacco cessation treatment in the United States since 1996. However, data on its effectiveness is sparse.

Aim: The current study is aim to evaluate the impact of Medicaid cessation coverage on smoking prevalence before, during and after pregnancy; birth weight outcomes; quit rates during pregnancy; postpartum relapse rates and maintained abstinence postpartum among pregnant women who were registered for Medicaid.

Methods: We analysed cross-sectional data from Pregnancy Risk Assessment and Monitoring System (PRAMS) in eleven states from 1997 to 2005. We used the difference-in-difference (DID) method to investigate the impact of Medicaid cessation coverage on smoking behavior and birth outcomes. We controlled for tobacco taxation and smoke-free indoor laws in our model.

Results: We showed that smoking prevalence before pregnancy was 3.9 percentage points lower in states that provided Medicaid cessation treatment than states that did not. However, Medicaid cessation coverage did not have a significant impact on maintained abstinence postpartum or on the relapse rate after delivery.

Conclusion: Our results suggest that access to Medicaid coverage for tobacco cessation treatment significantly decreases smoking prevalence before pregnancy, but not during and after pregnancy. Medicaid cessation program has the importance of encouraging and supporting quitting before pregnancy but has no significant impact on postpartum abstinence and the relapse rate. To maintain smoking abstinence after delivery, further postpartum programs (such as quitline) should be incorporated and enhanced for women after pregnancy.

Keywords: Smoking prevalence; Medicaid tobacco cessation coverage; pregnant women; health economics

3-034

Nurses' network in tobacco control: A 10-year experience from Thailand

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Nurses are widely recognized as health care providers that have significant roles in tobacco control. Beginning in 2005, the Nurses Association of Thailand develop the nurses' network in tobacco control with the support by Thai Health Promotion Foundation. The network has a multifaceted effort to reduce the tobacco use, with emphasis in enhancing nurses' roles nationwide. The aim of this study is to describe "NURSE" strategies to improve tobacco control. The NURSE (Network expanding, Undergrad curriculum, Routine practice, Setting approach, Enabling excellence through evidence) strategies were developed by a working group of key nurse professionals from various settings. In 2015, the working group is composed of professional representatives from nursing council, nurses association, nursing schools, nursing administrative office, hospitals, and communities. More than 90,000 nurses (accounted for > 60% of Thai registered nurses) are network members. Since 2005, tobacco control has improved in different areas such as increasing nurses' awareness and practices in tobacco control, training professionals on smoking cessation interventions and integrating tobacco control in nursing curricula. The nurses' network has produced and disseminated various materials, including clinical practice and best practice guidelines, implemented smoking cessation programs, nurse-led tobacco control research, and organized seminars and training sessions on smoking cessation measures in various settings including hospitals, communities, and correctional facilities. The next challenge is to include tobacco control in graduate education and ensure effective smoking cessation services by Thai nurses. While some areas of tobacco control within nursing services still require significant improvement, the network initiatives promote successful tobacco control activities by Thai nurses.

Keywords: Nurse, Network, Tobacco Control

Acknowledgement:

Thai Health Promotion Foundation

3-035

Effects of tobacco control in Thai correctional facilities

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Prevalence of tobacco use is high among low socioeconomic status populations including many of those in correctional facilities. Smoking rates among Thai inmates have been estimated to be as high as 75%. Most facilities do not have implemented tobacco control policies and the possession of tobacco products by inmates currently is not prohibited. The purpose of this study was to examine the effect of the smoke-free correctional facilities program on smoking cessation practices among smoking inmates and promoting policies in support of smoke-free workplaces. Using community-based participatory research (CBPR) methods, the smoke-free correctional facilities program mobilized a network of correctional facilities and academic partners to implement smoking cessation activities, adoption of evidence-based smoking cessation programs, and promotion of smoke-free environment. Ten correctional facilities participated in the smoke-free correctional facilities program. Collaborators implemented activities that supported the promotion of the smoking cessation and smoke-free workplaces policy and sponsored yearly trainings, including tobacco control conferences. From 2015 to 2016, there were 750 smokers receiving cessation services through the smoke-free correctional facilities program and 6 month abstinence rate of inmates, as outcomes of project, was 34.4%. The smoke-free correctional facilities program demonstrates the feasibility of developing a successful and sustainable community-based tobacco control program model that enlists the participation of academic researchers, organizations, and health care providers as partners to promote tobacco control in highly prevalence smoking community.

Keywords: Tobacco control, Smoking cessation, Correctional Facilities

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3-036

Mindfulness training for workplace women smoking cessation in Hong Kong: a pilot randomized controlled trial

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Significance and objective: The prevalence of women smoking in Hong Kong had increased from 3.0% in 2010 to 3.2% in 2015 but gender-specific smoking cessation (SC) services for women are scanty. Women smoking is closely related to emotion and stress disturbance. Mindfulness improves psychological status and may help SC. We tested the first SC intervention to help workplace women quit smoking. Methods:

This was a single-blind randomized controlled trial (RCT). A total of 213 smoking women (mean age: 33.6 years; mean cpd: 11; and mean years of smoking: 15) were recruited and allocated to either intervention or control group. Subjects in the control (n=99) received a self-help booklet. Subjects in the intervention (n=114) received the same booklet plus 2 two-hour mindfulness workshops (within 1 month since recruitment) and optional smoking-related health talks. The 1-month follow-up was conducted via telephone for the control and post-workshop questionnaire for the intervention. All subjects were followed-up at 6-months via telephone. Intention-to-treat was used for data analysis. (Clinical trial registry no: NCT02497339) Results: 74% subjects were followed up at 6-month and the overall self-report quit rate, reduction rate ($\geq 50\%$ cigarette consumption) and biochemically validated quit rate were 18.8%, 20.2% and 7.5%, respectively. No significant differences were observed between groups ($p=0.48$, >0.99 and 0.07). The 1-month follow-up revealed that subjects in the intervention were more likely to have reduction attempt (48.2% vs. 32.3%; $p<0.001$), quit attempt (24.6% vs. 5.1%; $p<0.001$) and intention to quit (56.1% vs. 43.5%; $p=0.004$) but such outcomes were not found to be similar at 6-month follow-up. Conclusion: This pilot RCT found feasibility of the mindfulness training for SC for workplace women and provided evidence on improving quitting indicators. However, future interventions may consider a longer-term follow up and include boosters to improve the quit rates.

Keywords: Mindfulness, women smoking cessation

Acknowledgement:

The project was commissioned and initiated by the Lok Sin Tong Benevolent Society, Kowloon, and evaluated by Schools of Nursing and Public Health, the University of Hong Kong.

3-037

Adapting a mobile cessation (mCessation) intervention for a Pacific Islander context: The Guam experience

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Text messaging (SMS) has been proven effective for tobacco cessation. Most of the research and development has taken place in developed countries with comprehensive tobacco control policies, and education and media campaigns. Research is needed to investigate the potential to transfer proven effective SMS interventions to less developed countries with very different tobacco control and cultural contexts. The National Cancer

Institute recently launched its Smokefree TXT program, which helps users set a quit date and provides motivational messages leading up to the date and for the weeks following the quit date. The program is available to Guam residents and can be accessed with domestic SMS charges. We conducted a usability study of the Smokefree TXT program with Chamorro and other Micronesian young adults to: (1) explore their beliefs about quitting benefits and barriers, and their interest in the text-based program; (2) follow participants' use of the program over a two-week trial period; and (3) explore their evaluations of the program, usability problems, and reactions to new messages about chewing tobacco with areca nut/betel quid as well as new messages tailored to Chamorro and other Micronesian cultures. Pre and post-trial focus groups with 15 Chamorro and Micronesian smokers were augmented with an online survey with ~120 respondents. Young smokers in Guam were highly receptive to a text-based cessation program. Concerns about addiction and cancer, and desire to quit increased after the 2-week SMS trial, while current smoking decreased. Survey data collection is ongoing. The potential for text-based cessation is significant within the Pacific Island community. Fine-tuning of message content to contextualize the program within the Pacific Islander culture will enhance program acceptability.

Keywords: tobacco cessation, mHealth, mCessation, mobile interventions for health, Pacific Islander

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Reference:

Whittaker R, Borland R, Bullen C, Lin RB, McRobbie H, Rodgers A. Mobile phone-based interventions for smoking cessation. *Cochrane Database of Systematic Reviews* 2009, Issue 4.

3-038

Predicting factors of family members' intention in smoking cessation assistance

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The purposes of this research were to study the intention of family members to assist the smoker to quit and its related factors. This study was conducted with purposive sampling of 804 participants through clients' family members from antenatal clinics, postnatal clinics, and well-baby clinic from 9 public hospitals in Thailand. Data were collected by using a self-administered questionnaire. Pender's Health Promotion Model was used as the conceptual basis of the study. Data were analyzed by using Pearson's product moment correlation and multiple regressions. The results were that Intention of smoking cessation

assistance was at moderate level ($\beta = 2.93$, S.D.= 0.46). Perceived benefits, self-efficacy, smoking cessation behavior could altogether explain 39.0 % of the variance in intention of smoking cessation assistance at $p < .001$. The researcher suggests that perceived benefits of smoking cessation, self-efficacy, and smoking cessation behaviors are the important factors to help family members to promote their intention to assist Thai smoker to quit. Nurses should be concerned of factors related to intention to help family members toward successful smoking cessation.

Keywords: family member, intention to assist, smoking cessation

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2. Thai Health Promotion Foundation

3-039

Evaluation of a WHO-5A-based smoking cessation intervention among migrant workers: a pilot study

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Background: The smoking prevalence of migrants which account for 1/6 of the Chinese population was 32.5% but didn't draw enough attention. We conducted an intervention among migrants in workplaces using group consulting package adapted from WHO 5A's model, and evaluated the preliminary effectiveness and feasibility.

Methods: 4 manufacture factories in Zhongshan were randomly divided into intervention and control group. The intervention ones were provided with the 5A's group consulting package, routine health education and social network intervention, while the control factories weren't provided any intervention measures. All participants were tested salivary cotinine concentrate, a cutoff of 15ng/mL was employed to distinguish active smokers from non-smokers. They also completed questionnaires which included demographic data, tobacco-related knowledge and attitudes, quit behaviors at pre- and post- intervention. Analyses followed the ITT principle, and used MI method for missing or incomplete data. D-I-D analyses were used to assess the change of tobacco-related KAP between groups over time.

Results: 349 migrant workers were recruited (intervention=173, control=176). The change of smoking rate based on cotinine concentrate didn't vary significantly between intervention and control groups (-2.3% vs. -

1.1%, $P>0.05$). However, compared with the control group, the intervention group reported significantly positive changes in tobacco-related knowledge scores (1.039 in intervention vs. 0.195 in control, $P<0.05$), attitudes scores (1.249 in intervention vs. 0.163 in control, $P<0.05$), quit stages (39.6% in intervention vs. 23.4% in control, $P<0.001$), and quit rates (27.1% in intervention vs. 7.8% in control, $P<0.05$) from pre- to post-intervention.

Conclusion: The intervention shows preliminary effects on migrant workers' smoking behaviors, knowledge and attitudes. However, further understanding is needed regarding its long-term effectiveness and feasibility among migrant workers.

Keywords: WHO-5A-based intervention, migrant workers, smoke cessation;

3-040

Smoking Cessation Services in Hospital and Community by Nurses and Health Volunteers

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Beginning from tobacco use, people can further get other illegal substance addicted. This study was conducted in multi-setting communities, Pathumthani province, Thailand, to promote smoke-free community. In addition, the Princess Mother National Institute on Drug Abuse Treatment (PMNIDAT), the first Thai rehab center and medical facility for drug addiction, has a policy of smoke-free hospital policy. However, all smokers have not being recruited into the institution to receive a smoke cessation service. Thirty participants, community leaders, health volunteers, and care providers, from two communities were invited to join the community participation on smoke-free and smoke cessation project. The 4-month follow-up reveals 20-22 percent of successful quit smoking in community and up to 60 percent in the PMNIDAT. The relapse rate of people in community who had stopped smoking ranged from 9-21 percent. Lesson learned from community members voluntary attending the project are shown on continuous monitoring on smoke-free community campaign, remain the smoke cessation service in community, and reward people who can successfully quit as a community role model.

Keywords: Smoking cessation service, Community participation, Rehab center for drug addiction

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1. Nurse Network on Tobacco Control of Thailand
2. Thai Health Promotion Foundation

3-041

The relationship among nurses' tobacco-related attitudes, nurses' competency, and practice in smoking cessation interventions in Thailand

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Guidelines from the National Institute for Health and Clinical Excellence (NICE) stated nurses should play a pivotal role in raising an issue of smoking cessation with patients. In Thailand, little information is known about tobacco-related attitude, perception of nurses' competency in smoking cessation, practice in smoking cessation.

Objective: To identify the relationships among tobacco-related attitudes, nurses' competency and practice in smoking cessation intervention in Thailand.

Design: A cross-sectional research design was conducted.

Method: The Helping Smoking Quit Questionnaire developed by Sarra and colleagues were mailed to 1579 registered nurses who working in 203 hospitals, and 792 questionnaires (50% response rate) were returned.

Result: Most respondents were female nurses and age ranged from 22-59 years. Among the nurses who participated in the survey, only 25% had received training for smoking-cessation interventions as part of their training program in their healthcare settings. The majority of nurses had a lower score on the attitude about their roles and responsibilities, the competency to help patients quit smoking, and the frequency of practice than the mean score of all aspects. Subgroup analysis was done between a trained group and an untrained group. The results found nurses with prior training in smoking cessation intervention had a higher score than nurses without such training. Tobacco-related attitude had positive correlation with practice in smoking cessation ($r = .49, p < .001$); perception of nurses' competency in helping patients to quit smoking had positive correlation with practice in smoking cessation ($r = .53, p < .001$).

Conclusion: Supporting people as they attempt to give up smoking requires specialist nurses' competency and positive attitude in nurse's role and responsibilities in delivering smoking cessation. Therefore, there is the need for nurses who have received smoking cessation training.

Keywords: Smoking cessation, Thai nurse, tobacco-related attitude, practice, competency

3-043

Outcomes from pilot tests for developing residential smoking cessation program in Korea

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Background: Tobacco tax was increased by 80% from 2015 in Korea. With increased tobacco tax, Korean government planned to develop advanced smoking cessation program for failures in quitting smoking from established quitline or smoking cessation clinics.

Methods: Korean residential smoking cessation program was developed by multidisciplinary experts by benchmarking from the residential smoking treatment program in Mayo clinic in the US. Degree of willingness in quitting smoking, confidence in success for quitting, and participant's satisfaction of the program were investigated. The feasibility of recruitment and the compliance of the program were compared between 7-day program and 5-day program. Smoking cessation rate were obtained by telephone interview.

Results: The residential smoking cessation program was developed to provide pharmacotherapy for nicotine dependence, intensive counselling with cognitive behavioral therapy, and education on harm of smoking, benefit of cessation, immorality of tobacco company, dealing methods for smoking craving, effective diet and exercise during quitting smoking. The participants received follow-up care at 2, 4, 8, 12 and 16 weeks by visiting a smoking cessation clinic or telephone counselling. Total 37 smokers (34 males, 3 females) were participated in the pilot test. Average age is 60.0 (ranged 38-78 years old). The participants smoke 22.9 cigarettes per day and have 40.5 pack-year smoking history averagely. Five-day program is assessed to be better in feasibility than seven-day program. Degree of willingness in quitting smoking, confidence in success for quitting were significantly increased through the program. Average satisfaction degree of the participants is as high as 95%. Continence abstinence rate and 7-day point prevalence abstinence were equally reported as 73% at 6 months.

Conclusion: Five-day residential smoking cessation program is evaluated to be effective in helping smoking cessation for highly addicted smokers.

Keywords: smoking cessation, residential program

3-044

长春市新生儿父亲吸烟情况干预效果研究

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【摘要】

【目的】探索有效的戒烟干预措施, 帮助更多吸烟的新生儿父亲戒烟, 保护婴幼儿免受二手烟危害。

【方法】通过招募及筛查, 将 299 名在家吸烟的新生儿父亲随机分配到两个干预组及一个对照组中。对干预组 A 组进行宣传材料干预, 对干预组 B 组进行宣传材料干预加戒烟短信干预。通过前、中、末三次问卷调查评价新生儿父亲吸烟情况干预效果。

【结果】中期调查中, 三组新生儿父亲吸烟情况的组间差异未达到统计学意义显著 ($\chi^2=8.795$, $P=0.066$), 但进行两两比较发现, 干预组 B 组与对照组间的差异具有统计学意义 ($\chi^2=7.587$, $P<0.05$)。末期调查中, 三组新生儿父亲吸烟情况的组间差异未达到统计学意义显著。干预组 B 组与对照组比较差异也未达到显著水平 ($\chi^2=5.900$, $P=0.052$)。

【结论】只发放宣传材料并未取得明显的干预效果, 而在此基础上实施的戒烟短信干预, 在短时期内会对新生儿父亲吸烟行为产生明显的作用效果。但这种影响存在时间效应, 在今后的研究及应用中, 建议将短信干预的作用时间延长, 或采取更便捷的信息发送平台, 建立干预长效机制。

Keywords: 新生儿父亲, 戒烟干预, 无烟家庭, 短信

3-047

Moving towards a tobacco free workplace at a cement manufacturing plant in Chandrapur, Maharashtra.

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Background: 48% Indian men over 15 years are current tobacco users (50% smokers, 69% smokeless tobacco users, 19% dual users). Smoking is banned in India in public places including indoor workplaces under the Cigarettes and Other Tobacco Products Act (COTPA). However, there are no regulations for smokeless tobacco use, the most prevalent form. Workplaces offer a unique opportunity to address employees' health and influence their tobacco use behaviour. Tobacco-free workplaces help in increased productivity as employees take fewer breaks, are more active, have lower risk of machine-related accidents and have lower health-related absenteeism.

Objective: LifeFirst tobacco cessation service was provided at a cement plant with about 1500 employees in Chandrapur, Maharashtra from May 2014 to July 2016 with the objective of making the factory tobacco free and promoting and aiding quit attempts of tobacco users.

Methods and results: An awareness talk about tobacco and its ill effects and benefits of quitting was provided in groups to 1530 employees (all males). 556 employees voluntarily joined the service. This included a detailed face to face counseling session followed by four follow up sessions over six months. 527(95%) of these were smokeless tobacco users, majority (71%) of them using the local tobacco product “kharra” (mixture of tobacco and areca nut). 64% of them had made a past quit attempt. 480(86%) attended the follow up session at 6 months and 374(67%) of all registered users reported not using any form of tobacco, 46(8%) had reduced use, 56(10%) had made a quit attempt but relapsed. Trainings for “Anti-tobacco champions” among the employees were conducted for sustaining the initiative which has been incorporated into the company’s Occupational Health activities.

Conclusion: By providing and promoting tobacco cessation activities, employees can be helped to quit their tobacco habit and improve the overall wellbeing of the organisation by making it tobacco free.

Keywords: tobacco-free workplace, cessation, smokeless, LifeFirst

3-048

A school based tobacco and areca nut cessation intervention for students from slums in Mumbai, India

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Background: The prevalence of tobacco use among children between 13 to 15 years in India is 14.6%. Areca nut (“supari”) is an easily available carcinogenic, addictive substance widely used among school children from the lower socioeconomic class. This usually acts as a gateway product to tobacco use.

Objective: LifeFirst school cessation programme was implemented in six schools catering to lower socioeconomic population in slum areas of Mumbai in the academic year 2015-2016 for helping students quit their tobacco and supari use.

Methods: After due permissions from school authorities, orientation sessions about harmful effects of tobacco and areca nut were conducted using audio-visual aids for 969 students of the 7th, 8th and 9th grades. The students who voluntarily joined the service were divided into groups of 10-15 students each and six group sessions involving videos, games, role plays and activities were conducted over six months. The sessions were

theme based; covering topics like rapport building, ill-effects of tobacco, coping mechanisms, refusal skills etc. The self-reported status of tobacco use was discussed and recorded individually.

Results: 325 students (86% boys, 14% girls) joined the programme. 87% of these were only areca nut users, 3% only smokeless tobacco users, 1% only smokers and 9% used supari as well as a tobacco product. 61% were daily users. The average age of initiation was 11.7 years and 73% were introduced to the product by their peers. 64% were aware that it is detrimental to health and 41% had made a past quit attempt. The 7-day point prevalence of abstinence among all registered students increased steadily over successive sessions from 29% at the first follow-up session to 55% at the 6th month follow-up using intention to treat analysis.

Conclusion: Improving awareness, refusal skills and positive peer influence facilitated by trained counsellors encourages and aides tobacco as well as areca nut users to be free from their habit.

Keywords: school, cessation, areca nut, supari, LifeFirst

3-049

Feasibility, effectiveness and provider perspectives on integrating tobacco cessation for tuberculosis patients in a decentralized NGO setting in urban India

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Background: Tobacco consumption has lethal interactions with tuberculosis leading to increased adverse treatment outcomes including death and recurrence. Providing tobacco cessation advice will be beneficial to TB patients at an individual level and from the perspective of a larger spectrum of non-communicable diseases associated with tobacco use.

Objectives: In 27 TB treatment centres run by three non-governmental organisations, to assess and understand feasibility and effectiveness of integrating tobacco cessation into routine TB care following a brief training,

from August 2015 to March 2016 in urban India.

Design: This mixed methods study used a triangulation design to correlate quantitative findings of a retrospective analysis of cessation intervention provided to self-reported tobacco users among all TB patients registered under routine program conditions and enablers and challenges emerging through qualitative thematic analysis of focus group discussions with DOT providers.

Results: All 27 DOTS centres initiated the intervention and sustained it. 259 (17%) of the 1510 TB patients registered during the period were current tobacco users, 79% of them using smokeless tobacco. Seven-day point prevalence abstinence at scheduled follow-ups progressively increased upto 62% among new cases and 25% among retreatment cases. DOT providers felt they had acquired the necessary skills for integrating tobacco cessation into routine work. Structured DOTS approach, NGO collaboration, capacity building and supervisory support emerged as enablers while need for 15-45 minutes per patient, multiple addictions, documentation, reliance on self-report and normalization of tobacco use were highlighted as challenges for implementation.

Conclusion: Integration of tobacco cessation into routine TB care was feasible and showed individual patient benefit in an urban NGO setting. This should be scaled up with a special attention to strengthen efforts to tackle smokeless tobacco.

Keywords: integration, mixed method study, cessation, DOTS, NGO

3-050

Capacity building of healthcare professionals to create a workforce trained in tobacco dependence treatment at different levels of healthcare settings

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Background: The prevalence of tobacco use according to Global Adult Tobacco Survey in India is estimated to be 35% of which 60% use only smokeless tobacco and an additional 15% are mixed users, that is, they use both smokeless and smoked tobacco. In spite of willingness to quit, healthcare professionals (HCPs) have not been identifying a majority of tobacco users and a very small proportion has been advised to quit. Data from the India Global Health Professional Students Survey showed a general lack of training among health professional students. Currently, no standardized tobacco cessation treatment training module exists in India. To meet the widespread need

of tobacco cessation services, stronger efforts are needed to equip HCPs by providing trainings in tobacco cessation. Narotam Sekhsaria Foundation in partnership with Harvard School of Public Health has developed a tobacco cessation training program for HCPs. The objective of this study was to evaluate the impact of Brief Advice (BA) Training on change in knowledge, attitude and confidence among HCPs. Methodology- Pre and post-tests survey method was used. The intervention was 1-day training and topics covered were a) Tobacco use in India, b) tobacco control policies and initiatives, c) tobacco use and dependence d) providing brief intervention. 1486 different HCPs (including doctors, dentists, nurses etc.) were trained during June 2015 to April 2016.

Results: There was significant difference between pre- and post-test scores. The training improved participants' knowledge, perceived skills and confidence. Post training, there was an increase in knowledge by 50%, perceived skills by 25% and confidence to provide BA by 24% among HCPs. 78% of the participants showed interest in undergoing further intensive training.

Conclusion: A BA training program can generate significant improvements in skills, knowledge and confidence among HCPs and increases their readiness to engage in tobacco cessation activities.

Keywords: Tobacco cessation, trainings, Healthcare professionals, India

3-051

三甲综合医院门诊采用电子化信息系统进行简短戒烟干预实施效果的调查

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【背景及目的】为促进临床医生开展简短戒烟干预,北京朝阳医院开发了电子化戒烟干预系统。患者首次就诊时,系统会提醒医生询问并记录其吸烟情况,并自动为吸烟者打印一张戒烟处方。本研究旨在探索在三甲综合医院促进临床医生开展简短戒烟干预的有效模式。

【方法】采用问卷调查的方式随机调查了在北京朝阳医院就诊的444名吸烟者。

【结果】73.4%的患者曾被医生询问过是否吸烟,66.9%的患者曾被医生建议戒烟,10.7%的患者曾接收到戒烟处方。经logistic回归分析,打印戒烟处方(OR 5.02, 95%CI 3.27-7.70)可明显促使吸烟患者产生戒烟意愿。

【结论】电子信息系统,尤其是打印戒烟处方是一种可有效促进吸烟患者产生戒烟意愿的临床简短戒烟干预措施,但仍需完善系统操作,加强医务人员戒烟意识及技能的培训,以提高系统使用率。

Keywords: 简短戒烟干预,电子化,信息系统,戒烟处方

3-051

Tobacco Cessation: Creating an environment that supports smokers to live a life free from tobacco

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As governments and society continue to implement policies that denormalise tobacco smoking there is an important opportunity that should be capitalised upon beyond the important aim of stopping new users from taking up tobacco smoking. These measures also have significant potential to drive increased dissonance and quit attempts amongst the present population of tobacco smokers. As such it is critical that these measures are capitalised upon for the sake of public health, individuals and society by effectively supporting smoking cessation.

Key to helping those smokers motivated to quit tobacco smoking is ensuring that there is a supportive environment within which they can obtain effective support to maximise their chance of quitting tobacco. Policy makers, healthcare professionals, public health and tobacco control leaders, industry and other stakeholders all have a role to play in developing and delivering an environment that is conducive to quit and to providing the best support to tobacco smokers willing to try and quit tobacco smoking. These efforts should include:

- training and motivating healthcare professionals to engage directly in supporting tobacco smokers to quit
- developing and disseminating evidence based tobacco cessation guidelines
- making treatment and services widely available
- signposting services and support to ensure tobacco smokers wishing to quit know how to reach support
- providing free quit lines.

This presentation will consider key elements that make up a supportive environment that helps motivated smokers to quit tobacco and live a life free from tobacco.

6-012

Effectiveness of village health worker counseling on cessation outcomes among Vietnamese smokers

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Background: Vietnam has the second highest smoking prevalence among the Southeast Asian countries, yet treatment is not readily available to smokers in low middle-income countries like Vietnam. This NIH funded study is comparing the effectiveness of two system-level strategies for implementing evidence-based guidelines for the treatment of tobacco use in 26 commune health centers (CHCs) in Vietnam.

Methods: 26 CHCs were randomized to receive 12 months of 1) training, reminder system and tool kits (ARM 1) vs 2) ARM 1 + referral to a Village Health Worker (VHW) for three in person counseling sessions (ARM 2). Using a quasi-experimental design, we compared the difference in the primary outcome—biochemically validated smoking abstinence measured 6 months after receiving the intervention—among patients with a visit to the ARM 1 CHCs vs ARM 2 CHCs during the intervention period.

Results: There were 668 participants in the total sample with 226 (33.8%) in ARM 1 and 442 (66.2%) in ARM 2. At 6-months following the intervention, 40.3% of participants in ARM 2 had not smoked in the last 7 days compared to 14.6% of participants in ARM 1. There was a statistically significant difference in the smoking abstinence ($p < .0001$).

Conclusion: Findings suggest that the addition of the VHW to the standard training plus clinical reminder system is an effective intervention for this population and may lead to higher rates of smoking abstinence.

Funding: NCT02564653

Keywords: Vietnam, Southeast Asia, Asia Pacific, smoking, smoking cessation, tobacco, tobacco cessation, clinical practice guidelines, village health worker, health services, treatment of tobacco dependence

6-013

Combating tobacco use in prison: Experiences of Thai nurses

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Inmates are at high risk of tobacco-related illnesses including cardiovascular diseases, pulmonary diseases, and cancer. Tobacco control policy in prison can assist in eliminating nonsmokers' exposure to the dangers of secondhand smoke and can reduce tobacco consumption amongst smokers themselves. In Thailand, the smoke-free prison project was developed with collaboration between Nurses Network for Tobacco Control of Thailand and Department of Correction, Ministry of Justice. Three case studies of nurse-led tobacco control intervention in

prison are presented that exemplify the key approach of working with strong allies and informed decision makers to establish tobacco-free areas. In each of the cases, the tobacco control interventions including the inspired policy changes, the smoking cessation services, and enhancing the smoke-free areas will be discussed. The key strategies and lessons learned may help other health care providers to combat tobacco control in other settings.

Keywords: Prison, Tobacco Control, Nurse, Smoke-free environment

Acknowledgement:

Thai Health Promotion Foundation

10-002

A Comparison of Smoking Cessation Drug Therapies Related Quality of Life between Vernonia cinerea Tea and 0.5% Sodium Nitrate Mouthwash

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The study aims to evaluate quality of life between Vernonia cinerea tea and 0.5% sodium nitrate mouthwash. It is a quasi-experimental, cross-sectional design. The participants were the giving up smokers qualified to be treated at two different hospitals. They filled out a questionnaire form. All data was analyzed via descriptive statistics, independent t-test, simple linear regression and multiple linear regression. The results showed the quality of life related to psychological feeling, adverse effects and the overall QOL of Vernonia cinerea tea group were obviously higher than 0.5% sodium nitrate mouthwash group ((95% CI; 14.68, 18.62); (95% CI; 26.31, 30.80); (95%CI; 26.98, 45.81) respectively).

Keywords: Quality of life, Vernonia cinerea tea, 0.5% Sodium Nitrate mouthwash

Acknowledgement:

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Reference:

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议题 (四)

W-Warn about the dangers of tobacco; Enforce bans on tobacco advertising, promotion and sponsorship

W- 警示烟草危害

1-019

The effects of tobacco pack warnings in two developed countries and two developing countries: Findings from the ITC Australia, Canada, Malaysia, and Thailand Surveys

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Background: Longitudinal data from 15 ITC participating countries indicate that quit intention is positively associated with subsequent quit attempts. Recently a randomised control trial has revealed that a strong commitment to quitting leads to better cessation outcomes. Smokers should be stimulated to form intentions and make strong commitment. This presentation aimed to summarize some key findings from population surveys on the impact of implementing graphic health warning labels (GHWLs) on stimulating quitting-related thinking (cognitive responses) and actions (micro-behaviours and behaviours).

Methods: Two developed countries (Australia and Canada) and two developing countries (Malaysia and Thailand) in the Asia-Pacific region were, and key findings from published papers looking at the longer-term impact of GHWLs on smokers in these countries were summarized.

Results: We found that these published studies show that immediately following the implementation of GHWLs, smokers' cognitive reactions (eg, thinking about the health risks and being made more likely to quit) and their micro-behaviours (eg, forgoing cigarettes because of GHWLs) increased significantly in almost all countries, although declined over time (with different patterns in selected countries). Most importantly, these reactions (eg, the increased cognitive responses) were found consistently predictive of quit attempts, especially in countries with stronger GHWLs and tobacco control programs, such as in Thailand.

Conclusion: In summary, these cross-country comparisons demonstrate how the introduction of larger and stronger pack warnings in selected Asia-Pacific countries leads to greater levels of awareness of warnings and increased micro-behavioural responses; how these warning reactions are associated with increased levels of quitting activities; and finally, how these latest international findings relate to other Asian countries' (including China's) tobacco control policies and practices.

Keywords: Graphic warnings, quit attempts, longitudinal survey, cross-country comparison

Acknowledgement:

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1-021

Over-time Changes in Reactions to Pictorial Health Warning Labels and Association with Quitting Behavior among Adult Smokers in Thailand: Findings from ITC Thailand Survey (2005-2012)

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This presentation explores over-time changes in smokers' reactions to pictorial health warning labels (PWLs) and impact on subsequent quitting in Thailand where PWLs on tobacco packs were first implemented in 2005 and were revised several times later. Nationally representative longitudinal data from six waves of the ITC Thailand Survey (2005-2012) were analyzed, involving 2,000 smokers aged 18 years and older at baseline. The primary outcome was subsequent quitting behavior (intentions to quit, quit attempts, and successful quitting). Descriptive analyses show that the effectiveness of the PWLs increased over time (the percentage of smokers who often/very often noticed, read the warning labels closely, reported that the PWLs made them think of harm of smoking, that PWLs influenced them to think about quitting a lot, and that PWLs stopped them from smoking more than once). Preliminary bivariate analyses found a significant association between these indicators of warning effectiveness and subsequent intention to quit. Additional analyses will examine whether these indicators also predict subsequent intentions to quit, quit attempt, and successful quitting when controlling for other predictors of quitting. More research is needed to understand the extent to which the health warnings contribute to the public health objective of increasing cessation among smokers.

Keywords: Pictorial health warning labels, effectiveness of PWLs, adult smokers in Thailand, ITC-SEA Thailand

Aknowledgement:

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4-001

Ensure Pictorial Pack Warning on Tobacco Pack Rightly and Timely as mentioned on law.

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The Bangladesh government enacted Tobacco control law on 2005 and amended 2013 in the amended law have provision of printing a pictorial warning covering the upper half of the tobacco packs. The provision is expected to come into effect on March 19, 2016. But the tobacco industry group wrote to the health ministry to make changes in the provision. They want to print the warning pictures in the lower part of the packs so that they draw less attention of the smokers. Bangladesh Anti-Tobacco Alliance and Civil Society Organisation urged the health minister to stay put in its position and also took necessary action like; public awareness, advocacy with health department and parliament members to print pictorial warning rightly on tobacco pack within 19th March 2016.

Keywords: Pictorial pack warning

Aknowledgement:

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4-002

Relation between smoking and primary lung cancer mortality in females in urban China

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To examine the association between smoking and female lung cancer mortality in urban of China. Used the national causes of death data in 1986-1988, age 35-69 females died of lung cancer were selected in 27 cities. Mortality of lung cancer in 35 to 69 years females was 35.65/100 000 and smoking proportion was 38.42%. The proportions who started smoking in age less than 20, 20-25 years and daily smoking 10-19, cumulated years of smoking \geq 40 were founded significantly positive correlated with the mortality, $r=0.59$, 0.51 , 0.44 and 0.55 . Mortality rates of lung cancer in ages 35-49, 50-59 were significantly positive correlated with the smoking percentage, $r=0.52$, 0.44 . Start smoking age, daily and cumulative years smoking are important risk factors to lung cancer of urban females, China.

Keywords: Lung cancer, Epidemiology, Smoking, Mortality

4-003

Effect of Cigarette Plain Packaging on Intention not to Smoke of Thai Teenagers

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Objective of this study: To predict intention not to smoke by age, gender, smoking experience, health perception and severity, susceptibility to smoke, and fear of negative health impact from seeing graphic health warning on cigarette pack. Research method: Recruitment of 1,239 students were recruited from 4 regions of

Thailand, to participate in this study. Plain packaging mock-ups were presented to these students, and data was collected from August 2012 to April 2013.

Results: From Mimic Model, it can be predicted that variables influencing intention not to smoke are fear of negative health impact, perception and severity, gender and smoking experience. Current smoking has an effect on intention not to smoke, while susceptibility and age do not have any effect. Female has a greater effect on intention not to smoke than male when exposed to graphic health warnings on plain cigarette package. Fear of negative health impact, and health perception and severity have a positive effect on intention not to smoke.

Recommendation: Plain cigarette packaging policy has a greater effect on intention not to smoke on females than male. Current smokers, when exposed to graphic health warning on plain cigarette pack, will have greater intention not to smoke compared to those who were smokers but stop smoking now. Effective strategy for tobacco control is to have color graphic health warnings on plain cigarette packaging.

Keywords: graphic health warnings, cigarette smoking, plain cigarette packaging

Acknowledgement:

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4-004

The effects of law enforcement related 85% pictorial health warnings on cigarette package at retail stores

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Background: Thailand has applied the full color of pictorial health warning labels (PHWs) on cigarette package, 50% in 2005 to 85% in 2014.

Objective: to assess the effects of the law enforcement related 85%PHWs on cigarette package on retail stores.

Design: A longitudinal studies design was conducted with 260 retail stores for 4 rounds, 1 week before and after 6th, 8th and 16th week of the law enforcement.

Method: A Simple random sampling has been adopted to select the 7 target areas. Then, a single-stage cluster sampling and a systematic random sampling have been adopted to select the retail stores at the target areas. 50 sample of retail stores in each target areas, except Bangkok, at totally 60 sample were composed of traditional stores and convenient

stores. Interview data from the owner of retail stores were obtained as well as observation of the sale, affecting through the enforcement of 85%PHWs. Statistical analysis was performed by using descriptive and inferential statistics.

Results: the observation revealed the increasing rate of several strategies of point of sale (POS) such as display cigarette package on the transparent cigarette display box, placed the transparent cigarette display box on the counter or in front of the cashier, placed cigarette package horizontally instead of vertically. Time spent in picking a new products, 85%PHWs cigarette package significantly decreased from 11.2 second (sec) within 1 week before the enacted date to 9.3 sec, 8.9 sec, and 7.9 sec after 6th, 8th, and 16th week of the enforcement. Most of the owner indicated that volume of cigarette package sale per day remained the same and had significantly decreased in the errors of picking a new products which inconsistent with customer needs.

Conclusion: The enforcement of 85%PHWs did not effects on the retail stores according to the tobacco companies claimed and the concern of retail stores about sales volume. On the other hand, the evident of POS were increased.

Keywords: Law enforcement, 85% PHWs, Retail stores, Point of Sale (POS)

Aknowledgement:

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Reference:

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4-005

NGO 推动国内烟盒包装采用图形警示政策的实践

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我国烟盒包装至今未采用图形警示，为此新探中心不断的呼吁，并开展了系列的行动。

【目的】倡导图形警示的有效性、迫切性，推动图形警示政策出台。 1. 动员两会代表 / 委员，推动政策出台 连续十年向两会代表 / 委员提交相关建议 11 条，多次被采纳和递交两会。 2. 致函主管部门，

传递专家呼声 2008 年联合 40 位专家四次致函工信部；2011 年，1525 名全国各地公共卫生人员联名致函工信部，呼吁图形警示上烟包。 3. 发挥媒体传播作用，营造社会氛围 2008 年至今，举办或联合举办呼吁图形警示上烟包的媒体会议达 15 次。如，2008 年中国在 WHO 第三次缔约方大会上因图形警示问题被授予“脏烟灰缸奖”，新探第一时间通过媒体传达大会精神，揭露烟草业抵制图形警示上烟包的真相。 4. 开展公众倡导，获得民众支持 1) 自 2011 年至 2013 年，新探发起“图形警示上烟包”倡导活动，利用各国烟盒上的图形警示开展烟草危害教育，推动图形警示上烟包。活动覆盖 30 省 300 多个城市，展览场次超过 3000 次，现场观展人数超过 1500 万人。警示图形上烟包平均支持率达 85.4%。“中国控烟资源中心”网站上供免费下载活动工具包，截止到 2013 年年底下载量达到 22754 次。 2) 2016 年 5 月，再次发起“警示图还原真相，烟之害无处隐藏”巡展活动，通过真实的图形警示烟盒强化采用图形警示是最有效控烟措施的理念，增强民众呼声。活动一经推出就得到多个省数十城市的欢迎，目前正在各地深入推广。短短一个月，活动工具包下载量 613 次。 3) 编制多种形式宣传材料，倡导图形警示：视频《烟盒上的战争》，优酷点击播放量 3461 次；视频《警示图还原真相，烟之害无处隐藏》，中国控烟资源中心网站一个月内下载量达 1061 次；宣传画《大面积图形警示上烟包我们还要等多久？》、Z 卡《这样告知烟草危害最有效》、画册《我要告诉你，因为我爱你——图形警示上烟包》，印发量共计 20000 册，网站下载量达 2000 多次。

【结论】历时 10 年的推动，坚持高层倡导、公众动员和媒体传播相结合，不仅持续提高了公众的烟草危害意识，强化了烟盒采用图形警示是最有效控烟方式的理念，还反映了民众支持和希望尽快实施图形警示的呼声，有力反击了烟草业对这一政策的阻挠。我们将会继续行动，直至烟盒采用图形警示的政策在国内实施。

Keywords: 图形警示, NGO, 高层动员, 公众倡导, 媒体传播

4-006

SEATCA Tobacco Packaging and Labelling Index: ASEAN's Progresses and Setbacks in Health Warning Law Implementation

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Background: This paper assesses each ASEAN country's progress in implementing recommendations of the World Health Organization Framework Convention on Tobacco Control (WHO FCTC) Article 11 Guidelines. It recognizes both achievements and gaps aiming to help ASEAN governments to strengthen implementation of health warning policies in their countries.

Method: The Index is based on data collected from governments and non-governmental organizations and measures each country's health warnings laws/regulations relative to recommendations in WHO FCTC Article 11 Guidelines.

Results: The main findings of the Index showed that all ten ASEAN countries require pictorial Health Warnings (PHWs). Thailand leads with the largest warning size, occupying 85% of the front and back of the package and ranking as the world's second largest warnings after Nepal's 90% warnings. At least 75% is preferred; Thailand has 85% PHWs followed by 75% PHWs in Brunei, Lao PDR and Myanmar; and 55% in Cambodia and Malaysia. Philippines, Singapore, and Vietnam require 50% while Indonesia only has 40%. PHWs are applied to all shapes and forms of tobacco packaging. Nine ASEAN countries have legislated bans on the use of misleading descriptors such as "light" and "mild" on any tobacco product packages. Seven countries gave less than 10 months to the tobacco industry to comply with PHWs. Research and policy development towards plain packaging have begun in Malaysia, Singapore and Thailand. The ASEAN region's PHWs images are shared and copyright-free images can be obtained through an image bank and sharing mechanism facilitated by SEATCA in collaboration with ASEAN Focal Points on Tobacco Control (AFPTC).

Conclusion: Although all ten ASEAN countries have legislated PHWs, all governments are encouraged to continuously strengthen their regulatory on health warnings to implement bigger (more than 85%) PHWs size and close the loopholes in the current legislations as indicated in the SEATCA FCTC Article 11 index.

Keywords: ASEAN, Packaging and labelling, Pictorial Health Warning, Index, Health Warnings Law, Article 11 Guidelines

Acknowledgement:

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Reference:

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4-007

关于“图形警示上卷烟包装盒”的态度调查研究

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为了解公众对“图形警示上烟包”的态度, 组织 志愿者身着印制警示图片的烟包模型, 用匿名方式对参加肿瘤咨询活动者进行一对一的问卷调查。调查发现, 61.4% 的现在吸烟者、46.5% 的曾经吸烟者和 49.6% 非吸烟者对“低焦油、低尼古丁等于低危害”的错误信息缺乏认知。现在吸烟者中, 86.4% 对吸烟和被动吸烟的危害缺乏全面了解, 其中, 对被动吸烟可能引起儿童中耳基本、新生儿猝死综合征和新生儿低体重

的认知率为 18.2%–34.1%，显著低于非吸烟者 49.6%–57.9%。87.8% 被调查者支持在烟盒包装盒上印制烟草危害警示图的控烟举措，支持率在调查对象中未发现性别、年龄、学历、职业等人群特征差异。

Keywords: 图形警示, 烟草危害, 知识, 态度

Aknowledgement:

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4-008

Tobacco health warning labels in Asia Pacific countries: progress after the adoption of FCTC Article 11 Guidelines

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BACKGROUND: In 2008, FCTC Article 11 Guidelines were adopted, requiring tobacco health warning labels (HWLs) of at least 50% of the product display areas (PDAs) plus graphics.

OBJECTIVE: To assess the evolution of HWLs in all 38 countries from WHO's South East Asia (11) and Western Pacific (27) Regions (all except Indonesia are Parties to the FCTC) before and after adoption of the Article 11 Guidelines.

METHODS: We analyzed 46 pieces of legislation, as well as tobacco industry litigation cases, related to packaging and labeling in the comprehensive database (Tobacco Control Laws) of the International Legal Consortium at the Campaign for Tobacco-Free Kids to assess HWL size and type (graphic vs. text-only) requirements. In addition, we reviewed the 2015 WHO MPOWER Report.

RESULTS: As of July 2016, Bhutan has banned the sale of tobacco products; 3 countries have not approved laws requiring HWLs; and 4 countries require text-only HWLs without specifying size. Before the adoption of the Article 11 Guidelines, 15 countries required HWLs printed on at least 30% of the PDAs: 8 required HWLs (7 of which were text-only) on at least 30 but less than 50% of the PDAs, and 7 required HWLs (all graphic) on at least 50 but less than 75% of the PDAs. Since the adoption of the Article 11 Guidelines, the total number of countries in both WHO Regions requiring HWLs of at least 30% of the PDAs has doubled (from 15 to 30); HWLs of at least 50% of the PDAs has tripled (from 7 to 21); HWLs of at least 75% of the PDAs went from none to 8 (out of only 11 globally). The number of countries with graphic HWLs has nearly tripled (from 8 to 22). Tobacco industry's response has been to challenge effective HWLs through litigation in Australia, India, Nepal, Philippines, Sri Lanka, and Thailand.

CONCLUSIONS: Adoption of the FCTC Article 11 Guidelines contributed to an increase in effective HWLs in the Asia Pacific Region despite the tobacco industry's strategies to undermine these efforts.

Keywords: South East Asia Region, Western Pacific Region, FCTC implementation, evaluation, packaging and labeling

Acknowledgement:

Bloomberg Initiative to Reduce Tobacco Use

4-009

Does smoking kill one out of two or two out of every three smokers

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WHO states that "Tobacco kills up to one in every two smokers". This absolute risk of tobacco death was first stated by Peto in 1994, based on a relative risk (RR) of two for total mortality due to smoking from the British Doctors Study with 40-year follow-up.(1) The 50 year follow-up in 2004 showed that if smoking started at a young age, 2 in 3 smokers will be killed by smoking, based on an RR of 3. In 2012-15, large cohort studies from the UK, US and Australia showed that the RRs were about 3. The 2004 US Surgeon General Report concludes that the RR has increased over the last 50 years in both US men and women. In China mainland where the tobacco epidemic is at an early stage, an RR approaching two was first reported in a small cohort in Xi'an in 1997. Other cohorts set up more than 20 years ago from Beijing and Shanghai showed lower RRs of 1.2-1.4. In 2015, Chen et al. comparing two China nationwide cohorts revealed that the 1991 cohort showed lower RRs but China Kadoorie Biobank with subjects recruited in 2004-8 showed greater RRs of 1.98(95% CI 1.79-2.19) in urban men who started smoking before 20, and 2.64(2.19-3.19) for starting before 15. The RR was 1.72(1.52-1.96) in urban women. We expect greater RRs from cohorts born before 1950.(2) The stage of the tobacco epidemic in Hong Kong is about 20 years behind that in the US and 20 years ahead that in the Mainland. In 2014, a 10 year follow-up cohort study reported an RR of 1.93(95% CI = 1.84-2.03) in current smokers aged 65-84 years.(3) A warning that one out of every two smokers will die from smoking is more striking. The WHO statement should be included in health warnings of all cigarette packaging. The Hong Kong Food & Health Bureau has proposed to include this statement to the Legislative Council on 18 May 2015. Physicians should warn high risk smokers that their chance of being killed by smoking could be 2 out of three or greater.

Keywords: Mortality, Absolute risk of tobacco death, Health warning

Acknowledgement:

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4-010

Trade and Investment Agreements that promote Graphic Health Warnings and Plain Packaging

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CONTEXT: Graphic health warnings (GHWs), and their next frontier, plain packaging (PP), are known to be cost-effective measures to reduce tobacco use, but international trade and investment agreements (TIAs) have been used to stop governments from moving forward with PP. Cases in trade tribunals (WTO cigarette cases), and in investment tribunals (Philip Morris' lawsuits vs Australia's PP and Uruguay's GHWs) have a chilling effect that deterred PPs in the region. In concluding the Trans-Pacific Partnership Agreement (TPPA), touted to set the standard for future TIAs, Asia-Pacific countries have created a breakthrough to protect GHWs and move forward with PP. For the first time in TIA history, TPPA included a specific provision on tobacco control (TC)...a new challenge for health officials to prepare TC-related inputs to future TIAs such as the RCEP.

OBJECTIVE: To present options available to protect TC in TIAs.

METHOD: Analysis of the tobacco options considered during the TPPA negotiations and assessment of strategies used in environment and labor sectors.

RESULTS: A general classification of options for TC would be: specific exception; partial exclusion (such as the TPPA TC provision to exclude TC measures from the investor-state dispute settlement chapter); and,

full exclusion. In contrast, environment and labor concerns are integrated into the TIA to ensure better enforcement of treaty standards.

CONCLUSION: Considering the need to adopt larger GHWs and move towards PPs in the region, health ministers need to explore legal options to minimize challenges by the tobacco industry. TIAs had been used to encourage compliance with labor/environment treaty standards even with countries that have not signed such treaties. Precedent of including TC in the TPP presents an opportunity to scale up TC implementation and prevent challenges to GHW and PP.

Keywords: trade and investment agreements, graphic health warnings, plain packaging, whole of government, tppa, investor state dispute, monitoring, fctc

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4-011

COMMUNITY PERCEPTIONS, KNOWLEDGE AND ATTITUDES ON PICTORIAL HEALTH WARNINGS OF CIGARETTE PACKAGES IN INDONESIA

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Introduction. In 2013, the Indonesian government released regulation on population protection from addictive substance of tobacco on pictorial health warning. There are 5 designs of pictorial health warning for cigarette packages which consist of pictorial and text warning. In this study, we aimed to assess the perceived effectiveness of the individuals on pictorial health warning of cigarette package. **Method.** A survey was conducted covering youth and adult smokers in 11 districts and cities in Indonesia. Respondents were asked to state whether they noticed the pictorial health warning on the cigarette packages. Respondents were also asked to state their thoughts when noticing the pictorial health warning on the cigarette; their effectiveness in motivating smokers to quit smoking or preventing re-smoking; and in informing public about negative health impact of smoking. **Findings.** About 86.9 % of respondents noticed the health warning on the cigarette packs in the past 30 days. Most of them only noticed pictorial rather than text warning. About 86.4 % of smokers felt worries about impact of smoking for their health and 71.2% thought about quitting because of the warning label. About 39.4 % of smokers said that pictorial health warning are very effective in motivating them to quit smoking. About 71.1

% thought that pictorial health warning is very effective or effective to inform public about negative impact of smoking. The picture's theme "Smoking man with tobacco smokes that form a skull" and "Pharyngeal cancer due to smoking" are considered less effective in providing information regarding the danger of smoking. Conclusion. The use of pictorial health warnings of cigarette package in Indonesia has confirmed the world-wide evidence of their effectiveness. Updating the pictorial health warnings will help sustaining the effective effects.

Keywords: Community perceptions, knowledge, attitude, pictorial health warning

4-013

Evidence from South Asia: Marketing and Packaging Policies on Smokeless Tobacco Initiation

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Background: Smokeless tobacco (SLT) use is prevalent in South Asia. [1,2] There is evidence that smokeless tobacco use is a gateway for smoking initiation among young adult males, [3, 5, 6, 7] and that marketing and packaging of tobacco products affects smoking behavior among youth. [8, 9] However, there is not much evidence on how can marketing and packaging policies affect the initiation of SLT.

Method: 2007 to 2011 waves of the Global Youth Tobacco Survey (GYTS) in Bangladesh, Bhutan, India, Myanmar and Nepal, and 2007 to 2013 waves of International Tobacco Control project (ITC) data from Bangladesh, Bhutan and India were linked to the WHO MPOWER policy data using country and year identifiers for the analyses. Logistic regressions and linear regressions were used to analyze the impact of marketing and packaging policies on SLT initiation (a dichotomous variable indicating if the respondent ever tried SLT) and age of SLT initiation while controlling for MPOWER scores, compliance scores, gender, age, and parental smoking status.

Results: In countries mandating that health warnings appear on smokeless tobacco packages or banning advertisement, SLT initiation (OR=0.46, n=15700) is significantly less likely to occur. And in countries mandating that health warnings appear on smokeless tobacco packages, the average initiation age is significantly delayed by 0.98 years (n=8088).

Conclusion: This study provides evidence for policy makers to evaluate existing and proposed regulations on smokeless tobacco marketing and packaging.

Keywords: Smokeless Tobacco, Initiation, Global Youth Tobacco Survey, International Tobacco Control, MPOWER

Acknowledgement:

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Reference:

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4-014

Policy discourses to support health warnings: A comprehensive review of existing studies

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CONTEXT: The global trend of FCTC parties adopting graphic health warnings (GHWs) and plain packaging (PP), have ignited various discourses on tobacco control and trade in the past several years. The

need to be apprised of such discourses on trade and tobacco control becomes imminent as the tobacco industry consistently uses trade arguments to challenge policies for larger GHWs and PP in the region.

OBJECTIVE: To examine the various policy discourses for or against adoption of GHWs and PP.

METHOD: Qualitative analysis of researches published in peer-reviewed journals from 2000 to 2016 (Q2). **RESULTS:** In general, pro-tobacco industry arguments are scant among peer-reviewed journals but abound in trade journals and intellectual property discussion boards. Beginning 2004, post-FCTC, studies on tobacco packaging concerns have increased. Majority of such studies focused on the trade and investment disputes (e.g., Philip Morris' case against Uruguay on its adoption of GHWs), the defense of plain packaging (Australia's case), how these disputes may be decided, and how these cases may be avoided in the future. Scholars have presented a broad range of solutions varying from bolstering regulatory capacity to conform with WTO and other trade rules, excluding tobacco and aspects thereof from trade and investment agreements (TIAs); refusing TIA policies that undermine public health; and, adopting international standards.

CONCLUSION: Although widely disseminated among policymakers to discourage passage of GHW and PP policies, the tobacco industry's trade-related arguments are not widely promoted in peer-reviewed journals. Many existing literature on trade and tobacco control, be it in medical journals or law journals, focus on the merits of PP and GHW and the justification of such policies in light of TIAs and potential WTO disputes. Advocates in the region should look to these as basis to challenge TI arguments and bolster the adoption of more effective GHWs and PP.

Keywords: health warnings, plain packaging, graphic health warning, policy discourses, tobacco control, trade and investment agreements

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议题 (五)

R-Price and tax of Tobacco

R- 提高烟税与价格

1-055

Is there Differential Responsiveness to a Future Cigarette Price Increase depending on Adolescents' Source of Cigarette Access?

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We examined whether the responsiveness to an increase in cigarettes price differed by adolescents' cigarette acquisition source. We analyzed data on 6,134 youth smokers (grades 7–12) from a cross-sectional survey in Korea with national representativeness. The respondents were classified into one of the following according to their source of cigarette acquisition: 1) commercial-source group 2) social-source group, and 3) others. Multiple logistic regression was performed to estimate the effects of an increase in cigarette price on the intention to quit smoking on the basis of the cigarette acquisition source. Of the 6,134 youth smokers, 36.0% acquired cigarettes from social sources, compared to the 49.6% who purchased cigarettes directly from commercial sources. In response to a future cigarette price increase, regardless of an individual's smoking level, there was no statistically significant difference in the odds ratio for the intention to stop smoking in association with cigarette acquisition sources. The social-source group had non-significant, but consistently positive, odds ratios (1.07 to 1.30) as compared to that of the commercial-source group. Our findings indicate that the cigarette acquisition source does not affect the responsiveness to an increase in cigarette price. Therefore, a cigarette price policy is a comprehensive strategy to reduce smoking among youth smokers, regardless of their source.

Keywords: Differential responsiveness, Price policy, Smoking cessation, Source of Cigarette Access, Youth smokers

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5-002

Illicit Cigarette Consumption and Government Revenue Loss in Indonesia

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Illicit cigarettes, lower consumer prices, threaten national tobacco control efforts, and reduce excise tax

collection. We use two methods; the discrepancies between legal cigarette sales and domestic consumption estimated from surveys, and discrepancies between imports recorded by Indonesia and exports recorded by trade partners. From 1995 to 2013, illicit cigarettes first emerged in 2004. Illicit consumption makes up 17% in 2004, 9% in 2007, 11% in 2011, and 8% in 2013. Tax losses due to illicit consumption amount to between Rp 4.1 and 9.3 trillion rupiah, 4% to 13% of tobacco excise revenue, in 2011 and 2013. Conclusions: Illicit domestic production is most the important source, initiatives targeted to combat this illicit production carry the promise of the greatest potential impact.

Keywords: Illicit, Kretek, Cigarette, Tax loss, Indonesia

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Reference:

Ahsan et al.: Illicit cigarette consumption and government revenue loss in Indonesia. *Globalization and Health* 2014 10:75.

5-003

Impact of Increasing Tobacco Tax on Government Revenue and Tobacco Consumption

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Three objectives of imposing excise tax on tobacco; to raise revenue, to correct external costs, and to discourage consumption. Objective of this paper is to evaluate the benefit of tobacco tax increase for government revenue and decreasing tobacco consumption. We use econometric analysis of two part model to estimate the impact of increasing tobacco tax to government revenue and tobacco consumption using 2011 National Socio Economic Survey data. The impact of increasing tobacco excise tax to maximum allowable rate of 57% will increase cigarette price (38%), decrease cigarette consumption (18%) and increase government revenue from tobacco excise (58%). The higher the increase in tobacco excise, the higher the the increase in government revenue.

Keywords: Indonesia, Tax, Government Revenue

Aknowledgement:

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Reference:

Ahsan et al, Impact of Increasing Tobacco Tax on Government Revenue and Tobacco Consumption, SEADI-USAID Discussion paper No. 8, 2013

5-004

Cigarette Price Level to Decrease Consumption in Indonesia : A Qualitative Approach

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Smoking prevalence in Indonesia has increase significantly from 27 percent in 1995 to 34.7 percent in 2010. Increasing cigarette price is an effective measure to decrease cigarette consumption. Using focus group discussion (32 FGD) and indepth interview (23 interview) method in four provinces and several type of informants, we want to estimate the price level that will initiate to decrease consumption or quit smoking. We found that the common decreasing cigarette consumption price level is IDR. 50,000 per pack or IDR. 5,000 per stick. The current price level is far below from IDR 8,000 – IDR 20,000. There are many supports for increasing cigarette price by increasing tobacco excise from informants like smoker, non-smokers, policy makers, civil society, and member of local parliament.

Keywords: Indonesia, price, qualitative, consumption

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Reference:

Ahsan et al, Impact of Increasing Tobacco Tax on Government Revenue and Tobacco Consumption, SEADI-USAID Discussion paper No. 8, 2013

5-005

The Association between Tax Structure and Cigarette Consumption Across 17 Countries: Findings from the International Tobacco Control Policy Evaluation (ITC) Project

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Background: Recent studies show that greater price variability and more opportunities for tax avoidance are associated with tax structures that depart from a specific uniform structure. These findings indicate that tax structures other than a specific uniform one may lead to more cigarette consumption.

Method: This paper aims to examine how cigarette tax structure is associated with cigarette consumption. We analyzed survey data from the International Tobacco Control Policy Evaluation (ITC) Project in 17 countries. Self-reported cigarette consumption was aggregated to average measures for each country and wave. The effect of tax structures on cigarette consumption was estimated using Generalized Estimating Equations (GEE) after adjusting for WHO MPOWER policy scores and year fixed effects.

Results: Our study provides important empirical evidence of a relationship between tax structure and cigarette consumption. We find that a tiered tax structure is associated with a 42% increase in cigarette consumption ($p \leq 0.01$) compared to a uniform tax structure. Moreover, a 10% increase in the share of specific component among total excise taxes is associated with a 6% decrease in cigarette consumption ($p \leq 0.05$).

Conclusions: The results of this extensive multi-country study are consistent with existing evidence and suggest that a uniform and specific tax structure is the most effective tax structure for reducing tobacco consumption.

Keywords: tax structure, cigarette consumption, price variability

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5-006

The trend in affordability of tobacco products in China and Bangladesh: Findings from the ITC China and Bangladesh Surveys

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Background: The price of tobacco products in relation to income is recognized as a key determinant of tobacco use behaviour. While increasing price can reduce demand for tobacco products, the positive effect of income growth on demand can more than offset the negative effect of price increase and the net effect can be increase in demand. Thus the effectiveness of price increase as a deterrent to tobacco use depends on how much price increases in relation to income of the potential users. The aim is to examine the distribution and trend in affordability of tobacco products in China and Bangladesh.

Method: Existing studies have developed the relative income price (RIP) ratio to measure tobacco affordability. The higher the RIP, the less affordable are cigarettes. Using multiple waves of ITC Survey data on China and Bangladesh, this study measures RIP of cigarettes at the individual level as a ratio of self-reported price and self-reported income. The trend in the RIP by brand of cigarettes in China and Bangladesh and of bidi and smokeless tobacco in Bangladesh are examined. The shift in the distribution of affordability

over time is tested using the non-parametric Kolmogorov-Smirnov test. The trend in the affordability measure by tobacco product is estimated using multivariate linear regression analysis controlling for observable demographic and socio-economic characteristics of individuals.

Results: Both the univariate and the multivariate analyses reveal that the affordability of tobacco products has increased in Bangladesh and China. The tax increases in these high-burden countries are not enough to increase price significantly and reduce consumption that can outweigh the effect of income growth in increasing tobacco use.

Conclusion: The findings of the study would inform policy makers that in countries experiencing rapid economic growth, tax and price policies need to be stronger to counteract the effect of income growth on tobacco consumption.

Keywords: AFFORDABILITY, PRICE, INCOME, SMOKING

Acknowledgement:

Funding statement: The ITC China Survey was supported by the US National Cancer Institute at the National Institutes of Health (R01 CA125116 and P01 CA138389), the Roswell Park Transdisciplinary Tobacco Use Research Center (P50 CA111236), Canadian Institutes of Health Research (79551 and 115016); and Chinese Center for Disease Control and Prevention. The ITC Bangladesh Survey was supported by the International Development Research Centre (IDRC Grant 104831-002) and Canadian Institutes of Health Research (115016). Additional support was provided to Geoffrey T. Fong from a Senior Investigator Award from the Ontario Institute for Cancer Research and a Prevention Scientist Award from the Canadian Cancer Society Research Institute.

5-007

The association between tobacco prices and tobacco use onset: Evidence from the TCP India Survey

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Background: The use of tobacco including cigarettes, chewing tobacco, and bidis, is prevalent in India, one of the biggest tobacco users in the world. Despite this prevalence, how tobacco prices are associated with tobacco use onset have not been studied.

Objective: To analyze the association between prices of cigarettes, bidis, and chewing tobaccos with tobacco

use onset with any of these tobacco forms.

Methodology: The TCP India Survey by the International Tobacco Control Project contains information on the ages when tobacco users initiated the use of cigarettes, bidis, or smokeless tobaccos. Using this information, data were expanded to pseudo-panel data for duration analysis using a Discrete Time Hazard model. The prices of bidis, cigarettes, and chewing tobacco collected for constructing Consumer Price Index during 1997-2012 were linked to the TCP India data using state and year identifiers. Logistic regressions were employed to estimate the association of these three prices with tobacco use onset.

Results: Preliminary findings suggest that both cigarette and bidi prices significantly reduce ($p \leq 0.01$) tobacco use onset. When the prices of bidis or cigarettes were entered separately into the model, the results suggest that a 10% increase in prices is associated with a 3-4% reduction in the probability of tobacco use onset; when both the prices were entered to the model simultaneously, results suggest that a 10% increase in cigarette prices is associated with a 5% reduction in the probability of tobacco use onset while a 10% increase in bidi prices is associated with a 3% reduction.

Conclusions: We find that increased cigarette and bidi prices are associated with a lowered probability of tobacco use initiation in India. This finding suggests that increased tobacco prices may prevent youth and adults in India from harmful health consequences of tobacco use.

Keywords: PRICE OF CIGARETTES, PRICE OF BIDIS, PRICE OF CHEWING TOBACCO, TOBACCO USE

Acknowledgement:

Funding statement: The TCP India Project was supported by grants from the US National Cancer Institute (P01 CA138389), Canadian Institutes of Health Research (115016). Additional support was provided to Geoffrey T. Fong from a Senior Investigator Award from the Ontario Institute for Cancer Research and a Prevention Scientist Award from the Canadian Cancer Society Research Institute.

5-008

The Economics of Smallholder Tobacco Growing in the Philippines

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Background: The alleged negative effect of tobacco control on smallholder tobacco farmers is one of the most common arguments employed by the tobacco industry and its allies against efforts to stem tobacco use. Further, the industry consistently claims that tobacco farming is a lucrative economic endeavour, particularly

under contractual arrangements. There has been, however, little rigorous research examining farmers' economic livelihoods.

Objectives: We seek to evaluate the economic livelihoods of smallholder tobacco farmers in the Philippines, including how much money they earn from selling tobacco and the costs they incur to produce the crop, which includes a thorough evaluation of farmers' labour inputs. We also examine the contractual relationships into which thousands of tobacco farmers enter each season and the farmers' decisions to enter into these contracts.

Design: We designed and implemented an individual-level economic survey of 421 tobacco farmers across the major tobacco-growing regions. We also implemented 6 focus groups of tobacco farmers to validate the survey's findings and examine topics not addressed sufficiently in the survey.

Results: Our preliminary results suggest that there is considerable variation in the economic livelihoods of smallholder farmers cultivating tobacco in the Philippines as their main economic livelihood. The variables that help to explain this variation include education, location, the type of tobacco cultivated, land size, credit, debt and the nature of the contracts. The results also provide evidence to complement previous anecdotal evidence that tobacco farming is more labour-intensive than most crops and that including it even nominally in the cost calculations makes tobacco farming much less profitable.

Conclusions: The industry narrative that tobacco farming is a lucrative economic endeavour for farmers is much more complicated in the context of the Philippines where there is significant variation among growers.

Keywords: SMALLHOLDER TOBACCO FARMERS, TOBACCO FARMING, ECONOMIC LIVELIHOODS

Acknowledgement:

Funding statement: This project received funding from Johns Hopkins Bloomberg School of Public Health with funds from the Bloomberg Initiative to Reduce Tobacco Use.

5-009

Recent Cigarette Tax Adjustments in China and Chinese Tobacco Industry Pricing Strategy: Findings from the ITC China Survey

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Background: In May 2009, cigarette excise tax rate at the producer level in China was increased. In addition, an additional 5% ad valorem cigarette excise tax was imposed at the wholesale level. The goal of this study is to investigate how this tax change affected cigarette price and consumption levels, and Chinese tobacco

industry pricing strategy.

Methods: Analyses were conducted using multiple waves of the International Tobacco Control China Survey data, a longitudinal survey of adult smokers in seven cities in China, and tobacco industry pricing data.

Findings: We found that the 2009 cigarette tax adjustments reduced wholesalers' profit margins. However, the reduction in profit margins was more pronounced among cheaper cigarettes. As a result, it provided incentives for cigarette manufacturers in China to increase the production of more expensive cigarettes. While statistically significant changes were not detected in the average retail prices within each class after the tax increase, we found that the share of smokers who reported smoked cheaper cigarettes dropped after the tax adjustment, and the overall average self-reported cigarette prices increased after the tax increase. In addition, the cigarette consumption decreased among those who reported smoked more expensive cigarettes after the tax increase. However, the overall change in cigarette consumption was not statistically significant.

Conclusions: The 2009 cigarette tax adjustments in China altered the incentives for cigarette manufacturers in favor of the production of more expensive cigarettes. Future tobacco tax policies in China should take into account the tax pass-through rate, as well as their influences on cigarette producers, with the goal of increasing tobacco product retail prices.

Keywords: CIGARETTE PRICE, CIGARETTE TAX, CIGARETTE CONSUMPTION

Acknowledgement:

Funding statement: The ITC China Survey was supported by the US National Cancer Institute at the National Institutes of Health (R01 CA125116 and P01 CA138389), the Roswell Park Transdisciplinary Tobacco Use Research Center (P50 CA111236), Canadian Institutes of Health Research (79551 and 115016); and Chinese Center for Disease Control and Prevention. Additional support was provided to Geoffrey T. Fong from a Senior Investigator Award from the Ontario Institute for Cancer Research and a Prevention Scientist Award from the Canadian Cancer Society Research Institute.

5-010

Tobacco Tax Index: Implementation of WHO Framework Convention on Tobacco Control Article 6 in ASEAN Countries

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Background: In 2014, the Conference of Parties to the WHO FCTC at its 6th session adopted the FCTC Article 6 Guidelines. As ASEAN countries (except Indonesia) ratified the WHO FCTC and implement the FCTC Article 6, Southeast Asia Tobacco Control Alliance (SEATCA), therefore, assessed the implementation

of the FCTC Article 6 in ASEAN countries based on the FCTC Article 6 Guidelines for the first time in the region.

Methods: The questionnaires based on the FCTC Article 6 Guidelines were developed and answered by representatives from each country (both civil society and government). The results were analyzed based on the actual policy implementation in the countries.

Results: Singapore currently has the highest tax burden as a percentage of retail price whereas the countries with lowest tax burdens are Cambodia and Lao PDR. Only Philippines and Singapore have taken into account public health factors in the formulation of tobacco tax policy through the consideration of tobacco product affordability. Most countries in ASEAN do not have any long-term tobacco tax policies with regularly evaluated fiscal and public health targets. Important obstacles in some countries are their ineffective tobacco tax structures and weak tax administration, as well as tobacco industry interference in tobacco tax policy formulation.

Conclusion: While some countries have made significant progress in implementing tobacco tax policies, the region as a whole has advanced slowly in the past few years, outpaced by economic and income growth. It is urgent for ASEAN countries to speed up the implementation of the FCTC Article 6 by utilizing the FCTC Article 6 Guidelines as a direction to achieve public health target.

Keywords: tobacco tax, tobacco tax policy, tobacco tax index, ASEAN, FCTC Article 6 Guidelines

Acknowledgement:

We would like to express our gratitude to the country partners, coordinators and tobacco control focal points in the ten ASEAN countries for providing information and other inputs.

5-011

Illicit tobacco trade disturbs tobacco control policies and affects local price and tax measures

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Because of some comprehensive tobacco control measures, Bangladesh is now market of illegal cigarette brands of more than 50 countries of South East Asia and European Union. Illicit tobacco trades both international and its counterpart at local level affect tobacco control policies related to tax and price measures undertaken by government which basically result in availability of foreign brands at a very low cost and loss of revenue for government with the ultimate gain of health hazards. Illicit tobacco trade is a global problem. Research has found; 1 per 10 sticks of cigarettes is sold illegally in global market.

11.6 per cent of the global illicit cigarette trade, and countries every year as a direct result of the cost of revenue was \$40.5 billion. According to research conducted by The International Organization Framework Convention Alliance (FCA) and Health Bridge (2010), the illegal tobacco trade volume in Bangladesh is of 944 billion per year which results in 445 million worth of revenue loss to the government. According to a study PROGGA (knowledge for progress) in 2011, about 100 types of smoked and smokeless tobacco products from more than 50 countries are being smuggled in Bangladesh. The result is 6% of country's total smoked tobacco (cigarettes and bidis) and 14 percent of smokeless tobacco are smuggled. It is also noticed that 4 out of 5 vendors and 3 out of 5 have no idea about the smuggled cigarettes. Pragmatic actions taken both by government and tobacco control organizations are highly effective in preventing illicit tobacco trade or streaming cigarettes under import duty. In this regards tobacco control organizations play vital role in sensitizing government agencies and creating awareness among buyers and sellers regarding the illegal stature of cigarettes. More comprehensive actions are to be taken in collaboration with GO-NGO and involvement of multiple agencies and stakeholders to change the scenario of illicit tobacco trade in Bangladesh.

Keywords: Illicit, Tobacco, price, Tax, Tobacco companies

5-012

The Trends of Cigarette Brand Switching among Urban Chinese Smokers: Findings from ITC China Survey, 2006-2015

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Background: The China National Tobacco Company (CNTC) relies heavily on flagship brands to compete on price, and brand identity and product differentiation to retain current smokers and entice new customers smokers. The understanding of Chinese smokers' brand switching behaviour over time is critical to guide tobacco control polices to reduce cigarette consumption and smoking prevalence. However, little is known about the trends of brand switching behaviour among Chinese smokers. This study aims to examine this phenomenon.

Method: Self-reported brands came from a cohort sample of urban adult (aged 18+) current smokers from Waves 1 (2006) to 4 (2011-12) of the International Tobacco Control (ITC) China Survey in 7

cities.

Results: A total of 4,852 respondents provided full brand and variant information for at least two successive data-waves. Overall, brand switching rose steadily from 64.5% to 78.8% between Waves 1 and 4 ($p < 0.001$). Between-brand (two different brands) switching increased from 47.5% to 55.9% ($p = 0.03$) and within-brand (two different same-brand variants/different variants of the same brand) switching rose increased from 17% to 22.9% ($p = 0.03$). Between Wave 3 (2009) and Wave 4 and of all smokers, 52.9% switched from a lower- to a higher-priced brand or brand variant compared to 17.6% in the opposite direction, only 29.6% did not switch price. In the case of between-brand switching and of all smokers, 16.6% switched from non-flagship to flagship brands compared to 4.6% in the opposite direction.

Conclusion: Brand switching, both between- and within-brands, rose considerably over time where more higher number of smokers chose to buy more expensive brands or brand variants. Increases in tobacco affordability and positive societal perceptions of premium brands may have led to the surge of smokers trading up their cigarette brands. Stronger tobacco control measures should be taken to raise the retail price and negate the CNTC's strong marketing efforts.

Keywords: flagship brands, brand switching, CNTC, non-flagship brands

Acknowledgement:

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5-013

The forecasting impact of raising tobacco tax

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The objectives of this research were to provide people and relative departments the knowledge and awareness about impaction of increasing tobacco tax, to preparing for a situation of Trade down effect and to prepare the government support measure. The method continues by TaXSim model to analyze the impaction from increasing tobacco tax rate, tobacco tax structure, consumer behavior, the income taxes and consumption of tobacco. In February 2016, Thailand has been an increase in the tax from 87% to 90%, which are the important variables to estimate the impact of higher cigarette taxes. The elasticity flexible price rate by WHO. The result suggested that the impact of smoking on the income from taxation is excise tax revenues are increased 10,834 million baht, VAT revenues increased 636 million baht, Thai health promotion(THP) revenue increased 162 million baht, Thai public broadcasting service(TPBS) revenue increased 121 million baht, Provincial Administration Organization(PAO) revenue decreased 494 million baht, and an income to support sports fund 1,364 million baht. The impact of cigarettes price level in premium, middle and economy cigarette increased 21, 16 and 10 baht/ pack, respectively. The impact of changing consumer behavior after summing of Trade down effect has decreased 185 million pack and smokers adapt to use roll-your-own increase 854 million tons. The impact occurred with tobacco making RYO excise tax revenues increased 10 million baht to 22 million baht and the use of RYO after a sum of Trade down effect had increased 1037 tons/year. It is evident that the rising tax rate effects on economics that mean the most important concentrated issue is Trade down effect. It should be raised RYO taxes to reduce or eliminate the Trade down effect, cancel the tax exemption of native RYO and oversight as well as non-native RYO and adjusting taxation of PAO from the tax per pack to taxable value of the retail price.

Keywords: tobacco tax, forecasting, impact, tobacco, Thailand, TaXSim model

Aknowledgement:

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Reference:

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- [2] TaXSiM model, Dr.Ayda Yurekli (WHO Tobacco Free Initiative)

5-014

Country-specific Tobacco Control Cost and Financing Sources to Support Full Implementation of WHO-FCTC

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Background: One of the major obstacles to the full implementation of the Framework Convention of Tobacco Control (FCTC) tobacco control measures is the lack of sustainable resources.

Goal: To help policymakers establish sustainable mechanisms to fund and accelerate the comprehensive implementation of the FCTC.

Approaches: To construct a user-friendly tool that juxtaposes and summarizes the following five key items that are crucial to identifying sustainable measures for implementing the FCTC: (1) affordability of tobacco products, (2) tax revenues, (3) health costs of tobacco use, (4) implementation of FCTC policies, and (5) the costs of policy implementation. We also selected countries including China, India, the Philippines, Russia, Jamaica, Romania, and Poland to conduct an in-depth analyses of these five components and how to seek sources to finance FCTC implementation in these countries.

Findings: Compared with cigarettes in many other upper-middle-income economies, cigarettes in China are very affordable. In addition, bidis in India are relatively affordable compared with cigarettes. Taxes and prices in many countries have room for further increases. Based on a recent model published by the World Health Organization (WHO) researchers, further tax increases would reduce smoking-attributable non-communicable disease and are likely to increase annual tax revenues in many regions.

Conclusions: Tax increases not only will decrease smoking rate and smoking-attributable non-communicable disease but also can be used to finance the implementation of FCTC in the country to gain further public health benefits.

Keywords: FCTC implementation, finance, tax, cost.

Acknowledgement:

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5-015

Public Support to Increase Cigarette Price and Excise to Finance Universal Health Coverage in Indonesia

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Indonesia is the highest prevalence of smokers, 67% man are smoker. Smoking prevalence among adult, youth and woman increasing sharply. High consumption of cigarettes may be correlated with low price and excise of cigarettes. Burden of disease related tobacco consumption has increase. More over BPJS experienced deficit of IDR 6 Trillion 2014. The difficulties to collect non formal worker as JKN participant also cause the miss match financing UHC in Indonesia. One of the effective way to reduce cigarette consumption by increasing cigarette price through increasing cigarette excise. By increasing excise the government increase revenue to finance health insurance. The question is do people support? This study explored the possibility the people support increasing cigarette prices. This polling conducted to explore cigarette consumption and perception of price increase to finance UHC . This study use polling by phone conducted December 2015-January 2016, The sample (N=1,000) was randomly selected using systematic random by the interval of 20,000. The Analysis conducted use descriptive and logistic regression analysis. Data of smoker in Indonesia based on polling are 41.5%. More than 80.3% (N=976) respondents agree to increase cigarette price for health financing (83,4% non smoker agree and 75,9% smoker who agree increasing cigarette price). 33.3% respondent who smoke believed price in above 50.000 will make they thought to decrease cigarette consumption and 68.9% believed that they will stop smoking. The highest smoker are include in nonformal sector work. This group (nonformal worker respondent) also give strong support to increase cigarette prices to finance UHC. Cigarette smoking continues increase and impact in serious health and economics problem in Indonesia. The strong support expressed in this survey can be consideration and convince policy maker reduce cigarette use by increasing cigarette price through excise significantly.

Keywords: Tobacco Control, Cigarette Price, Cigarette Excise, Public Support, Universal Health Coverage

5-016

Experiences of advocating for strong policies on tobacco excise tax in Vietnam

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Background: Vietnam is one of the countries with highest number of smokers in the world. Tobacco tax and price is approved as the most cost effective measure to reduce tobacco use. In Vietnam, the excise tax rate for cigarette in 2008 Excise Tax Law is 65% on the ex-factory price, equivalent to 41.6% of the retail price which is much lower than the World Bank recommended rate. The Government revised this Law in 2014 and 2016 but a strong lobby from the tobacco industry threatened to delay and weakened the law.

Aims: • To advocate for higher excise tax rate in the 2014 Excise Tax Law and higher tax base in 2016 Law on Amending three laws, including 2014 Excise Tax Law. • To increase the support and commitment of policy makers, and the support of public and media for passing the Laws with strong provision.

Strategies: • Generating and gathering evidence, best practices for dissemination to agencies in charge of law development. • Building relationship with and capacity of policy makers, media and other partners. • Monitoring and exposing interference of the industry.

Program process: Partnership with the Drafting Committee of the laws and related Ministries and agencies allowed us to follow up with the process and to send comments on the draft of laws. A series of study on tobacco economics and tobacco tax system, and lesson learnt on tobacco tax increased were conducted and disseminated to the developers of the law and the media. Workshops were organized for media which resulted in series of articles published. Media surveillance was conducted to monitor media coverage, identify gaps of information, and industry interference tactics.

Outcomes: • The 2014 Excise Tax Law was passed with the increased tax rate from 65% to 70% in Jan 1st 2016, from 70% to 75% in Jan 1st 2019. The higher tax base was revised in 2016 Law on Amending three laws. • Improved awareness among policy makers and the media on the effectiveness of higher tobacco tax in tobacco control.

Keywords: Advocacy, tobacco excise tax rate, Excise Tax Law, Vietnam

Acknowledgement:

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5-018

Big data and small data approaches to measuring global progress on taxation

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Context: The price of the most sold brand of cigarettes is the basis for computing excise tax shares and measuring global progress on tobacco taxes. While both easy to understand and implement cost-effectively, an unanswered concern is whether tracking a few prices across countries and over time provides enough

information on the impact of tax on prices in comparison with other approaches, like market-share-weighted average prices. This is the first systematic validation of cigarette price data collected globally.

Methods: Price data was systematically collected, matched and validated across four sources - World Health Organization's 2014 report on the tobacco epidemic (185 countries), Euromonitor International annual survey of country brand prices (80 countries), the Global Adult Tobacco Survey (27 countries), and individual countries' national household surveys (6 countries). Brand name matches of most sold brand prices were performed and statistical tests of equality conducted. Empirical distributions of price, both weighted and unweighted by market shares, were constructed to understand the spread of prices in each of 80 countries.

Findings and policy implications: For the 80 countries with matched data, most sold brand price collected in 2014 was highly correlated ($r = 0.82$), with many exact matches, providing support to the use of a single brand price to track tax policy. Comparisons of empirical price distributions however, demonstrate three patterns important for a fuller picture of whether tax policy changes raise prices and change price distribution to reduce demand 1) presence of kink points in price distributions 2) Changes in the count and range of product prices and 3) price data collection dates that do not synchronize with tax policy change dates. These findings point to the superior ability of higher frequency price-collection methods to track and react to industry pricing strategies evolve, particularly around tax announcements.

Keywords: Price measurement, Taxation, Validation

5-019

Before and after of price raise of tobacco in Korea: Findings from the ITC Korea Waves 2-4 survey.

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OBJECTIVES: We investigate the effect of cigarette price on quitting smoking in high smoking persistent people after price increase from December, 2015 with new data from the ITC Korea waves 5 survey in 2016. And we study other factors including non-tax tobacco regulation policies associated with motivation of quitting smoking compared to price.

METHODS: We analyzed the cross-sectional data of 1,514 smokers (female, 7.8%) from Wave 4 of the ITC Korea Survey on July 2016. We have seen a general trend and changes of wave 4(2016) compared to wave 2(2008) and wave 3(2010). Then logistic regression analyses on people who intend to quit smoking during non-quitting smokers were conducted to identify effectiveness of tobacco tax policy and other factors.

RESULTS: The cigarette price went up from KRW 2,500(US\$3.10)/pack to KRW 4,500(US\$4.01)/pack. Odd

ratio of the price of cigarettes was 2.003 (95% CI 1.604-2.503) and statistically significant. Concern for personal health had the highest Odd ratio (4.667, 95% CI 3.654-5.962). And younger age, higher education, less amount of cigarettes smokers, information about the health risks, warning labels, free stop-smoking medication, telephone helpline, smoking restrictions at work or public places, and so on were also effective significantly.

CONCLUSIONS: The effect of tobacco tax policy was similar to that of smoking restrictions at work. However, we showed that it was successful because we have seen changes of response on some questions associated price: The response rate of ‘somewhat or very much’ on the question that the price of tobacco led them to quit in the past 6 months has increased. And the response rate that they agree the cigarette price increase since 2015 made you try to quit was 56%(N=725 of 1,514). They tend to attempt to quitting smoking in lower price than the wave 2-3 surveys. We are also planning to evaluate the success of the tobacco tax policy by comparing wave 4 to wave 2 and wave 3.

Keywords: price raise, tobacco tax policy, ITC Korea, tobacco regulation, logistic regression

5-020

Civil Society’s (CSO) Role in Philippine Sin Tax Reform

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Context: The Philippine Sin Tax reform is deemed global best practice where practically a tenfold increase in taxes was justified for health reasons. For countries that have yet to increase taxes, much can be learned from the CSO groundwork that contributed to this.

Objectives: To map CSO’s contribution in the Sin Tax Reform through key informant interviews and review of media monitoring reports

Results: Laying the groundwork for advocacy and removal of TII by CSO action are the most significant contribution of CSO’s to Sin Tax Reform As early as 2009, a health law group HealthJustice (HJ), with SEATCA funding, initiated economic research and built the capacity of the victim’s group (NVAP) and economic advocates (AER) to tap CTFK’s resources for advocacy. Taking advantage of a new administration in 2010, HJ provided the strategic framing by tying the need to increase tobacco taxes to fulfill a campaign promise to provide Universal Health Care (UHC); and published, through the UP Law, the method for computing lives to be saved and the exact amount of taxes needed to discourage purchase. CSOs systematically disseminated the same: • FCAP, PCS, PMA and other medical groups, along with AER, constantly reached out to politicians and government officials. Members of the academe and HJ /SEATCA continued to provide technical information. • NVAP played a significant role in lobbying, changing the debate from economics to health through the presence of the victims of tobacco in hearings,

mass action such as “Right to Health Walk,” and media expose of tobacco industry interference (TII) such as denouncing the pro-tobacco stance of politicians. Among others, some of these actions contributed to the resignation of key officials that are defending the tobacco industry positions. At the height of the campaign, the issue reached 10,000 views and generated more than 2,000 likes on specific articles posted un-promoted on Facebook.

Keywords: SIN TAX, TAX, CSO, PHILIPPINES

6-015

Working with and motivating policy makers to impose 1% health development surcharge from all tobacco products for sustainable funding for tobacco control

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Purpose: Establishing the health development surcharge (1%) from all tobacco products in Bangladesh.

Methods and Materials: Tobacco control movement in Bangladesh actually began in 1980s and got organized through preventing “Voyage of Discovery” by a writ petition by some organizations and formation of Bangladesh Anti-Tobacco Alliance (BATA), a platform of more than 700 organizations. Through continued advocacy government being sensitized started to act; ratified and enacted first tobacco control law in 2005 (Later amended in 2013). Tobacco control organizations continued advocacy and organized programs for imposition of higher tobacco taxation and 2% health promotion surcharge on all tobacco products for sustainable tobacco control. In this regard multiple programs i.e. roundtable meeting, human chains and high level meeting with all stakeholders are announced and are being organized for ensured and sustainable tobacco control.

Results: As a result, higher taxation on all tobacco products has been imposed since the enactment of law in 2005. Due to continued advocacy and mass movement Ministry of Health & Family Welfare demanded a 2% health promotion surcharge on all tobacco products in addition to regular taxation from 2014-2015 fiscal years. According to this demand, Ministry of Finance has imposed 1% health promotion surcharge on all locally produced and imported tobacco products. Until January 2016, 40.34 million US dollars (314 million to 68 million taka) has been deposited and the fund is entrusted to National Tobacco Control Cell for sustainable funding for tobacco control. Conclusion: The formulation of tobacco control law according to the FCTC legislation, implementation, monitoring, and finally 1% surcharge to pay from all kinds of imported and locally produced tobacco products for sustainable health development is considered an important step in tobacco control and sustainable health promotion in Bangladesh.

Keywords: health development surcharge, sustainable funding, tobacco control



议题 (六)

Tobacco control and disease control
控烟与疾病控制

6-001

Current State of Smoking, Prevention, and Treatment for People Who Identify as LGBTQ outside of the United States: A Systematic Review

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To date, none of studies have systematically examined the smoking behavior and treatment in lesbian, gay, bisexual, transgender, and queer (LGBTQ) populations outside of the United States. To gain the understanding of LGBTQ smoking behaviors, we reviewed articles gathered from PubMed, ScienceDirect, and Web of Science and organized them into two groups: studies in Western countries (n=20; 69%) and Eastern countries such as China(n=9; 31%). LGBTQ individuals outside of the United States are at elevated risk of smoking. Studies need to be conducted in countries that have not explored the smoking behaviors among LGBTQ populations. Furthermore, studies suggested that developing tailored smoking cessation program for LGBTQ populations may be effective to decrease the high smoking prevalence.

Keywords: Tobacco control and prevention, Smoking Disparity, Sexual Minority Populations, Systematic Review

6-002

吸烟与中国城市女性原发性肺癌死亡率的研究

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【目的】分析吸烟与中国城市女性原发性肺癌（肺癌）死亡率的关系。

【方法】选取 1986~1988 年全国人口死因与吸烟情况的调查资料，根据各城市肺癌患者死亡数量，选取例数较多的 27 个城市中 35 ~ 69 岁女性患者死亡病例的资料，分析吸烟与中国城市女性肺癌死亡率的关系。结果：北京、天津等 27 个城市 35 ~ 69 岁女性在 1986 ~ 1988 年肺癌死亡率合计为 35.65/10 万；生前吸烟者 38.42%。20 岁前开始吸烟、20 ~ 25 岁开始吸烟、每日吸烟量 10 ~ 19 支、累计吸烟年限 ≥ 40 年与肺癌死亡率均呈正相关，r 分别为 0.59 (P = 0.001)、0.51 (P = 0.007)、0.44 (P = 0.02)、0.55 (P = 0.003)；35 ~ 49 岁、50 ~ 59 岁生前吸烟者比例与该年龄组肺癌死亡

率呈正相关, r 分别为 0.52 ($P = 0.005$)、0.44 ($P = 0.02$)。结论: 中国城市女性开始吸烟的年龄、每日吸烟量、累计吸烟年限和生前吸烟是肺癌发生的重要危险因素。

Keywords: 原发性肺癌, 流行病学, 吸烟, 死亡率

6-003

Analysis on passive smoking status among pregnant women

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Objective The survey aimed to assess the prevalence of passive smoking among pregnant women to explore its influencing factors. **Methods** 426 subjects were surveyed by questionnaire. The subject's characteristics and the predictors of passive smoking were analyzed by logistic regression. **Results** The prevalence of passive smoking of pregnant women was 58.5%, and main place was their home. The logistic regression identified two predictors of exposure to passive smoking: pregnant women's awareness of Secondhand Smoke (SHS) and smokers in family. **Conclusion** Pregnant women has high rate of passive smoking. Pregnant women having smokers in family are the key population for SHS intervention. Providers' capacity of Intervention would be strengthened in the maternal and child health institutions.

Keywords: Pregnant women, Passive smoking, influencing factors

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6-004

Assessment of Heart Rate Variability and Its Correlation with Pulmonary Dysfunction in Smokers

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Cigarette smoking is associated with cardiovascular mortality and also important risk factor for lung diseases. Smoking causes of sympathovagal change, which can be assessed by the heart rate variability (HRV) technique. The purpose of this study was to investigate changes that occur in HRV and pulmonary function in acute effect of smoking. This study was done on 60 males of smokers and nonsmokers. Time domain (the mean R-R interval; RRI, the standard deviation of R-R interval; SDNN, the root mean square of successive R-R interval differences; RMSSD, and the proportion of adjacent normal RR intervals differing more than 50 ms from the preceding RR; pNN50) and frequency domain (high-frequency; HF, low-frequency; LF, and low-frequency/high-frequency ratio; LF/HF) parameters of HRV were obtained from all subjects and for 5-min and 15-min ongoing for smokers after completing a cigarette smoking. The spirometric measurement (forced vital capacity; FVC, forced expiratory volume in 1 s; FEV1, and forced expiratory volume in 1 s/forced vital capacity; FEV1/FVC) parameters of lung function test were obtained from all. The RRI, SDNN, RMSSD, pNN50, LF, HF, and FEV1 significantly decreased in smokers but LF/HF, FVC, and FEV1/FVC (%) were not different in both groups. Within the first 5 min after smoking, RRI significantly decreased, while LF/HF significantly increased. In addition, there was no difference between the two groups of baseline and after smoking of SDNN, RMSSD, pNN50, LF, and HF. Moreover, there was a correlation between FEV1/FVC (%) and LF/HF ratio ($r = -0.62$, $p\text{-value} < 0.001$). The HRV analysis on acute smoking can represent the autonomic modulation and which characterize the sympathetic increasing and vagal blunt for heart control, particularly after 5-min smoking. The dysfunction of autonomic system contributes to fatal arrhythmias. Then, the HRV of heavy smokers can be used to predict the risk of cardiac diseases and severity of pulmonary dysfunction.

Keywords: heart rate variability, pulmonary function test, smoking

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6-006

Cross-Cultural Adaptation and Reliability of the Modified Positive and Negative Affect Schedule (Modified PANAS) to Thai

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Background: The Positive and Negative Affect Schedule (PANAS) is one of the questionnaires used to evaluate the mood in normal subject and smoker. The changing in the mood will occur in the smoking cessation and can cause the failure from smoking cessation. Mood have been associated with smoking relapse. Therefore, the mood of smokers should be evaluated in cessation period. The original version of the PANAS is in English but has not been translated into Thai.

Objectives: To translate the Positive and Negative Affect Schedule (PANAS) into the Thai language by using the standard method according to the cross-cultural adaptation process and to evaluate the test-retest reliability and internal consistency of the Thai version.

Methods: The PANAS was translated into Thai according to the cross-cultural adaptation process. Afterward, participants completed the questionnaire two times, at baseline and 7 days after. The intraclass correlation coefficient (ICC) and Cronbach's alpha were calculated for the test-retest reliability and internal consistency, respectively.

Results: The average age of 40 participants was 34.91 years. Participants smoked an average of 9.98 cigarettes per day over an average period of 12.41 years. The ICC (3, 1) of positive affect of PANAS was 0.93 and the ICC (3, 1) of negative affect of PANAS was 0.95. Cronbach's alpha of positive affect of PANAS was 0.89 and Cronbach's alpha of negative affect of PANAS was 0.90.

Conclusions: Overall, the ICC and Cronbach's alpha of this Thai version was excellent. Therefore, this modified PANAS could be used to evaluate the mood of Thai smokers in the clinic and in research.

Keywords: Positive and Negative affect schedule, PANAS, Modified Positive and Negative Affect Schedule, Modified PANAS, Modified PANAS to Thai

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6-007

Physical Therapists' Awareness and Roles in Tobacco Control in Thailand

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Physical Therapy Network of Thailand for Tobacco Control has been developed in 2005. It has a vision of “Physical therapists are aware of and participate in tobacco control” and developed several strategic planning for sustainable smoking control. This survey study aims to describe physical therapists' awareness and roles in tobacco control and evaluate their knowledge about tobacco and counseling for smoking cessation. The samples were 309 physical therapists who attended 4 physical therapy conferences (between 2012 and 2013). Data was collected by self-reporting questionnaire and analyzed using descriptive statistics. The results showed that majority of physical therapists (66.66%) were aware of participating in tobacco control at high to very high level. Most physical therapists (66.02%) had roles in tobacco control. The most frequent role was advising smokers to quit smoking. The least frequent roles were assessing smoking addiction level and referring smokers to smoking cessation clinics. The main barrier in participating tobacco control was the lack of knowledge and skills in counseling for smoking cessation. The findings of this study suggest that physical therapists need more knowledge and skills in counseling for smoking cessation and should be encouraged to have more roles in referring smokers to cessation clinics.

Keywords: Physical Therapist, Tobacco Control, Awareness, Roles

Acknowledgement:

1. Thai Health Promotion Foundation (ThaiHealth)
2. Physical Therapy Network of Thailand for Tobacco Control

Reference:

Thaveeratitham P, Janwantanakul P. Case study: The survey of the role of physical therapists in Thailand on tobacco control. *Thai Journal of Physical Therapy* 2008; 30:106-16.

6-008

Attitude, Knowledge, Self-awareness and Tobacco Smoking Behaviour among Patients with Cancer Receiving Chemotherapy at Siriraj Hospital, Thailand

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This descriptive research aimed to investigate the attitude, knowledge, self-awareness, smoking behavior and the factors associated with smoking behavior among cancer patients at the Medical Oncology Clinical Outpatient Siriraj Hospital, Thailand. Patients who were recruited by simple random sampling from May 2015 to August 2015 completed self-rated questionnaires on socio-demographics data, disease and treatment characteristics, smoking status, Fagerstrom's test for nicotine dependence, knowledge of smoking, attitude towards smoking, and self-awareness. Then data were analyzed and presented by descriptive statistic, chi-squared test, Independent t-test, and forward stepwise logistic regression analysis. The result revealed that a majority of samples showed the attitude toward smoking at negative level (agree with no smoking) and demonstrated the knowledge of tobacco use at high level. Nevertheless, most of patients showed the self-awareness at medium level. The prevalence of current smoker was 16% (n=42). Additionally, there were six factors associated with continued smoking (current smoker) among cancer patients post diagnosis significantly differences at 0.05 level by forward stepwise logistic regression. There were male gender, having a history of substance use, a less duration of time since diagnosis, exposed to environmental tobacco smoke or secondhand smoker (SHS), the attitude toward smoking at neutral level, the knowledge of tobacco use at medium to low level.

Keywords: Tobacco use behavior, Cancer patients, Knowledge, Attitude, Self-awareness

Acknowledgement:

1. Tobacco Control Research and Knowledge Management Center (TRC)
2. Thai Health Promotion Foundation (ThaiHealth)

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6-009

The healthy public policy process for Trang provincial driven tobacco control

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This action research aims to develop a model-Trang province driven tobacco control by using the concept of healthy public policy. The target group consists of 1) the leader of government sector, local sector, and public sector, 50 persons and 2) the cigarette sellers and restaurant owners totaled 240 persons. The operation included of five steps: 1) agenda setting 2) policy formulation 3) decision-making 4) policy implementation, and 5) policy evaluation. Data collected by the survey, group discussion, and in-depth interviews and analyzed by descriptive statistics and content analysis. The results showed that the

driving public policy to tobacco control of Trang province started from the coordinating parties. The public health policy consisted of 1) creating understanding law focused on the outreach campaign in the provincial and district levels to inform about the effects of smoking in all channels that is accessible to the public, such as a location-based radio campaign posters and leaflets, and 2) expanding non-smoking area started from government office and expand to public areas as markets, bus stations, and parks. The results found that the recognition of non-smoking area in the restaurant without air condition, hospitals health facilities official place and fresh markets increased (21.16%, 19.71%, 15.39%, and 15.16%, respectively). But operators of shops selling cigarettes to recognize legal cigarette / tobacco to those who are under 18 years of age is illegal, and putting cigarettes out through the cabinet but band not show is the ad cigarettes, a slight increase (4.11% and 3.7%), and the issues are still the misconception that giving smoking / tobacco to children and stuffing envelopes with small for sell to customers is illegal, increase (6.59% and 3.06%).

Keywords: Healthy public policy, province movement, tobacco control

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6-010

Income related health inequality among current smokers aged 35 years and over

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Background: The poor are more vulnerable than other socioeconomic group. The linkage between smoking and health inequality is empirical evidence which required the appropriate tobacco control policy.

Objective: to determine the prevalence rate of income inequality in health among Thai adults aged 35 years and above who were current smokers in 2013 and 2015.

Method: The 2nd data of health and welfare survey conducting by National Statistical Office was applied. A survey was used a two stage stratified cluster sampling to produce nationally representative data. Participants aged 35 years and over were selected for this study. Those reported current status of tobacco use, had ever been sickness in the last month, and have been diagnosed with any chronic disease. Income-related health inequality was defined as personal income and divided equally into quintiles

ranking from the poorest to the richest. Statistical analysis was performed by using descriptive and inferential statistics.

Results: In 2013 and 2015, there were no statistical difference in the prevalence of current smoking among Thai adults aged 35 years and above, 20.0% and 20.3%. Among current smokers, the wider gap of those who present any sickness in the last month was observed, at totally 32.3% (25.4% of the poorest vs 17.2% of the richest) and then increased to 38.5% (23.1% of the poorest vs 14.2% of the richest). The prevalence rate of the poorest who were current smokers and present any chronic disease was increased 23%, from 27.4% in 2013 to 33.7% in 2015. Meanwhile, the richest was increased 10%, from 14.3% to 15.7%. The income related inequality in chronic disease was wider between the poorest and the richest from 43.9% (27.4% vs 14.3%) to 53.4% (33.7% vs 15.7%).

Conclusion: These findings suggest that linkage between health outcome and smoking among different of socioeconomic status has a vicious circle. So, the implication of tobacco control policy should be concern about the poverty.

Keywords: Health inequality, socioeconomic group, the poor and the rich, chronic disease

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6-011

Exposure to Second-hand Smoke and Correspondent Burden of Diseases in Guangdong Province, China

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Objectives: The study aimed to investigate the exposure to second-hand smoke in Guangdong Province, China, and to estimate the burden of diseases attributable to the exposure. Research finding would provide evidence in pushing tobacco control legislation in the province.

Methods: The survey was conduct in 2010 in ten districts/counties throughout Guangdong Province which were selected by multi-stage stratified cluster sampling strategies. Residents aged 15 to 69 were investigated through questionnaires. The study also used data from the Health Statistic Data in 2005 and 2010 and data from a retrospective survey on death causes from 2004-2005 in Guangdong Province. Deaths and DALYs (disability adjusted life year) loss attributed to second-hand smoke

exposure was estimated following the handbook of disease burden evaluation which was released by the WHO in 2010.

Results: Smoking rate was 20.1% among the 2,121 respondents, with 37.2% in male and 2.0% in female. the prevalence of exposure to second-hand smoking among adult non-smokers was 63.8%, with 62.9% in male and 64.2% in female respectively. Seventy percent of those exposed almost every day under second-hand smoke, and homes, working places and public places were places with heavy exposure. It was estimated that at least 9,699 deaths and 108,393 DALYs loss attributed to second-hand smoke in 2005.

Conclusions: The people are highly exposed to second-hand smoke and were suffering heavy diseases burden in Guangdong Province.

Keywords: Tobacco Control, Second-hand Smoke, Burden of Diseases

6-014

The Role of Medical Insurance in the Chinese Elders' Behaviors of Smoking and Quit Smoking

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In the midst of rapid ageing population and rising medical cost, smoking cessation policy is more emphasized by Government of China. The Government has already referenced to public health approach to reform her medical care system and deliver smoking cessation policy to reduce the impacts of ageing population and rising prevalence rates of chronic diseases on medical expenditure. However, there are limited studies for the relationship between China' medical care system and elderly smoking behaviors, including behaviors of smoking and quit smoking. The study adopts national elderly data, namely the China Health and Retirement Longitudinal Study (CHARLS), to investigate into the relationship between medical care system and elderly smoking behaviors with control variables, including socio-economic background, disability status and chronic diseases. According to the results of logistics regression model, there is no significant relationship between

smoking behavior and the medical insurance for urban residents and urban employees, whereas, new rural cooperative medical insurance is positively correlated to the likelihood to smoking and negatively correlated to the likelihood to quit smoking among the elderly population. Besides, aged above 75, having chronic diseases and visual disability increase the likelihood to quit smoking, but no formal education and hearing disability decrease the likelihood to quit smoking. Aged above 75 and marred lower the likelihood to smoking, but male, having hearing disability and respiratory disease enhance the likelihood to smoking. As a result, China's medical care system has not yet fully utilized her role in public health approach. It is better for China's medical care system to borrow from the experience of Macau's medical care system to pay attention to public health approach. Keywords: ageing population, medical care system, social insurance, tobacco smoking, behavior of quit smoking.

Keywords: smoking cessation, policy, ageing population, medical care system, social insurance, tobacco smoking, behavior of quit smoking

Reference:

Koplan, J., Eriksen, M., Chen, L., & Yang, G. (2013). The value of research as a component of successful tobacco control in China. *Tobacco Control*, 22, Ii1-Ii3. doi:10.1136/tobaccocontrol-2013-051054



议题 (七)

Tobacco control among youth
烟草危害与青少年控烟

7-001

Establishment of Smoke Free Area & Drug Prevention with Drug Addicted People Treatment Programs

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The purpose of the project is to strengthen GO- NGO cooperation for improved Framework Convention Tobacco Control (FCTC) implementation WBB Trust is particularly well- placed, being the Secretariat for a strong, active alliance (Bangladesh Anti Tobacco Alliance or BATA) with a network of over 500 NGOs throughout the country which will work actively with WBB in this project. In order to reduce Tobacco & drug prevention use the FCTC is critical as it covers the important aspects of the project; meanwhile, implementation can only be successful if it is carried out in partnership between Government and non-Government Organizations.

Keywords: # New strengthened and or better enforced to direct/indirect tobacco & drug prevention advertising bans. # New strengthened and or better enforced to smoke free policies& drug prevention.

Acknowledgement:

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7-002

The Development and Evaluation of the Effectiveness of Vernonia cinerea Cookies for Smoking Cessation

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The study aims to evaluate quit rates, side effects, users' satisfaction related to Vernonia cinerea cookies. Materials and Methods: It is a quasi experimental, randomized, controlled study. Totally there were 63 participants in this study. A study group received Vernonia cinerea cookies alongside with some advice, whereas, a control group received normal cookies. Results: most participants were males, an average age is 13. Quit rates in study group at 1,3, and 6-month were 81.8, 97, and 81.8 percent. Noticeably, there was a significant difference of quit rates at 1, 3, and 6-month between study and control groups ($p<0.001$). The results found CO levels at 1, 3, and 6-month of study group were significantly different ($p<0.01$).

Keywords: Vernonia cinerea, Vernonia cinerea cookies, smoking cessation

Acknowledgement:

1. Ubon Ratchathani University
2. National Alliance for Tobacco Free Thailand

Reference:

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7-003

Prevalence and Influencing Factors of Smoking Behaviors among Vocational and Technical Students in a North-Eastern Province of Thailand

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This study aims to evaluate the prevalence and influencing factors related to smoking behavior of students in these two institutes. This is a cross-sectional, descriptive study. Totally, there were 302 participants. All participants filled up a questionnaire using rating scale. The relationships between variables were statistically analyzed. Participants in both groups were approximately 17 years old. The prevalence of cigarette smoking between the two groups were 6.2 and 1.4 percent. Mean scores related to the attitudes towards smoking,

both groups had high scores. However, the mean score in both groups related to self-esteem were low but significantly different ($p < 0.001$). The influencing factors related to smoking included gender, accommodation, and attitudes towards smoking.

Keywords: Vocational, technical college, smoking behavior, prevalence.

Aknowledgement:

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Reference:

[1] Dr.Prakit Vathesatogkit

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7-004

温州市大学生尝试吸烟及其影响因素调查

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【摘要】

【目的】调查温州市大学生尝试吸烟、二手烟暴露及校园控烟现状，分析影响大学生尝试吸烟因素，为制定针对大学生适宜的控烟干预措施提供依据。

【方法】采用分层随机抽样方法，对温州市2所高校510名学生吸烟相关行为进行现场自填式问卷调查。

【结果】发放问卷510份，回收有效问卷505份，有效应答率为99.02%。大学生尝试吸烟率33.50%，男生尝试吸烟率为50.80%，女生尝试吸烟率为16.50%，男生尝试吸烟率高于女生（ $P < 0.01$ ）；非医学院校学生尝试吸烟率19.60%高于医学院校学生13.86%（ $P < 0.01$ ）。现在吸烟率为9.31%，现在吸烟原因分析主要为社交/聚会中需要，占53.19%。多因素分析结果显示，女性是尝试吸烟的保护因素（ $OR=0.38, 95\%CI: 0.24 \sim 0.62$ ），而好朋友给烟劝吸是尝试吸烟的危险因素（ $OR=3.46, 95\%CI: 2.44 \sim 4.90$ ）。

【结论】大学生尝试吸烟率、有尝试吸烟意愿者的比例和二手烟暴露的比例均较高，在严格实施室内公共场所禁烟的同时积极开展学生控烟同伴教育活动，营造校园无烟环境。

Keywords: 大学生, 尝试吸烟, 影响因素

Aknowledgement:

无

Reference:

无

7-005

Smoking Behavior and Risk Factors with Early Smoking Initiation Among Thai Adolescents

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Introduction: This study aimed to investigate the prevalence of smoking and risk factors related to smoking behavior among adolescents.

Methods: it is a cross-sectional survey related to smoking behavior among Thai adolescents. Descriptive statistics, Chi-square tests and Logistic regression were used.

Results: The prevalence of smoking was 31.1 percent. Smoking rate among males and females were 54.4 and 13.2 percent. The causes of being a smoker included, curiosity (43.4%), stress relief (32.8%) and friend persuasion (22.1%). Parents and friend smoking, attitudes toward smoking behavior and academic achievement were related to early smoking of adolescents.

Conclusion: Family and school should promote non-smoking behavior. The law policies should be focused to minimize adolescent smoking

Keywords: adolescents, smoking behavior, risk factors

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7-006

艺术生吸烟行为及认知影响因素分析； Influencing factors of tobacco-related practice and knowledge among art academy students

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【目的】了解艺术院校在校大学生吸烟行为和烟草相关认知的状况，分析其影响因素。

【方法】采用分层整群抽样的方法，于2012年5月对广州市某艺术院校1701名在校大学生进行自填式问卷调查，描述烟草相关知识与态度，分析吸烟者与非吸烟者之间的差异以及大学生吸烟行为影响因素。

【结果】大学生烟草相关知识类得分16分（总分23分）；对“戒烟越早越好”正确认知率最高，为85.19%（1449/1701），不吸烟者（86.76%，1304/1503）正确认知率高于吸烟者（73.23%，145/198）（ $P<0.01$ ）；70.78%（1204/1701）的学生认为吸烟会导致皮肤粗超，不吸烟者（72.39%，1088/1503）比例高于吸烟者（58.59%，116/198）（ $P<0.01$ ）；75.84%（1290/1701）的学生认为被动吸烟会导致肺癌，不吸烟者（77.58%，1166/1503）比例高于吸烟者（62.63%，124/198）（ $P<0.01$ ）；对《烟草控制框架公约》的知晓率为25.51%（434/1701）；85.10%（1279/1503）的不吸烟大学生认为政府应该加大控烟的工作力度，高于吸烟者（64.65%，128/198）（ $P<0.01$ ）；调查对象尝试吸烟率和现在吸烟率分别为31.92%（543/1701）和11.64%（198/1701）；在校平均月生活费越高的大学生其尝试吸烟率（ $P<0.05$ ）和现在吸烟率越高（ $P<0.01$ ）；家庭平均月收入、在校平均月生活费、户籍所在地和饮酒情况是男生吸烟行为的影响因素（ P 值均 <0.05 ），在校平均月生活费和饮酒情况是女生吸烟行为的影响因素（ P 值均 <0.05 ）。

【结论】艺术生烟草相关知识知晓率普遍不高，不吸烟者知晓率高于吸烟者；吸烟率较高，应针对吸烟行为不同的影响因素采取相应的干预措施，才能取得较好的控烟效果。

Keywords: 烟草, 知识, 态度, 行为, 艺术生, 因素分析

7-007

广州某高职院校大学生吸烟行为及认知影响因素分析

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【目的】了解高职院校在校大学生吸烟行为和烟草相关认知的状况，分析其影响因素。

【方法】采用分层整群抽样的方法，对广州市某高等职业技术学院1849名在校大学生进行问卷调查，分析其烟草知信行情况。

【结果】大学生烟草相关知识类得分16分（总分23分）；76.42%（1413/1849）的学生认为吸烟会导致肺气肿，不吸烟者（77.34%，1304/1686）比例高于吸烟者（66.87%，109/163）（ $=76.42$ ， $P<0.01$ ）；调查对象尝试吸烟率和现在吸烟率分别为22.12%（409/1849）和8.82%（163/1849）；饮酒情况、饮食习惯是男生吸烟行为的影响因素（ P 均 <0.05 ），在校平均月生活费、户籍属性和饮酒情况则是女生吸烟行为的影响因素（ P 均 <0.05 ）。

【结论】高职生烟草相关知识知晓率普遍不高，不吸烟者的知晓率高于吸烟者；应针对吸烟行为不同的影响因素采取相应的干预措施，才能取得较好的控烟效果。

Keywords: 烟草, 知识, 态度, 行为, 高职生, 因素分析

運用遊戲法教學對青少年戒菸班其認知成效之探討

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【研究目的】吸菸對健康、社會、經濟與環境影響甚鉅，是全球公共衛生重視的議題。台灣 2014 年調查國中、高中生及 18 歲以上成人吸菸率為 5.0%；11.5%；16.4%。其中以國中女生吸菸率首度微幅上升，為維護青少年的健康，青少年時期的菸害防治教育工作更顯重要。本研究的主要目的在探討戒菸班學生其認知及吸菸行為、態度與拒菸自我效能相關因素探討，以作為推廣青少年戒菸教育的參考。研究方法：於 2015 年 4-12 月進行，採立意取樣，對象為台灣南部某縣市四所國中、二所高中、一所大學有抽菸且參與戒菸班 8 小時課程的學生，共收案 89 位。問卷設計 CVI 值 0.91；Cronbach α 值 0.94。研究變項包括社會人口學、親友的吸菸狀況、吸菸學生其吸菸行為、反菸態度與拒菸自我效能相關因素探討。認知評量採用『菸害認知賓果遊戲』，以競賽及獎勵措施測得同學真正學習狀況。

【結果】（一）社會人口學（ $n = 89$ ）：平均年齡 16.2 歲，男生佔 84.3%；女生佔 15.7%。國中生佔 36%、高中生佔 41.6%、大學佔 22.4%。（二）家庭因素：單親家庭佔 25%；自覺家庭經濟狀況不好者佔 75.3%；自覺父母對自己關心程度不好者佔 5.6%。（三）親友吸菸狀況：家人有吸菸佔 66.3%，好朋友有吸菸佔 96.6%，顯現同儕間的影響力。（四）個人吸菸行為：抽菸年齡平均 13.9 歲最小 9 歲開始，人生的第一支菸來自同學居多佔 42.7%，吸菸量每天 5 支以上居多 56.1%，繼續吸菸的理由多數是朋友有吸菸。（五）學生吸菸態度：總平均分數 3.31（滿分五分），顯現學生對反菸態度中立偏正向。不同族群平均分數：國中生 3.29；高中生 3.33；大學生 3.31，顯現高中生對反菸的態度優於大學生及國中生。（六）學生拒菸自我效能：總平均分數 3.11（滿分五分），顯現學生對拒菸自我效能中立偏正向。不同族群平均分數：國中生 3.11；高中生 3.18；大學生 3.01，顯現高中生對拒菸的態度優於國中生及大學生。拒菸把握度以聚會時，別人遞菸給我最無法抗拒。對戒菸成功把握度：國中生 3.28；高中生 3.11，大學生 2.75，顯現國中生對戒菸成功把握度優於高中生及大學生。（七）菸害防治認知評量採用『菸害認知賓果遊戲』，以競賽及獎勵措施來改善同學亂填問卷的問題，完成前後測認知評核結果（ $n = 89$ ），從 56.1 分提昇至 95.5 分， $p < .05$ 具顯著性差異（八）CO 檢測結果（ $n = 62$ ），介入後 CO 檢測 > 7 顯示有吸菸者佔 20.9%，其中國中生為 0%；高中生 5.6%；大學生 70.7%。結論：運用『菸害認知賓果遊戲』，採用競賽及獎勵措施，增加學生參與意願及菸害認知提昇具顯著差異。研究對象國中生及高中生多屬於嘗試期或經驗期，但大學生已有 70.7% 進入尼古丁依賴期。有 86.5% 的青少年想戒菸或嘗試過戒菸，因此青少年戒菸教育工作有其重要性，防治教育需著重於國中和高中時期。但在臨床實務面推動有其困難，發展活潑的問卷及上課加入遊戲法可增加青少年上課的參與意願。戒菸需要家庭支持與父母以身作則的示範，及社會各界落實執行菸害防治法，以期共同改善青少年菸害問題。

Keywords: 吸菸, 反菸態度, 拒菸自我效能

7-009

Youth and Tobacco Control in Indonesia: Embracing Davids to defeat Goliaths

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Indonesia is one of the few countries that has not yet signed or ratified the FCTC, and its young people are paying the price. Considering these matters, Youth Movement for FCTC (YM for FCTC) declared their campaign on April 12th 2015. It was initiated by 60 young people from 11 cities. The main objective is to ensure Indonesian government's political will to proceed the sign FCTC and support any tobacco control policy. To achieve this, they are gathering society supports in tobacco control, especially young generations as the primary target of cigarette industries. YM for FCTC was an online-based campaign on Facebook (FCTC Untuk Indonesia), web (www.fctcuntukindonesia.org), etc. As the support of this movement have surged through almost 40.000 petition supports (<https://www.change.org/dukungfctc>) and thousands of FCTC profile pictures, YM for FCTC also conducted countless offline activities to embrace more supporters, including street campaigns in front of the presidential palace, researches reviewing cigarette advertisements in schools, and 10.000 handwritten letters organized by 20 Youth Reformers of YM for FCTC from 17 cities in Indonesia demanding the president to sign FCTC. Through an ethnological research and leadership training conducted in YM for FCTC, we would be delighted to share the strategy of embracing youth participation in Indonesian tobacco control. We came up with two aspects of strategy: fundamental value and initiative value. The former consists six stages of fundamental values: clarification, persuasion, sympathy, empathy, collectivity, and action-oriented. As for the latter, it consists of a regeneration system called Collective Participation and Palpable Process Oriented. Even though tobacco control movement in Indonesia is still a minority as small as David in the Bible, we believe that if we can embrace more Davids from the young people, it will be easier to defeat the gigantic Goliath-alike influence of cigarette industries in Indonesia.

Keywords: youth, fctc, framework convention on tobacco control, indonesia, movement, young people, campaign, strategy

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7-010

Perceptions of risk and patterns of use of smoked tobacco products among youth in Mumbai

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Background: India is experiencing an epic of tobacco use among its children and youth. Evidence suggests that smoking tobacco is likely to increase as the tobacco industry concentrates its marketing on youth. However, little is known about patterns of use and attitudes towards smoked tobacco products among children in Mumbai.

Methods: A survey was conducted among 1,558 Students in 50 randomly selected government-run schools in 7th, 8th, and 9th grades were surveyed in Mumbai in 2014. The self-administered survey covered demographic information as well as questions about tobacco product use, perception of harms and family use of tobacco products among children. The results were analyzed using SPSS.

Results: Cigarettes (2.5%,n=39) were the most commonly reported smoked tobacco product ever used, followed by bidis (2.1%,n=33). Most students identified cigarettes (70.3%,n=1095) and bidi (57.6%,n=897) as harmful to their health. Only 8% (n=125) reported that hookah was a harmful product. Male students were more likely to report ever using cigarettes and bidis (cigarettes: 3.4% vs 1.5%; bidi: 2.5% vs 1.5%). Students who smoked cigarettes were significantly less likely to report that they were harmful to health (OR=0.3; 95%CI=0.1-0.9). Students whose father used tobacco were more likely to report ever use of cigarettes. (OR=0.4; 95%CI=0.2-0.8).

Conclusions: The low levels of knowledge and lack of perceived harm associated with these products is worrying and may lead to higher smoked tobacco use as children age. School-based tobacco control programs are needed to ensure students understand the risks of smoked tobacco use. Since reported use is low among students in grades 7, 8 and 9, this may be the ideal time to intervene on tobacco control in India. Given the

correlation between parental and child tobacco use, tobacco control programs targeting youth may benefit from the involvement of parents.

Keywords: mumbai, india, youth, smoked tobacco

7-011

Prevalence and patterns of use of smokeless tobacco in Mumbai schools

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Background: Smokeless tobacco use among children is a serious problem in India. Smokeless tobacco in the form of gutkha, khaini, mawa and mishri is more commonly used than smoked tobacco products. It is a major risk factor for diseases involving heart, liver and lungs. Due to health concerns, the Maharashtra government has banned the manufacture, storage, and sale of gutkha and scented / flavoured pan masala in the state.

Methods: A cross-sectional survey was carried out among 1558 students in the 7th, 8th and 9th grades in 50 randomly-selected government-run schools in Mumbai in 2014. Students were asked about smokeless tobacco use, perceptions of harm associated with these products and family use of tobacco products. The results were analyzed using SPSS.

Results: Mava (2.8%,n=44) was the most commonly reported form of smokeless tobacco ever used by students followed by mishri (2.2%,n=34), gutkha (1.9%,n=30) and khaini (1.2%,n=19). Male students were significantly more likely to report current and ever use of smokeless tobacco compared to female students ($p=0.03$). Less than half of the students were able to identify tobacco as an ingredient in mava (38.9%, n=607), mishri (39.1%, n=608), gutkha (33.4%, n=520) and khaini (30.2%, n=470). Students who used smokeless tobacco were significantly less likely to believe that smokeless tobacco are harmful ($p=0.01$). Students who used surrogate tobacco products (supari and pan masala) were more likely to report using other smokeless tobacco products than their peers (supari:OR=0.2, 95%CI=0.1-0.3,pan masala: OR=0.07, 95%CI=0.04-0.09)..

Conclusions: Despite a ban, gutkha continues to be used by students in Mumbai schools along with other smokeless tobacco products. Proposed efforts to enforce the ban and increase health warnings on tobacco packages in India should be supported. School-based programs targeting kids should consider involving parents in campaigns.

Keywords: India, Mumbai, youth, gutkha, pan masala

7-012

Using Digital Technology to Help Youth Monitoring Tobacco Marketing in Mumbai

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Background: Despite bans on advertisements, promotion and sponsorships in India's tobacco control law, tobacco marketing is common in Mumbai. Previous studies have found advertisements displayed at the

Methods: As part of an on-going advocacy project conducted by the Salaam Bombay Foundation, 160 students in an in-school tobacco control programme participated in an activity to monitor tobacco advertisements, promotions and sponsorships in the area surrounding 40 schools in Mumbai. Twenty government-run schools and 20 private and government-aided schools were included in the study. Students were equipped with low-cost tablet computers loaded with an app, called KoboCollect, with a orientation presentation and survey. Staff conducted a one hour orientation to tobacco marketing and the survey. Following the orientation, students surveyed tobacco shops around their school and took pictures of tobacco marketing using the tabs.

Results: Students completed surveys of 368 stores around their schools (9.2 shops per school). A total of 2,689 photos of tobacco marketing were taken (7.3 photos per tobacco shop). The photos collected from the student photo allowed staff to see tobacco marketing from the students' perspectives. Students participating in the activity reported that using the tablet computers were easy to use. They also reported that the photo component of the activity was more fun and more engaging than a paper-based survey.

Conclusions: Tablet computers are an effective tool to assist students in monitoring tobacco advertisements, promotions and sponsorships even in low-income settings. Tablet computers were found to be easy to use for students and increased student interest in this tobacco control activity.

Keywords: Monitoring, india, mumbai, marketing, TAPS

7-013

Building Capacity for Tobacco-Free Schools in Rural Maharashtra: The Salaam Mumbai Model

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Background: Tobacco is a significant public health risk faced by youth in rural India. In rural Maharashtra, up to 45.4% of youth use tobacco. Tobacco use is commonly seen on school grounds across the state. India's tobacco control law, the Cigarettes and Other Tobacco Products Act (2003), imposes restrictions on the use of tobacco on school campuses and prohibits the sale of tobacco within 100 yards of school grounds.

Intervention: In 2008 the Salaam Mumbai Foundation began a tobacco-free schools initiative in rural Maharashtra. Awareness meetings were held with the Director of State Education and District Education Officers to build motivation to promote the tobacco-free schools programme. District-level workshops were held with Master Trainers for the Education Ministry. Master Trainers included training on tobacco-free schools as part of their regular training curriculum. Once trained, teachers conducted tobacco control initiatives with students. Steps were taken by teachers, students and administrators to meet the CBSC criteria. Salaam Mumbai Foundation rewards schools for reaching levels of compliance with the criteria created by SBF in accordance with a education board. Bronze-level awards are given to schools reaching 4 out of 11 criteria. Silver-level awards are given to schools reaching 8 criteria. Gold-level awards are provided to school reaching all 11 criteria.

Results: To date, Salaam Mumbai Foundation has trained 2,648 teacher trainers in Maharashtra. 354 schools have reached full compliance with the tobacco-free school criteria.

Conclusion: Using the existing infrastructure of Maharashtra's rural teacher training programme has been a successful and efficient strategy for increasing compliance with tobacco-free schools criteria. Using a graded system to reward schools provides an incentive for schools to expand compliance and serves as a useful tool for measuring increases in compliance over time.

Keywords: Maharashtra, India, Schools, Smoke-free, Capacity building

7-014

Meta synthesis of preventive factors for cigarette smoking among Thai youths

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Smoking may serve as gateway drug to other substance abuse such as alcohol, heroin, marijuana and methamphetamine. Furthermore, of all the risk factors of ill health, smoking is responsible for the second

greatest burden of disease. An understanding of factors affecting smoking among youth is important in protecting them from smoking behaviour. This study, constituting the systematic review and meta-synthesis of literature, aimed to examine factors regarding social ecological model which protect Thai youth from smoking. A comprehensive search of literature in Google Scholar, Scopus and Science Direct was conducted and found 6,372 articles. Eighteen articles fulfilled the selection criteria and quality assessment. The context and findings of the eligible articles were extracted and summarised using social ecological model. The review found that factors in social /policy level, especially tobacco control law and taxation were effective in protecting youth from smoking, factors in the individual level including having a role model (parents, family members, teachers and famous persons) were also the protective factors. In Thailand, there has been policies and implementation which target smoking among youth. However, there was a lack of connections in each level. In addition, intervention in the community level has not corresponded to the factors found in this review. It is recommended that effective youth tobacco control should consider and develop a connection of the complex interplay among various levels.

Keywords: social ecological model, preventive factors, smoking, Thai youths, meta-synthesis

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7-015

The experiences of young adults smokers and non-smokers: motivation and attitudes towards tobacco control policy in China

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Background: Tobacco use continues to be one of the leading causes of preventable death and disease in China. Smoking, as a health-risk behaviour, is frequently established during childhood and adolescence and extends into adulthood. In 2014, around 82% of Chinese youth aged 13 to 15 years reported that they first tried smoking under the age of 13. Despite the numerous studies on identifying factors that may affect the initiation and maintenance of smoking in adolescent populations, qualitative knowledge about how the young people themselves explain their smoking behaviour and why young adults continue smoking in full knowledge of the health risk they are taking is only emerging. Furthermore, from young people's point of view, how effective the tobacco control policy implemented is unknown. In addition, e-cigarettes, as a means of recreational nicotine use, are produced mainly in China and are becoming popular. Little is known about the prevalence of young people use or their attitudes towards e-cigarettes.

Objective: To explore how cigarettes and e-cigarettes are perceived and experienced among Chinese young adults and what their attitudes are towards the effectiveness of implementing tobacco control policy in China.

Methods: a qualitative method will be used. Forty Chinese young adults aged 16-24 years in Beijing and Tianjin and ten parents will participant in focus groups and semi-structured interviews. A thematic analysis of the interview transcripts will be undertaken.

Implication: Findings from this research will be useful for health authorities to develop effective tobacco control strategies targeting young people. Supporting young people to not smoke will have both health and equality benefits.

Keywords: young adults, motivation, e-cigarette, tobacco control policy, China

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7-016

Cigarette smoking behavior and the related factors among junior high school students in coastal rural area, Western Taiwan

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Background and objectives: Most adolescents who initiate smoking eventually become regular smokers and experience smoking-related diseases. Therefore, the importance of preventing cigarette smoking among adolescents has recently become an important public health issue. The present study aimed to explore cigarette smoking behavior and its correlates in adolescents in order to propose concrete suggestions for preventing cigarette smoking.

Methods: This cross-sectional study investigated junior high students (n= 1072) who lived in a coastal rural area of Western Taiwan. A structured, self-administered questionnaire was administered that obtained data for demographics, parent attitudes, status of family members who smoke, smoking attitude, knowledge of the hazards of smoking, and smoking cessation self-efficacy.

Results & conclusion: The smoking rate in this population was 7.6, and was highest among male adolescents aged 14–15 years with poor school grades: the number of male smokers was 2.2 times the number of female smokers, and over 80% of the smokers had lower school grades. In the logistic regression analysis, the most influential factor of cigarette smoking behavior was school grades (odds ratio = 2.8), and second was the number of family members who smoked (odds ratio = 1.6). In addition, age, attitude toward cigarette smoking, and smoking cessation self-efficacy showed significant differences. Future cigarette smoking prevention strategies for adolescents in this area should focus on the following three aspects: 1) male students aged 14–15 years with poor school grades, 2) attitude towards cigarette smoking and smoking cessation self-efficacy, and 3) reduction in the number of family members who smoke.

Keywords: Tobacco use, Academic achievement, Gender, Environmental tobacco smoke (ETS), Urban-Rural Divide

Acknowledgement:

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7-017

Implementation of smoke-free schools in Thailand

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The purpose of the report is to prevent the abuse of tobacco. A new focus on youth smoking by 7 measures as a tool for action in schools. The goal is to cover 100% in 2018 as a collaboration between the Ministry of Public Health (MOPH), the Ministry of Education and Action on Smoking and Health Foundation Thailand. Through the signing of a Memorandum of Understanding in the implementation of smoke-free schools on November 26, 2013. Tobacco usage among students in Thailand between 1991-2013 ages 15 years to 18 years started decrease smoking and increasing steadily. The MOPH recognizes the importance of the need for the implementation of a smoke-free schools policy. Since 2015, they had increased the goal of the operation to least 40% and had developed guidelines and criteria to 7 measures is 1) Smoke-free school policy in the school 2) Smoke-free school Management 3) Smoke-free environment in the school 4) The depictions of tobacco consumption control in teaching and extracurricular activities 5) The participation of students in the implementation 6) Prevent students from smoking 7) Integrating activities between schools and the community. In 2017 the operation added at least 80% who continued to implementation the policy on the integration of tobacco consumption control in the schools. Expand operations of the school target and modify the structure of the Ministry of Education. Results of Implementation of smoke-free school in Thailand that Perform target with collaboration from all sectors, and continuing to contribute to the sustainability of the school's non-smoking policy. It is also one of the key factors that will contribute to the overall success of youth tobacco reduction. It also supports the implementation of Framework Convention on Tobacco Control.

Keywords: smoke-free schools, Thailand, youth, tobacco

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We would like to thank the Office of the Basic Education Commission under Ministry of Education of

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7-018

Less is More: Strengthening the Tobacco Control Youth Advocacy Through Social Media

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The rise of social media across the world has brought greater interconnectivity to the global citizenry. Communication is done with greater ease, collaboration with greater efficiency, impact assessment with more insight. Popular social networking services—particularly Facebook and Twitter—are predominantly used by youth, or individuals within the age range of 18 to 24. As the tobacco industry targets the youth population of developing countries more and more, tobacco control non-profit organizations in these countries can help the youth protect themselves from big tobacco through awareness campaigns, crowdsourcing campaigns, and signature campaigns. This research is a case study in the social media experience of HealthJustice Philippines as a non-profit organization in the tobacco control and health promotion advocacy. It explores the best practices in content curation, content generation, and content assessment, with the goal of increased youth engagement both online and offline. Through the use of social media analytics tools such as Facebook Insights and Twitter Analytics, the online campaigns of HealthJustice and the online presence of the organization as a whole are assessed. Over the ten-month period of July 2015 to May 2016, the posts that received the highest engagement rates were those with straightforward pictures, with less text, and those posted at select optimum times, grounded on the follower base of the organization's online accounts. In the same vein, involvement in a certain trending topic in region or in the country of a given week or month and utilizing online tools such as Facebook Ads and ActionSprout helps. Social media is a powerful tool not only to reach a wider audience or to gain supporters for the tobacco control and health promotion advocacy, but more importantly, to engage the youth in discourse and to get them involved both online and offline in the advocacy. There is still much to be learned about it, but also much to be gained.

Keywords: Social Media, Facebook, Twitter, Youth Engagement

7-019

The Role of Youth Movement Against Tobacco Industry Exhibition in Indonesia

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Backgrounds: The tobacco industry sees Indonesia as a strategic country to host the international tobacco exhibition as Indonesia is the world's fifth largest cigarette market. Tobacco productions and consumptions grow steadily here. The exhibition was certainly being contradictive with the concern about public health and did not support the national development. The youth movement is the catalyst to fight against tobacco industry interference, considering that they are the main target of tobacco industry.

Objectives: To describe and analyze the role of youth movement in response of the tobacco industry exhibition held in Indonesia by 2012-2016.

Methods: Literature searches, books, internet list serves, and interview with tobacco control youth activist.

Results: Tobacco industry exhibition (World Tobacco Asia/WTA) was succesfully held in Jakarta in 2010 and 2012. The movement in 2010 became a good beginning in response of tobacco industry exhibition, followed by 2012 as the phase of youth advocacy in tobacco control. Besides, WTA and Intertabac planned to be held in Bali in 2014 was booted out of Indonesia by the youth activist and local government. At the moment, social media and petition become a new strategy in their action. But World Tobacco exhibition re-titled 'World Tobacco Process and Machinery' sucessfully held at Jakarta International Expo Centre in 2016. During the event period, youth was set to take big awareness against uncommittment of government and to support enforcement of Tobacco exhibition ban. They did petition handed and big rally to against the event.

Conclusions: The role of youth movement become priority and important consideration in tobacco control advocacy through the variation of act to raise awareness. The primary goals of movement against tobacco companies and event are to change youth attitudes about tobacco use, to empower youth communities, and to reduce the availability of tobacco products.

Keywords: Youth Movement, Tobacco Industry Exhibition

Reference:

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7-020

Is Electronic Cigarettes Use among Malaysian Youth a Gateway to Nicotine Addiction?

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Malaysia ranks among the top users of electronic cigarettes by country in the world. However, little is known on the use of e-cigarettes in Malaysia, despite its popularity among youths. The increasing trend in e-cigarettes usage has sparked the question as to whether it is a gateway to nicotine addiction. We aimed to identify e-cigarettes usage pattern including awareness and beliefs in a preliminary study of 138 young adults aged 18 – 24 years old. The majority were male (92.8%) and more than one third (31.9%) were never smokers prior to e-cigarette use. Majority (68.8%) used e-cigarettes daily despite starting ≤ 6 months. They used e-liquid that contain nicotine (76.8%) but substantial minority (21.0%) did not know the strength of the nicotine. More than one third (39.1%) reported the urge to vape within 10 minutes after waking up. Majority (62.8%) think that e-cigarettes will help them to quit smoking, but half of them were not thinking about quitting e-cigarettes use. They believe e-cigarettes are less harmful (60.9%) and slightly less/a lot less addictive (46.4%), but they said they somewhat addicted to it (37.7%). 29.0% respondents received free samples of e-cigarettes products. Initiation of e-cigarette use was significantly associated with marital status ($p=0.014$), employment status ($p=0.004$), smoking status ($p=0.019$), similarly with belief characteristics including e-cigarette potentially as quit aids ($p = 0.001$) and less addictive compared to conventional cigarettes ($p=0.081$). In contrast initiation of e-cigarette use was not significantly associated with gender ($p = 0.534$), race ($p=0.213$), age ($p=0.071$) and harmful beliefs on e-cigarettes ($p=0.396$). In conclusion, this study provides baseline information and useful reference of e-cigarettes use among young adults. Communities require an adequate exposure on the health risks and effects of e-cigarette use in order to prevent unknown risks especially among young adults in Malaysia.

Keywords: electronic cigarettes, youth smoking, Malaysia

7-021

Raising the legal age for tobacco consumption in Guam: Youth-led advocacy for tobacco control policy change

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Guam, a United States Territory in the Western Pacific, has the highest adult smoking prevalence of all US States and Territories; youth smoking prevalence is significantly higher than the US average (17.6% vs. 10.8%; $p=0.00$). In 2015, the Institute of Medicine concluded that raising the minimum age of legal access to tobacco likely will reduce youth smoking and smoking-related mortality. Guam's Vice-Speaker introduced Bill 141-33 in 2015, raising the legal age of tobacco consumption from 18 to 21 years of age, and expanding tobacco control policy to include electronic cigarettes. Stakeholder mapping revealed there were not enough supporters within the Legislature to assure its passage. The undecided senators were concerned that the bill would be unpopular among those aged 18 to 21 years. The Youth for Youth Live! Guam, a youth-led non-profit organization, launched a multi-pronged advocacy campaign to mobilize political support for the bill. The youth advocates developed policy toolkits about local tobacco and e-cigarette use and the socio-economic implications of tobacco prevention policies; toolkits were provided to the Guam Legislature, Governor, and Lieutenant Governor. Youth appeared in local news media (radio, television, and newsprint), voicing strong support for the bill. Social media strategies included written, picture, and video posts on Facebook, Twitter, and Instagram. The youth advocates partnered with other community organizations for face-to-face meetings with local policymakers to showcase youth support for the bill and overcome the legislators' perceptions. Youth advocates also testified at the public hearing. The bill was passed with 9 out of 15 Senators voting for it. Senators who supported the bill indicated they were convinced by the youth advocates. Youth involvement is critical to the public policy adoption process. This real life experience from Guam showcases how youth-led advocacy can influence political support for tobacco control.

Keywords: Tobacco control, Youth advocacy

Acknowledgement:

Youth for Youth Live! Guam

Reference:

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7-022

Roles of Thai Nursing Students in Tobacco Control

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Nursing students have a prominent role to promote Thai smoke-free society. The community campaign project on tobacco control was developed by a group of nursing students with the aims to encourage youth and community to 1) recognize the effect of smoking and to 2) develop the leadership on health promoting in tobacco control. Tobacco control activities were supported by the Nurses Network on Tobacco Control of Thailand. The three steps of project were conducted. First, the nursing students were prepared for initiative planning among student leaders through group discussion and brain storming. Second, students in other schools were collaborated and related organizations were informed about the activities. During the campaign, there were art contest & exhibition, motto contest, and walk rally on the theme of the campaign against tobacco, alcohol, and drugs. At the end, certificate was given to all participants and youth gave the pledge “New Generation Free from Tobacco”. Nursing students and other student leaders get a chance to develop and perform leadership on Tobacco Control. Furthermore, the participants understand and recognize the effects of smoking, drinking, and drug addiction.

Keywords: Nursing student, tobacco control

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2. Thai Health Promotion Foundation

7-023

Youth involvement in Tobacco Control: Youth for the Youth

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Youth involvement in Tobacco Control: Youth for the Youth Background: It is prohibited to retail sale sticks of cigarettes, bidi or cigar on the basis of the assumption that the number of users will be discouraged to consume it since, user has to expend more money for a packet. Despite this regulation, people are openly selling, buying and consuming tobacco products. Youth are more vulnerable in this case. Aim: Strengthen the Youth Watch Group to involve in tobacco control: Youth for the Youth Strategy/Tactics: After the tobacco control law passed, Health Rights and Tobacco Control (HRTC) district networks start monitoring the law in their areas through Youth Watch Groups. It is the group of the youths who are dedicated to anti- tobacco campaigns in 57 districts out of 75 districts of Nepal. If there is any illegal selling, distribution of tobacco products then it will report to the police and take necessary action. Youth Watch group is impeding such illegal transactions in the grassroots level. Youth knows the youth better than others age groups. So, the actual problem and the point to action to be taken in right time and right place are properly distinguished by youth watch group in order to prevent the other youths in consuming tobacco. Youth gatherings for the awareness and the commitment campaigns are organized regularly. Youth Watch Group work hard to aware people about smoke free public place and transport issues even. Programme/Policy Process: This ultimately helps to reduce and even eradicate the tobacco consumption and tobacco caused hazards in future. Preventing the youth to consume tobacco and making them involve in anti tobacco campaigns is the lifelong guarantee strategy for the tobacco control. Outcome/What was learned: Nepal successfully passed tobacco control law in 2011 and by 2015 90% graphic health warning implemented widely. Now it's time for the special focus on youth for preventing them from consuming tobacco in early age.

Keywords: Tobacco Control, Youth, Tobacco, Health Rights & Tobacco Control District Network, Youth Watch Group

Acknowledgement:

Health Rights & Tobacco Control District Network

7-024

DEVELOPING STUDENT NETWORK ON TOBACCO CONTROL MOVEMENT IN EASTER INDONESIA

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Students have an important role in the change of a country, because students are intellectuals who have the freedom of thought, opinion, expression and association as well as of honesty, integrity, and moral spirit. Thus the authors build networks tobacco control movement in the student, especially students eastern Indonesia which has the characteristic

bold, agile, consistent and have good negotiation skills. In this paper the author intends to explain a step will be undertaken within build the network Tobacco Control (TC) among students of East Indonesia, which is certainly hoped that Indonesia East Students participate in the fight for TC in Indonesia. Since 2014 the author has started building a network of TC movement among the students in eastern part of Indonesia. Leading the campaign to mobilize support and clearly Accession and Ratification of the FCTC in the city of Makassar in commemoration of World No Tobacco Day (HTTS) followed by 8 Institute of Public Health and two anti-smoking community. In 2015 the writer returned to the TC movement through the National Seminar was attended by approximately 3000 students of public health throughout South Sulawesi and the Student Activity Unit of UNHAS in order HTTS in May. The author also was invited as a guest speaker on a discussion of TC in several organizations, including the activities held by SMEs KPI Unhas, BEM FKM UNHAS, Organization of Islamic Student Health Branch HMI East Makassar. In 2016, TC issues attract more attention to students in eastern part of Indonesia, is evidenced in the implementation of discussion at several institutions outside South Sulawesi, some of them in Central Sulawesi (UNTAD, Stik.J Palu, and Alkhaerat) of 5 Universities in Central Sulawesi and Southeast Sulawesi (UHO, Unidayan, and Mandala Waluya) of 4 university there.

Keywords: tobacco control, youth

7-025

北京市中小学校周边售烟点及其自然状态下向未成年人售烟的现状

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【目的】了解北京市中小学校校园周边的烟草售卖点数量及向未成年人售烟现状。

【方法】自拟调查问卷, 采用普查的方法, 对全市中小学校周边 100 米范围内的烟草售卖点进行计数并观察销售点是否设置有关标识、有无未成年人购烟现象。

【结果】共调查 1654 所中小学校, 其中 35.6% 的中小学校周边 100m 范围内存在烟草售卖点, 对其中 874 处售烟点进行了观察, 70.1% 的售烟点为杂货店 / 便利店, 11.8% 的售烟点为烟酒商店, 8.5% 的售烟点为商场 / 超市, 5.9% 为烟草专卖店; 79.1% 的售烟点未在醒目位置设置“吸烟有害健康”的标识, 72.9% 的售烟点未在醒目位置设置“不向未成年人售卖烟草”的标识; 15.4% 的售烟点有未成年人前来购买烟草, 其中的 80% 未拒绝未成年人购买烟草。

【结论】中小学校周边尚存在较多烟草销售点, 且多数未按要求明示“不向未成年人出售烟草制品”标识, 未成年人购买烟草不遭拒绝现象普遍。

Keywords: 中小学校周边, 青少年, 售烟点

7-026

The tobacconists surrounding the primary and secondary schools and their sales to school-aged adolescents behaviors under natural conditions in Beijing

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Objective To understand the counts of tobacconists surrounding the primary and secondary schools and their sales to school-aged adolescents behaviors under natural conditions in Beijing. **Methods** Design questionnaires and use the method of census, make the census for all of primary and secondary schools, count the number of tobacconists around 100m outside the schools, and make sure that whether they have set related warning signs and sell cigarettes to school-aged adolescents or not. **Results** 1654 schools are effectively surveyed. There are one or more tobacconists around 100m outside of 35.6% of the primary and secondary schools. 874 tobacconists around the schools have been observed, 70.1% of them are grocery stores or convenience stores, 11.8% of them are cigarette and wine stores, 8.5% of them are malls/supermarkets, 5.9% of them are tobacco exclusive shops; 79.1% of them have no signs of “smoking is harmful to health”, 72.9% of them have no signs of “underage sale prohibited”; Observer have seen school-aged adolescents bought cigarettes at 15.4% of tobacconists, and 80% of them have sell cigarettes to school-aged adolescents. **Conclusion** There are too many tobacconists around the primary and secondary schools, most of them did not set the “underage sale prohibited” signs, and they usually sell cigarettes to school-aged adolescents.

Keywords: primary and secondary schools surroundings, adolescents, tobacconists

7-027

2014年重庆市13-15岁初中学生烟草流行监测调查

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【目的】系统监测我市初中在校学生的烟草流行状况，通过分析具有重庆市代表性的指标，为制订控烟政策、策略和措施提供科学依据和工作建议。

【方法】采用多阶段分层整群随机抽样的方法，使用GYTS全球统一标准的核心问卷对重庆市13-15岁初中学生烟草使用、二手烟暴露及烟草制品获得等情况进行调查。结果 初中学生现在吸烟率为9.3%，24.9%的学生尝试过吸烟。83.2%的学生在家、室内公共场所、室外公共场所或公共交通工具中暴露于二手烟。66.0%的吸卷烟的学生报告在学校周边可以购买到卷烟。结论 我市初中学生吸烟以男性为

主，但女性吸烟率已出现上升的端倪，需引起重视。同时，我市青少年二手烟暴露形势相当严峻，烟草方便易得，切实保护青少年不受二手烟的危害，是迫切需要解决的问题。

Objective The Surveillance and study was conducted to know about the smoking prevalence among junior high school students and make scientific suggestions for making smoking control policy. **Methods** Multistage PPS sampling was adopted in the surveillance. A global -unified -standard core questionnaire e of Global Youth Tobacco Survey (GYTS) was used in investigating, which was mainly about tobacco use, secondhand smoke expose and cigarettes getting. **Results** The percentage of current smokers was 9.3% ,who once attempted to smoke was 24.9% and who once exposed to secondhand smoke at home ,at public places or by public transportation was 83.2%.66.0% of current cigarette smokers reported they could buy cigarettes around schools. **Conclusion** Most of smokers in junior high school are male, but female smokers had an upward tendency which should be brought to the forefront. meanwhile,the situation of exposing to secondhand smoke of the teenagers was severe.Cigarettes were easy to get. Prohibiting the teenagers from secondhand smoke was an urgent need to solve.

Keywords: 重庆，初中学生，烟草流行，监测调查，Chongqing, Junior high school students, Smoking prevalence, Surveillance

7-028

Study on pathways of initiation in tobacco use among school children in Mumbai

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Background: Many studies on tobacco have failed to trace the journey of tobacco users. The study finds reasons for initiation and continuity in tobacco use by tracing the pathways, knowing the dynamics around it. In the study pathways are collectively seen under one lens bringing insights to health behaviour, tobacco prevention and cessation works.

Objective: To understand the pathways of initiation in tobacco use from stages of exploration to addiction among school going children from lower socio-economic background.

Methods: Data collection was done through qualitative research tools of FGD and In-depth Interview. Students of class 7th, 8th & 9th who participated in the sessions of LifeFirst tobacco cessation programme for six months were selected from six municipal schools in Mumbai. 166 students participated in FGDs, out of which 60 students were selected for in-depth interviews. Concept dimensions were generated to form themes and data analysis was done using the Theory of Triadic Influence (TTI), a health behaviour model assessing aspects of social, environmental and personal influences.

Results: The study tracked the initiation process of children growing up in communities where tobacco use was normalised, they defied familial and school norms to use tobacco. Their journey transitioned from Areca nut users to addicted tobacco users where smokeless tobacco which is easily available was consumed privately

and use of pen hookah, e-cigarettes leading to addiction. The aspirational element attached to these products was expressed. The study dwells on children's perception on habitual use, addiction to tobacco and other addictive substances, finding their attitudes towards quitting.

Conclusion: The study found areas for prevention of initiation of tobacco use among children. Moreover, using the pathway approach children have reflected on their own health behaviours, and determined to alter these behaviours for pro-life measures.

Keywords: Pathways, Initiation, TTI, Health Behavior, Tobacco Use, Cessation

7-029

警惕烟草业向青少年营销卷烟

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【目的】揭露中国烟草业引诱青少年吸烟的营销手段 烟草业一切广告、促销、赞助的唯一动机，就是要在更大范围内、更大规模地推销烟草制品——而这正是民众健康的灾难。多项研究已经证明，烟草营销，包括广告、促销和赞助已被证明能够提高青少年吸烟率。2014年《中国青少年烟草调查》向社会发出了严重警告！初中学生尝试使用过烟草制品其中，三分之一已经成为现在烟草使用者。鼓励并吸引青少年吸烟的外部因素广泛存在。如果这些因素不有效消除，青少年吸烟率难以降低。烟草业利用形形色色的烟草广告、促销和赞助向青少年营销烟草。1. 烟草业美化烟草，淡化烟害：赋予烟草“深厚”的“文化内涵”、“爱国情怀”让青少年产生错误的价值认同，淡化烟草使用的健康风险。2. 烟草业引诱青少年亲近烟草：通过慈善、助学培植对烟草业的感恩心态，奠定烟草业的“正面”形象；举办“企业社会责任”为名的烟草赞助活动迷惑青少年，让青少年对烟草业感恩戴德。捐资助学，冠名烟草希望小学，扶贫济困、赠送书籍、校车等是烟草业拉拢青少年的常用手段。3. 烟草业使用各种促销手段增加青少年对卷烟的易获得性：通过各类促销吸引青少年关注卷烟，更容易接触到、获得烟草制品。烟草业借举办各种与烟草品牌名称相关的文化、体育大型活动进行品牌推介；免费让女性、儿童青少年品吸卷烟；特别是在全国几百万个青少年经常进入购物的烟草销售点内展示烟草，设置大幅烟草广告；围绕学校周边的许多烟草店不实行“不向未成年人售烟”规定，甚至向中小學生分支销售卷烟。2015年9月1日实施的新《广告法》对于烟草广告的禁止，就立法层面而言，已经基本排除了烟草业对《公约》的篡改，恢复了《公约》的本意，但是，仍要警惕烟草业对《广告法》作有利于烟草营销的其它解读！由于没有出台有关烟草广告的实施细则，执法部门监管不到位，《广告法》实施近一年，虽然户外烟草广告得到有效禁止，但烟草销售点仍是烟草广告的重灾区，花样翻新的变相广告成为新动向。此外，社交媒体的烟草广告泛滥无人监管。烟草业的网站，微信、微博、微电影仍然肆无忌惮地营销卷烟。

Keywords: 烟草广告, 烟草促销, 烟草赞助



议题 (八)

Health industry and tobacco substitutes
健康产业与烟草替代

8-001

Safety of electronic cigarettes

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Although the best way for smokers to avoid the health risks associated with smoking is to quit smoking altogether, for those who do continue to smoke the application of an exposure reduction (“harm reduction”) strategy could result in substantial reductions in mortality and morbidity. One such approach for continuing smokers would be to promote the substitution of alternative, less toxic means of delivering nicotine, assuming that these were proven to be less hazardous than tobacco smoking and did not cause any additional health risks. Electronic nicotine delivery devices, commonly called electronic cigarettes or “e-cigarettes”, represent a new stage in which nicotine is delivered in a method that simulates smoking but without involving a tobacco combustion process. Distributors of e-cigarettes promote the product as completely free of harmful substances. However, nicotine solutions used in e-cigarettes vary with respect to concentrations of toxicants, and the quality control in e cigarette manufacturing is questionable. We identified a number of toxicants in e-cigarette vapors; however the levels of these toxicants were orders of magnitude lower than those found in cigarette smoke. We found that after switching from tobacco to electronic cigarettes nicotine exposure is unchanged while exposure to selected toxicants is substantially reduced. Although it cannot be said that currently marketed e-cigarettes are safe, e-cigarette aerosol is likely to be much less toxic than cigarette smoke. The devices likely pose less direct hazard to the individual smoker than tobacco cigarettes and might help smokers quit smoking or reduce harm by smoking fewer cigarettes. The use of e-cigarettes as a harm reduction strategy among cigarette smokers who are unable to quit, warrants further studies. Further research is needed to evaluate long term effects of switching, including the health effects of continued use of e-cigarettes.

Keywords: e-cigarettes, electronic cigarettes, electronic nicotine delivery systems, nicotine, toxicants, inhalation

Acknowledgement:

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8-002

E-Cigarette Marketing Online: Characteristics of Websites Serving the Indian Market

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Background: Electronic nicotine delivery systems (ENDS), commonly known as e-cigarettes in India, are an emerging and controversial product in tobacco control debates. Previous studies suggest that use of ENDS by youth in numerous countries is expanding, however very limited information on use and access is known for the Indian market.

Methods: A survey of websites selling e-cigarettes was conducted in May 2015 by student volunteers. The search terms “e-cigarette”, “electronic nicotine delivery system” were used in Google to identify online vendors. All websites that sold e-cigarettes and provided delivery in India were included in the survey.

Results: Twenty-one online vendors providing delivery in India were found in the survey. Seventeen online vendors (81.0%) exclusively sold ENDS, while four shops sold products beyond ENDS. The majority of shops (61.9%, n=13) sold refillable and disposable products. E-cigarette prices ranged from Rs. 219 (\$3.25 USD) to Rs.15,000 (\$222.79). The average lowest price per site was Rs. 905 (\$13.44 USD). Half of the websites (52.4%, n=11) included a health warning message, and 2/3 of vendors (66.7%, n=14) included a message indicating a ban on sales to minors. Positive health messages were found on the web pages for 57.1% (n=12) vendors. The most common positive health claims included that ENDS were “safer” (42.9%, n=9), have “no smoke” (28.6%, n=6) and produce “no ash” (19.0%, n=4). Most websites (90%,n=19) linked to social media platforms. All websites allowed users to receive direct marketing.

Conclusions: A variety of online vendors are available to children and youth in India interested in purchasing ENDS at a variety of price-points. Such online sales should be regulated to remove positive health claims and ensure mechanisms to prevent the sale of ENDS to minors. Tobacco control programs should include information on the potential harms of ENDS devices

Keywords: ENDS, e-cigarettes, marketing, India

8-003

E-cigarettes contain harmful substances: total ban before too late

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The global sales of e-cigarettes surged exponentially from 2008 by 170 folds US\$3.5 billion in 2015. It has become popular among youngsters in the US and Europe. In Hong Kong, the rate of ever e-cigarette use among primary and secondary school students were 2.6% and 9.0% respectively. A laboratory test was conducted from October 2015 to February 2016 to analyse the concentration of nicotine and other harmful substances contained in and elicited by e-cigarettes. Thirteen samples were selected by convenient sampling. Aerosol of the samples was tested and the results found that e-cigarette aerosol contains polycyclic aromatic hydrocarbons (PAHs) (ranged 2.9-504.5 ppb), poly-brominated diphenyl ethers (PBDEs) (1.7-1490.0 ppb), formaldehyde (3482.4-6676.5 ppm), nicotine (3.5-28.5 ppb) and other chemicals. PAHs and formaldehyde are proven carcinogens and PBDEs is first to be discovered in e-cigarette aerosols by this study. Despite the level of nicotine detected was low, most of the e-cigarettes claimed nicotine-free. Concentrations of formaldehyde and PBDEs were much higher than those in conventional cigarettes. Significant variation in the chemical compositions of the aerosol was found even in the same batch of the same brand of e-cigarettes. In Hong Kong and most places, the marketing of e-cigarettes has emphasized the products as an aid for smoking cessation, harm-free, safe and trendy etc. and introduced various designs and flavours which were attractive to non-smokers. Research found that e-cigarette use is associated with future smoking, especially among youth. The World Health Organization states that there is insufficient evidence to prove the safety and effectiveness of e-cigarettes for smoking cessation. Hong Kong banned smokeless tobacco in 1980s and have successfully prevented its epidemic. The Government should enact a total ban on sales, advertising, promotion, import and manufacturing of e-cigarettes promptly before they become widely popular in Hong Kong.

Keywords: e-cigarette, ban on e-cigarette, harmful substances

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议题 (九)

Interference from Tobacco industry
控烟与烟草业干扰

9-001

Exploring Possible Ways to Secure a Pro-health Settlement of Tobacco Disputes under Article 27 of who/fctc

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Liberalization of international trade in tobacco products has been blamed for the spread of tobacco epidemics worldwide. Tobacco control policies have been threatened by legal challenges brought under World Trade Organization (WTO) or international investment tribunals based on international trade and investment agreements. Trade and investment issues have always been one of the controversies fiercely debated among delegates of the Framework Convention on Tobacco Control (FCTC) since the initiation of negotiation in 1999. In October 2014, the sixth Conference of the Parties (COP) to the FCTC adopted two relevant decisions on trade and investment issues in relation to the implementation of the FCTC. Instead of discussing Malaysia's proposal for carving out tobacco from free trade agreement, this paper tries to examine Uruguay's proposal on further implementation of dispute settlement mechanism under Article 27 of the FCTC. With a brief overview on how international trade issues evolved under FCTC, this paper will address problems of current mechanism under Article 27, and explore possible options for reinforcement of current system to secure a pro-health settlement of tobacco disputes under the WHO/FCTC. This paper suggests a two-step reform to strengthen current dispute settlement system under FCTC. The COP can start with a much easier step by adopting a guideline governing the procedures for ad hoc arbitration provided already under Article 27.2. Rules for such procedures may refer to those in other international agreements such as Annex II of Convention on Biological Diversity. Then, the COP may consider how to make ad hoc arbitration a compulsory or even exclusive remedy to resolve tobacco disputes derived from the FCTC among Parties. Adopting a protocol may be needed to have Parties explicitly agreed to subject their potential tobacco disputes to the procedures under the FCTC.

Keywords: Tobacco Control, Dispute Settlement, FCTC, Ad hoc Arbitration, Tobacco Disputes

9-002

Tobacco industry aggressively opposed effective pictorial health warning (PHW)

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Tobacco industry was the most challenging obstacle Cambodia faced during the development of legislation to implement PHW on cigarette packs. The industry used many tactics and false arguments to aggressively fight effective legislation. In 2014, Cambodia started to work hard to develop a legislation to implement PHW on tobacco products packs, when the industry fought hard to subvert the legislation. First, they created false arguments highlighting that PHW (1) negatively affects the country's economy because of less revenue generated; (2) puts burdens on legal companies, who is not able to compete with smuggled cigarettes; (3) harms retailers who mainly depend their living on cigarettes; (4) is ineffective to meet the government's goal to reduce smoking since smokers already know the harms of smoking. Second, the industry sent letters requesting meetings to relevant government institutes in order to spread the false arguments, including the National Assembly and Senate, the Ministry of Health, Ministry of Economy and Finance. Etc. Third, the industry influenced some potential government officials to aggressively defense for their interest in official meetings, and to lobby top decision makers. To deal with strong interference from the industry, advocacy works were formed. Fact-sheets on myths and Fact about the industry claims were distributed to relevant policy makers and media through Informal and formal meetings and workshops with them. Media campaign via radio, television, outdoor materials, particularly social media worked well to de-normalize the industry's tactics. Public, particularly youth were mobilized to voice their supports the PHW, which were heard by top decision makers. Our advocacy worked, and the government adopted in late 2015 the legislation requiring tobacco companies to print PHW on top of the two main surfaces of cigarette packs covering 55%. Fines are imposed to producers, imported, distributors and retailers.

Keywords: Tobacco interference in PHW

9-003

Women as Target of the Tobacco Industry

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WOMEN AS TARGET OF THE TOBACCO INDUSTRY Author: Soeminar Siregar-Soeryakoesoema Tobacco Control Coordinator Yayasan Kanker Indonesia (Indonesian Cancer Foundation) 1. Background Indonesia the no 3 biggest cigarette consumer has a new arising problem: Women as target of the Tobacco Industry More room to expand is with women and teenagers. Men smokers are stable, 67 million out of 240 million Indonesian inhabitants. Women smokers in 1995 were 1,7 % and increased alarmingly to 6,7 % in 2013. This epidemic should be stopped, as every human being has the right to

live in a healthy smoke free environment . 2. Objectives Commitment of the government in controlling tobacco consuming : Issuing The Tobacco Law- Government Regulations - Ratification of the FCTC the most important thing to decrease smoking . Increase of women smokers is a success for the Tobacco Industry. 3. Methods - Approach Women organizations, Advocates and Activists to activate Tobacco Control through seminars, posters, fact sheets . - Empower the potential of women to give information and dissemination of smoking threatening the health of women and children through neighborhood gatherings. - Make women aware that modern social life in cafés, workplaces , make them vulnerable to start smoking and be the target of the Tobacco Industry 4. Results - Create awareness among women for the danger of tobacco consuming - Caution that women are the target of the Tobacco Industry - Strategy building to reduce tobacco consuming 5. Conclusion - The target and the biggest constitute is women and teenagers with modern life style , a trend and sign of freedom. - Demand the Government for tobacco use regulation ; call to policymakers for total advertisement ban, promotion, sponsorship for concerts, sport events and scholarships from the Tobacco Industry.

Keywords: The Tobacco Industry constantly and aggressively seeks new loyal smokers

9-004

Tobacco Industry Strategies in 3 MPOWER Areas in Thailand

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Background: There are no studies of tobacco industry (TI) documents examining recent strategies of the TI in Thailand, although the industry still must turn over their internal documents due to legal decisions in the US. It is useful to examine current strategies the industry uses on smoke-free, tobacco warning and tobacco tax policies, central elements of the World Health Organization (WHO) MPOWER framework as part of the Framework Convention on Tobacco Control (FCTC).

Method: Multiple searches of TI documents were conducted over the last ten years of archived/ available documents in the Legacy Library of documents, UCSF. We started using common search terms in the three MPOWER areas, and then did more refined searches that looked at density of mentions of Thailand and by type of document, separating out reports and correspondence (emails, letters, memos and minutes). Final case reports focused on each of the 3 MPOWER areas.

Results: Nearly 40,000 documents were identified in the initial searches with the final case reports illustrating

TI strategies through very select documents, summarized below: Protect: The TI is not likely to change its refusal to recognize the dangers of secondhand smoke, since it focuses on its new ‘migration’ strategy to noncombustible ‘harm reduction’ products to divert attention from harm to nonsmokers. W: Warnings, especially through plain packaging, will continue to be opposed with warnings to smokers focused on continued sales: ‘We give our customers a variety of less harmful choices.’ R: Tax policy continues to be an area where the TI asserts strong ‘business’ dominance with price and tax policy. Arguing for immediate and substantial government benefits through tobacco sales continues to be their strategy to influence policy makers.

Conclusion: We found both new and old strategies and tactics that provide insight to likely directions of the TI in the future. Financial support for this investigation was provided by WHO Thailand.

Keywords: Tobacco industry documents, Interference, MPOWER, Thailand, Policy

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9-005

The Impact of Tppa and Intellectual Property Rights on Tobacco Control in Asia

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Under the Trans-Pacific Partnership (TPP), there is an agreement on issues related to intellectual property. The TPP agreement has raised the level of protection of intellectual property which higher than the agreement of the World Trade Organization. This is known as TRIPs PLUS. The negative impacts of the TPPA could be not only on access to affordable medicines in developing countries but also tobacco control. This paper presents issues related to the potential influences of TRIPS-Plus under TPPA on the implementation of WHO FCTC. For instance, the Article 11 of WHO FCTC: Packaging and labeling of tobacco products, which is a point of controversy in many countries since tobacco companies claim that intellectual property rights are limited to the use and acquisition of rights, such as Australia, Uruguay, as well as in Thailand. Philip Morris has been trying to push the TRIPs Plus to play a role in framing the TPP because TRIPS-Plus has specific requirements allowing tobacco industries to have a chance to hamper the developing of legislation addressing tobacco advertising and promotion, as well as rules on the packaging. The TPPA also threatens to apply restrictive intellectual property (IP) laws that could cause the unclear policy link between IP laws and public health. This may affect the fulfillment of its

obligations to tobacco control, which goes against the substance of content TPPA. In addition, TPP obligation also limits the protection of geographical indications (GIs) by classifying GIs to the same level of protection for a trademark (Trademark). Even though an exclusion of tobacco from TPP exists, there still are issues of concern in that tobacco industries might apply the pretext of intellectual property to hamper the government's policies to control tobacco.

Keywords: TPPA, INTELLECTUAL PROPERTY

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9-006

TPPA Implications on Tobacco Control Policy and Law in Asia-Pacific

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As a comprehensive and new generation of free trade agreement, the Trans-Pacific Partnership (TPP) gives member countries better access to globally significant, but it has some provisions which go well beyond WTO standards. This paper presents some potential threats of this free trade agreement on Asia-Pacific countries. The TPP gives governments the option to exclude tobacco control measures from Investor-State Dispute Settlement (ISDS) in investment chapter, but it generates more opportunities for member countries to complaint trade disputes to the WTO. Tobacco companies in the US and other the TPP countries can claim litigation before the domestic courts that the law and regulations or administrative measures in other Asia-Pacific countries are not consistent with some TPP provisions. The provisions in TPP have set of rules to target non-tariff barriers by measure introducing high standard disciplines on issues such as regulatory coherence, transparency, state-owned enterprises, investment, competition, etc. The fact is that tobacco industry may use some TPP chapters to file or threaten to file disputes with the aim of defeating tobacco control measures in Asian countries. Then, TPP nations and other WHO FCTC Parties may conflict with the FCTC obligations, in particular, FCTC Article 5.3. Under the transparency and anti-corruption chapter, tobacco companies may ask tobacco control agencies to present facts and arguments in support of that health agency's position prior to any final administrative action. Regulatory impact assessments may encompass a range of procedures to determine possible impacts on tobacco control authorities. Tobacco industry

may propose some changes to diminish tobacco control law by using this assessment. Thus, Asian countries should concern about the negative effects of this regional trade agreement on tobacco control policy and law.

Keywords: TPPA, Tobacco Control Policy, WHO FCTC

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9-008

A Compromised Tobacco Exception Text in the TPPA: Challenges and Mitigation Strategies

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The Transpacific Partnership Agreement (TPPA), an Asia Pacific agreement touted to be the one on which future trade and investment agreements will be patterned after, includes a provision on tobacco control. The final TPPA text released early 2016 merely provides exemption from the Investor-State Dispute Settlement (ISDS); well short of the full exemption for tobacco from the entire agreement proposed by Malaysia. Notably, all TPPA countries are parties to the FCTC except the United States. The objective of this paper is to document the rationale for the Malaysian full carve out proposal and analyze the potential impact of the final text which involves a narrow and optional exception on tobacco control measures. Tobacco control (TC) provision in TPPA provides an option for parties to deny investors the benefits of ISDS. Such narrow provision is largely inadequate to safe guard public health measures. Aside from strong demand reduction strategies like moving towards plain packaging, Malaysia has committed to supply reduction measures including completely removing tobacco production by 2020. Some provisions in the TPPA could hamper such government efforts that are consistent with the FCTC provisions. There are various chapters within the TPPA that provide huge opportunities for the tobacco industry to undermine government efforts to implement effective tobacco control measures. Among others, these include intellectual property, technical barriers to trade (TBT), and regulatory coherence. As with many other agreements, the TPPA will require any tobacco control measures to be non-discriminatory and subject to a 'necessity test' that entails each one to be evidence-based and least trade restrictive, but

the TPPA provides a new tribunal where TC measures can be challenged. As have been done in various jurisdictions, tobacco industry can use evidence used to comply with regulatory coherence procedures to contest TC measures.

Keywords: Partial Carve Out, TPPA, FCTC, Tobacco Control Measures

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9-009

Domestic policies to limit tobacco industry interference in foreign countries

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The tobacco industry (TI) has systematically used trade and investment agreements (TIAs) to challenge tobacco control (TC) measures of foreign governments, either directly, as investors suing the government; or indirectly, through governments questioning a TC measure through the embassies or at a trade tribunal like WTO, EFTA, etc. Protecting against foreign challenges to TC is not new in the Asia Pacific. When USA used trade sanctions to open markets and challenge TC in Thailand, Korea, and Taiwan during the '90s, US TC advocates challenged the US policy permitting such behavior. This led to EO13193 and Doggett Amendment, which prohibited use of US funds and embassies to promote tobacco exports or reduce foreign TC measures. Many similar domestic policy reforms are available to address coherence between trade and TC policies but these have not yet been fully studied.

OBJECTIVES: To outline domestic policies that limit TI interference (TII) in foreign countries, which are typically justified by trade relations.

METHODOLOGY: Examined existing domestic policies which effectively restrict TII in foreign countries (e.g., Brazil, India, Malaysia, Thailand, UK, US, Vietnam). **RESULTS:** Best practices in restricting the power of TI includes: A. limiting the use of government resources or embassies in the promotion of tobacco export; B. limiting the participation of tobacco companies in official government bodies; C. directly prohibiting public offices/officials to assist the TI; D. adopting regulatory policies such as ban or restrictions of foreign direct investment in tobacco; ban or restrictions on tobacco exports including export tax; and, agricultural policies like shifting to alternative crops and removal of subsidies for tobacco growing.

CONCLUSION: The options used thus far to restrict tobacco industry influence are limited but insightful; countries may also consider drawing practices from other sectors to pursue policies to reduce cross border TII.

Keywords: tobacco industry, interference, domestic policies, foreign countries, best practices, trade agreements

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9-010

Whitewashing Child Labour in Tobacco Cultivation in ASEAN

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Child labour is prevalent in many industries in ASEAN countries including tobacco cultivation. All ASEAN member states are Parties to the United Nations Convention on the Rights of the Child (CRC) and hence, are obligated to enforce the Convention and ensure children's rights are protected. Furthermore, all ASEAN member states have also ratified the International Labour Organization (ILO) Worst Forms of Child Labour Convention (C. 182) that obligates them to ensure that children are protected from the worst forms of child labour, including hazardous work, which is defined as "work which, by its nature or the circumstances in which it is carried out, is likely to harm the health, safety or morals of children." The ILO considers agriculture among the three most dangerous sectors in terms of work-related fatalities, non-fatal accidents, and occupational diseases. The type of work children are involved in tobacco cultivation clearly violates the CRC and C.182 and exposes them to hazards, injury, and ill health. This paper will provide an overview of the problem in ASEAN region using the CRC, C. 182, as well as the Framework Convention on Tobacco Control (FTCT) as policy frameworks. It will discuss how the tobacco industries have dealt with child labour issues, what laws on importation of goods using child labour are in place, and how the industry have shielded themselves through their corporate social responsibility (CSR) activities, which have not eradicated the problem. More important, this paper will also provide recommendations on what needs to be done to eradicate child labour in tobacco leaf production.

Keywords: child labour, tobacco industry, ASEAN, tobacco farming, CSR activities

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9-011

The Impact of Tppa on Tobacco Consumption in asia

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Free trade affects increase of cigarette consumption because increasing competition leads to lower price and subsequent rise of smoking. A higher efficiency of transnational tobacco companies than government tobacco monopolies could lead lower cost of production and lower prices. Under the thrust of Section 301 of the Trade Act of 1974, negotiations with several Asian countries have led to the opening of markets to American tobacco products. For instance, In October 1986, Japan became the first Asian nation to lift its tariffs on foreign cigarettes. Aggressive western-style advertising methods were then introduced. Since the opening of the Japanese market, Japanese cigarette sales have increased 2 percent, reversing a 20 year downward trend. At present tobacco products are imported by ASEAN countries from several countries, e.g. Japan, South Korea, the Philippines (Philip Morris co.) etc. However, under the Trans-Pacific Partnership Agreement (TPPA), new exporters could be newcomers, such as Canada and Mexico. Canada's largest cigarette manufacturer is Imperial Tobacco Canada which is wholly owned

subsidiary to British American Tobacco. Its market share was 51.2% in 2012. Rothmans, Benson & Hedge is the second largest tobacco manufacturer and Japan Tobacco International in the third largest. Mexico can export its cigarettes to the vast Asia-Pacific region. The smoking prevalence showed a decrease since 2006 because of anti-tobacco legislation activities and increase in prices. The international tobacco companies dominate Mexico's cigarette market, holding almost 99% of the market share. In 2008. Cigarros la Tabacalera Mexicana, a Philip Morris International subsidiary, held 65 percent of market share. It is followed by British American Tobacco (23 per cent) and Japan Tobacco (10 percent). The future market would rely on export to the vast Asia pacific countries.

Keywords: The Trans-Pacific Partnership Agreement, Tobacco Control, Tobacco Consumption

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1. Dr.Hatai Chitanondh, Thailand Health Promotion Institute
2. Tobacco Control Research and Knowledge Management Center, Thailand

9-012

Exposing interference of tobacco industry in Vietnam

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Background: Vietnam ratified the FCTC in 2004 and passed National Tobacco Control Law in 2012. However, despite the high smoking prevalence and the active interference of tobacco industry (TI) in public health policy, Vietnam hasn't yet implemented the Article 5.3 FCTC.

Aim: Exposing tobacco industry tactics to interfere public health policy and violations in corporate social responsibility (CSR) and tobacco advertising, promotion and sponsorship ban.

Method: A media surveillance has been conducted since 1/2014-5/2016 on daily basis covering all online and 56 most-exposed printed newspapers to collect all articles related to tobacco and tobacco control. Screening mechanism was set up to classify articles by categories, tobacco-related topics, and support or counter aspect. Information on TI was deeply reviewed to detect tactics and violations, then be informed to tobacco control network and government authorities by alarm letters.

Results: 1353 articles related TI were identified in total of 3908 tobacco-related articles in the period. Promoting of TI CSR activities were the most common violation. Main kind of CSR were charitable activities, living condition improvement, and poverty reduction. Key TI's partners in performing CSR included both local government, and socio-political organizations. There were high level of interaction

between TI and government through rotation of officials from TI to Ministry and vice versa, collaboration in smuggling control, active participation of TI in process of policy development, and high appreciation of government for TI's contribution. TI strongly interfered in development tobacco tax policy by providing misleading information on burden of smuggling, and exaggerating tobacco control environment in Vietnam.

Conclusions: There is an increasing interference of TI to undermine tobacco control which requests action to strengthen the implementing Article 5.3 FCTC and advocacy efforts to counter TI interference in Vietnam.

Keywords: tobacco industry, interference, media monitoring

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9-013

The Impact of Tpp on State Owned Enterprises of Tpp Countries

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In the past the tobacco industry used trade agreements to force entry into closed markets in many Asian countries and also to challenge the legality of proposed tobacco control legislation. Other strategies were joint manufacturing and licensing agreements and voluntary policy agreements with governments to form joint ventures with state monopolies and subsequently pressure governments to privatize monopolies. At present the Trans-Pacific Partnership Agreement (TPPA) is going to be an important instrument for multinational tobacco companies (MTCs) to get rid of state owned tobacco companies (SOTCs) in the region. TPP's State-Owned Enterprise chapter provides broad coverage of SOEs that are principally engaged in commercial activity. This chapter includes commitments by TPP Parties to ensure that their SOEs make commercial purchases and sales on the basis of commercial considerations, except for those providing public services. The chapter requires TPP Parties to share a list of their SOEs with the other TPP countries and provide, upon request, additional information about the extent of government ownership or control and the non-commercial

assistance they provide to SOEs. These measures, of course, benefit foreign companies including MTCs while weakening SOTCs and the latter may eventually be taken over. A former WTO director-general as well as a former UNCTAD secretary-general, Supachai Panitchpakdi, likened the TPP to a political tool of the United States to maintain its power in Asia in light of the increasing influence of China. He suggested Thailand and other ASEAN countries review their stance on the Trans-Pacific Partnership (TPP), not allow the TPP to disintegrate ASEAN, and rather refocus on materialising the Regional Comprehensive Economic Partnership (RCEP) if they want to ensure an equal-growth path for the region.

Keywords: STATE OWNED ENTERPRISES, trade agreements

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2. Tobacco Control Research and Knowledge Management Center (TRC)

9-014

Manufacture of Cigarettes to Decrease the Role of Health Status Young Generation in Indonesia

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The tobacco industry is one of the most business profit. The existence of the cigarette industry in Indonesia has created a dilemma. On the one hand, the tobacco industry as a whole has accounted for a large enough portion for state revenues, one through the cigarette tax revenue. However, there can be pointed out that the cigarette is a product that is harmful to health and cause of death for millions of lives each year. More than 60 million people in Indonesia smoke and most of them are young people. This is because the younger generation is the main target of the tobacco industry as a prospective customer for life because of the addictive nature of cigarettes. In this research using descriptive method based on secondary data gathering existing data relating to the role of the tobacco industry to the decline in health status of the young generation in Indonesia. The results of this study (1) Advertising, promotion and sponsorship contributed to the behavior of young people to smoke. In one study mentioned that 46.3% of young generation believes cigarette

advertising has a big influence to start smoking, and 41.5% of young generation believes that involvement in activities sponsored by the tobacco industry has the influence to start smoking. (2) Various sports activities, music, movies, art, culture and even religion has been sponsored by the tobacco industry. This can be seen from the monitoring of 10 months in 2007 there were 1,350 events sponsored by the tobacco industry. (3) Providing scholarships, community awareness, sponsor music and free health facilities often used as imaging-smoking efforts. Suggested to this research, namely (i) The Government further increasing restrictions and sale of cigarettes, (ii) More increased surveillance and sanctions to limit smoking area. (iii) In addition, restrictions on cigarette production is also required. This is done to encourage young people not to start or dared to quit smoking.

Keywords: tobacco industry, young generation, promotion of cigarettes

9-015

发挥非政府组织作用 推动《广告法》全面禁止烟草广告

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2013年中国控制吸烟协会获悉, 国家工商总局将启动1994年颁布的《广告法》修订程序。协会参与起草了“《广告法》禁止烟草广告”条款。许桂华亲自就草稿意见与国家工商总局广告监管司领导进行沟通, 被纳入修订稿中。在烟草业的干预下, 《广告法》修订稿中删除了禁止烟草广告条款。协会获知后, 立即向国务院法制办汇报协会的诉求, 组织钟南山等132位知名专家签名致函全国人大, 坚决要求《广告法》中明确禁止烟草广告, 并组织编写了《关于要求全面禁止烟草广告建议的函》, 呈送全国人大法工委以及157位常委。因此在一审中, 有49位常委质问为何不全面禁止烟草广告, 为何还为烟草广告留空间。二审时, 有6位副委员长, 61位常委要求全面禁止烟草广告, 最终成功促进《广告法》明确规定“全面禁止烟草广告”。在《广告法》的修订过程中, 烟草企业千方百计的干预, 协会和其他控烟专家与其进行了长达两年的博弈, 证明了WHO总干事陈冯富珍所说的: “不要指望有人告诉你控烟会有顺风顺水的那一天。你要想着烟草业永远会让这场战争层出不穷, 无休无止。”

Keywords: 《广告法》, 控烟组织与烟草企业的博弈

9-016

Make full use of the role of non-governmental organizations to promote the < Advertisement Law> for a comprehensive ban on tobacco advertising

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In 2013, CATC was informed that the State Administration for Industry and Commerce will start revision procedures of the which was issued in 1994. CATC participated in drafting the “prohibited tobacco advertising” clause of the . Xu Guihua communicated personally with leaders of advertisement supervision of State Administration for Industry and Commerce about the opinions of the draft, and it’s incorporated in the revision. Under the intervention of tobacco industry, the revision of removed those terms that requires total ban on tobacco advertising. CATC immediately appealed to the Legislative Affairs Office in the State Council while it had been informed then, 132 famous experts including Zhong Nanshan, the famous respiratory physician are organized and their allied signature has been sent to the National People’s Congress, appealing for a strict prohibition of tobacco advertising in the ; “Opinions about the comprehensive banning of the tobacco advertising” were collected simultaneously and present to the Law Committee of NPC and 157 members of Standing Committee of NPC. In the first review meeting, 49 committee members questioned why we don’t ban comprehensively on tobacco advertising, why there is still remaining space for tobacco advertising. In second review meeting, there are 6 vice chairmen of NPC and 61 Standing Committee members required the overall ban on tobacco advertising, the ultimate success lead to a comprehensive ban on tobacco advertising in . In the process of revising , tobacco companies do everything possible to interfere the Law which includes clauses of banning tobacco advertising, CATC and other experts competes in the game with them for two years, Margaret Chan who is the general director of WHO said: “there is no smooth sailing day on tobacco control. It will be never-ending struggle with tobacco industry.”

Keywords: <advertising law>, game in tobacco control organizations and tobacco enterprises

9-017

日本菸商大舉在臺設廠對大中華地區之影響

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董氏基金會於 2015 年 7 月接獲民眾檢舉，日本菸商已在台南建廠。查證後發現：經濟部核准建廠、衛生福利部不反對，且地方政府提供 7.6 公頃的土地讓菸商得以設廠，此舉不但違背 WHO 的「菸草控制框架公約」第 5.3 條之實施準則及台灣的「外國人投資條例」，甚至政府用納稅人血汗錢補貼菸商各項租稅，還讓菸商年避 30 億元的關稅。日本菸商在台灣設廠所帶來的損失：健康損失 臺灣：每年 2.4 萬人因菸害而死亡。金錢損失 臺灣每年用於菸害的直接國民醫療保健支出為新台幣 507 億元 臺灣政府每年將短收新台幣 30 億元之關稅。(日本菸品每包關稅約 4 元，以 2013 年為例，傑太日菸在臺灣年售 7.6 億包菸品，約新台幣 30 億元) 提供台南 7.6 公頃的好山好水給菸商，並提供房屋稅、地價稅、貨物稅、營利所得稅等之減免。形象損失 臺灣成為日本菸商海外新據點。若 JTI 在台南製造之菸品大量外銷至鄰近國家，臺灣將以鄰為壑，成為菸草產業金三角，國際菸害防制形象嚴重受損。臺灣的菸害防制倡議始於 1984 年的董氏基金會成立，民間團體邀請知名藝人義工參與、走上街頭宣導，一步一腳印地不斷促請政府往前走，近幾年政府無論是對國內民眾或是在國際會議，皆大力宣揚臺灣菸害防制成效，但同時卻讓菸商大舉在臺灣設廠，這是極度荒謬的現象。這也顯示跨國菸商的影響力無所不在，絕不只是台灣的問題，也絕不能只依賴政府的力量，更需要的是大中華地區非政府組織的共同參與、努力與堅持。國際菸商為節省製造成本，一定會陸續轉向大中華地區進行投資設廠，期盼在大家的交流合作下，能確保全球華人都能徹底脫離菸品的荼毒危害。

Keywords: 菸草產業, 菸草控制框架公約



议题 (十)

Tobacco control and health promotion
控烟与健康传播

1-015

A smart and sustainable approach to improving health

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Few things are more important than being healthy, yet as a society, we invest little money or attention to keep people healthy. Most health spending goes to treatment rather than disease prevention. While treatment is important, it should not take priority over prevention. Stronger programs to keep people healthy would reduce the burden on health systems, save money, and prevent unnecessary suffering and early death. But how are we to fund such efforts? Many countries have established a health promotion foundation, funded by a surtax on tobacco and, in some cases, alcohol. That surtax feeds into a special fund, usually operated by a health promotion foundation, which works not only to decrease the use of tobacco (and alcohol), but also other health problems. The amount raised from a tobacco tax surcharge is huge. Putting that much money into one program, while others are underfunded, can cause jealousy that makes it difficult to gain cooperation across different health sectors. Ensuring a significant portion of the funds do go for tobacco control, the rest can be allocated to other programs to promote health and thus reduce overall illness. In Bangladesh we already have a surtax on tobacco that is earmarked for health promotion. Down the line, there is no reason why we could not add surcharges on other unhealthy products (soft drinks, fast food, junk food, plastic packaging including bottles, and automobiles) that damage our health and the environment. With a broader funding base, there would be even more possibility to fund important programs to improve health, and the surcharge would itself reduce the use of these harmful products. It makes far more sense to use taxes to discourage harmful behavior than to tax positive things like education or products essential to daily life. Good health at the societal level is achievable, and a broad based health promotion foundation is one vital step towards achieving it.

Keywords: sustainable approach, health promotion foundation, disease prevention

2-002

浅论我国青少年吸烟影响因素及控烟履约策略

The strategy of China's tobacco control performance factors and adolescent smoking effect

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【目的】对我国青少年吸烟影响因素进行客观评估并提出控烟履约策略。

【方法】阐述现阶段影响我国青少年吸烟的主要因素，分析评估其对青少年吸烟的危险程度。

【结果】我国青少年吸烟受家庭“有烟环境”和社会“吸烟环境”及“个体差异”的“多重因素影响”，面临“效仿吸烟”、沦为未来“烟民”的危险，其遭受“二手烟”暴露的状况不容乐观。

【结论】必须从控制“烟草源头”、构建“无烟环境”、转变“吸烟观念”、健全控烟履约保障体系入手，加强政府主导控烟工作与“部际协调机制”，动员多部门合作和全社会参与控烟，从根本上消除青少年“效仿吸烟”的动机与行为，避免和延缓其未来及成年后发展为“烟民”的可能性，最大限度地避免和减少“二手烟”危害。

Keywords: 烟草危害; 控烟; 履约; 青少年; 吸烟, The harm of tobacco; tobacco control; performance; adolescent; smoking

9-007

Malaysia's Experience on the Tobacco Carve-out Proposal in TPPA: Lessons Learnt and Way Forward

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The Trans-Pacific Partnership Agreement (TPPA), dubbed as the 21st Century free trade agreement has membership consisting of 12 countries of the Pacific Rim including Malaysia. Under the TPPA, tobacco is seen as any other commodity and therefore subject to trade liberalisation. Tobacco was successfully included in this agreement after strong lobbying of giant tobacco industries to weaken the domestic tobacco control measures in partner countries. However, at its 19th rounds of negotiation in Brunei in 2013, the official Malaysian delegation tabled a proposal to completely carve out tobacco from the TPPA. Given the high stakes and political complexities involved with such suggestion, this bold move received applause and support from around the world. The outcome was a historic first, a tobacco control provision in a multilateral trade and investment agreement. The primary impetus that led to the carve out proposal was a cohesive collaboration between participants from civil societies at local, regional and international levels with officials from the Ministry of Health and the Ministry of International Trade and Industry. Malaysia's success in pushing the agenda in the TPPA demonstrates how well-coordinated and solidarity among the tobacco control community can frame issues and set strategies to ensure trade rules do not inhibit domestic tobacco regulations. This paper intends to elaborate the process of this coordination and the challenges faced in getting the agenda accepted and endorsed by the government. The TPPA concluded with a provision to exercise an option to

exclude tobacco control from ISDS, a far cry from the carve out proposal but still a milestone in tobacco control and trade arena. Additional resources and having more active civil society partners in the other countries would have helped in producing a provision that is closer to the carve-out proposal.

Keywords: Tobacco control measures, Malaysia, Carve Out Proposal, TPPA

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10-001

FCTC Ratification and Economic Condition

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Indonesia is the only country in Asia Pacific that has not signed and ratified the FCTC. The major obstacles for this are economic argument like employment, poverty and economic growth. This paper will explore the impact of ratifying FCTC to economic condition in several countries that has ratified FCTC. Lesson learned drawn from several countries that ratify FCTC and its impact on economic and cigarette consumption after the ratification. Most of the countries experienced improved economic condition after the FCTC ratification. Turkey, China, Lao PDR, Uruguay, and India has succeeded in reducing tobacco consumption. Tobacco leave production rose in eleven countries and decline in other seven countries. Most indicators shows that FCTC ratification has no relation with economic condition.

Keywords: FCTC, Economic, Myths

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10-003

The relationship between smoking characteristics and respiratory muscle strength, and lung function in young adult smokers

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To investigate respiratory muscle strength, and lung function among the smoking characteristics in young adult smokers. Smoking male participants aged between 18 to 35 years were recruited (N=138). Participants were asked to complete a questionnaire relating to smoking characteristics. Their respiratory muscle strength and lung function was tested. All lung function tests demonstrated significant differences among the smoking groups ($p<0.05$). This study's findings show that the cigarette smoking characteristics are associated with the decline of lung function which can subsequently lead to problems with the respiratory system. Such information can be used to further clarify the harm of smoking and should be used to encourage smokers to quit cigarette smoking.

Keywords: cigarette smoking, lung function, respiratory muscle strength, spirometry

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10-004

Acute Effect of Physical Therapy and Mouthwash with Chewing Gum on Smoking Cessation

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The primary objective of this study was to determine the acute effect of physical therapy and using mouthwash with chewing gum on smoking cessation. The secondary one was to investigate immediate changes in vital capacity and the amount of carbon monoxide in smokers who were able to quit smoking. Twenty-nine males aged 42.90 ± 13.29 years performed physical therapy program including diaphragmatic breathing exercises (10 times/set, 3 sets/day), anterior and lateral active chest mobilization exercises (10 times/set, 3 sets/day) and using mouthwash (when craving for cigarettes at home) with chewing gum (when craving for cigarettes outdoor) for 6 weeks. All subjects were followed up every week by telephone to ensure that they completed this program until 6 weeks. They were asked to undergo the vital capacity test and carbon monoxide measurement before and after completing 6 weeks program. The Independent t-test and Mann-Whitney u-test were used for statistical analysis with significant difference at $p<0.05$. The results showed that 7 of the subjects (24%) were able to quit smoking and 10 of them (34%) could reduce the amount of smoking. The results also showed no statistically differences in the average vital capacity between before and after 6 weeks in both groups that could and couldn't quit or reduce smoking. The average level of carbon monoxide decreased significantly in merely the group that could quit or reduce smoking. In conclusion, physical therapy together with mouthwash and chewing gum is another effective way to help in smoking cessation.

Keywords: Physical therapy, smoking cessation, mouthwash, chewing gum, carbon monoxide, vital capacity

Acknowledgement:

1. Thai Health Promotion Foundation (ThaiHealth)
2. Physical Therapy Network of Thailand for Tobacco Control

10-005

Effects of Community Based Program with Health Promotion Strategy on Tobacco Control in Nakornrachasima Province

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Objective: To evaluate the effects of Community Based Program with Health Promotion Strategy on Tobacco Control in Nakornrachasima Province

Methods: This participatory action research (PAR) has applied five strategies of Ottawa Charter; 1) Build Healthy public policy, 2) Create supportive environment, 3) Strengthen community action, 4) Develop personal skill, and 5) Reorient health service to design community based intervention in 43 communities in five districts of Nakornrachasima Province in 2014-2015. Output and outcome evaluation were done by record and observation form and questionnaire. Data were processed by descriptive statistics.

Results: Target populations were 35,308 smokers in 43 sub-districts. After the implementation community based program, the results showed that 20 mentors in district level and 5,620 leaders were built capacity to do tobacco control. Each community has built its policy and announced to public and also had movement to push provincial leader to announce provincial policy for tobacco control such as ‘Baraku Free Korat’ and reinforcing people to comply the law. Supportive environment has been created 1,756 public places in educational institutes, health centers, villages’ halls, etc., and 1,642 cigarette retailers were trained to understand tobacco control law and law compliance, especially not sale to minors under 18 years. Relevant people more than 80% perceived and concerned to tobacco harm. The key outcomes were 11.17% or 1,644 smokers (one in ten was youth) can quit after participating in the program and 30.21% or 6,376 smokers reduced number of cigarettes. There were averagely ten modelling quitters in each community. Moreover, 5,877 youths were socialized to have immune for protecting them from being new smoker.

Conclusion: Community based program with health promotion strategy was effective to tobacco control and sustainable health development which has impacts on individual behavior, environment and community strengthen.

Keywords: Community based program, Health Promotion Strategy, tobacco control

Aknowledgement:

1. Faculty of Public Health, Mahidol University
2. ThaiHealth Promotion Foundation, Thailand
3. Tobacco Control Research and Knowledge Management Center (TRC)
4. All health Officer and people in Nakornrachasima Province

10-006**Assessment of 2015 Taiwan Tobacco Control performance based on WHO MPOWER guidelines**

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Objectives: Smoking kills more than 20,000 people each year in Taiwan. This study aims to demonstrate the significant progress with Taiwan MPOWER performances and compare achievements with other Asia-pacific countries.

Methods: Assessment data from Taiwan's laws and regulations, a comprehensive health surveillance system, and research database and reports, with WHO MPOWER performance rating indicators.

Results: The adult smoking rate declined from 21.9% in 2008 to 17.1% in 2015, indicating a 22% decline in smoking rate and a decrease in the number of smokers by approximately 760,000 within 7 years. Taiwan has protected over 90% of the population from smoke-free environments by enforcing the law in eliminating second hand smoke in public areas, and promoted the recognition of tobacco hazards to youth especially via campus activities, official websites, Facebook, and YouTube. It's worth noting that Taiwan is the 2nd country to carry out the ordinance of smoke-free parks and national parks around the world. Assisting nearly 100,000 smokers since 2012 in quitting smoking successfully by providing the Second Generation Smoking Cessation Program and other services such as Quitline, cessation classes and cessation counseling. Over 40% of smokers attempt to quit after Taiwan enacted health warning labels on tobacco packs. The Health Promotion Administration has worked with the National Communications Commission (NCC) to establish the guideline that anti-tobacco textual messages are required to add on Radio and TV programs, reminding people of tobacco harming.

Conclusion: Taiwan gains five 1st performance (Monitoring, Smoke-free environments, Cessation programmes, Anti-tobacco mass media campaigns, Bans on advertising, promotion and sponsorship) while compared to other Asian countries (Japan, Republic of Korea, Thailand, China, etc.), and ranks among the best with Singapore and Australia. Continued efforts are needed to raise the health warnings and taxations in the future.

Keywords: MPOWER, Tobacco Hazards Prevention Act, MPOWER performance rating indicators, Second Generation Smoking Cessation Program

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10-007

Capacity Building for Female Community Health Workers – An Effective Tool for Tobacco Control and Empowerment

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Background Tobacco is a significant public health concern in rural India. In Maharashtra, India's second largest state, 31.4% of adults report tobacco use. In rural villages, tobacco use is endemic – smokeless tobacco use is engrained in social and cultural norms. At the same time, poor rural health care infrastructure means diagnosis and treatment of tobacco-related diseases is a challenge. Intervention Salaam Mumbai Foundation began its rural initiative in 2007. An initial needs assessment was conducted in nine villages across Chandrapur, a rural district in Eastern Maharashtra. At that time, 45% of all village residents reported tobacco use – including children as young as two years old. Following the needs assessment, SMF began capacity building sessions with 60 female community health workers to empower them to become the tobacco control counselors in the villages they serve. Capacity building activities included sensitization workshops about the health effects of tobacco, and the existing tobacco legislation. Follow up sessions were done to assess progress. Results Community health workers implemented tobacco control activities including songs, street plays, anti-tobacco rallies. They also incorporated anti-tobacco messages into their other health activities. Through this programme, SMF has addressed tobacco control issues among 28,000 residents in 60 villages and schools. An evaluation conducted one year after the program revealed that awareness of the harmful effects of tobacco use increased up to 90% and tobacco consumption had reduced. Conclusions Community health workers can be trained to implement tobacco control efforts in villages and work with all village stakeholders. Community health workers are uniquely situated to implement tobacco control programmes due to their access to community members, their role as trusted sources for health information, and their ability to understand the unique issues faced in their communities.

Keywords: Health workers, India, Maharashtra, capacity building, community mobilisation

10-008

Predicting Factors of Smoking Cessation in Acute Coronary Syndrome Patients After Hospital Discharge

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Smoking is one of the leading causes of acute coronary syndrome (ACS). Despite of being aware of the harmful impact of smoking on ACS, these patients still indulged in smoking even after being admitted in the hospital. This study aimed to examine the predictors of smoking cessation in ACS patients. A descriptive correlational design was used in this study. The study was conducted in seven tertiary care hospitals in Thailand during January 2014 to August 2015. A total of 162 ACS patient smokers participated in this research. Instruments consisted of the demographic data questionnaire, the smoking self-efficacy questionnaire (SEQ), the Fagerstrom test for nicotine dependence (FTND), the partner interaction questionnaire (PIQ), the center of epidemiology scale of depression (CES-D), the reasons for quitting questionnaire (RFQ), an intensity of smoking cessation intervention questionnaires, and the smoking cessation question. Descriptive statistics were used to assess the demographic data, and regression analysis was used to examine the relationship between variables. Of the total sample, 71% (n=115) reported they had not smoked for three months following hospital discharge. The significant predictor of smoking cessation in ACS patients at three months after hospital discharge were previous CAD (OR = .229; 95%CI = .076-.693, $p < .01$), nicotine dependence (OR = .769; 95%CI = .611-.968, $p < .05$), self-efficacy in smoking cessation (OR = 1.127; 95%CI = 1.081-1.175, $p < .05$). The results demonstrated that having previous coronary artery disease, self- efficacy in smoking cessation and nicotine dependence to quit smoking were the important factors influencing smoking cessation in ACS patients after hospital discharge. In order to encourage ACS patients to quit smoking, self-efficacy in smoking cessation and nicotine dependence should be incorporated in smoking cessation intervention.

Keywords: smoking cessation, acute coronary syndrome, hospital discharge

Acknowledgement:

The Tobacco Control Research and Knowledge Management Center (TRC). Thailand

10-009

An innovative approach to promote smoking cessation in women

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Despite the low prevalence of women smokers in Hong Kong, number of women smokers had increased by 53.2% from 1993 to 2012. This upward trend is particularly observed in recent years among the middle-aged groups. Compared to male smokers (32.7%), more female smokers (43%) took up the habit at older age after 19. Although women smokers (9.9 sticks) consumed less cigarette daily than male smokers (13.5 sticks), quit attempt of female were also low (60.0% vs male: 62.4%). According to a focus group study conducted by Hong Kong Council on Smoking and Health (COSH), reasons for smoking was mainly relieving stress from work and family and spending the excessive spare time. Most of them did not want to be identified as smokers and expressed reluctance to the conventional mode of promotional activities of smoking cessation, e.g. health talks and advice by professionals. An innovative Women Smoking Cessation Promotion Programme targeting the middle-aged women smokers was therefore organized by COSH from 2014-2016 with the objectives to educate the middle-aged women on the knowledge of smoking hazards, to motivate female smokers to quit smoking, and to mobilize the public to support female family members and friends to quit. A series of creative activities such as publicity activity, TV programme and district-based classes on different health-related topics, such as fitness, personal grooming, Chinese medicine, dietary and stress relief were organized to spread the smoke-free messages. Over 800 participants joined the classes. Evaluation results showed that the classes were effective in improving knowledge of smoking hazards and encouraging smoking cessation in women. The programme was supported by over 50 local women associations to promote and encourage women to participate through their network.

Keywords: smoking cessation promotion, female smoker, smoking women

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10-010

吸烟者对烟草与健康关联的认知

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【目的】了解吸烟者对吸烟、被动吸烟影响身体健康相关知识的认知状态。

【方法】在 5 个地区通过非随机抽样方法调查吸烟者的吸烟习惯，吸烟危害相关知识的认知情况，单因素方差分析比较不同人群对吸烟危害的认知差异。

【结果】吸烟者对少量吸烟、低焦油烟危害及如何成功戒烟的认知欠缺（知晓率 <20%），对除肺部疾病外的其他疾病与吸烟关联的认知率低于 50%。累计吸烟量和每日吸烟量多的被调查者得分低（ $P < 0.05$ ），家人要求戒烟的吸烟者吸烟危害相关知识的得分高于没有家人要求戒烟者（ $P < 0.05$ ）。得分在不同性别、开始吸烟年龄、累计吸烟时间及尝试戒烟情况的吸烟者间没有显著差异。

【结论】在控烟干预和健康教育中应针对不同状态吸烟者的特点设计对应的干预措施，家人、朋友的积极态度能够影响吸烟者对吸烟危害的认识。

Keywords: 吸烟者, 吸烟危害, 吸烟与疾病联系

10-011

Short term benefit of smoking cessation on health-related quality of life in smokers receiving services from the SMART Quit Clinics Network

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Background: Smoking cessation is the crucial intervention to reduce tobacco-related diseases. The SMART Quit Clinic Network, sponsored by the Thai Health Promotion Foundation, provides comprehensive smoking cessation service in hospitals. Currently, approximately 330 hospitals across Thailand have become the network members. Very few studies have addressed health-related quality of life and smoking cessation. Evidence of the impact of smoking cessation on quality of life can be useful in encouraging smokers to quit.

Purpose and method: This cross-sectional study examines health-related quality of life among smokers receiving services from ten selected hospital network members. A convenience sample of 1,000 smokers who met inclusion criteria was invited to take part in the study. Data were collected from hospitals' database and telephone interviews throughout January to April 2015. Research instruments included demographic data and smoking screening form; the Quit Smoking Questionnaire; and the EQ-5D-5L questionnaire. Data were analyzed with descriptive statistics and independent sample t-test.

Results: 716 smokers agreed to participate in this study and the response rate was 71.6%. The majority of participants (97.1%) were males. About forty percent of the participants were aged between 25 - 44 years and 45 - 64 years. The majority had heavy smoking index score less than four, indicating low nicotine dependence. The self-reported continuous abstinence rate at 6 month(s) was 40.5%. The reported HRQOL as measured by mean EQ-5D-5L index value and Euro QOL visual analogue scale (EQ-VAS) score was 0.93 ± 0.12 and 81.5 ± 13.0 , respectively. The participants who stopped smoking over months had higher average score on EQ-VAS than those who continued to smoke (p -value $< .05$). Further studies are needed to determine the long-term effect of smoking cessation on health-related quality of life.

Keywords: Health Related Quality of Life, Smoking Cessation

Acknowledgement:

This study was funded by the Tobacco Control Research and Knowledge Management Center (TRC) and Thailand Health Promotion Foundation.

10-012

The Sin Tax Law and Tobacco Farmers: A Review of the Policy and Implementation of Alternative Livelihood Programs for Tobacco Farmers in the Philippines

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Background: Republic Act No. 10351 (Sin Tax Law) increased taxes of tobacco products and provided needed funds for government health care programs. The law also provided funds for alternative livelihood programs for tobacco farmers to help them to shift to other forms of livelihood, in accordance with the Framework Convention on Tobacco Control (FCTC). After a few years of implementation of the law, it is necessary to look into implementation of alternative livelihood programs in the Philippines.

Method: Key informant interviews, policy research and analysis

Results: There are high-value crops and other forms of livelihoods that can be promoted to tobacco farmers. Government intervention and support is crucial to encourage farmers to shift to other economically viable livelihoods. There has been a delay in the implementation of alternative livelihood programs for tobacco farmers due to a Supreme Court case and the election ban on government projects. Nonetheless, the memorandum providing for the allocation of fund and guidelines for its utilization was released last March 2016 and it is expected that the fund will be released soon. Analysis of policies shows inconsistency in the government's position on implementing alternative livelihood. There is still a government agency mandated to promote tobacco farming and the growth of the tobacco industry and an earmarked fund to improve tobacco production.

Conclusion: The Philippines has started to comply with its commitment to Article 17 and 18 of the FCTC by providing funding for alternative livelihood programs, but government efforts should be scaled up to ensure that programs aimed at promoting alternative livelihoods to tobacco farming are implemented effectively. The Philippines needs to address policies that are inconsistent with promoting alternative livelihood, specifically, those that promote tobacco production, as it is inconsistent with the commitment to reduce the supply of tobacco products.

Keywords: Alternative livelihood, Tobacco industry interference, Tobacco control funding

10-013

Civil society movement to utilize health surcharge: Experience from Bangladesh

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Bangladeshi tobacco control is moving forward as Prime Minister has declared that Bangladesh would be tobacco free by 2040. Civil society movement became inspired, but government of Bangladesh moving slowly as many obstacles exist including tobacco industries interference. Government imposed 1% surcharges on all tobacco products in the 2014-15 financial budgets, which is milestone initiative to protect public health. **Description:** Bangladesh has been experiencing an epidemiological transition from communicable disease to Non-Communicable Diseases (NCDs) due to high prevalence of risk factors including high prevalence of tobacco use. Government approved National Health Policy 2011 with the principal agenda to prevention of diseases, 1% surcharge is an opportunity to focus on NCDs prevention.

Methodology: Work for a Better Bangladesh and Bangladesh Anti Tobacco Alliance started discussion to utilize this surcharge through health promotion foundation. Various kinds of public support campaign and advocacy has been organized including letters to health minister and secretary, signature campaign, human chain, rally, seminar, round table, discussion and meeting with policy makers etc. This issue is also appeared in the news media. From July 2014-January 2016, government collected USD 40.34 million (BDT 3146.8 million) as surcharge from tobacco companies. But it is not clear yet how this surcharge will utilize on tobacco control and health promotion. Ministry of Health and Family Welfare formed a sub-committee on January 2016 to develop draft policy for utilizing surcharge and developed draft, which has shared with all relevant ministries to get their feedback. Ongoing civil society movement will continue until pass this draft policy.

Success: A subcommittee is formed and a draft policy is developed. Lesson learnt: Strong civil society movement can create a positive atmosphere among policy makers and administration to work on tobacco control effectively.

Keywords: surcharge, tobacco control, health promotion, NCDs prevention, Health promotion foundation, civil society, tobacco control movement

10-015

中国控烟传播模式的发展与创新——以“携手灭烟，拥抱晴天”健康传播运动为例

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烟草危害是当今世界最严重的公共卫生问题之一，如何通过多种媒体渠道开展控烟传播运动成为健康

传播重点议题。本文以“携手灭烟，拥抱晴天”无烟环境创建倡导活动为例，分析目前中国健康传播运动在实践方面出现的新变化。健康传播模式的创新，不仅是活动的具体形态的不同，更在于传播理念、社会动员和社会治理模式的创新。本文通过分析该活动的在达成控烟传播的概念框架、运作模式、政府及大众媒体的角色等因素，为中国未来控烟传播的方向提供借鉴。

Keywords: 控烟, 健康传播, 传播运动, 无烟环境

10-016

Basic Prevention

samar Parker

Cancer aid society,ngo,lucknow,india,asia

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Cancer Aid Society is a Non Profit, National Level, Social Secular NGO working for the control of Cancer in tune with the guidelines of the “National Cancer Control Programmes”, 1995 & 2002 of the World Health Organization and “National Cancer Control Programme”, 1985 & 2005 of the Govt. of India without any financial assistance from the Government or Non Government Bodies. This NGO has National Network of Offices at Delhi, Mumbai, Chennai, Kolkata, Ahmedabad and Lucknow . I had Worked in more than 50 cities/towns of Uttar Pradesh, Rajasthan, Himacal Pradesh, West Bengal, Kerala, and Tamil Nadu for Maas awareness on Tobacco control and Heathy dietary habits. Worked Mostly among the students aged 4 to 17 years. Interacted with more than 50,000 students /youth/Adult. Above activity conducted in more than 500 schools, colleges, private offices and Banks. Maas awareness and focus group activity at Panchayat level to the rural population. Made more Than 1400 institutions tobacco free Zone. Educated the above through interactive Lectures/Seminars/Counselling session/Signature Campion/Panting Competition/Nukkad natak activity show casing the ill effect of Tobacco, new amendments in COTPA Act , health and hygiene program, which has also in turn had helped in improving the life style of the people interacted. Also making them aware about the warning sign and symptoms of few cancers so that early deduction of cancer might be done. Asking to Pledge the student/Adults not to be involved in any ill practice of using Tobacco and alcohol product .At the same time motivating them to force their parents /elders through love and care to stop using any and every tobacco product, because “ what your stick can’t do your smile will do.” Author Name: SAMAR .Y. PARKER Designation : Regional Director Organization: Cancer Aid Society

Keywords: health, lifestyle

Reference:

Piyush Gupta

10-017

Systematic Reviews on Nurse Led Projects for Tobacco Control in Thailand

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This is a review of research articles from Thai published journals. Most of them were from the Thai Journal of Nursing, Nurses Association of Thailand during 2009-2016. There were 20 descriptive and 30 quasi-experimental/action research studies. Most studies were conducted in communities (31.0%), following by in hospitals (23.8%), in schools/academic institutions (16.7%), and in work places (9.5%). The other studies aimed to enhance efficacy on nursing practice for tobacco control (19.0%), both for registered nurses and nursing students. Findings from quasi-experimental and action research studies reveals that nursing practice for tobacco control and helping smokers to quit smoking needs family and community participation on supporting smoke-free environment in community and supporting smokers during the quitting process. The descriptive studies also examine smoking situation and factors related to intention to quit smoking among Thai population in various settings, i.e. in community, in industries, in educational institutions, and in health care service institutions. In addition, integration of tobacco intoxication and nursing practice to help smokers to quit as an elective course was developed and included in nursing program, in many nursing education institutions. Recommendations from this review support nursing practice guideline on helping smokers to quit with no medication treatment. Strategies of promoting smoke-free community were recommended to raise more participation at family and community level as well.

Keywords: Nurse Led Tobacco Control, Health Promotion, quit smoking

Acknowledgement:

1. Nurse Network on Tobacco Control of Thailand
2. Thai Health Promotion Foundation

10-018

Civil Society Monitoring of Tobacco Control Laws in the Philippines: The Case of the Sin Tax Law of 2012 and GHW Law of 2014

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Background: The Philippines successfully passed two vital tobacco control measures within a span of five years, namely the Sin Tax Reform Law in 2012 and the Graphic Health Warning on Tobacco Products Law in 2014. Despite strong opposition from the tobacco industry, these measures hurdled the exhaustive legislative process due to the robust network of advocates and supporters. They are now hailed as milestones in the public health history of the country, and have been recognized as an inspiration for tobacco control worldwide. Following the enactment of the law comes the challenge of implementation, which is under the jurisdiction of the executive departments of government. With limited resources and anticipating the threats from the industry to subvert the law, agencies such as the Department of Health have tapped civil society to assist in monitoring and provide feedback about the actual situation on the ground. Both sectors have also developed monitoring tools and processes, and systematically share information to compare and validate the data collected.

Design/Methods: The paper is based on primary data, and interviews of partners from the Department of Health and civil society.

Results: The implementation committees for both tobacco control measures have incorporated a specific provision in the implementing rules and regulation (IRR) that recognize civil society participation in monitoring both laws. Civil society input is therefore considered important and have actually helped government determine attempts of the industry to subvert the effectiveness of the law. Various monitoring tools were developed. Challenges encountered include the outdated or incomplete data provided by government, lack of support from some government offices, and absence of sustainable resources to conduct research and network with civil society organizations from far away regions.

Keywords: Tobacco control, Health promotion, civil society, monitoring, intersectoral approach, Tobacco Tax, Graphic Health Warning

Acknowledgement:

This paper is supported by HealthJustice Philippines

Reference:

[1] RA 10351

[2] RA 10643

[3] Joint Circular 001-2014

10-019

The impact of secondhand smoke on neonatal biometric outcomes and gestational age in Hungary

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Prenatal second-hand tobacco smoke (SHS) is a serious problem in Hungary's four underdeveloped north-eastern counties with considerable ethnic Roma population. In this study, we aimed to explore the consequences of at-home SHS exposure on the neonates' obstetrical outcomes. We collected data of mothers delivered with live born babies 2009-2011 (n=16,859) in Hungary's four underdeveloped counties. The neonates' biometric measures were obtained from medical records (birth weight, body length, head and chest circumference, gestational age). Maternal demographic and sociocultural data were obtained by in-person surveys with mothers. The response rate was 74.5%. We conducted binary logistic regression analysis of maternal variables for SHS exposure, frequency analysis for central tendencies and dispersion and t-probes for comparing means of neonatal data using significance level $p < 0.05$ (IBM-SPSS v.23 program). In the non-smoking sample (n=8,497) pregnant women exposed to SHS were typically less educated (OR=3.32, 95%CI=2.64-4.18), of Roma ethnicity (OR=1.71, 95%CI=1.36-2.15), living without amenities (OR=1.70, 95%CI=1.37-2.11) and of extramarital status (OR=1.52, 95%CI=1.27-1.82). The negative difference of birth weight by fetal SHS exposure was 154.9 gram (95%CI=-188.5-121.3), that of body length 0.8 cm (95%CI=-1.0-0.6), of head and chest circumference 0.5 cm (95%CI= -0.6-0.3, and 0.7-0.3 respectively). Gestational age was shortened by 0.4 week. We conclude that at-home SHS exposure has a significant impact on biometric and obstetrical parameters of new born babies. Tobacco related programs for pregnant women must also focus on SHS exposure, eliminating of which is essential in lower socioeconomic status households as well.

Keywords: Second hand smoking, preterm birth, low birth weight, premature birth, Hungary, Roma

10-020

Enhancing capacities of nurse preceptors in tobacco control

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Nurse preceptors are significant in preparing nursing students and newly graduate nurses. Enhancing capacities of nurse preceptors in tobacco control could enhance the effectiveness of integrating tobacco control not only in nursing practices but also serving as a role model and increasing role awareness of nursing students. The purpose of this study was to describe the systematic development of a tobacco control training program for Thai nurse preceptors. Its impacts on smoking cessation practice of preceptors were also evaluated. The conceptual framework of development, implementation, and evaluation was used. Two hundred and ninety-five preceptors working at 20 teaching hospitals/ health centers in 3 northern provinces of Thailand participated. The 1-day workshop comprised contents related to smoking cessation (5A) and using clinical nursing guideline for smoking cessation. Training outcomes were evaluated using group discussions. Findings indicated that preceptors reported

integrating smoking cessation practice in various clinical settings. Nurse working in out-patient department routinely asked the smoking status of patients and refer to patients to cessation services. While nurses working in pulmonary units provide one-stop services at their department. Nurses working in inpatient units have less roles in smoking cessation as all of patients admitted are not allow to smoke when they are hospitalized. Preparing nurses preceptors with cessation guideline could promote tobacco control in teaching health care facilities.

Keywords: Enhancing capacities, nurse preceptors

10-021

Research on Tobacco Control Communication in the New Media Environment : Taking WeChat Official Accounts as an Example

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Objective To understand process on tobacco control communication in the domestic new media environment, evaluate the effectiveness of tobacco control communication by WeChat Official Accounts, and provide new media strategies for tobacco control. **Methods** Researches on tobacco control communication were retrieved and collected by Chinese academic database including CNKI, Wanfang and VIP. WeChat Official Accounts of tobacco control were gathered by Wechat Search bar, then evaluated from communication process and content. **Results** 124 articles about tobacco control communication were filtered and achieved, including analysis of the framework of media coverage, research on tobacco control strategy, and effectiveness of anti-tobacco advertisement. Secondly, 28 tobacco control WeChat Official Accounts were gathered, consisted of six government bodies, fifteen Non-government organization(NGO), five business organization and two personal accounts. In detail, the average number of Official Accounts number of fans, released Wechat messages and viewed Wechat messages was 2098, 233 and 249, separately. Content analysis suggested, the viewed amount of WeChat Official Accounts was wave-like trend and reached a peak on World No Tobacco Day. There was a significant difference between operator of the account and language style, scope of the audience and persuasion. in addition, There was a high degree of participation by award-winning question. **Conclusion** the amount of Tobacco control WeChat Official Accounts is less , and overall operation situation is not optimistic. What's more, Theme Day activities were main topics of Wechat message, Call to Action was important means of persuasion and visual communication was important means of communication.

Keywords: New media, Wechat, Tobacco control, Health communication



议题
(十一)

Tobacco control and media communication strategies
控烟与媒体传播

11-002

新媒体对大众防烟 / 控烟态度的正面影响

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【目的】了解新媒体对大众防烟 / 控烟（以下简称控烟）的正面影响，强化新媒体在控烟知识传播中的作用，为制订有效的新媒体干预策略提供科学依据。

【方法】运用网上与面对面的方便抽样调查方法，对 664 名大众进行自编调查问卷统一调查。

【结果】有 26.5% 的受访者认为新媒体对其的控烟意识产生了正面影响，正面影响在年龄（ $\chi^2=10.03$, $P=0.04$ ）、吸烟情况（ $\chi^2=7.17$, $P=0.007$ ）、控烟知识关注程度（男性 $\chi^2=29.03$, $P=0.000$ 、女性 $\chi^2=32.83$, $P=0.000$ ）上存在显著差异，此外新媒体对女性医护教师的正面影响大（ $P < 0.01$ ），不同类型媒体对女性控烟意识产生的影响差异显著（ $P < 0.05$ ）。

【结论】新媒体对大众控烟态度的正面影响作用逐渐显露，并受年龄、吸烟情况和控烟知识关注度等的影响，与性别和受教育程度无明显关系，应有针对性地加强其正面影响力度，减少或消除烟草公司利用新媒体阻碍我国控烟履约进程的一切行动。

Keywords: 新媒体, 正面影响, 大众, 控烟

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11-003

Effect analysis of anti-smoking advertisements on the bus digital television in urban, Tianjin

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Abstract: Objective To evaluate the effect of anti-smoking advertisements on the bus digital television in urban of Tianjin, and to provide evidence to promote mass media of tobacco control.

Methods: One bus stop was randomly selected in each six districts in Tianjin, and passengers were surveyed by questionnaire; the same surveys were conducted twice before and after the broadcasting of tobacco control advertisement. We processed the data by χ^2 test to analyze the variations.

Results: The smoking rate was 27.5% among passengers, and 81.9% of passengers had seen the advertisement on digital television in bus; the proportion of passengers who knows smoke and secondhand smoke may resulting in stroke and heart disease has significantly increased ($P < 0.05$), indicating the effectiveness of publicity; passengers' awareness on smoke and secondhand smoke causing pregnant women abortion, sudden infant death, fetal abnormalities and impotence disease has a rising trend; the approval rate of smoking ban in public as well as the proportion of passengers who agree with the contents of anti-smoking advertisements increased significantly, and the approval rate of punishment on smoking in public places raised.

Conclusion: Bus digital television advertisement of tobacco control has better performance and lower budget; awareness of public on several diseases caused by smoking is still low and needs to be improved; publicity alone has little influence on behavior associated with smoking.

Keywords: Anti-smoking advertisements, bus digital television, publicity effect

11-004

Qualitative Study of Thai Tobacco Farmer's Perception of the New Proposed act of Tobacco Control: Nervousness and Remedies

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The current campaign against the new Tobacco Products Control Act of Farmers in Thailand which reflects the perceived problems of tobacco farmers and that there is a mismatch of perception between public and tobacco farmers. Therefore, this study aims to investigate the recognition of the new tobacco control act of farmers in Thailand that relate to the concerns and proposals about measures to help tobacco farmers that could be affected from the new act version. Methods: This study is a qualitative research and data collecting was gathered through semi structured interviews and a focus group. There are 18 tobacco farmers in Sukhothai Province, the area which grows the biggest amount of tobacco in land size, federation burley, and analysis of the data by the content analysis. Results: The study found that tobacco farmers' perception of the new act's content quite less and limited within the head of tobacco farmers. Furthermore, there are concerns about the impact of the act pretty in relation to reducing the amount of tobacco purchased and to stop growing tobacco. The bad image removal of tobacco farmers and to stop doing the activities of Corporate Social Responsibility (CSR) for tobacco farming as well as a proposal to help tobacco farmers that could be affected by an interception dating from the new act were also highlighted. This included, urgent help such as investigation and registration of tobacco farmers which have got the affects and the compensation amount quota planted tobacco which are reduced and in the long-term offer the agency to be involved to promote alternative crops instead of tobacco, for instance, sweet corn and peppers that require a quantity insurance system and price of the crops which require funding to support low-interest loans including support in academic and agricultural technology.

Keywords: Tobacco farmers, the new tobacco control act, recognition

Aknowledgement:

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11-007

Influence of Public Media toward the Intention not to Smoke Among Students in Lower Secondary School Under The Office of Educational Service Area, Trat Province

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Adolescent smoking had increased, even though many non-smoking campaigns were promoted through public media and pictorial warnings were printed on cigarette packs. This study was to investigate the influence of public media toward the intention not to smoke among Grade 2 students. The sample was 556 students who were randomly selected by multi stage sampling from public lower secondary school in Trat province. The data were collected by distributing questionnaires to students in their classrooms. The data were analyzed using Pearson product moment correlation. Influence was analyzed using multiple linear regressions. The results showed that Students at 97.8 percent had intention to try smoking at less level. The factors, which were female gender (= -0.78; 95% CI = -1.23, -0.33), understanding the meaning of public media (= -0.43; 95% CI = -0.64, -0.22), understanding the meaning of pictorial warnings on cigarette packs (= -0.18; 95% CI = -0.30, -0.07), intention not to try smoking (= -0.12; 95% CI = -0.21, -0.04), considering non-smoking perception from public media's influence (= -0.09; 95% CI = -0.14, -0.05) and the fear of pictorial warnings on cigarette packs (= -0.07; 95% CI = -0.10, -0.03) all negatively influenced the smoking intention. Therefore, public media and pictorial warnings on cigarette packs should be clear and simply understandable. The non-smoking spot T.V. campaign could make students concern about health impacts and pictorial warnings on cigarette packs that showed fatal effects could make students fear and do not want to try smoking.

Keywords: pictorial warnings on cigarette packs, public media, intention not to smoke

Aknowledgement:

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2. Dr. Nipa Mr. Ratchapong Co-advisor
3. Tobacco Control Research and Knowledge Management Center
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11-008

Media Communication strategy: No Free lunch

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Media is one of the easiest ways to reach and address a large audience. At present, media plays an outstanding role in creating and spreading public opinion. It is also an extremely important way to reach (and influence) policymakers. Getting free press coverage as an individual can be a challenge, but it can be done effectively if can be followed some strategy. It is also important to avoid making certain mistakes that will make it more difficult in future for others to attain media coverage. WBB Trust earns media, not buys it. We have developed relationship with media personnel and try to support them. We provide news to them and get them involved in programs with government officials and other important personnel from which they can collect news and build networking. These opportunities encourage them and make them positive about us. Sometimes they have been invited to participate in trainings and workshops provided by us. So making good communication is the best practice with media. We used to provide technical support to them. Sometimes giving some news or links that may not our interest but for them it will be helpful can be provided. Even helping/support them in their personal need can be good strategy to make network with journalists. When people obtain media coverage through financial exchange, it can become destructive because our funding is not unlimited. Making the practice regular may bring trouble in future when there may not be funding. While addressing important current problems, it is also important to think about the long term and remember that not all programs are as well funded as tobacco control currently is, and that in the future of tobacco control we may not have so many funds. While it is more work to obtain earned media than to buy it, the effort is important so that we do not sacrifice the future good to present interests.

Keywords: Media Communication strategy, WBB Trust earns media, tobacco control and Media, good strategy to make network with journalists

11-009

Tobacco Control and Media Strategies in Cambodia

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There are 10,000 Cambodians die every year due to tobacco uses, and 2 million Cambodians are current smoker. Since 2006 until now, Cambodia Movement for Health (CMH) is a non-profit organization working for tobacco control in

Cambodia under the main supports from Tobacco Free Kids (TFK). CMH has engaged both advocacy for the adoption and implementation of tobacco control policies and awareness raising about the burdens of smoking. Among many advocacy strategies, media is determined as an important tool in tobacco control field in Cambodia. Therefore, lots of media strategies have been set up. CMH has been producing weekly radio shows for almost 4 years which were widely heard by policy makers and publics. In addition, many videos on burdens of tobacco consumption were produced and broadcasted on TV channels to advocate policy makers in every step of regulation development. Tobacco uses victims and public opinions were included in all video. Indeed, those video were also broadly shared on social media which is recognized as a modern and popular tool. Tobacco industries have been interfering in every step of policies development. That's why many articles were also written and published occasionally on newspaper and news websites regarding to the myths from industries. As a result from our efforts, Cambodia tobacco control law was enacted in 2015 after had been obstacle by industries for almost 10 years. Besides, other tobacco control regulations were also adopted one by one, such as, sub-decree of banning tobacco advertisement, sub-decree on printing pictorial health warning on cigarette packs, sub-decree on banning smoking in public places, and so on. Now it's the meant time that media is going to play role again for all tobacco control policies enforcement. I would like to take a chance at 11th APACT conference to share about what we have successfully done in tobacco control field in our country to others, and also learn about new evidence on tobacco impacts.

Keywords: Media Strategies

11-010

Developing Victims of Tobacco as Front Liners in Media and Legislative Advocacy

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Attracting the interest of the media in support to legislative advocacy is a daunting task. The victims of tobacco can play a significant and effective role as advocates since they tend to “humanize” the issues being presented by other tobacco control advocates. Media has its own set of criteria to make their written articles or video stories not only interesting to the viewers to solicit public support but also sensational enough to encourage positive response for policy development among legislators. The victims of tobacco can easily portray the harms brought about by tobacco as they are considered living proofs of the diseases and possible death that tobacco abuse may cause. However, not all may be willing and capable volunteers. Likewise, not all tobacco victims may be qualified due to their current medical condition. Several steps should be taken in the selection of victim-advocates; attain their consent; and develop them to become effective advocates. 1] Select victims of tobacco that are medical fit or are in remission. 2] Get their consent to be tobacco control advocates on

their own volition 3] Create fellowships for information and experience sharing 4] Build their capacity and develop them as independent resource for the media 5] Develop value and create heroism to stir passion and motivation for sustainability 6] Recognize them for their achievements. This oral presentation shall discuss the strategies implemented to engage the legislators and the media which contributed in the successful passage of the Sin Tax Law in December 19, 2012 and the Graphic Health Warnings Law in July 15, 2014 in the Philippines. It shall share the first-hand proven strategies enumerated above in soliciting advocates out of victims of tobacco; in building their capacity; encouraging volunteerism; and in assuring the sustainability of media advocacy to advance any tobacco control legislative agenda.

Keywords: victims of tobacco, grassroots organization, media advocacy, legislative advocacy

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Tobacco Free Kids

11-011

Targeted digital media campaign supports draft of new Thai Tobacco Control Law

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Summary : Action on Smoking and Health Thailand aimed to educate Thais to understand the core issues of the draft tobacco control law (TCL) by explaining those issues through digital media (DM). The DM campaign was one of several strategies to convince people to support the draft TCL. The DM campaign lasted from 24 May to 2 June 2015, along with WNTD 2015 activities.

Objective: To raise awareness and advocacy through a DM campaign • To convince people using social media and the internet that the draft TCL is important • To gain more e-signatures from internet users who support approval of the draft TCL • To stimulate public interaction to support the draft TCL through a DM campaign, a popular communication platform nowadays.

Method: • To promote a DM campaign through Facebook for 10 days, with different content each day. • Target **Consumers:** Males and Females, Gen X , aged 30 – 50 years and Gen Y , aged 18 – 30 in urban Bangkok
Results: Post-performance results of Facebook promotion for 10 days with 10 content posts: • Overall Total Reach 7,810,316 people, Engagement 236,829 people (3.03%) • Gen X ,Age : 30 – 50: Estimated People Reached= 380,000 - 1,000,000 people In one day • Gen Y , Age : 18 – 30: Estimated Reached= 630,000 - 1,600,000 people In one day • DM with questions, and that had understandable and frightening pictures (Fear messages) were popular and shared the most. • On the other hand, some DM was not popular with low engagement by the public, which was difficult to understand.

Conclusions: • The communication to promote the draft TCL through a social media platform is an effective means

to build public awareness and advocacy about smoking harms. However, due to the lack of a monitoring system, it is a challenge to assess the exact number and action of the supporters of the draft TCL using a DM campaign. • Fear messages were more popular and effective than other types, as well as questions that stimulated public engagement.

Keywords: digital media campaign supports draft of new Thai Tobacco Control Law

Reference:

ASH Thailand

11-012

The effectiveness of Akha printed media on tobacco control advocacy

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Background: The ASH Tobacco Control Resource Center, funded by ThaiHealth, serves as a focal point for producing media to support the rapid expansion of tobacco control networks in Thailand. The Akha hill tribe live in small villages in the mountains of Thailand. The development of Akha material in their own language is important to increase Akha accessibility to tobacco control information. Akha material is crucial to raise community awareness of tobacco and secondhand smoke harms.

Objective: - To develop Akha printed media through a collaboration with Akha speakers and academicians - To produce tobacco control media on tobacco's harms for Akha people.

Results: The production of Akha printed media involved agreement between academicians and Akha people, to ensure media effectiveness and usefulness. The printed media was focus group tested in development and before distribution. The printed media was also evaluated among Akha youth. Evaluation showed high scores on learning development (4.56/5), illustration appropriateness (3.89/5), illustration size (3.89/5), concordance with project's objective (3.67/5) and font size appropriateness (3.16/5).

Conclusions: Akha media for tobacco control advocacy was produced with attention to the social and cultural context of the Akha population. Understandable Akha messages consistent with their life experience resulted. They effectively increased the awareness of tobacco harms among Akha young people.

Keywords: The effectiveness of Akha printed media

Reference:

ASH Thailand

11-013

#WhenYosiIt: Social media campaign that empowers the public to police enforcement of the tobacco advertising ban

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The Tobacco Regulation Act of 2003 (RA 9211) prohibits direct and indirect advertising or promotion of tobacco products, except at point-of-sale locations or within the premises of retail establishments. This exception is largely exploited by tobacco manufacturers and retailers by displaying large signages, posters, and stickers bearing the mark, logo, figure, symbol, or text representing or clearly alluding to a specific tobacco brand or product outside small neighbourhood variety stores (sari-sari stores), over a million of which are operating across the across the entire Philippines. These displays are larger than what was intended by the law, as those should only be read or seen at the point-of-sale locations and not from a distance. The exploitation of the stated exception is itself a violation of the tobacco advertising ban. We will bring it to the attention of the proper authorities by efficiently taking advantage of widespread access to the Internet. We will engage the public to be part of a national effort to track and document the violations happening all over the country and then submit a compilation of such to law enforcers. Philippines is dubbed as the social media capital of the world. 44% of its population are active Internet users. 36% have access through their mobile phones. Telecommunication companies offer free Internet to their subscribers. We will launch the #WhenYosiIt social media campaign (a play on the expression “when you see it” and “yosi”, the Filipino word for cigarette) inviting the public to take a picture of a particular violation (e.g. a big logo of a tobacco brand superimposed on the store sign and visible from afar) and upload it on their pages with the hashtag. Public personalities will take the lead in participating so as to generate public support. Incentives may also be given to participants. The posts will be linked to the campaign page and be curated for submission to authorities.

Keywords: social media, communication, TAPS, tobacco advertising ban, internet, media

11-014

该控的是“抽烟”还是“吸烟”？从用户搜索习惯出发

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【目的】同义词间细微差异可能导致不同信息集合。了解大众认知中吸烟同义词的差异，有助于促进控烟，尤其网络宣传。对此百度指数提供了一个经济便捷的途径。

【方法】基于“抽烟”“吸烟”相关百度指数，观察 2011–2016 年全国百度用户关注热点。

【结果】自 2011 年起，吸烟相关搜索热度持续上升。2014 年以来“抽烟”逐渐超过“吸烟”，差距达到 20–30%。“抽烟”组常在明星吸烟新闻时爆发大量搜索；而“吸烟”组通常在控烟新闻时出现波峰。两组关注热点稳定但不同：“抽烟”组多为娱乐和社会新闻，且时效性强；“吸烟”组多为健康、控烟。

【结论】解读大数据有助于窥探控烟环境全貌。本研究提示，当前控烟信息网络投放倾向已了解烟草健康危害的人群，并未瞄准对烟草萌发好奇的人群。

Keywords: 百度指数, 控烟宣传, 网络投放, 精准传播

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感谢阿斯利康公司致力于人类健康的理念，支持着我们作为公共卫生从业者，做与产品无关的的公众健康研究。

11-015

Nurse network management: Lessons learned from tobacco control

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In 2005, Nurses Network on Tobacco Control of Thailand was established with the support from Thai Health Promotion Foundation. The network aims to strengthen the roles of nursing professional and nursing students in tobacco control. The strategies used by the network include 1) enhancing capacity of nursing students in tobacco control 2) promoting smoking cessation in nursing practice 2) developing community-based nursing intervention for tobacco control and 4) strengthening network member through evidence. This paper describes 10 lessons learned relative to the management aspects of network. 1) establishing the infrastructure needed to maintain the projects; 2) capacity building of network members is vital; 3) leadership and expertise are keys; 4) work planning and analysis have to be done on regular basis; 5) working relationships with stakeholders should be assured; 6) communications with network members has to be effective; 7) database and information management is important; 8) collaboration and partnerships are essential; 9) evidence is required for policy makers; and 10) Post-event evaluation is important. The paramount lesson learned from network management is that the effectiveness of the network could be increased by appropriate planning and monitoring. On the other hand, financial support, and resources are essential for infrastructure and has to be secured.

Keywords: Nurse network, Lessons learned, tobacco control

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1. Nurse Network on Tobacco Control of Thailand
2. Thai Health Promotion Foundation

11-016

Contestation and Politicization of Tobacco Control in Social Media: Experiences from the 2016 Philippine National Elections

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Social media plays an important and innovative role in the information, education, and communication activities of civil society organizations involved in tobacco control. Facebook, Twitter, Instagram, and various platforms and sites have been utilized as tools to spread awareness of the dangers of tobacco use and engage citizens through direct and responsive set-ups. In particular, the pervasiveness of social media is important in shaping the public sphere's discourse against tobacco use and tobacco industry interference in a fast and cost-efficient manner. This strategy is practical considering the extensive penetration of social media among Filipinos and the epidemiological landscape of tobacco use in the Philippines. This interactive and open approach, however, presents several challenges where social media is used to create strong polarization such as in the political arena. This has been demonstrated in the Philippines during the May 2016 National Elections. Widely recognized as the first national elections where the internet was immensely influential, the national elections provided an avenue to observe the interplay among social media actors or "netizens," the tobacco industry lobby, and tobacco control advocates. This study documents the politicization of tobacco control in the social media interactions of a local civil society organization, drawing parallels to the role of social media in the highly-contested political race and providing lessons on how to address the threats from social media use in such unprecedented and critical milieus. The legal dimensions of such exchanges, in the backdrop of the domestic cybercrime laws, the Framework Convention on Tobacco Control, and extant national and local anti-tobacco policies, are also described.

Keywords: tobacco control, tobacco industry lobby, social media, Philippines, national elections

Reference:

- [1] HealthJustice Philippines. 2015. "Selling Death: Marketing Tobacco Products to the Filipino Youth." (HealthJustice Philippines: Quezon City, Philippines)
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11-018

Effectiveness of 85% health warning label on cigarette package on responsive smoking behaviors among Thai teenagers in 2015

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Significant and back ground; Thai health ministry increasing the graphic health warnings (HWG) size on cigarette package from to be 85% are attacked by Major international tobacco companies, a legal challenge to the court battle has highlighted on whether the issues increasing size of the HWG is necessary condition for Thai health policy measures to reduce smoking effectively. This field experiment study implemented to postulate the effectiveness of the 85% HWG on plain or usual brand packaging. Method ; Factorial design was implemented . 724 students of 4 High schools and 5 colleges in Bangkok Metropolitan in 2015 were criterion selection and tested their perceptions on intention to quit smoking after Observing the 8 Cigarette packed Mock- ups in during June 2018, 1 mock up per 20 students, ,80 students per one school. The Mock- up comprised of 2 sizes of the HWG(55%,85%), 2 types of the cigarette pack (plain pack & branded pack) and 2 kinds of the selected HWG(CA mouth & Weaker Sex picture), then answer the questionnaires. The results showed that the 85% of picture ,and the picture style on the packaging were significant increasing intention not to use the cigarette of the never smoke students , while as smokers' students; The picture style interact with packaging were significant different in intention to quit via the fear feeling. Moreover; the picture style affected to fear harm from smoking. The major influence of The size of HWG , the packaging interact with picture style to increase mutual intention to quit smoking. Conclusions: The early indication is that 85% HWG is caused of increasing smoking quitting intention, more support for the Thai policy and plain packaging could be an alternative to increasing fears and does not intend to smoking among adolescents. .

Keywords: Picture Health Warnings, Adolescent, Plain packaging, Cigarette Smoking, Fear Arousal, Intention not to smoke

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11-019

How social media and formal media work together to expose ill tactics of Tobacco Industry in Bangladesh.

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Background: Social media is becoming popular among Bangladeshi people as one of the important mediums of communications. Though PROGGA has been using formal media for tobacco control since 2011 through facilitating a large media network ATMA of more than 300 journalists, the use of social media for tobacco control is very new. Recently, the organization has conducted a number of successful earn media campaign by using social media and formal media together. The present study illustrates the successful cases about how social media complement mainstream media in countering TI moves.

Methods: Alertable information on important tobacco industry moves to undermine tobacco control was collected from different sources like journalists, media story, industry watch team, and friends/social media. Thus, based on the collected information, messages for different stakeholders were prepared and disseminated. After the alert had been sent, some ATMA journalists contact PROGGA to know more about the alert. PROGGA replied them with relevant information to facilitate further investigation on the issue. Following continuous follow-up with the interested journalists, the story published in formal media finally. Finally, the story was emailed to relevant stakeholders and disseminated through social media for exposing the ugly faces of industry for earning greater policy and public attention.

Results: Although using of social media for tobacco control in Bangladesh is very new, but some success cases to expose the ill tactics of tobacco industries are exemplary in the history of tobacco control in Bangladesh. The cases are; Case 1: The 'Be the One' campaign of Phillip Morris International (PMI) in Bangladeshi private universities has been unveiled. Case 2: The covert pre-budget meeting on tobacco taxation with Cigarette Manufacturer Association of Bangladesh (CMAB) and National Board of Revenue (NBR) Chairman has been exposed.

Keywords: social media, formal media, tobacco industry interference, tobacco control

11-020

臺灣「戒菸就贏比賽」的執行策略及戒菸成效

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【背景】國際 Quit & Win 「戒菸就贏比賽」是世界衛生組織（WHO）曾經唯一支持的國際性成人戒菸比賽，由 WHO 及芬蘭國家公共衛生部每兩年主辦一次。吸菸的「參賽者」與不吸菸的「見證人」兩人一組，依國際最初規定的參賽條件、報名方式、活動期程舉辦「戒菸嘉年華」。臺灣在時任董氏基金會執行長

葉金川教授帶領下，經過登記、培訓之後，2002年起在衛生部門與民間團體的共同合作下，臺灣正式加入國際戒菸就贏比賽的行列。雙數年舉辦「戒菸就贏比賽」，單數年委託調查參賽者戒菸成效。目標：兩年一次的「戒菸就贏比賽」在西元雙數年三至四月進行活動宣傳，5月2日至5月29日連續四周進行戒菸（最慢5月2日凌晨起完全不吸菸）；次年進行的戒菸成效調查包含一年前的五月活動當個月戒菸情形、參賽動機、戒菸期望目標、戒菸輔助、戒菸失敗情形、繼續吸菸原因、活動訊息清楚度…等，確實了解參賽者戒菸狀況，並評估活動的完整效益。

【方法】歷屆「戒菸就贏比賽」透過高額獎金吸引、名人代言吸睛、媒體與活動宣傳、親情與同伴（2人1組報名）支持，尤其衛生體系的動員與醫護專業的介入，加上便利的報名系統與報名後的關懷提醒…集合所有的策略，創造「戒菸嘉年華」的社會氛圍，舉行至2016年已成功促成近20萬名吸菸者勇於報名且嘗試戒菸。其戒菸成功可抽高額獎金制度，確實增強戒菸意願且吸引民眾主動參與，但所有執行與徵信過程也因此就更加繁瑣，以杜爭議。

【結果】調查2002年至2014年每屆皆有超過三分之一的一年戒菸成功率，顯示臺灣「戒菸就贏比賽」的執行策略建立了「全國戒菸嘉年華會」的社會氛圍，成功鼓動吸菸民眾在比賽期間願意嘗試吸菸，幫助成就了超過17萬個無菸家庭。

【結論】在政府各部門的支持、衛生醫療系統的積極參與、民間團體的努力推動、媒體的公益傳播之下，以名人代言、高額獎金、活動造勢、多元宣傳通路、針對重點族群特別獎勵、完善的報名機制、戒菸關懷、資訊提醒與支持系統等策略，成功創造歡樂的戒菸嘉年華氛圍及友善的助人戒菸環境。

Keywords: 戒菸就贏, Quit & Win, 戒菸

11-021

如何建置與經營高瀏覽率網站宣導菸害防制 – 以華文戒菸網為例 How to build and operate a high traffic website

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「華文戒菸網」由非政府組織 – 董氏基金會建置上線，是單一菸害防制訴求網站，從2007年下半年開始至2016年中，網站瀏覽達8千3百萬人次，是以單一菸害防制訴求並公開記錄最高瀏覽人次的華文網站，探究其維持平均每年860萬人次瀏覽率的網站行銷策略如下：1、網站行銷策略：「華文戒菸網」於2007年底建置，曾於2011年全面改版，以正體中文為主，簡體中文為輔，經常性的網站資料更新，提供視覺性且多元化的菸害防制資訊。董氏基金會長期且善用名人進行媒體傳播，以「華文戒菸網」為根基，素材資訊的擴展及傳播，達持續宣傳之成效，更透過系列文宣物進入校園、企業、公務機關及公眾休閒娛樂等場所，藉由名人影響力使宣導推廣工作，更能發揮出其深層的影響；也結合名人部落格及Facebook網站，亦與各大電玩動漫社群網站合作，透過記者會舉辦及新聞媒體的傳播，讓人持續有機會接觸瀏覽，達到擴展目標族群，強化戒菸宣導的目標。2、目標使用者：「華文戒菸網」不定期製作菸害防制專區，提供吸菸者正

確的戒菸知識，透過與時事的結合，也讓想幫助別人戒菸的人，了解菸品的危害。網站內容也包含了目前世界各國對菸品展示限制及菸品包裝健康警示圖文、電子菸危害，以及世界各國對抗菸草公司廣告行銷的最新消息，作為衛教人員進行衛教活動時的參考。豐富的網站內容、不斷拓展的目標族群，並與公益活動結合，一系列的整合性行銷，都能加強「華文戒菸網」的影響力，將菸害防制資訊推廣至所有華人社會。

Keywords: 戒菸就贏, Quit & Win, 戒菸

11-022

如何持續吸引吸菸者參加「Quit & Win 戒菸就贏」活動 __ Quit & Win Campaign Promotional Strategy—Social Smoking Cessation Carnival Atmosphere Encouraged Participants to Quit Smoking

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臺灣自 2002 年首度引進「Quit and Win 戒菸就贏」以來，至今已成功舉辦過八屆比賽，共吸引近 20 萬名菸癮者體驗戒菸。為成為民眾討論的話題，吸引媒體願意義務傳播，2016「戒菸就贏比賽」採用「名人吸睛」的宣傳策略，邀請甜美良善又親和的昆凌擔任代言人，以霹靂嬌娃的造型及閃電光束特效，呈現科技和未來感，用使命必達的魄力號召「姐姐妹妹站出來，哥哥弟弟一起來」，更凸顯「戒菸就是未來時尚」！透過電視、廣播及報紙雜誌公益廣告，網路公益連結及臉書等全面且廣泛的傳播，達到吸睛效果、進而促成參賽戒菸。為延伸 2016「戒菸就贏比賽」的能見度和可近性，針對指標性吸菸族群，積極尋求與不同業別和公務機關合作舉辦造勢活動的機會，塑造全民參與的社會戒菸運動氛圍。例如與法務部、交通部、公路總局、職業駕駛人公會全國聯合會等合作，共同參與鼓勵高吸菸率的職業駕駛及監獄收容人戒菸。而為協助戒菸者成功戒菸，特地於宣導記者會或新聞稿上主動提及衛生部門戒菸計畫，鼓勵癮君子多加利用，且工作人員執行電話關懷時，主動宣達相關資訊。於「華文戒菸網」及宣導製作物上刊登 0800-636363 戒菸專線，並主動告知來電民眾「戒菸專線」及「戒菸門診」資訊。同時在比賽期間發送文字簡訊及孫越叔叔語音關懷給報名戒菸者，陪伴他們戰勝菸癮，並推出可隨時定位查詢附近戒菸門診的「戒菸就贏」APP，藉以鼓勵民眾多多使用戒菸資源，了解政府為鼓勵民眾戒菸，提供積極、便利又便宜的戒菸服務政策。此外更積極擴展各式宣傳通路，不僅台灣大車隊全臺 1 萬 5 千部計程車，從宣傳到比賽期間，免費提供車內外廣告版面，協助宣傳活動、持續提醒參賽者戒菸，每一屆都擔任協辦的 22 縣市衛生局(所)、500 家醫院診所等也都全力投入宣傳。2016「戒菸就贏比賽」在全國近五千處實體通路的全力支持及各類媒體的合力宣傳下，符合參賽資格、於報名截止期限內完成報名者，共計 25,252 組。兩年一次的「Quit and Win」戒菸就贏比賽在臺灣將要邁向第九屆，未來如何還能吸引現有的癮君子嘗試戒菸，甚至讓過去戒菸失敗者捲土重來；同時，創造議題性及新鮮度，讓新聞媒體願意報導，電視及報章雜誌願意免費提供廣告版面宣傳，實為 2018「戒菸就贏比賽」的一大挑戰。

Keywords: 戒菸, Quit & Win, 菸害防制, 華文戒菸網



议题 (十二)

E-Enforce bans on tobacco advertising, promotion and sponsorship

E- 确保禁止烟草广告、促销和赞助

1-011

Point-of-Sale Marketing in Mumbai: How national cigarette firms are breaking the law to market to kids

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Background: Tobacco advertisements at the point of sale (POS) are an important means for the tobacco industry to market to kids. POS advertisements make tobacco products accessible and desirable to children. Exposure to tobacco advertisements is positively correlated with smoking among children. However, little research has explored the POS advertisement environment in Mumbai.

Methods: A survey documented POS advertisements at 569 tobacco shops in Mumbai in 2015. Information was collected on advertisements of tobacco brands, non-traditional advertisements without brand name and placement of board about the ban on tobacco sales to minors.

Results: This survey found that (32.9%, n=187) shops had advertisements for tobacco products. The most commonly observed tobacco advertisements were Gold Flake (36.9%, n=69), Four Square (26.7%, n=50) and Classic (19.8%, n=37). Among shops with advertisements, more than half (69.5%, n=130) had advertisements for brands produced by ITC Ltd. (Gold Flake, Classic, Wills) and 29.9% (n=56) of shops had advertisements for brands produced by Godfrey Philips Ltd. (Four Square, Marlboro). Non-traditional advertisements using common colours and designs without brand names and logos, were found at (44.8%, n=255) of tobacco shops. Only 14.8% (n=84) of tobacco shops posted the required board about the ban on sales to minors.

Conclusions: Point-of-sale advertisements in Mumbai are driven by two national tobacco companies. Under COTPA, advertisements described in this study are illegal, however big tobacco companies are routinely breaking the law. Removing the advertisements for the top three brands alone would eliminate 83.4% of all POS advertisements around Mumbai schools. Removing the influence of two national companies (ITC and Godfrey Philips India) would eliminate 99.4% of POS advertisements. Despite widespread use, no advertisements for smokeless tobacco and bidis were found.

Keywords: marketing, India, advertisements

1-012

Three-year survey of tobacco industry targeting of kids through sales of tobacco within 100 yards of Mumbai Schools

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Background: Tobacco use is a growing public health problem in India. Almost 15% children aged 13-15 years currently use tobacco. Previous studies have shown an association between the number of tobacco vendors near schools and child tobacco use rates. India's tobacco control law, COTPA (2003), prohibits the sale of tobacco products within the radius of 100 yards of any educational institution. However, implementation remains a challenge.

Methods: cross-sectional study was conducted at 127 municipal and government-aided schools in Mumbai in 2013, 2014, and 2015. Surveyors collected information on school type, and number of tobacco vendors operating within 100 yards of school.

Results: Out of 127 schools, 60.6% (n=77) schools were from Mumbai Suburban District and 39.4% (n=50) from Mumbai City District. In 2013 and 2015, 61.4% (n=78) of schools had tobacco vendors operating within 100 yards. Schools located in Mumbai Suburban District were more likely to report tobacco vendors compared to the Mumbai City District (Mumbai Suburban: 45.6% (n=58) and 48.1% (n=61) vs Mumbai city: 32.2% (n=41) and 30.1% (n=38)). Secondary schools were more likely to have tobacco vendors within 100 yards of the school compared to primary schools in 2013 and 2015 (Secondary schools: 70.1% (n=89) and 73.2% (n=93) vs primary schools 67.7% (n=86) and 67.7% (n=86)). There was no statistically significant difference in the proportion of schools with tobacco vendors by school type (p=0.25).

Conclusions: Greater efforts to enforce the ban on tobacco sales within 100 yards of schools along with dedicated manpower and appropriate penalties are needed to ensure compliance. Simplifying the enforcement process and giving responsibility to a single agency is recommended.

Keywords: mumbai, schools, tobacco sales, monitoring

1-040

Monitoring of compliance with the national Tobacco Advertising Law in 11 cities in China (March-April, 2016)

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BACKGROUND: China's revised national Advertising Law went into effect on September 1, 2015. It prohibits tobacco advertising to minors in any form and comprehensively bans tobacco advertising in public places, public transportation and outdoor areas.

OBJECTIVES: To assess compliance with the advertising ban at points of sale (POS), in public places and outdoor areas. **METHODS:** During March to April, 2016, we conducted a survey in 11 cities in China (Beijing, Shanghai, Guangzhou, Shenzhen, Kunming, Xi'an, Hangzhou, Wuhan, Lanzhou, Haerbin and Zhangjiakou),

and visited POS (tobacco specialty stores, supermarkets, convenience stores and newsstands), public places (bus stops, bus terminals, train station, airports, hospitals, restaurants, bars and shopping malls), and outdoor areas. An observation form was developed to record the number, type, brand, size, other relevant tobacco advertising and promotion information, and the presence of minors in the selected places.

RESULTS: POS (n=1,236): Tobacco advertising was observed in all 11 cities and in almost 47% of the observed places. The most prevalent was in tobacco specialty stores (78%). The most common type of tobacco advertising was pasted advertising (34%). 70% of the POS did not have the “No tobacco to Minors” sign and almost 18% stores had minors inside. POS tobacco promotion was found in 10 cities and in 4% of the POS. Public places (n=1,453): Tobacco advertising was found in 9 cities and in almost 4% of the observed places in these cities. Outdoor areas (n=149 major blocks): Tobacco advertising was observed in 4 cities and from 19% of the observed blocks in these cities.

CONCLUSIONS: Despite implementation of the revised national Advertising Law, tobacco advertising and promotion is still commonly found at tobacco POS in China. Law enforcement agencies should increase inspection and enforcement measures on tobacco advertising and promotion.

Keywords: FCTC implementation, Article 13, Tobacco advertising promotion and sponsorship, monitoring & evaluation

Acknowledgement:

Bloomberg Initiative to Reduce Tobacco Use

12-001

香烟的警示性包装的政府责任与监管

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2003年5月,我国作为缔约国签署了世界卫生组织《世界卫生组织烟草控制框架公约》,对香烟包装的警示图像有了明确的要求。其中《公约》第11条要求香烟包装上要有明确的健康警示,面积要占到30%--50%,并且要求附上警示图像。但我国如今大多数香烟包装盒的设计图案上依旧日益精美,烫金包装以示尊贵。相比于其他国家的香烟警示性包装,我国仍存在较大的差距。不仅如此,在法律法规,税收层面我国也存在明显差异。因此,本文着手对香烟包装国内外的外观差异比较,分析税收层面和法律法规现状的差异及原因,并针对我国推进警示性包装可行性等方面进行了分析。同时运用行政监督和利益分析法,针对我国现状,从政府角度提出了一些可行的监管措施。

Keywords: 警示性包装规制,可行性分析,政府监管举措

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12-003

青岛初中生烟草使用情况及烟草广告和促销暴露调查

綦斐

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【目的】了解烟草广告和促销对青岛市初中生吸烟情况的影响,为开展学校控烟工作提供科学依据。**【方法】**于2014年9—11月,采用多阶段分层整群抽样方法,抽取山东省青岛市44所初中6155名初中生为调查对象,采用全球青少年烟草调查核心问卷,了解青少年烟草使用情况、烟草广告和促销暴露等内容,对数据加权后,采用SPSS 19.0软件进行分析。

【结果】青岛市初中生现在吸烟率为1.5%,尝试吸烟率为7.3%。在过去30d内,34%的学生报告看到过烟草广告和促销,其中通过互联网看到的比例最高(12.8%),其次为户外广告牌(12.6%)、电视(11.9%)和报纸杂志(11.6%)。50.7%的学生在电视、录像、视频中看到过吸烟镜头,3.3%的学生报告自己拥有印着烟草品牌标识的物品。烟草广告和促销暴露与烟草使用状态之间有关联,现在吸烟者的烟草广告和促销暴露率最高(72.1%),高于不吸烟者(33.3%);尝试吸烟者的烟草广告和促销暴露率为55.6%,高于未尝试者暴露率(32.1%)。

【结论】青岛市初中学生暴露于烟草广告和促销的现状严重,暴露使学生更容易对烟草使用持正向态度。

Keywords: 初中生; 烟草使用; 烟草广告和促销

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12-004

Selling Death: Marketing Tobacco Products to the Filipino Youth

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Background: In recent years, tobacco companies have been introducing marketing campaigns that aggressively target the youth. In the Philippines, children are regularly exposed to tobacco advertising, promotions, and sponsorships (TAPS) – from stores near schools to social media. According to surveys 92% of stores within the inspected areas in Metro Manila have one or more types of tobacco advertisements and 70 – 80% of Filipino teens aged 13 – 15 years old have seen tobacco advertisements.

Methods: This research reviews and analyzes available data, policies, and strategies related to TAPS. It also provides policy recommendations and ways forward.

Results: Despite being a Party to the Framework Convention on Tobacco Control, the Philippines only has an ineffective and poorly implemented partial TAPS ban in place. Because of loopholes in the law and lack of implementation, data shows that violations are numerous and TAPS are still prevalent, even near schools and areas frequented by minors. Marketing campaigns that target youth, such “Be Marlboro,” are utilized heavily by the tobacco companies. “Be Marlboro” advertisements use youth-oriented images and themes and have been found to encourage the youth to smoke. Other promotional activities by the tobacco industry include sponsoring events that greatly appeal to the youth such as exclusive parties with international music artists and DJs. These events and activities support the objective of integrating the use of tobacco into the youth culture and reinforce the association of the tobacco brand with being hip or cool.

Conclusion: The gaps in the law and lack of implementation show that the Philippines is remiss in its obligation to protect the youth against tobacco marketing. A ban on TAPS is effective only if it has a broad scope and is strictly implemented. The Philippines needs to review its policies, address the loopholes in the law, and implement a national law banning all forms of TAPS.

Keywords: TAPS, Marketing, Tobacco Industry Tactic

12-005

Tobacco point-of-sale advertising and promotion

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Background: Since 1992, all forms of tobacco products advertising and promotion have been banned in Thailand. However, point-of-sale (POS) advertising and promotion at retail stores is the most tobacco industry strategies to increase sales of tobacco products. Objective: to explore the POS advertising and promotion at retail stores.

Method: A cross sectional study was conducted at retail stores during Oct 2015 to Jan 2016. A well-trained of multi-level law enforcement team composed of the legal officer at central level, Law Center, Department of Disease Control (DDC), MoPH, and legal officer or public health officer at target area including Regional Office of DDC, Health Provincial Office, Police, Provincial Excise Office. 277 retail stores were purposively selected. An inclusion criterion was the stores locating nearby the 100% smoke free areas. The multi-level team was directed observation at stores. The data were collected by the checklist form of legal requirements according to the Tobacco Products Control Act, 1992. The act restricted POS advertising and promotion, i.e., sales to minor, sales promotion, displaying cigarette brand and price with a big alphabet letters, sales in loose form, and brand stretching. Statistical analysis was performed by using descriptive statistics.

Results: 51.3% of retail stores not complied with the legal requirement. The non-compliance rate was different between the stores located in Bangkok Metropolitan (40.8%) and upcountry (59.9%). The highest rate of sales in loose form was observed, 71.1% and followed by display cigarette brand and price with a big alphabet letters, 42.9%. Moreover, the multi-level team noticed a variety activities related POS such as display cigarette package on the transparent cigarette display box and placed it on the counter or in front of the cashier.

Conclusion: The POS inspection by multi-level law enforcement team should regularly schedule across county to ensure the effective law enforcement.

Keywords: Law enforcement, Retail stores, Point of Sale (POS)

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12-006

Plugging loop holes in online tobacco advertising and promotion in implementation of FCTC Article 13 - ASEAN Experience

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Most countries in the ASEAN region have made good progress in implementing a comprehensive ban on tobacco advertising, promotions and sponsorship (TAPS). However one domain still remains wide open and

that is online communication. Brunei, Singapore and Thailand are ahead with TAPS ban in all mass media and a ban on cigarette pack display. Cambodia, Malaysia and Myanmar have banned tobacco advertising at points of sale (POS). Philippines and Lao PDR are taking a step-wise approach in TAPS ban and currently still allow advertising at POS. Indonesia however remains the only country that has restrictions but no TAPS ban. While advocacy is mounting to strengthen TAPS ban, the internet and social media remain an open forum for tobacco to be widely advertised and promoted. While legislation in most countries are specific in that tobacco companies are prohibited from advertising, however the law does not ban individuals from sharing information about their favorite cigarette brand, smoking experience or photos from a tobacco related music event. Ordinary people, young and old, are content creators and tobacco control laws do not stretch that far. The cross border nature of internet and social media also presents enforcement problems. Since children and young people own mobile phones and use social media to communicate, they are most vulnerable and easy target to be exposed to online tobacco promotion. Alarming number of youths are smoking in the ASEAN region. While tobacco control measures need to be strengthened to address online promotions, policy makers need to also address tobacco sales on internet, more attractive education campaigns, and de-glamorisation of smoking. Humour and sharing of positive messages via facebook, such as the Singing Canary fb, can be more appealing in reaching out to young people.

Keywords: FCTC, Article 13, advertising, TAPS, online

12-007

《中华人民共和国广告法》修订中关于“全面禁止烟草广告”的倡导和推动

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【目的】为推动新《广告法》中明确“全面禁止烟草广告”，政府机关、科研机构及社会组织积极合作，通过政策倡导、媒体传播及公众动员等手段，引起社会各界的关注及支持，使决策者充分意识到禁止烟草广告的重要性，促使新《广告法》符合《公约》标准。

【方法】两会提案及建议、媒体倡导、投诉及举报、公众倡导

【结果】推动主要分为两个阶段进行：一、《广告法》修订之前：1、两会提案及建议：连续8年向两会递交提案及建议近20次，要求尽快组织修订《广告法》及相关法律法规；2、烟草广告的监测及举报：在全国各地开展“烟草广告随手拍”活动，监测各地烟草广告情况，并与公益律师合作先后30多次对烟草广告及变相广告进行投诉和诉讼。3、公众倡导：构建立体传播网络，传播“全面禁止烟草广告”理念，在微博上与烟草广告相关的三个话题超过4000万的阅读量；通过微信平台进一步揭露烟草广告危害；4、社会舆论氛围创建：举办“拒绝烟草广告、促销和赞助倡议行动”，超过6000

家机构签署承诺书；针对青少年暴露于烟草广告的现状进行调查并拍摄相关视频，通过网络等渠道进行传播，引起社会对烟草广告问题的重视；5、开展无烟影视评选：为减少影视作品中吸烟镜头，保护观众尤其是青少年免受影视作品中吸烟镜头的误导，控烟机构专门设置“脏烟灰缸奖”并揭露吸烟镜头为烟草公司带来的广告效应；二、《广告法》修订过程中：1、加强立法游说：控烟机构前后召开十余次专家会，多次向立法部门递交修改建议，积极与两会代表/委员沟通，促进新《广告法》全面禁止烟草广告；2、向国家机关致函致信：控烟机构曾多次联名专家学者签名致函国务院法制办及人大法工委，递交修改意见和建议；3、向全社会倡导呼吁，争取公众支持：控烟机构先后举办了十余次专家、媒体会议，从不同角度呼吁《广告法》修订全面禁止烟草广告；4、向公众揭露烟草广告真相：控烟机构连续发布三本特刊：《谁在营销死亡？》、《我们绝不放弃—禁止烟草广告促销和赞助》、《灾难——如果允许540万售烟点做广告》，揭示烟草广告本质及危害。

【结论】控烟机构历时多年的推动、倡导，提高了公众对烟草广告危害的认识，构建了“全面禁止烟草广告”的社会舆论氛围，加强了立法者修订《广告法》以禁止烟草广告、消除烟草业误导的信念，成功促使新《广告法》全面禁止烟草广告。

Keywords: 烟草广告, 广告法, 控烟倡导

12-008

《广告法》实施半年，11城市烟草广告调查结果

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2015年，全国人大通过了新修订的《广告法》，规定全面禁止烟草广告，为评估《广告法》禁止烟草广告条款实施半年后的情况，尤其是了解烟草销售点的烟草促销情况，中国控制吸烟协会选择了全国不同类型的11个城市进行调查。调查的重点是公共场所、户外街区、烟草销售点及促销情况。烟草销售点选择?个，包括便利店、烟草专卖店、超市、贩售亭四种类型。户外街区选择?个，每个城市选择4个区中的8条街道。公共场所共选择?个，包括公共交通线路、公共交通候车点、餐馆、医疗卫生机构、酒吧、网吧、商场、火车站、长途汽车站、机场等。11个城市中，7个城市未发现有户外烟草广告，占比?；2城市（上海、深圳）公共场所未发现有烟草广告，在9个有烟草广告的城市中，有3.8%的公共场所发现有烟草广告。所有城市均发现烟草销售点有烟草广告，有46.8%的烟草销售点有烟草广告。结论：《广告法》颁发后，户外和公共场所烟草广告得到有效实施，但烟草销售点是烟草广告的重灾区，在烟草销售点做变相广告和促销是烟草企业的新动向。

Keywords: 禁止烟草广告法律得到有效实施, 烟草销售点是变相烟草广告、促销的新阵地

12-009

Evaluation of Cigarette Advertising Broadcast on Television According to PP NO 109 of 2012 on Security of Material Containing Tobacco Additives for Health

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Background. Prohibition to promotion of tobacco product is an effective way to fight tobacco. In ASEAN, Indonesia is the only country that hasn't prohibits tobacco ads in broadcast media. Television is still the most frequently used media for these kinds of ads. In the first semester of 2015 cigarette is the biggest product advertised on television with total worth of IDR 2,2 trillion and record the highest growth of 49% compared to the same period in 2014. Cigarette ads are commonly shown in movies, sports, series, music, and reality shows, one brand could have wide variation of ads. Objective. To describe obedience and violation of cigarette ads through national television according to Art. 27 of Government Regulation No. 109 of 2012. Methods. This study is a descriptive research with observational method. Data collected from 18 to 24 April, 2016, with 10 national televisions as study population using checklist. Data will be shown with distribution of obedience and violation of 11 points in Art 27 PP 109/2012. Content analysis was done to message and visualization of these ads. Result. There are 19 versions of cigarette ads in 10 national televisions, with broadcast frequency 1645 times and total duration of 40,785 seconds. All of the ads obey point 1, 2, 4, 5, 7, 8, 9, 10, and 11. Violations are found in point 3 about health warning and point 6 about words usage. Friendship is the most common theme used in these ads. Conclusion. Specifically create regulation of cigarette ads broadcast on television; monitoring and prosecuting violations should be done

Keywords: cigarette ads, government regulation, television, shows, friendship

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