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SHIELDING THE NEXT GENERATION: A QUALITATIVE ANALYSIS OF TOBACCO CONTROL POLICIES FOR KARACHI'S MINORS

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ABSTRACT

The global tobacco epidemic remains one of the most severe public health crises, causing over 8 million deaths annually, including from second-hand smoke exposure. Tobacco use is the most preventable cause of illness and death worldwide, with smoking being the most common method. Adolescents are particularly vulnerable, with smoking often beginning before age 21. This study explores the current status and challenges of tobacco control policy implementation for minors in Karachi, Pakistan. Using a qualitative exploratory approach, insights were gathered from policymakers and implementers. The findings reveal significant barriers to effective policy enforcement, including socioeconomic factors, peer pressure, and insufficient legislative action. The study concludes that stronger local, national, and global tobacco control policies are essential, particularly those aimed at protecting minors. Improved public health efforts, education, and awareness programs are recommended to reduce tobacco use and its harmful effects on children and adolescents.

Keywords: Tobacco control, Public health policies, Minors Smoking prevention, Policy implementation

Key Messages

Stronger tobacco control policies are urgently needed to prevent tobacco use among minors, with a focus on banning sales and increasing taxes on tobacco products. Public health campaigns, particularly in schools and communities, are crucial in raising awareness about the dangers of smoking and second-hand smoke among minors. A comprehensive national approach, coupled with local action and family engagement, is essential to curb tobacco use and protect vulnerable populations from its harmful effects.

INTRODUCTION

The global tobacco epidemic remains a pressing public health issue, claiming over 8 million lives annually, including those affected by second-hand smoke (1). Despite numerous tobacco control policies, the challenge of protecting minors from

tobacco use persists, especially in large cities like Karachi, Pakistan (2). Karachi, the most populous city in Pakistan, experiences unique challenges related to tobacco control, which this paper aims to address. By evaluating existing policies and



their implementation, this study seeks to propose effective strategies to combat tobacco use among minors and safeguard future generations.

Tobacco use remains one of the most significant global public health challenges, responsible for over 8 million deaths annually (3). Despite ongoing efforts to curb its spread, tobacco control remains a complex issue, particularly in countries with emerging economies like Pakistan (4). The Ordinance 2002 on tobacco smoking, which addresses the sale of tobacco to minors (5), provides a foundation for tobacco control, but it falls short in several areas (6). The global tobacco epidemic has prompted numerous international efforts to address tobacco use, notably through as the World frameworks such Organization's Framework Convention Tobacco Control (WHO FCTC) (1). Countries with robust tobacco control policies have significantly improved public health outcomes (7). However, despite some regulations in place in Pakistan, gaps remain in implementing and enforcing these policies (8). The need for a dedicated policy addressing tobacco use among minors, drawing on insights from stakeholders and analysing the current state of tobacco control in Pakistan (9, 10).

2. Problem Statement

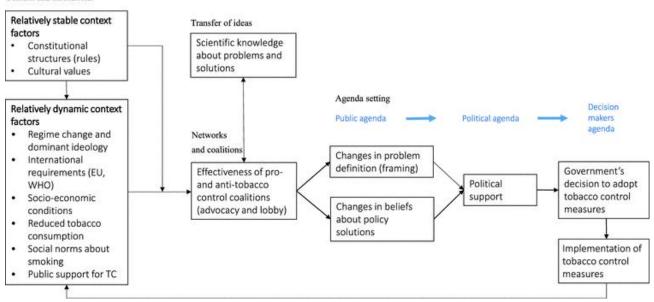
Tobacco use among minors in Karachi is a growing concern, exacerbated by insufficient policy enforcement and a lack of targeted regulations. The Ordinance 2002 on tobacco smoking, while addressing the sale of tobacco products, does not specifically cater to minors. This study explores the limitations of current policies, investigates the factors affecting policy implementation, and recommends measures to enhance tobacco control efforts specifically for minors.

3. Research Objectives

- 1. Assess the Effectiveness of Existing Policies: To evaluate how well current tobacco control policies in Karachi address the issue of tobacco use among minors.
- 2. Identify Challenges in Policy Implementation: To understand the barriers and difficulties faced in enforcing existing tobacco control measures.
- 3. Propose Recommendations for Improvement: To suggest targeted policy changes and interventions to improve the effectiveness of tobacco control efforts for minors.

Table 1 Integrated model of tobacco control Framework

Context and Institutions





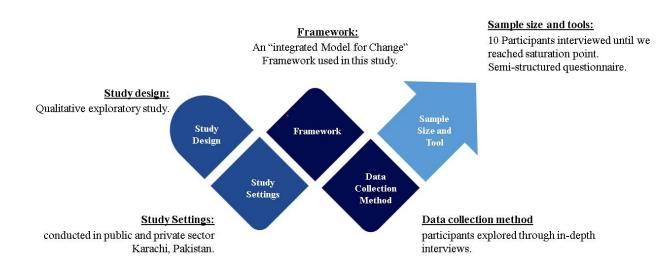
4. Methodology

4.1. Data Collection

In-depth interviews were conducted with a diverse group of stakeholders involved in tobacco control, including policymakers, enforcement officers, and representatives from public health organisations. These interviews aimed to gather detailed insights into current tobacco control policies' strengths and weaknesses and identify gaps in their implementation. This study adapts the Netherlands-integrated tobacco control policy model to explore tobacco control in minors in Karachi, Pakistan. The framework addresses

political, policy, and problem streams, focusing on the Tobacco Act, cultural values, WHO policies, and smoking norms. Key stakeholders such as the District Health Officer, tobacco industry representatives, and others were interviewed on smoking rates, cultural influences, solutions, and advocacy efforts. The study examined the political support for tobacco control, implementation challenges, and the role of stakeholders, emphasizing the interplay between smoking laws, cultural values. and economic conditions.

Table 2 Methodology flow chart.



4.2. Inclusion criteria and sampling method

The study involved 10 participants selected through purposive and snowball sampling, focusing on policymakers, policy implementers, parents, teachers, public health experts, and community stakeholders in Karachi, Pakistan. The participants provided insights through in-depth interviews, with

informed consent obtained for recording and note-taking. Permissions were obtained from District Health Officers and relevant authorities, and interviews were conducted in local or English languages based on participant comfort. Data was authenticated through debriefing and audit strategies.



Table 3 Participants List.

Participants	No. of sample	Techniques
Policymakers	2	Snowball techniques and in-
		depth interviews
Public health expert	2	In-depth interview
School administrator	2	In-depth interview
Hospital staff	1	In-depth interview
Restaurant/Tea	Hotel 1	In-depth interviews
managers		
Common people	2	In-depth interview

Table 4 Demographic characteristics of participants

TWO I D CHICAGO TO THE CONTROL OF TH			
Participants Characteristics	N=10		
Gender			
Female	07(70%)		
Male	03(30%)		
Language	08(80%)		
Urdu	02(20%)		
English	,		

4.3. Data Analysis

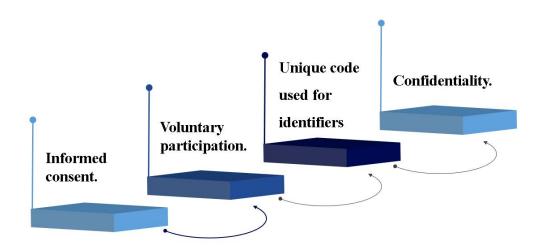
Thematic analysis was employed to analyse the interview data. This method allowed for identifying recurring themes and patterns, providing a comprehensive understanding of the issues related to tobacco control for minors in Karachi. Key themes included policy gaps,

enforcement challenges, and the role of public awareness.

4.4. Ethical Consideration

Before data collection started, this study received ethical approval from the Aga Khan University Ethical Review Committee in Karachi, Pakistan (ERC No# 2020–5419-14416).

Table 5 Ethical Consideration Flow Process





4.5. Result

This study adapted the Netherlands' integrated tobacco control policy model to explore tobacco control among minors in Karachi, Pakistan. The framework addressed political, policy, and problem streams, focusing on the Tobacco Act and cultural values. researcher interviewed kev stakeholders. including the District Health Officer and tobacco industry representatives, to gather insights on smoking rates, cultural norms, and potential solutions. Themes were developed based on this framework, which guided the analysis and comparison of tobacco control efforts in Pakistan with those in neighbouring The results were organised according to the themes and codes derived from the data.

5. Findings and Discussion5.1. Networks and Coalitions

Tobacco industry representative: "Tobacco companies do not follow Pakistani policies."

Public health expert "If the police wanted to do anything against them, they would call the political leader."

Community stakeholders: "The community is a great help to children's table pain, and the habit of children who start smoking cigarettes is from their friends or their family members."

The effectiveness of tobacco control efforts is significantly influenced by the networks and coalitions formed between various stakeholders, including policymakers, tobacco industry representatives, and anti-tobacco organisations (6). In Pakistan, the tobacco industry maintains strong ties with political leaders and law enforcement agencies, which impedes the enforcement of tobacco control measures (11, 12).

Interviews with policymakers and implementers reveal that the tobacco industry's influence extends to various government and law enforcement levels (13). For instance, one policymaker noted that tobacco companies often circumvent regulations through political connections, while another mentioned that law enforcement officers sometimes receive directives

to halt actions against tobacco sellers due to political pressure (14).

Coalitions working against tobacco use, such as those formed by health organisations and advocacy groups, face significant challenges in countering the industry's influence (15). Effective anti-tobacco coalitions require strong support from health advocates and robust collaboration with government agencies and the public(8). The tobacco industry's influence on policy implementation was a significant theme in the interviews (5). Stakeholders reported that the tobacco industry has established robust networks with policymakers, which complicates the enforcement of tobacco control measures. One policymaker noted,

5.2. Political Support

Policymaker stated: "In Pakistan tobacco can be controlled by the commercial and this movement should be made common all over the world

Policy Health expert stated: "Pakistan has its policy regarding Tobacco control and It also follows the guidelines of the WHO and is also implementing it so that it gives legally an importance how to implement it throughout Pakistan."

Political support for tobacco control varies among policymakers (16). While some commitment to following WHO guidelines, others acknowledge the limitations of current policies (7). Yet inconsistent implementation hinders the effectiveness of these policies. Political and economic interests often obstruct comprehensive policy enforcement, affecting the overall impact of tobacco control measures (17). A comparative analysis of implementation challenges in Pakistan and other countries shows that effective enforcement requires a combination of strict regulations, adequate resources, and strong political will (2). Countries with successful tobacco control programs often have dedicated enforcement agencies. clear frameworks, and robust monitoring systems (18, 19). In Pakistan, improving the implementation of tobacco control measures will require addressing these challenges through enhanced coordination between government agencies, increased funding



for enforcement efforts, and stronger penalties for non-compliance (20, 21).

5.3. Implementation of Tobacco Control Measures

Policymaker stated: "The biggest anti-tobacco industry that we have here is the tobacco industry, which is our local tobacco industry, and it promotes the organisation by doing different campaigns with the help of the Pakistan National Heart Association".

Tobacco control representative stated: "The tobacco industry violet all laws because they have strong political supports."

The implementation of tobacco control measures faces several obstacles(14). Despite existing regulations, local tobacco industries, supported by political allies, frequently bypass enforcement(13). In Pakistan, tobacco control policies have faced challenges, including several inadequate enforcement, lack of public awareness, and political interference (22). For instance, the sale of flavoured tobacco products continues despite their known appeal to minors, undermining the efforts of existing regulations (5). A comparative analysis of tobacco control policies in other countries reveals that the most successful strategies involve a combination of high taxes, strict advertising bans, and public education campaigns (12). SN (E) 31

5.4. Parental Roles in Nurturing Children

Parent stated: "If parents don't give money to them if someone in the family smokes, then they will take it from them. I remember that my grandmother and grandfather used to smoke, then my younger brother got the habit, and if he took out a cigarette, they would not know because he could access it."

Policy implementer stated: "Children learn from elders. Their parents have to act like a role model. If adults smoke, then how would you tell your child that smoking is a bad habit?".

The role of parents in preventing tobacco use among minors is critical (3). Interviews revealed that children are likely to mimic parental behaviour, making parental smoking a significant risk factor. It illustrates the influence of family behaviour on children's smoking habits (9). Education and awareness programs for parents

can play a vital role in reducing tobacco use among minors (13, 21).

6. Policy Implications

6.1. Need for Specific Policies

The current policies do not sufficiently address tobacco use among minors. It is imperative to develop a dedicated policy that targets explicitly minors, banning flavored tobacco products and establishing stricter penalties for violations. Such a policy should also address the issue of second-hand smoke exposure, which remains unregulated for minors. Comprehensive public awareness campaigns are essential to educate the public about the dangers of tobacco use and the importance of protecting minors.

6.2. Strengthening Enforcement

Enhanced enforcement of tobacco control laws is crucial for their effectiveness. This includes improving training and resources for enforcement agencies, increasing penalties for non-compliance, and ensuring that all vendors are properly licensed. Strengthening enforcement can help address the challenges posed by political and economic interests and improve adherence to tobacco control regulations.

6.3. Public Awareness and Education

Public education campaigns are essential to raise awareness about the dangers of tobacco use and to promote healthy behaviors. Integrating tobacco prevention education into school curricula can help instill awareness from a young age. Additionally, using media platforms and public signboards to disseminate information can reach a broader audience and reinforce the message of tobacco prevention.

Discussion and Analysis

The findings from this study highlight the need for a comprehensive approach to tobacco control, mainly focusing on minors. The gaps in existing policies and their implementation underscore the importance of developing targeted strategies to address the specific needs of this vulnerable population. The influence of the tobacco industry and the challenges in enforcing regulations further complicate the efforts to reduce tobacco use among minors.



Several recommendations can be made to address these issues. First, a dedicated policy that explicitly addresses tobacco use among minors, including measures to ban flavored tobacco products and increase penalties for selling tobacco to minors, is needed. Second, improving enforcement mechanisms and enhancing coordination between government agencies and anti-tobacco coalitions are crucial for effective implementation.

Furthermore, raising public awareness through media campaigns, community programs, and school-based education can help reduce smoking rates among minors. Parents and caregivers must also be educated about the risks of tobacco use and the importance of modeling healthy behaviors.

7. Strengths and Limitations 7.1. Strengths

The study's strengths lie in its comprehensive qualitative approach, providing in-depth insights into the challenges and gaps in current tobacco control policies. The interviews with stakeholders offer valuable perspectives on the effectiveness of existing measures and highlight the need for targeted interventions. The study also identifies specific areas for policy improvement, contributing to the development of more effective tobacco control strategies.

7.2. Limitations

The study faced several limitations, including difficulties in recruiting participants, limited interview time, and technical issues with online interviews. Participants' reluctance to discuss sensitive issues and concerns about confidentiality also posed challenges. These limitations may have affected the depth of the data collected and should be considered when interpreting the findings.

8. Recommendations

- 1. **Policy Development**: Develop and implement a specific policy targeting tobacco use among minors, including bans on flavoured tobacco products and stricter penalties for violations.
- 2. **Enforcement**: Enhance enforcement mechanisms by increasing training and resources for regulatory agencies,

improving monitoring and compliance, and ensuring that all vendors are licensed.

- 3. Public Education: Implement comprehensive public education campaigns and integrate tobacco prevention into school curricula. Utilise media platforms and public signboards to raise awareness about the dangers of tobacco use.
- 4. Community Involvement: Engage community organisations and stakeholders in tobacco control efforts and promote healthy behaviours among minors. Encourage families and schools to play an active role in tobacco prevention.

Conclusion

The tobacco epidemic remains a significant threat to public health, particularly among minors. Despite existing policies, gaps in regulation and enforcement continue to affect the effectiveness of tobacco control efforts in Karachi. This study underscores the need for dedicated policies, enhanced enforcement, and public education to address these challenges. By implementing the proposed recommendations, it is possible to reduce tobacco use among minors and protect future generations from the harms of tobacco. Implementing effective tobacco control measures requires a concerted effort from governments, educational institutions, and families. By adopting a comprehensive approach that includes stricter regulations, increased public awareness, and targeted interventions, the health burden of tobacco can be reduced and the well-being of future generations safeguarded.

ABBREVIATIONS/ ACRONYMS

(SES): Socioeconomic

Status

(FCTC): The Framework

Convention on Tobacco Control

(COPD): Chronic

Obstructive Pulmonary Disease

(WHO): World Health

Organization



(ETS): Environmental

tobacco smoke

(LMICs) Low- and

Middle-Income Countries

%: Percentage

(GYTS) Global Youth

Tobacco Survey

(IDIs) In-depth

Interviews

(SOPs) Standard

Operating Procedures

(COVID 19) Corona Virus

Disease

(SWOT) Strength,

Weakness, Opportunity, Threat

(NGO) Non-

Government Organization

(TCC) Tobacco

Control Cell

(SHS) Second-hand

smoke

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manuscript and meet the journal submission criteria.

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