



SEATCA
SOUTHEAST ASIA TOBACCO CONTROL ALLIANCE

The Collaborative Funding Program for
Southeast Asia Tobacco Control Research

SMOKING AMONG GIRLS AND YOUNG WOMEN IN ASEAN COUNTRIES: A REGIONAL SUMMARY

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**Financial support from
The Rockefeller Foundation and
Thai Health Promotion Foundation**

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Prepared for the
Southeast Asia Tobacco Control Alliance (SEATCA)
Under The Collaborative Funding Program for Tobacco Control Research

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Financial support from
The Rockefeller Foundation and Thai Health Promotion Foundation (ThaiHealth)

April 2009

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INTRODUCTION

There are important gender differences in tobacco use which the tobacco industry taps to exploit an important market segment. Smoking prevalence among males is about four times that of females (48% against 12%) globally.¹ While global male smoking rates have either reached a plateau or are in a slow decline, the prevalence of tobacco use among women is, on the contrary, increasing.

The Global Youth Tobacco Survey (GYTS) recently conducted the largest global survey on tobacco use among adolescents aged between 13 to 15 years old. The results of this important survey indicate that almost as many young girls are smoking as young boys in many parts of the world.

This means that there is likely to be an increasing global epidemic among women that will continue to rise until well into the 21st century. The ominous prediction is that by 2025, 20% of the female population will be smokers, up from 12% in 2005.²

Several factors are driving the increase in female smoking, especially in developing countries.³ The single most important factor may be the rise in spending power among girls and women, which is making cigarettes more affordable. Social and cultural norms that have traditionally prevented women in many countries from smoking are weakening, rendering smoking among women more socially acceptable. It is also seen that greater female autonomy and changes in women's roles are associated with smoking uptake in countries like the USA, prompting predictions of similar patterns in developing countries.

Tobacco companies have been targeting girls and women with expensive and alluring marketing campaigns all over the world for decades. They promote smoking with images of freedom, emancipation, slimness and glamour. Meanwhile, governments in developing countries may not treat tobacco use among women as a priority health issue. They mostly see tobacco use as a problem confined to men.

In addition to concern over rising smoking rates among women is the existing epidemic of secondhand smoke. Already large numbers of women are passive smokers, especially at home. Women must be addressed not only as potential future smokers, but as existing passive smokers whose right to a smoke-free environment is violated on a regular basis.

Youth Smoking in ASEAN Countries

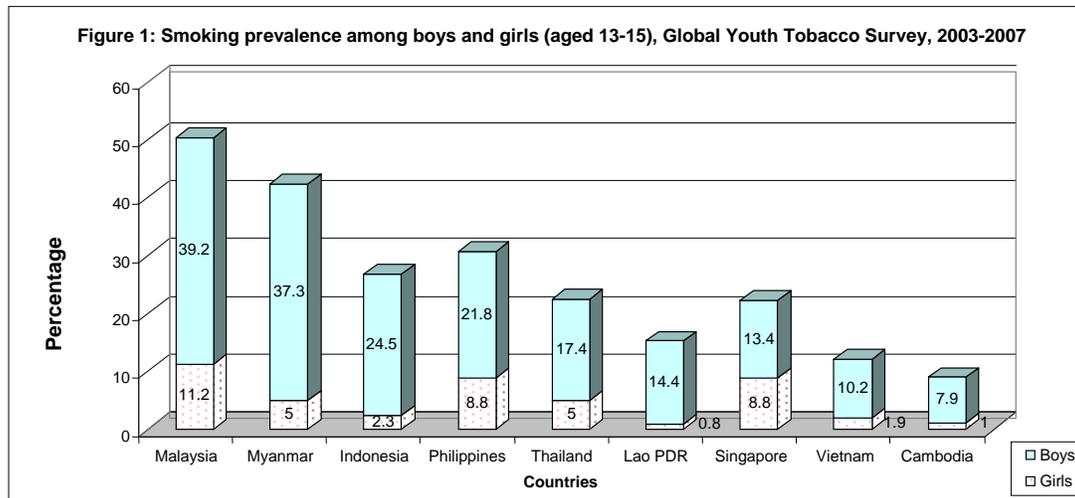
A similar trend of relatively high and rising smoking prevalence is observed among young people in ASEAN countries. The GYTS conducted among 13-15 year-olds during

¹ WHO, *Gender and Tobacco Control: A Policy Brief*, 2007.

² Mackay J, et al. *The Tobacco Atlas*, 2006.

³ WHO, *Women and the Tobacco Epidemic- Challenges for the 21st Century*, 2001.

2003-2007 showed that boys were more likely to smoke than girls (Figure 1)^{4, 5} while smoking rates differed substantially across the region.



Although the prevalence of smoking is low among females, in most ASEAN countries slightly over half of females who have never smoked reported being exposed to smoking both in their homes and in public places. Exposure to secondhand smoke (SHS) was significantly higher in all countries than smoking prevalence itself.

The reasons for increases in smoking among boys and girls include easy access to tobacco products, low cigarette prices, and peer pressure; having peers, parents and siblings who use tobacco and approve of smoking; and the misperception that smoking enhances social popularity. In addition, young girls smoke to stay thin.¹

Regional evidence from GYTS revealed that an overwhelming majority of young teenagers are exposed to varied forms of tobacco advertising, promotion and sponsorship. Such rates are particularly high in countries where there is no ban on tobacco advertising, promotion and sponsorship: nine in ten young teens in Indonesia and Cambodia reported seeing tobacco advertising on billboards.^{6,7,8,9} Eight in ten teenagers in Cambodia also saw cigarette ads in newspapers or magazines.

⁴ CDC, Global Youth Tobacco Surveillance, 2000-2007, 2008, http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5701a1.htm?s_cid=ss5701a1_e

⁵ Southeast Asia Tobacco Control Alliance (SEATCA), The ASEAN Tobacco Control Report Card, May 2007.

⁶ http://www.cdc.gov/tobacco/global/GYTS/factsheets/searo/2006/IndonesiaJava_factsheet.html (accessed 4/29/2008)

⁷ http://www.cdc.gov/tobacco/global/GYTS/factsheets/searo/2006/IndonesiaSumatra_factsheet.html (accessed 4/29/2008)

⁸ http://www.cdc.gov/tobacco/global/GYTS/factsheets/searo/2006/IndonesiaSurakarta_factsheet.html (accessed 4/29/2008)

⁹ http://www.cdc.gov/tobacco/global/GYTS/factsheets/searo/2006/cambodia_factsheet.html (accessed 4/29/2008)

In countries with a partial tobacco ad ban such as Vietnam and Laos PDR, about half of the teens saw tobacco ads on billboards as well as in print media. Compared to never smokers, significantly higher percentages of current smokers in all countries received free cigarettes from a tobacco company representative and have an object with cigarette brand logo on it. These findings indicate the significant association between exposure to cigarette advertising and smoking.

SEATCA Regional Study on Smoking among Girls and Young Women

Seven of the ten ASEAN countries – Cambodia, Indonesia, Laos PDR, Malaysia, Philippines, Thailand and Vietnam – participated in a regional study on smoking among girls and young women between the ages of 13 to 25 years old in 2007-2008. This study was funded by the Southeast Asia Tobacco Control Alliance (SEATCA) together with the Rockefeller Foundation and Thai Health Promotion Foundation (ThaiHealth).

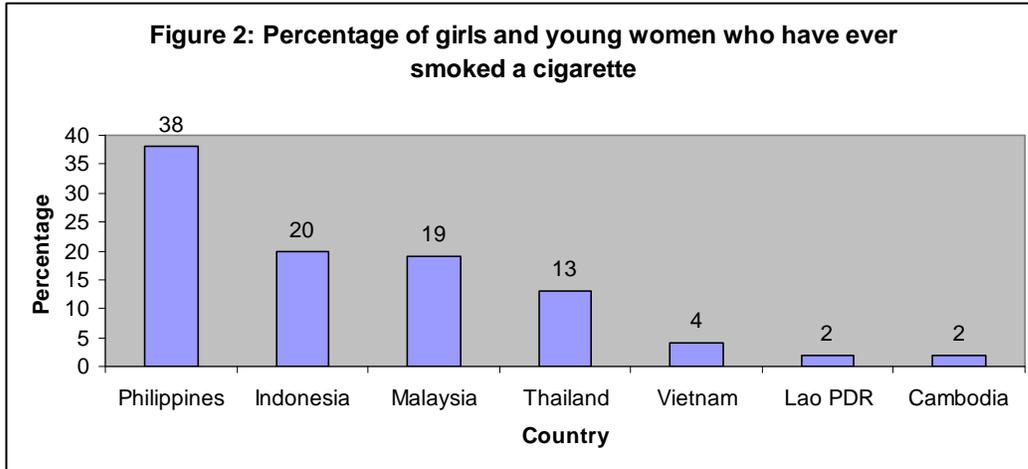
The study had 3 major objectives:

- 1) To determine the extent of cigarette smoking among girls and young women and socio-cultural factors associated with it;
- 2) To determine respondents' exposure to tobacco advertising, promotion and sponsorship; and
- 3) To examine the respondents' awareness of and support for tobacco control policies such as smoke-free public places, bans on advertising, promotion and sponsorship and health warnings on cigarette packs.

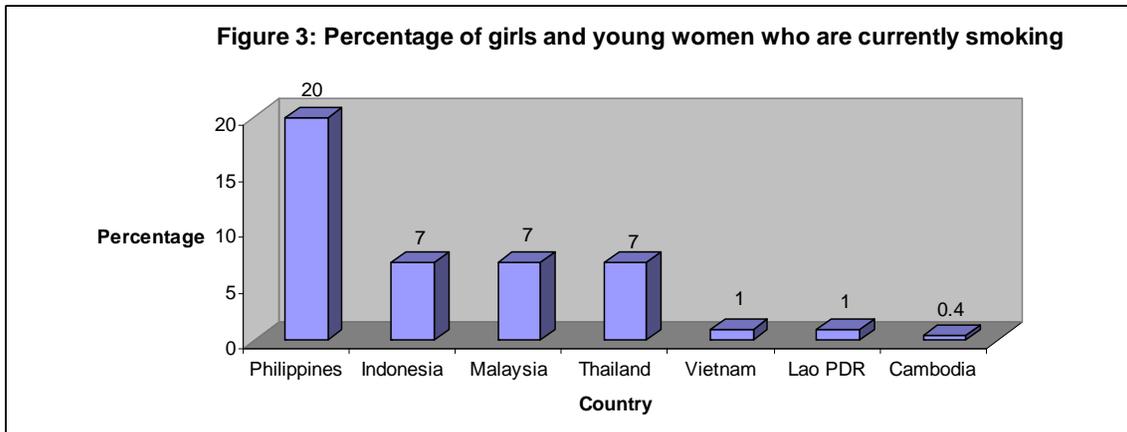
Female respondents from secondary schools and colleges or universities from the capital city of each country together with one rural district were selected to participate. For each country involved, a similar sampling approach and questionnaire was used. A total of about 3,000 female respondents were recruited for the study within each country. A combined quantitative and qualitative method was utilised. The first phase of the study involved cross-sectional sample surveys of female secondary and college students to collect data using a self-administered structured questionnaire. This was followed by a more in-depth examination of key findings obtained from the surveys using focus group discussions. Key findings of the survey within each country are summarised below.

Rates and Pattern of Smoking

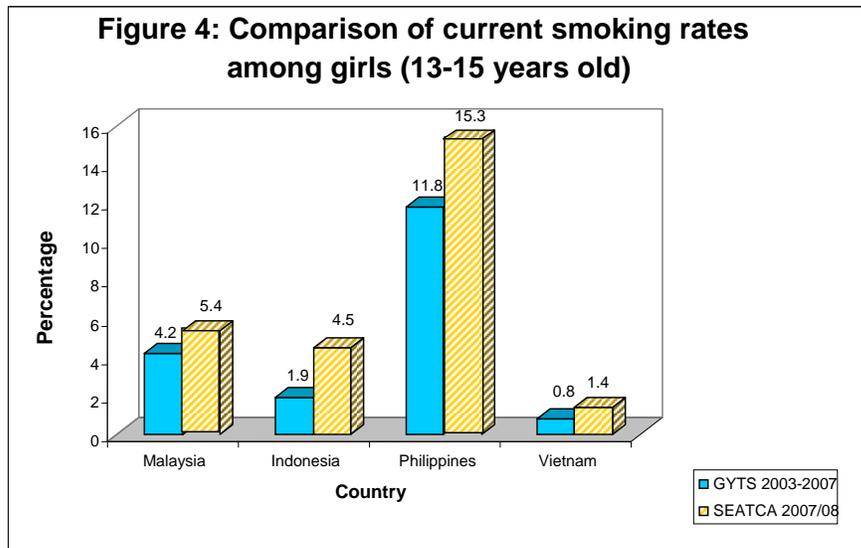
The proportion of girls and young women, who reported ever smoked cigarettes, i.e., taking at least a puff, varied substantially among these ASEAN countries (Figure 2). The Philippines recorded the highest ever-smoking rate. Cambodia and Laos had the lowest.



Two in ten females in the Philippines reported smoking in the last 30 days compared to less than one in ten females in Indonesia, Malaysia and Thailand (Figure 3). About 1% of girls in Laos, Cambodia and Vietnam smoked. Young women (20-25 years old) from colleges and universities in all the countries experimented and smoked more compared to the younger teenage girls. This finding suggests that stress, peer pressure and “modern” lifestyle could be influencing factors in this trend of female smoking.



A comparison of smoking rates among 13-15 year-olds obtained in this study together with those from the GYTS showed a significant increase in underage smoking in Malaysia, Indonesia, the Philippines and Vietnam (Figure 4).



An overwhelming majority of girls from all the countries initiated smoking in their teens. Some girls in Indonesia and Philippines started as young as 10 years old or less.

While smoking rates may differ between the various countries, the patterns of smoking are very similar. Most of the girls and young women who have ever smoked and those who are currently smoking are not established smokers, defined as someone who smoked more than 100 cigarettes in their lifetime and smoked in the last seven days.

Overall the amount of tobacco consumed was low among girls and young women in all countries. Over two-thirds of ever smokers in each country have smoked 10 or fewer cigarettes in their lifetime. Less than 5% of ever-smokers have smoked 100 or more cigarettes in their lifetime, except for the case of Thailand and Malaysia, where 20% and 10% respectively, have done so. Generally the older girls have smoked more in their lifetime than the younger girls.

Most girls said that they smoked to relieve stress and tension and to relax. Imitating young men and to gain acceptance of the group were some of the other factors influencing female smoking. Cigarettes were usually smoked in the company of friends.

Cigarettes were reported to be easily accessible to young people in most of the countries, as reported by 70% of smokers in Thailand and 60% of smokers in Malaysia. About 40% of smokers in Indonesia and the Philippines also had easy access to cigarettes. Evidence from this study suggests that bans on sales to minors are poorly enforced, as underage female smokers in most of these countries could easily purchase their own cigarettes.

A majority of smokers from all countries had plans to quit smoking, mostly within the next six months. It is also important to note however, that a sizeable proportion of female smokers in Thailand (26%), the Philippines (21%) and Malaysia (14%) had no intention

to stop smoking at all. There is a need to provide appropriate cessation services for female smokers in these countries.

The relatively low rate of cigarette smoking among girls and women in most of these ASEAN countries could be attributed to cultural beliefs and norms that make it unacceptable for females to be tobacco users, and particularly to smoke cigarettes. What tends to be forgotten, in speculating on whether rates in women and girls are likely to rise significantly, is that ASEAN females are already using tobacco at rates similar to or even higher than those of men — but that use is most frequently *passive*, by inhaling the smoke of their male relatives and colleagues. Most females live in homes with at least one smoker and thus exposure to risks of second hand smoke is very high.

Attitudes and Beliefs about Smoking

Attitudes and beliefs about smoking in youth are important factors that may influence their decision to smoke. Studies have shown that youth are more likely to smoke if they have favorable attitudes towards smoking and have a positive image of smoking, and believe that smoking is socially acceptable and a norm in society.

The current study elicited information on females' overall opinion of smoking, their perceptions of the positive image of smoking (such as weight control, a sign of being modern and cool) and societal norms regarding smoking.

When asked whether smoking is bad or good or neither bad nor good, most female respondents within each country believed that smoking is bad. However, there were sizeable proportions of females within each country having neutral opinion or who think that smoking is good. One in ten female students has a positive opinion of smoking in the Philippines, Malaysia and Indonesia whilst in Thailand it is one in five students. Smokers in all countries have significantly more positive opinions of smoking compared to non-smokers. For example, six in ten Thai female smokers as compared to two in ten non-smokers have a positive attitude toward smoking. Findings from the Philippines, Indonesia and Malaysia show that females with a positive opinion of smoking are three to four times more likely to smoke than females with a negative opinion of smoking.

Study findings in all countries also revealed that smokers generally have a positive image of smoking and believed that smoking helps to control body weight, a sign of being modern, makes one look cool or fit, and is a sign of maturity. Smokers were also more likely to perceive that smoking among young women is socially acceptable. Responses to the question on whether society disapproves of smoking varied significantly between countries. Eight in ten Vietnamese and six in ten Indonesian girls and young women perceived that their society disapproves of smoking. Half of Filipino females had such a perception. On the contrary, six in ten Malaysian and Thai females believed that their society approves of smoking. Perception that it is a norm to smoke was found to be linked to the likelihood of smoking.

Knowledge of Smoking-related Diseases

Over eight in ten female youths in most countries were aware of smoking-related diseases such as lung cancer in both smokers and (through secondhand smoke) non-smokers, stroke and stained teeth in smokers, premature ageing and pregnancy-related complications in women smokers. Most females within each country have been exposed to anti-tobacco advertising. All young females in Malaysia and approximately eight in ten females in Laos, Thailand and Vietnam recalled having seen things that reminded them of the dangers of smoking. Fewer (six in ten) females in the Philippines and Indonesia were exposed to anti-smoking messages.

The major sources of such messages varied between the countries. All Malaysian females were exposed to the national anti-smoking campaign that utilized all major media channels such as television, billboards, newspapers and radio. While television emerged as one of the major sources of anti-smoking messages in Thailand, the Philippines and Vietnam, health warnings on cigarette packs is the other important channel. Approximately six in ten females in the latter countries have seen large health warnings (pictures in the case of Thailand) on the front and back panels of cigarette packs. It is evident that implementing picture warnings on packs is a very useful educational tool for both smokers and non-smokers.

Exposure to Direct and Indirect Pro-tobacco Advertising

Another major focus of this study was to assess girls' and young women's exposure to tobacco industry marketing tactics and the extent this increased their likelihood to smoke. **Significantly, the level of exposure to tobacco industry's marketing is closely linked to the degree such activities are controlled within each country.**

Exposure to tobacco advertising and promotion is highest in Cambodia and Indonesia where there is no ban on such tobacco marketing, and in the Philippines where only a partial ban is in place. Over 70% of girls and young women in these three countries have noticed things that are designed to encourage smoking or which made them think about smoking in the last month. Tobacco marketing is prevalent and uses diverse channels. For example in Indonesia, nine in ten females had seen tobacco advertising on television. Seven in ten Indonesian females had seen tobacco advertising on posters. Over half of these young females had also seen ads on billboards, in print media and at retail outlets. Youth in the Philippines are also widely exposed to tobacco advertising found on posters, in print media, and at cigarette points-of-purchase.

Conversely, in Thailand, Malaysia and Vietnam where a comprehensive ban on tobacco advertising has been legislated, most (between 70-75%) of the girls did not notice any form of tobacco advertising in the past month. In Malaysia and Vietnam, tobacco advertising is predominantly confined to points-of-purchase. Thailand has a comprehensive ban on tobacco advertising and promotion including ban on displays of cigarettes at retail outlets.

Significantly more current smokers in these countries were exposed to tobacco advertising compared to non-smokers, suggesting a strong relationship between exposure to advertising and smoking. Earlier studies have found that youths who are exposed to tobacco advertising, promotion and sponsorship are more likely to smoke. Findings from the Philippines, Vietnam and Malaysia show that exposure to tobacco advertising increases the likelihood of smoking by 200% to 300%.

This study has also gathered evidence of the tobacco industry's violations of the law. For example, despite a ban on distribution of free cigarettes in all countries, 5% to 16% of girls and young women in each country have been offered free cigarettes, with higher rates recorded among those from the urban areas. This promotional activity, usually conducted during cultural events sponsored by the tobacco industry, is particularly prevalent in the Philippines (16%) and Indonesia (15%). Girls who were offered free cigarettes were more likely to smoke than those who were not. Such blatant violations committed by the tobacco industry calls for greater vigilance in monitoring industry activities and enforcement of the law in all countries.

Although all the countries (with the exception of Indonesia) have banned indirect advertising, a small proportion of girls and young women within each country reported ownership of merchandise containing a cigarette brand name.

Factors Associated with Smoking

Socio-cultural factors such as parental and peer tobacco use and exposure to direct and indirect pro-tobacco advertising are important risk factors for smoking. This study found that mother's smoking is a risk factor that predicted female smoking. For example in Malaysia, girls and young women are four times more likely to smoke if their mothers smoke.

Peer tobacco use is an even stronger predictor of female smoking. Female students with close friends who smoke are thirteen times more likely to smoke compared to those without. In Indonesia, girls and young women with close friends who smoke are eight times more likely to smoke. In the Philippines, girls were four times more likely to smoke if their close friends smoke. Hence, it is not a surprise that peer influence was also an important factor for female smoking in Vietnam. Prohibiting smoking in public places would be an effective strategy to reduce peer influence. If smoking is prohibited in public places, it will be less likely that girls will observe their friends' smoking behavior and join them.

Study results show that female students who are exposed to direct and indirect tobacco advertising and promotion are more likely to smoke. For example, in Indonesia, girls who are exposed to tobacco advertising at tobacco industry-sponsored sports and cultural events are twice as likely to smoke as girls without such exposure. Girls in Indonesia and the Philippines who were offered free cigarette samples were about twice as likely to smoke. In Vietnam and the Philippines, exposure to pro-tobacco advertising doubles the risk of smoking.

Personal factors that have consistently been associated with tobacco use are knowledge, attitudes and beliefs. The current study found that females with pro-smoking attitudes, positive image of smoking and a perception that smoking is the norm among people their age are more likely to smoke. For example, Indonesian and Malaysian girls who have a positive opinion of smoking are four times more likely to smoke than those who do not hold a positive opinion. Young females in Indonesia, Malaysia and Vietnam who perceived that it is acceptable for girls to smoke and that smoking is a norm among girls are also more likely to smoke.

Although this area was not touched on in the current research, it is important to note that the single most effective measure to reduce smoking among girls and women would almost certainly be higher taxes on all tobacco products. While there are easy ways to circumvent sales to minors (by getting others to buy cigarettes for you, for instance), there is no easy way to avoid higher prices. In every country in the world, tax and price measures have been shown to be the single most effective measure for reducing smoking, with a particularly high effect among youth and the poor.

The rates of smoking among those around young women and girls, which has been shown to be a strong determinant of smoking in this study, would also decline significantly if prices of tobacco products were sufficiently high. This is thus the single most important measure to protect girls and women from any future smoking epidemic, as well as to reduce their current high exposure to secondhand smoke.

Awareness of Tobacco Control Policies

The girls and young women were asked if they were aware and supportive of tobacco control policies such as health warning requirements on cigarette packs, tobacco advertising ban, prohibition of smoking in public places and cigarettes sale ban to minors.

About eight in ten young females in all countries (though only half of females in Malaysia) were aware of health warnings on cigarette packs. About two in three females within most countries have noticed these warnings in the last month. Only about half of young Cambodian and Malaysian female students have noticed health warnings on cigarette packs, which is not surprising given the very small and inconspicuous nature of the current warning.

Responses as to whether health warnings made them think about the health risks of smoking were related to the nature of current warnings. Nine in ten females in Thailand and Vietnam said that health warnings on packs trigger thoughts on the harmfulness of smoking compared to seven in ten females in Indonesia and the Philippines. This is to be expected given that Thailand and Vietnam have more prominent health warnings than other countries in the region. Over 80% of females in all countries supported the implementation of pictorial warnings on cigarette packs.

Seven in ten females in Indonesia supported a ban on tobacco advertising and sponsorship in cultural and sports events. Eight in ten Indonesian female youth also

called for a ban on tobacco advertising inside shops and stores as well as a ban on display of cigarettes at point of sale. Support for such bans was also high among females in Malaysia and Vietnam (nine in ten support such a ban). In the remaining countries though, only more than half of the young females supported a ban on advertising and display of cigarette packs at point of sale.

When asked about smoking bans in public places, approximately eight in ten young females in all countries supported a complete ban on smoking in hospitals, educational institutions, air-conditioned restaurants and indoor places of worship. Support for total bans in workplaces, public transport, non air-conditioned restaurants, and outdoor places of worship was much lower in all countries. Most females feel that there should only be partial smoking bans in bars and pubs. The study findings thus suggest that young people in all the countries should be educated about the benefits and feasibility of 100% smoke-free environments.

Most of the females in each country also emphasized the need to have effective implementation and enforcement of all the policies. They proposed increasing enforcement of tobacco advertising bans and smoking bans in public places. Some of their recommendations included more public education on the harms of secondhand smoke and improvement in the implementation of smoking bans.

POLICY IMPLICATIONS

In terms of countering and preventing an upcoming epidemic of smoking in girls, it is important to ensure that new policies are put in place and properly enforced to replace crumbling social norms. If traditional social norms preventing girls from taking up smoking are not replaced by other effective measures, then a smoking epidemic among girls could indeed result. Fortunately, the policies known to be effective at preventing smoking in the general population will also work for girls and women.

1. Tobacco Marketing and Advertising

There is substantial evidence that exposure to direct and indirect tobacco advertising, together with other marketing tactics used by the tobacco industry leads to an increase in experimentation by young people who may go on to become regular users of tobacco products. Studies show that pervasive tobacco promotion creates the perception that more people smoke than they actually do. Further, the tobacco industry promotes cigarettes to young women using false images of sophistication, slimness, vitality, emancipation and sexual allure.

Girls and women are, like males, strongly affected by advertising. Girls in particular may be highly image-conscious and thus even more affected by advertising than their male peers, especially when advertising (and indirect promotion in movies) depict extremely slender and sophisticated women smoking. The only way to prevent such advertising from influencing people is to ban it altogether, in all its forms. For countries such as Malaysia, Thailand, Vietnam and the Philippines which have already succeeded in banning virtually all forms of advertising and sponsorship, large gaps generally remain in terms of point-of-purchase advertising and of the glamorizing of smoking in the movies.

Youth are a prime target of the tobacco industry, which needs new recruits to replace those smokers who quit or die. However, industry spokespeople have repeatedly denied that they target the youth population through marketing and advertising. Evidence from this study contributes to the overwhelming pool of evidence, including from internal industry documents, that the industry has very successfully created a positive image of tobacco use among adolescents. Messages conveyed by advertising images also appealed to this young population. Adolescents in Malaysia and Thailand believed that smokers are more mature, stylish, attractive to the opposite sex, and macho. This suggests that cigarette advertising has likely increased the perceived social value of smoking among young people and is likely to have influenced the rate of adolescent smoking.

The effectiveness of ad bans becomes clear when we see that while over 70% of females in Indonesia and Cambodia – where tobacco advertising is not banned – are exposed to cigarette ads, a similar proportion of girls (70-75%) in Thailand, Malaysia, and Vietnam did not notice any form of tobacco advertising in the past month. More current smokers than non-smokers reported exposure to tobacco advertising, indicating that the ads are indeed successful at encouraging youths to smoke. That is, exposure to ads leads to a

higher acceptance of smoking, and those who pay most attention to ads are most likely to pick up and maintain the habit. Such evidence strongly points to the need to ban all forms of advertising, to protect young girls and women as well as males. A ban on tobacco advertising, promotion and sponsorship is a powerful weapon against the tobacco epidemic. To be effective, bans must be complete and apply to all forms of marketing and promotion.

It is also of interest to note that in some countries the tobacco industry continues to violate laws banning all kinds of tobacco marketing. This finding strongly points to the need to strengthen the implementation of existing laws.

2. Smoke-free Environments

This regional study shows widespread support for banning smoking in most public places such as health and educational facilities, air-conditioned restaurants and indoor areas of places of worship in all the countries. However, a substantial proportion of young females in all the countries favour a partial ban in workplaces and non air-conditioned restaurants, particularly in bars and pubs. Further education on the harms of second hand smoke would be useful to increase compliance and enhance youth support for 100% smoke-free environments.

Banning smoking in public places will prevent the development of social practices of smoking while hanging out at clubs, discos, restaurants, or in other popular gathering places of youth. It is vital that young people learn to socialize without the “crutch” of cigarettes through the development and implementation of strong policies banning smoking in workplaces (which would include many recreational areas) and public places. Smoke-free policy also denormalises smoking and contributes to the perception that smoking is not socially acceptable.

3. Education and Health Warnings

In terms of education, the most cost-efficient and effective measure to get across a message to people of both sexes about the dangers of passive smoking is not through the mass media – important though that may be – but by putting pictorial messages on all cigarette packs. Pictorial warnings should include messages about the harm done by smokers to others through passive smoking. Such messages, serving as “mini mobile billboards”, would reach virtually all smokers, including the illiterate, and serve as continual reminders of the harm done by smoking in front of infants, children and women. In order for pack warnings to be effective, they must be large, clear, highly visible, and preferably accompanied by vivid pictures.

Further, they should not be counterbalanced by advertising, which gives reassuring messages – whether directly or through the clever manipulation of images – that smoking is not harmful, but rather a tool of pleasure among the healthy, beautiful, and popular. It is also important to note that such images should not limit themselves to showing images of pregnant women. Such images reinforce the idea that only pregnant women (that is,

their foetus, not the woman herself) are harmed by smoking. While such messages may be important, the message of harm by passive smoking should also include adult women who are not pregnant.

Pictorial warnings about the dangers of tobacco are critical to changing its image, especially among adolescents and young adults. Graphic warnings will help people grasp the serious addictiveness and dangerous health consequences of tobacco use and to view smoking as socially undesirable.

4. Access to Cigarettes

Easy access and widespread availability of cigarettes have significantly contributed to the high rate of smoking among adolescents in ASEAN countries. Given rising spending power, girls and women will only be affected by higher prices brought about through strong taxation measures if they are significant enough to overcome rising incomes. It is well known that price measures are particularly effective with youth, which is of great importance since about one in four young people smoke their first cigarette before the age of ten.

This research found that an overwhelming majority of girls from all the countries started smoking in their early teens, with some girls in Indonesia and the Philippines beginning to smoke as early as ten years of age or less. The single most effective way to prevent girls, as well as boys, from becoming smokers is to maintain high and rising prices of tobacco products, so that tobacco remains unaffordable despite increases in spending power.

CONCLUSION

On a positive note, it is important to realize that most girls remain non-smokers, at least in terms of their own smoking, and harbour negative views towards smoking. These non-smokers also strongly support tobacco control policies, and only request for stronger enforcement. While young female smokers have a more positive image of smokers and smoking, they are very much in the minority. There thus exists a large pool of untapped support for strong tobacco control policies among Southeast Asian youth, particularly girls, which could go far towards making such policies more palatable and acceptable to the general population.

In sum, women and girls are both threatened by the potential of a future high uptake of smoking, and are suffering today from high rates of passive smoking. It is fortunate that exactly the same measures that will protect females from passive smoking will also reduce their likelihood to take up smoking themselves. A set of comprehensive measures to reduce smoking will thus serve to protect both those affected by passive smoking and those at risk of becoming smokers. Such policies are not a luxury, but a necessity to protect the health and well-being of our women and girls.

POLICY RECOMMENDATIONS

Strong government action in individual countries has the greatest potential to stem the tobacco epidemic. Comprehensive tobacco policies are a key component in preventing and decreasing women's tobacco use as well as in protecting non-smokers from being exposed to second hand smoke.

For tobacco policies to be comprehensive, they should also include price measures/taxation of tobacco products, packaging regulations, advertising bans, limiting depictions of smoking in mass media, and smoking bans in workplaces and all public places.

Countries should prioritise passage and implementation of tobacco control measures which have been proven to succeed in reducing smoking rates, in line with the WHO Framework Convention on Tobacco Control (FCTC). We know that tax increases and a comprehensive law are the most important and effective tools, therefore, these measures should be prioritised. Little evidence exists of the effectiveness of a ban on sales to minors, so such a measure should only be included as part of a larger, effective package, if at all. Specifically, these measures include:

- The tax on all tobacco products should be increased regularly to make them unaffordable to youth.
- All forms of tobacco advertising, promotion and sponsorship should be banned. Banning of the depiction of smoking and tobacco products in the media should also be considered.
- Display of cigarette packs and ads in stores represents an important form of advertising, and should, as in Thailand, be banned.
- Implementation and effective enforcement of 100% smoke-free places should be ensured.
- Warnings on cigarette packs should be clear, strong, specific, and use pictures as well as include messages about passive smoking.
- Anti-smoking media campaigns should be expanded through all possible means, such as the mass media (TV, radio, newspapers) and inter-personal communication.
- Countries may also consider banning sales to minors. It is very difficult to enforce such bans, and they may serve to reinforce the message that smoking is an adult activity (and thus attractive to youth). By no means should this be chosen as the single means to address smoking epidemic in youth.

Frightening as is the prospect of a tobacco epidemic among girls and women in South East Asia, it is reassuring to know that the tools to prevent such an epidemic are known and available. This study provides significant, local evidence of the need for stronger policies, pointing the way towards effective action to protect the current generation of young women and girls from the deadly harm of smoking. Scary as some of the numbers are, even scarier is the resistance of some governments to act to protect youth. It is hoped

that this research will serve as a call to action to protect the health and well-being of girls and women throughout the ASEAN region.

REFERENCES

CDC, *Global Youth Tobacco Surveillance, 2000-2007*, 2008.

Kengganpanich, T. and Kengganpanich, M., *Smoking Behavior of Female Students in Thailand*, Tobacco Control Research and Knowledge Management Center (TRC), Mahidol University, 2008.

Kin, F. and Tan Y. L., *Smoking in Girls and Young Women in Malaysia* Southeast Asia Tobacco Control Alliance (SEATCA), 2008.

Koalisi untuk Indonesia Sehat (KuIS), *Smoking in Girls and Young Women in Indonesia*, Southeast Asia Tobacco Control Alliance (SEATCA), 2008.

Mackay J, et al., *The Tobacco Atlas*, 2006.

Phothong S. and Lao Women's Union (LWU), *Smoking in Girls and Young Women in Lao PDR*,. presentation at the Southeast Asia Tobacco Control Alliance (SEATCA) Regional Research Workshop in Malaysia, April 2008.

Sarmiento, C., *Smoking in Girls and Young Women in the Philippines*, presentation at the Southeast Asia Tobacco Control Alliance (SEATCA) Regional Research Workshop in Malaysia, April 2008.

Sin S.,and Soreach S., *Smoking in Girls and Young Women in Cambodia*, presentation at the Southeast Asia Tobacco Control Alliance (SEATCA) Regional Research Workshop in Malaysia, April 2008.

Southeast Asia Tobacco Control Alliance (SEATCA), *The ASEAN Tobacco Control Report Card*, May 2007.

Tran Thi Kieu T.H., Pham H. A., Nguyen Dinh Q. and Vu Pham N. T., *Smoking in Girls and Young Women in Vietnam*, Southeast Asia Tobacco Control Alliance (SEATCA), 2008.

WHO, *Gender and Tobacco Control: A Policy Brief*, 2007.

WHO, *Women and the Tobacco Epidemic- Challenges for the 21st Century*, 2001.

http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5701a1.htm?s_cid=ss5701a1_e

http://www.cdc.gov/tobacco/global/GYTS/factsheets/searo/2006/IndonesiaJava_factsheet.html (accessed 4/29/2008)

http://www.cdc.gov/tobacco/global/GYTS/factsheets/searo/2006/IndonesiaSumatra_factsheet.html (accessed 4/29/2008)

http://www.cdc.gov/tobacco/global/GYTS/factsheets/searo/2006/IndonesiaSurakarta_factsheet.html (accessed 4/29/2008)

http://www.cdc.gov/tobacco/global/GYTS/factsheets/searo/2006/cambodia_factsheet.html (accessed 4/29/2008)



About SEATCA

The Southeast Asia Tobacco Control Alliance (SEATCA) works closely with key partners in ASEAN member countries to generate local evidence through research programs, to enhance local capacity through advocacy fellowship program, and to be catalyst in policy development through regional forums and in-country networking. By adopting a regional policy advocacy mission, it has supported member countries to ratify and implement the WHO Framework Convention on Tobacco Control (FCTC)

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