

PICTORIAL HEALTH WARNINGS IN INDIA:

Why Larger Warnings Should Be Implemented Without Delay

India is home to approximately 275 million tobacco users, including 47.9% of adult males and 20.3% of females in 2010,¹ and the World Health Organization (WHO) projects that tobacco-related deaths in India will surpass 1.5 million each year by 2020.² One of the most effective public health measures to inform the public about the harms of tobacco products is to implement large pictorial health warnings (PHWs) covering at least 50% of both sides at the top of tobacco packages as recommended in the Article 11 Guidelines of the WHO Framework Convention on Tobacco Control (FCTC).³ This in turn has been shown to increase thoughts and behaviours that lead to quitting, which would result in millions of lives saved in India alone.⁴,⁵

On October 15, 2014, India's Ministry of Health and Family Welfare (MOHFW) announced new rules called the Cigarettes and Other Tobacco Products (Packaging and Labelling) Amendment Rules, 2014⁶ to amend the previous 2008 Packaging and Labelling Rules⁷. These new rules increased the size of PHWs on smoked and smokeless tobacco packages, effective April 1, 2015. The new warnings would cover 85% of the principal display areas (both sides at the top edge) of tobacco packages, of which 60% would consist of specified pictorial warnings and 25% would consist of the text warning. This represents a substantial increase from the current size of PHWs, which cover 40% of the principal display area of the front panel of the packages (see Figure 1). However, on March 31, 2015, the MOHFW postponed the implementation of the larger warnings to review the amendments to the Cigarettes and Other Tobacco Products Act (COTPA) and hold further discussions with stakeholders.









Figure 1. Examples of health warnings on cigarette packages, 2009-2011 (top left), 2011-2013 (top right), and proposed 2015 warnings (bottom)

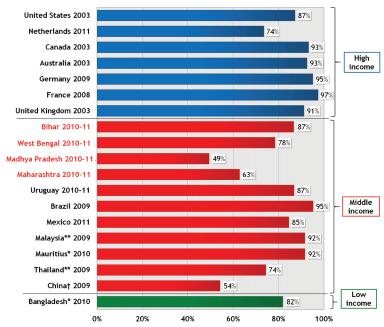
This factsheet presents findings from the India Tobacco Control Policy Evaluation Project (TCP), a cohort survey of 8,051 tobacco users and 2,534 non-users aged 15 and older in four states of India (Maharashtra, West Bengal, Bihar, and Madhya Pradesh), to summarize the evidence on the effectiveness of the current size of PHWs in India and demonstrate why larger PHWs on tobacco packs are needed. The findings point to the urgent need for the Indian Government to implement the Cigarettes and other Tobacco Products (Packaging and Labelling) Amendment Rules, 2014 without delay.

1 How do smokers in India respond to the existing pictorial health warnings and what is their level of knowledge of the harms of tobacco?

Evidence from Wave 1 of the TCP Survey indicates that the current size of PHWs is not effective in promoting quitting. Less than 25% of tobacco users in each state reported that the Indian health warnings made them think a lot about the health risks of tobacco use; less than 14% reported they had avoided looking the health warnings; and except in the state of Bihar, less than 20% reported that the health warnings made them a lot more likely to quit; and less than 26% reported they had given up the use of tobacco products at least once due to the health warnings.⁸

In the absence of pictorial warnings covering a range of harms of tobacco (the Round 1 warnings on smoked tobacco evaluated in the Wave 1 Survey only featured information on the risks of lung cancer), ITC* studies have shown that smokers in India are less knowledgeable about important tobacco-related health effects compared to smokers in other countries. For example, only 49% of smokers in Madhya Pradesh believed that smoking causes heart disease - the lowest level of knowledge of 16 ITC countries and regions (see Figure 2).

Figure 2. Percentage of smokers who believe that smoking causes heart disease, by country



Question asked about heart disease/COPD

[†] Question asked about neart failure † Question asked about coronary heart disea

^{*} ITC refers to the International Tobacco Control (ITC) Policy Evaluation Project.

In India, the ITC Project is called the TCP (Tobacco Control Policy) India Project to avoid confusion with the India Tobacco Company.

2. Are India's PHWs on cigarette packages more or less effective than PHWs on packages in other low- and middle-income countries (LMICs)?

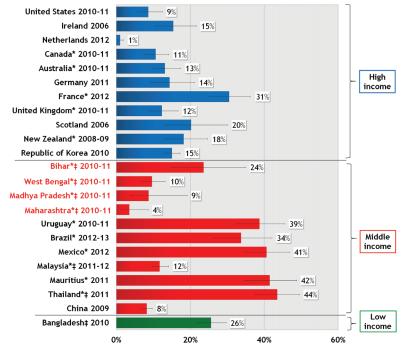
The answer is LESS effective.

Of 11 LMICs in the ITC Project, India has the secondlowest percentage of male cigarette smokers (8%) who reported that they made an effort to avoid the health warnings. This was similar to the percentage in Bangladesh (3%) where text-only health warnings appear on 30% of both sides of the cigarette packs.⁹

This is of concern because research studies show that smokers who report avoiding the warnings on tobacco packs are significantly more likely to **INCREASE** their intentions to quit, ¹⁰ and having an intention to quit is a very strong predictor of making future quit attempts. ^{11,12}

In addition, India has a low percentage of male cigarette smokers who reported that health warnings made them think about the health risks of smoking "a lot" compared to other LMICs in the ITC Project (see Figure 3). Only 4% of male smokers in Maharashtra said the health warnings made them think about the health risks "a lot" - the lowest percentage of 9 LMICs. The percentage across the four states (4%-24%) is even lower than in Bangladesh (26%).8

Figure 3. Percentage of male smokers† who said warning labels made them think about the health risks "a lot", by country



- † 'Smokers' refer to only cigarette users for all countries except Bangladesh and India where dual tobacco users (those tobacco users who reported smoking both cigarettes and bidis) were also included in the analysis.
- * Countries with pictorial warnings at time of survey.
- ‡ If a respondent answered "never" to noticing warning labels in Malaysia, Thailand, India, or Bangladesh, or if a respondent answered "no" to knowing that cigarette/smoked tobacco packages have warning labels in India or Bangladesh, the question asking about warning labels making them think about the risks of smoking was filtered. Thus the response was set to "no" for these individuals.

3. Does increasing the size of PHWs on cigarette packages make them more effective?

The answer is YES.

Research conducted in numerous countries around the world have shown conclusively that larger PHWs are more effective. For example, evidence from Uruguay clearly demonstrates that larger PHWs (beyond the FCTC minimum recommended size of 50% of the principal surfaces of the package) have a greater impact on smokers' behaviour.

Uruguay introduced the first set of eight PHWs on 50% of the front and back of cigarette packages in April 2006. In February 2009, eight new PHWs were introduced with no change in size (50%), and beginning February 2010, six new PHWs occupied 80% of the front and back of the pack, becoming the largest in the world at the time (see Figure 4).¹³

Figure 4. Examples of PHWs in Uruguay before (left) and after (right) the 2010 introduction of new images covering 80% of packs





2008 2010

Figure 5. Impact of pictorial health warnings on smokers' behaviours after increasing size of warnings from 50% to 80% of front and back of the pack in Uruguay

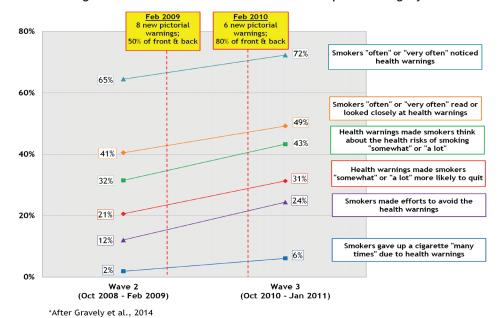


Figure 5 shows that after the much larger and new pictorial warnings were implemented on tobacco packages in Uruguay, there was a significant increase in EVERY indicator of health warning impact.

4. Why is it important to place pictorial warnings on the front AND the back of cigarette packages?

Evidence indicates that PHWs appearing only on one side of the cigarette package are less effective than PHWs on both sides, as recommended by FCTC Article 11 Guidelines. This has been demonstrated clearly in the UK and France, which introduced PHWs only on the **BACK** of cigarette packages.

Figure 6 shows that when the back-only pictorial images were introduced in the UK, the percentage of smokers who noticed the new warnings only increased by 1%, and there was less than 1% change in the percentage of smokers who reported giving up a cigarette because of the warnings. In comparison, when Malaysia introduced their pictorial warnings on BOTH sides of the package, noticing increased by 15% and the percentage of smokers who reported giving up a cigarette because of the warnings increased by 33%.

Figure 6. Impact of PHWs on noticing warnings and forgoing cigarettes in UK versus Malaysia

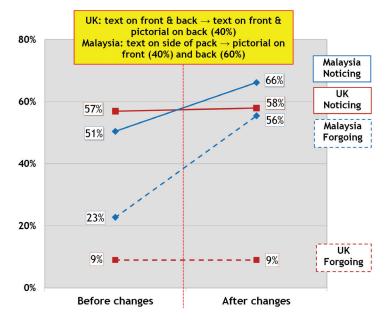




Figure 7. Impact of PHWs on smokers' perceptions and behaviours, pre- and post-implementation of pictorial warnings on back of pack in France

The introduction of PHWs only on the back of the pack had an even weaker impact in France, where the percentage of smokers who noticed the warnings actually decreased by 8% (from 57% of smokers to 49% of smokers) after PHWs were introduced on 40% of the back of the pack (see Figure 7). The decrease was likely due to the "wear-out" of warnings over time: warnings, like any other marketing message, are less effective over time.¹⁴

5. Do tobacco users in India want more health information on tobacco packages?

The answer is YES.

Evidence from the TCP India Survey clearly shows that tobacco users are supportive of having more health information on packages of smoked tobacco. On average, 67% of smokers in the four Indian states wanted more health information on tobacco packages, while only 2% wanted less information.⁸

ITC cross-country comparisons indicate that out of 16 countries and regions, India has the second highest percentage of male cigarette smokers overall who think there should be more information on cigarette packages, indicating a high level of support for stronger PHWs (see Figure 8).

Support for more health information varied across the four states, and was as high as 82% of male smokers in Madhya Pradesh.

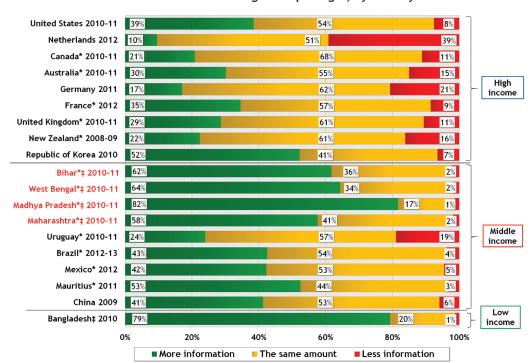


Figure 8. Percentage of male cigarette smokers† who think there should be more, less, or the same amount of health information on cigarette packages, by country

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^{† &#}x27;Smokers' refer to only cigarette users for all countries except Bangladesh and India where dual tobacco users (those tobacco users who reported smoking both cigarettes and bidis) were also included in the analysis.

**Countries with pictorial warnings at time of survey.

[‡] Among respondents who answered "yes" to the question "As far as you know, do cigarette/any smoked tobacco packages in Bangladesh/India have health warnings/warning labels?".

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The TCP India Project

The International Tobacco Control Policy Evaluation (ITC) Project is an international comparative study that examines the effects of tobacco control policy measures in 22 countries by following large cohorts of smokers over time in each country. The Tobacco Control Policy Evaluation Project India (the TCP India Project) was conducted in four Indian states: Bihar, Madhya Pradesh, Maharashtra, and West Bengal, by researchers from the Healis-Sekhsaria Institute for Public Health in India in partnership with the ITC Project at the University of Waterloo. The first wave of the Survey was conducted between August 2010 and December 2011, when the Round 1 pictorial health warnings had been in circulation for approximately two years. The Round 1 warnings included two images for smoked tobacco products and one image for smokeless tobacco products, covering 40% of the front exterior display area. Although two new sets of images for the health warnings have been introduced since Round 1, there has been no change in the size or position of health warnings in India.

For more information on the TCP India Project:

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