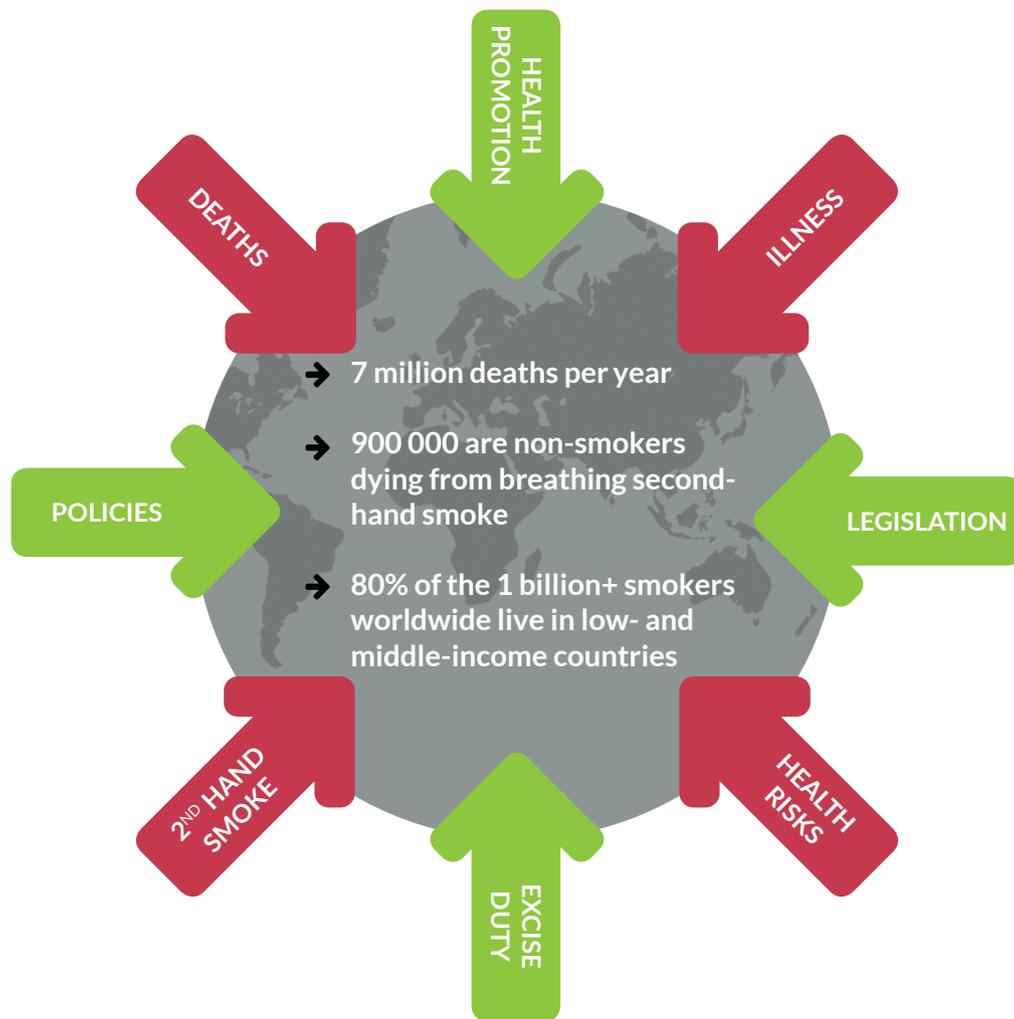




# GLOBAL IMPACT

SMOKING  
IS ONE OF  
THE MAJOR  
PREVENTABLE  
CAUSES OF  
DISEASE AND  
PREMATURE  
DEATH  
GLOBALLY



Research • Educate • Support

31MAY:WORLDNOTOBACCODAY #NoTobacco



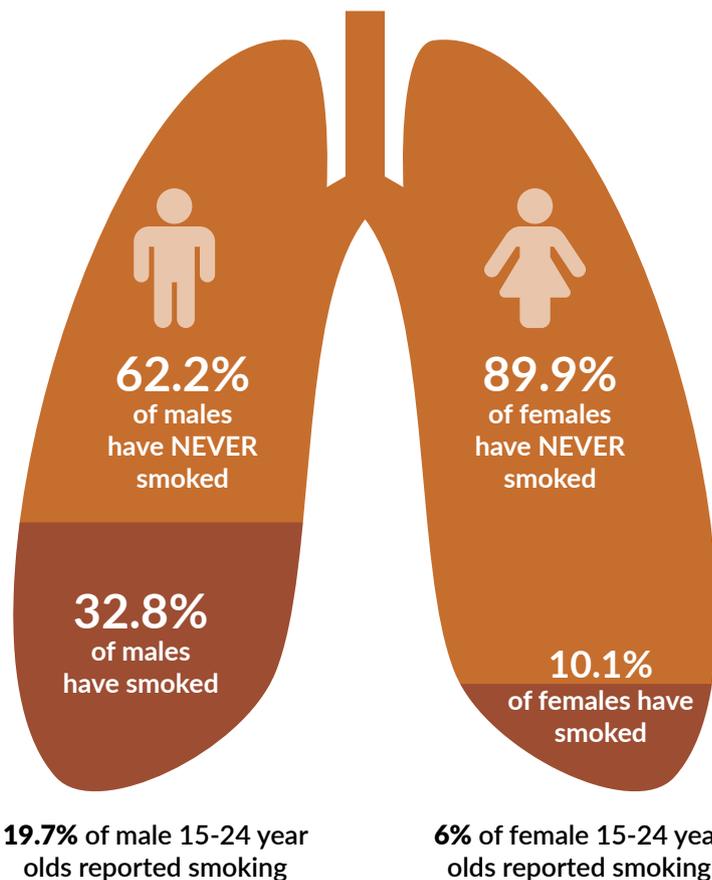
# SOUTH AFRICA

South Africa's comprehensive tobacco control strategy has been effective in reducing smoking prevalence and per capita tobacco consumption\*

\* SA National Health and Nutrition Examination Survey (SANHANES) 2013

## RESEARCH SHOWS:

- tobacco use is most often initiated and established during adolescence and young adulthood
- 90% of smokers start the habit by the age of 18, and 99% start by the age of 26



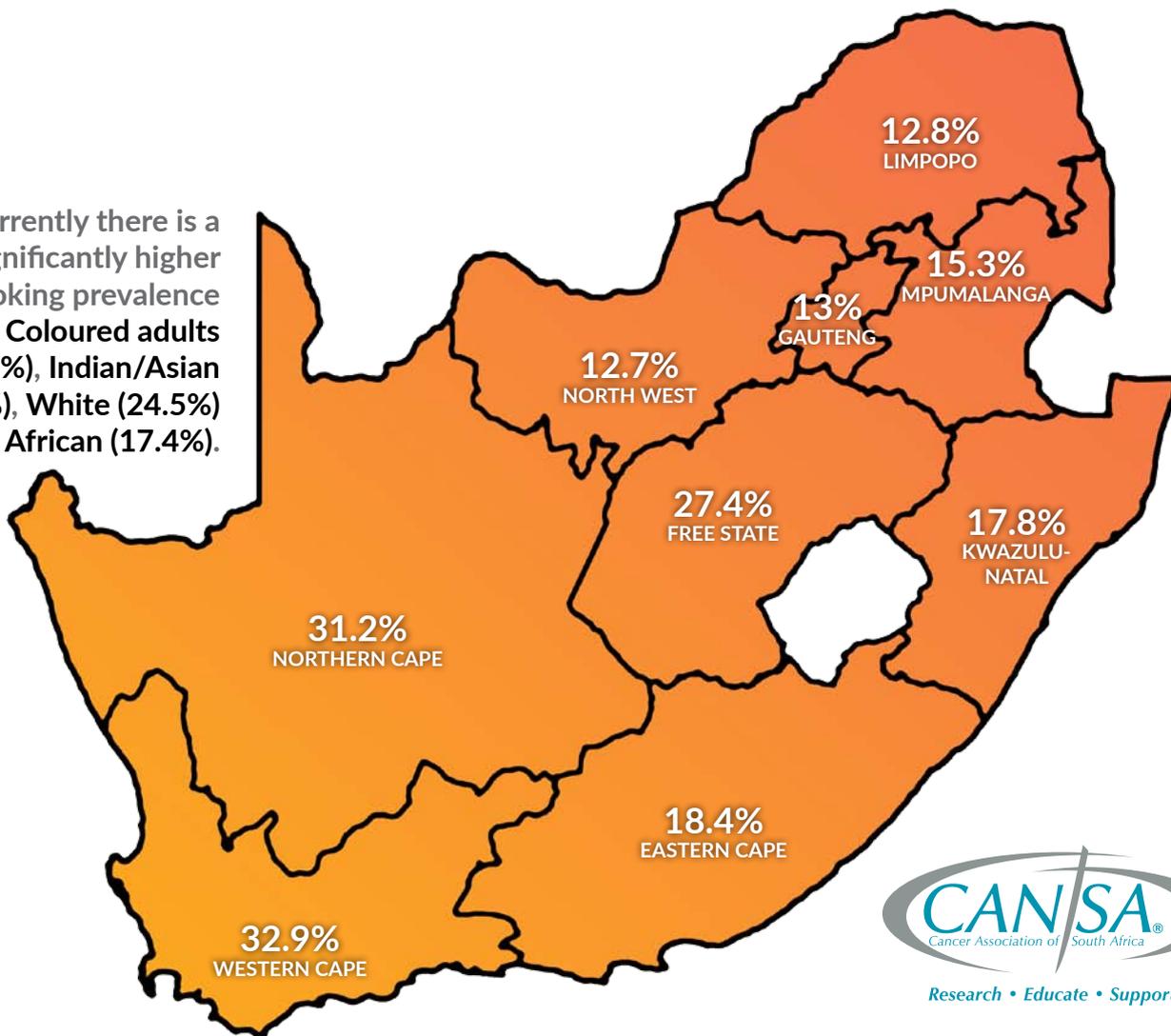
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# SOUTH AFRICA

## Smoking rates per province

Currently there is a significantly higher smoking prevalence among Coloured adults (44.9%), Indian/Asian (25.2%), White (24.5%) and African (17.4%).



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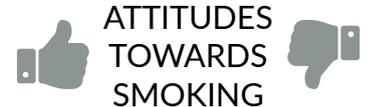
# How Big Tobacco Companies Target Kids

## MARKET RESEARCH

POPULATION TRENDS



SMOKING PATTERNS



STRATEGIES TO ENTICE ADOLESCENTS TO BEGIN SMOKING EARLY AND CONTINUE INTO ADULTHOOD



- capture product users early when young,
- give them what they want,
- establish brand as the brand of choice among the trendsetters and influencers.

**Aim:** become the brand of choice for others in that and subsequent age groups, carry it along to adulthood

Tobacco use between 2008 and 2011 among SA youth, particularly **GIRLS** has recently started **INCREASING\***

\* Global Youth Tobacco Surveys



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# How Big Tobacco Companies Target Kids

## MAXIMISING THE APPEAL OF TOBACCO PRODUCTS TO YOUTH

By **altering** the **taste, smell** and other **sensory attributes** of their products, tobacco manufacturers make it **easier for new users** – the vast majority of whom are **kids** – to start and continue smoking.

**Nicotine** can make tobacco smoke **harsh** and difficult to smoke, manufacturers use **chemical additives** to **alter the taste** and smoothness of tobacco use.



**Levulinic acid** reduces harshness of nicotine and makes the smoke feel smoother and less irritating

**Flavourings**, such as chocolate and liquorice, boost the sweetness of tobacco, mask the harshness of the smoke and make tobacco products more appealing to young people.

**Bronchodilators** expand the lungs' airways, making it easier for tobacco smoke to pass into the lungs.

**Menthol cools** and numbs the throat to reduce throat irritation and makes the smoke feel smoother

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# E-CIGARETTES

## What are they?

- Devices which allow users to inhale aerosol which contains nicotine, flavourings and other additives.
- They have less nicotine than combustible cigarettes, but release toxins in the vapours they produce. It is these toxins that can harm health.



## Are they safe?

- They deliver nicotine but release toxins when burned. It is not yet known what kind of health harm these toxins will cause.
- They are particularly harmful and addictive to young people under the age of 25, as their brains are still developing. This makes it easier for them to get addicted to nicotine after very limited exposure to e-cigarettes.
- E-cigarette use among young people could encourage them to become life-long tobacco smokers.



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## Can they help people to quit smoking?

- E-cigarettes were designed to assist those people who were struggling to give up tobacco.
- They were meant to be used for this target market only and for a limited time on the route to giving up completely.

The debate over the use of e-cigarettes has become a major issue in public health



E-cigarettes could be a route into nicotine addiction

Safety has not yet been proven



E-cigarettes may offer public health benefits

Should be regulated



E-cigarettes are an essential alternative to smoking tobacco that can help smokers quit



# E-CIGARETTES



## What does the World Health Organization (WHO) say about e-cigarettes?

“The potential risks they pose for the health of users remain undetermined. Furthermore, scientific testing indicates that the products vary widely in the amount of nicotine and other chemicals they deliver and there is no way for consumers to find out what is actually delivered by the product they have purchased.

For smoking cessation products to be most effectively and safely used, they need to be used according to instructions developed for each product through scientific testing.”

### Notes from CANSA:

- As yet, there are no scientifically proven instructions for using e-cigarettes as replacements for smoking or for smoking cessation.
- CANSA supports the proposed amendments to Tobacco Products Control Act, Act no. 83 of 1993 which will include regulations to e-cigarettes





# QUIT SMOKING

Your best chance of success is to **STOP** smoking **COMPLETELY**

The **National Council Against Smoking (NCAS)** advises the following with regards to quitting:

- **Quit Date:** set a date at least a week in advance to get ready
- **Get Support:** Family, friends, colleagues
- **Identify danger** and find solutions
- **Plan your survival kit:** what are the substitutes for your cigarettes
- **Start saving** your cigarette money and give yourself a treat



CHALLENGE	WINNING STRATEGY
After a meal or 1st cigarette in morning	<b>Wait</b> 10-15 minutes after a meal before you smoke. Increase the time by 5 minutes every day so that by Quit Day you do not smoke until at least 30 minutes after a meal. Similarly, extend the time to the first cigarette of the day.
Cigarette with a drink or coffee	<b>Avoid alcohol</b> for the first few weeks after quitting. Switch from coffee to tea or another beverage you do not associate with cigarettes.
Cigarette when socialising with other smokers	<b>Stay away</b> from smokers as much as possible for the first 10 days after quitting. Out of sight, out of mind. Socialize more with non-smokers.
When I'm alone or bored	Find <b>other things</b> to do. Phone a friend. Go to the cinema. Do a crossword puzzle or a Sudoku. Start a hobby.
When I'm upset or stressed	<b>Get active</b> – go for a walk, do some stretching. Exercise is a good way to beat stress. Practice deep breathing. Tell yourself “Relax. Stay calm.”

[ekickbutt.org.za](http://ekickbutt.org.za)

Counselling and medication can more than double the chance that a smoker who tries to quit will succeed.

**CANSA's eKick Butt programme** is a unique online smoking cessation programme. Through a series of emails, surveys and downloads, we will guide you and mentor you as you quit smoking.

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**10** 15 years after quitting risk of coronary heart disease is now similar to that of people who have never smoked; risk of death returns to nearly the level of people who have never smoked

**1** 20 minutes after last cigarette blood pressure and pulse rate drops; body temperature rises toward normal

**9** 10 years after quitting risk of lung cancer drops to as little as one-half that of continuing smokers; risk of cancer of the mouth, throat, oesophagus, bladder, kidney and pancreas decreases; risk of ulcer decreases

**2** 8 hours after quitting carbon monoxide level in blood drops to normal; oxygen level rises to normal

**3** 24 hours after quitting chance of a heart attack decreases

**8** 5 years after quitting risk of cancer of the mouth, throat, esophagus, and bladder are cut in half; cervical cancer risk falls to that of a non-smoker. After 5 to 15 years stroke risk is reduced to that of people who have never smoked

**4** 48 hours after quitting nerve endings start re-growing; ability to smell and taste is enhanced

**6** 1 to 9 months after quitting decrease in coughing, sinus congestion, fatigue, shortness of breath

**5** 2 weeks to 3 months after quitting circulation improves; walking becomes easier; lung function improves

**7** 1 year after quitting excess risk of coronary heart disease is decreased to half that of a smoker

# QUITTING SMOKING TIMELINE

