

ALTERNATIVE RESEARCH INITIATIVE

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Inside

Page 2

Smokers' corner

Page 3

Are nicotine pouches like ZYN safe?
GA makes progress toward a smoke-free future

Page 4

ARI urges release of GATS 2024 data as Pakistan records decline in tobacco use
Tobacco control in LMICs face sustainability crisis, report warns

Communities unite to end smoking in Pakistan

The Alternative Research Initiative (ARI) and its partner organizations have conducted awareness sessions on ending smoking in seven districts of Punjab and Sindh, aiming to engage local communities, tobacco users and students in efforts to save youth from smoking and help adults quit. In June, ARI conducted four community meetings in collaboration with partner organizations. As part of the ARI, Sun Consultants and Enterprises Services held community meeting in Multan, Rural Development Foundation in Jamshoro, and Dove

Foundation in Bawalpur and Lahore. Likewise, ARI held each session with smokers,

tobacco users and vapers in collaboration with Maimar Development Organization in Faisalabad, Sun Consultants and Enterprises Services in Multan, Rural Development Foundation in Jamshoro, Humanitarian Organization for Sustainable Development in Hyderabad, and Dove Foundation in Lahore. Additionally, one session with students was held by Nari Foundation in Sukkur. These meetings brought together community leaders, civil society members, laborers, mothers, smokers, students, and people from different walks of life. Sultan Mehmood, Shehzad Ilyas, Anwar Ali Meher, Fazul Chandio, Romas Bhatti, Farooq Ayub and others addressed the sessions. They elaborated on the health risks of tobacco products, benefits of quitting, cessation strategies and methods for community involvement in preventing youth smoking and helping adults quit.

They shared valuable insights on the harmful chemicals produced by burning tobacco, which cause chronic diseases, including cardiac arrest, severe cough, COPD, loss of appetite,

and various types of cancer. Statistics revealed that smoking kills 160,000 people in Pakistan annually, with an economic cost of Rs. 615 billion, accounting for 1.6% of the country's GDP. Conversely, quitting smoking brings immediate benefits, improving health, life expectancy, and reducing the risk of cancer and cardiovascular diseases.

The speakers highlighted Sweden's success in becoming the world's first smoke-free country by implementing tobacco control laws and promoting alternative products like Swedish snus and e-cigarettes. They stressed the importance of community involvement in declaring homes and public places smoke-free, educating children about smoking hazards, encouraging open communication with youth, providing medical support to adult smokers, and promoting reduced-risk products.

They emphasized that tobacco control laws exist in Pakistan, but their implementation and provision of effective cessation services remain a challenge, resulting in less than 3% of smokers quitting successfully each year. They informed smokers about methods to cope with nicotine withdrawal symptoms and educated participants on effective cessation



speakers also shared useful methods for educating children and youth on managing stress, peer pressure, and resisting smoking.

strategies, including tobacco harm reduction, nicotine replacement therapy, medication, and counseling. The

Smokers' corner

Unsuccessful quit attempts

Muhammad Adnan, 41, a salesman, started smoking at the age of 20 with friends. What began as a casual activity for fun quickly turned into a daily habit, and within six months he had become a regular smoker. Despite making several attempts to quit, he has never been able to stop smoking permanently. "I tried to quit many times through willpower, but I could not continue for more than a month," Adnan told the Alternative Research Initiative (ARI) in Islamabad.

When he first started smoking, Adnan preferred Dunhill cigarettes. Over the years, however, he switched to Capstan, which he has been smoking for the past seven years. He believes the brand helps control resha (phlegm), although there is no medical evidence that cigarettes relieve such conditions.

Adnan currently smokes up to four cigarettes a day and spends around Rs1,200 every month on cigarettes.

Unlike many smokers who never make an effort to quit, Adnan has tried to stop smoking 10 to 15 times using willpower alone. His longest successful quit attempt lasted about one month before he relapsed.

According to Adnan, travelling with friends and being around other smokers are the main reasons he starts smoking again after attempting to quit.

Although he has made several attempts to quit, Adnan says he has never searched for professional methods or services that could help smokers stop using tobacco.



He is aware that smoking can cause serious health problems, including diseases affecting the lungs and heart. However, he says he has never personally seen a cancer patient suffering because of smoking.

Despite this, Adnan believes smoking has already affected his own health. He says he has been experiencing resha and low blood pressure, which he associates with his smoking habit. "I have been facing resha and low blood pressure for the last four years," he said.

Adnan has never heard of smoking cessation clinics and has never consulted a doctor for help with quitting. While he believes doctors can prescribe medicines to assist smokers, he says the final decision to quit depends entirely on the individual.

He also experimented with an e-cigarette on the recommendation of a friend but found the experience disappointing. "It is harsher than cigarettes and not an alternative," he said.

Despite his repeated unsuccessful quit attempts, Adnan says he does not need professional assistance and believes that stronger willpower is the only thing that would help him quit smoking permanently.

According to estimates, more than 31 million people in Pakistan use tobacco products, including around 17 million smokers. However, awareness about smoking cessation services remains very low, which is one of the reasons why less than three percent of smokers in Pakistan successfully quit each year.

A habit hard to break

Imran Ali, 37, a bike rider, started smoking at the age of 20 after trying cigarettes with friends and a cousin. What began as occasional smoking at social gatherings gradually turned into a heavy habit as family tensions and depression increased his cigarette consumption. Despite knowing the health risks of smoking, Imran has never made a serious attempt to quit, saying stress and depression have repeatedly made it difficult for him to stop.

"I tried to reduce smoking through willpower, but stress and depression forced me to relapse," Imran told the Alternative Research Initiative (ARI) in Islamabad.

Between 2006 and 2010, Imran smoked mainly during social gatherings. However, family tensions and depression led to a sharp increase in his smoking, with his daily consumption rising from around 10 cigarettes to as many as 20 cigarettes a day.

By 2016, he was smoking around 15 cigarettes daily. Since 2017, his consumption has increased further, and he now smokes nearly two packs of cigarettes every day.

Imran initially smoked Gold Leaf cigarettes but switched to Capstan in 2017 because he believed Gold Leaf changed the color of his urine.

Although he has tried to reduce his smoking through

willpower, but stress and depression have repeatedly pushed him back to his previous smoking pattern.

He has heard about alternative nicotine products and once tried Velo on a friend's recommendation. However, he says the experience was unpleasant and made him believe that such products are more harmful than cigarettes.

"When I used it, I felt a burning sensation after swallowing it and had difficulty breathing," he recalled.

Imran is aware that smoking can cause serious health problems, including heart, liver and kidney diseases. However, he says he has not experienced any smoking-related health problems himself and has never been diagnosed with a smoking-related illness.

Despite being aware of the risks, Imran does not believe professional support is necessary to quit and says stopping smoking depends entirely on an individual's willpower.

"Medicines are dangerous. Quitting is possible through willpower," he said.

Despite his heavy cigarette consumption and attempts to reduce smoking, Imran says he does not seek medical assistance for quitting.

"I will never seek medical help. I will try to quit through willpower alone," he said.

Are nicotine pouches like ZYN safe?

No product that contains nicotine is 100% safe, including nicotine pouches. Nicotine is an addictive stimulant. However, nicotine pouches are less risky to health than combustible cigarettes, which contain nicotine and hundreds of harmful chemicals—including many that cause cancer.

On June 30, 2026, the U.S. Food and Drug Administration (FDA) authorized 20 ZYN nicotine pouch products to carry a specific claim: that switching from cigarettes to ZYN lowers the risk of several smoking-related diseases. ZYN had already been authorized for sale in the U.S. since January 2025.

This new claim applies only to these 20 named ZYN products, not to other ZYN products not included in the authorization. This is the first time a nicotine pouch has been granted clearance to use this kind of marketing language. Previously, the FDA authorized Swedish Match's General-brand snus (pouches that contain ground tobacco) to use nearly identical language, and has separately allowed certain heated tobacco products to make related, but narrower, claims about reduced exposure to harmful chemicals.

Specifically, the FDA said that ZYN can include marketing that says: "Using ZYN instead of cigarettes puts you at a lower risk of mouth cancer, heart disease, lung cancer, stroke, emphysema, and chronic bronchitis."

What is in a nicotine pouch?

Nicotine pouches contain nicotine, the addictive stimulant in tobacco, along with flavorings. They do not contain many of the harmful byproducts found in cigarette smoke, which remains the leading preventable cause of death worldwide.

Global health authorities including the FDA have concluded that nicotine pouches, which do not contain tobacco, are significantly less risky than cigarettes. However, this does not mean that they are completely safe or risk-free.

Are Zyn or other nicotine pouches addictive?

Because nicotine pouches contain nicotine, they are addictive. As a result, they are not suitable for youth or those who have never used nicotine products.

However, if an adult who smokes switches entirely to using nicotine pouches or other less-risky forms of nicotine like e-cigarettes or heated tobacco products, they can significantly lower their long-term health risks. This is called "tobacco harm reduction." It is a life-saving public health strategy for those who cannot or will not quit smoking using traditional methods, like nicotine replacement therapies or certain pharmaceutical interventions.

The bottom line:

There is enough scientific data present for the FDA to allow ZYN nicotine pouches to include claims that they can lower the risks of several specific diseases for a person who smokes and switches entirely. Global health authorities, including the FDA, agree that authorized nicotine pouches in general are less harmful than combustible cigarettes.

ZYN and other nicotine pouches are not safe or entirely risk-free; they are addictive. But they can be a form of tobacco harm reduction for adults who cannot or will not quit smoking otherwise.

<https://globalactiontoendsmoking.org/news-and-press/-/press/are-nicotine-pouches-like-zyn-safe/>

GA makes progress toward a smoke-free future

By Pamela Parizek

In recent decades, smoking rates have declined in most parts of the world. However, the reduction in smoking rates has stagnated; globally, the smoking rate remains stubbornly around 20%. As a result, even with substantial progress, smoking is still the leading preventable cause of death.

Global Action's mission is to end combustible tobacco use globally, and we are committed to supporting all adults who smoke, no matter where they are on their journey to quit. Our grantees are working on research and initiatives to help us achieve our mission to end combustible tobacco use. This means embracing tobacco harm reduction—which includes the use of reduced-risk nicotine products like e-cigarettes or nicotine pouches—when traditional smoking cessation support isn't enough.

I'm excited to share our 2025 Annual Report with you, which demonstrates the tremendous impact our grantees have had in the last year. With their efforts, we're working to make sure no one who smokes gets left behind.

In 2025, we supported more than 30 grants across more than 20 countries. This research led to the publication of 14 scientific research articles and 15 working papers, and our grantees appeared at 21 conferences and in 14 media articles worldwide.

A few examples of the grants we made in 2025 demonstrate how impactful our work truly is. The first is our unique grant

to Northwell Health. With our funding, Northwell will expand smoking cessation support, including tobacco harm reduction, to populations with elevated smoking rates in Queens. This is the first time a major health care provider in the U.S. has integrated tobacco harm reduction into its smoking cessation and cardiovascular care programs.

The second is the completion of the GA Agricultural Transformation Centre in Malawi. We gifted this state-of-the-art facility to the Lilongwe University of Agriculture and Natural Resources in Malawi to empower smallholder farmers to transition their crops from tobacco to more environmentally and economically stable crops. Already, the GA Centre has aided more than 800,000 farmers, and we are grateful for the opportunity to leave a legacy in the country for years to come.

I'm optimistic about the momentum this work has carried through to 2026. We're continuing our partnerships with many existing grantees and forging ahead with bold new partners who are taking creative approaches to ending combustible tobacco use.

People who smoke deserve the opportunities and resources to quit in the way that works for them. I'm confident that together, we can support the cessation journeys of all adults who smoke.

<https://globalactiontoendsmoking.org/global-action-community-newsletters/>

ARI urges release of GATS 2024 data as Pakistan records decline in tobacco use

ISLAMABAD: Alternative Research Initiative (ARI) and its partners have called upon the federal Ministry of Health to make public the data of the Global Adult Tobacco Survey (GATS) 2024 for Pakistan.

Over the last ten years from 2014 to 2024, according to the GATS 2024, Pakistan has reduced tobacco consumption by 15.7%. In Pakistan, an estimated 22.7 million adults currently use tobacco products. Exposure to secondhand smoke and pervasive tobacco advertising remains widespread, particularly in public spaces and among younger populations. Each year, tobacco-related illnesses claim the lives of approximately 164,000 Pakistanis—equivalent to 450 deaths every single day. The survey was carried out by the National Institute of Population Studies Training and Research, in partnership with the Ministry of National Health Services, Regulations and Coordination—through its Tobacco Control Cell—and the World Health Organization. More than 11,000 interviews were successfully completed, achieving an impressive overall response rate of 95.6%.

“The reduction in the use of tobacco over the last ten years is a

great achievement, but concerns remain, especially when it comes to supporting adult smokers in quitting,” said Arshad Ali Syed, the project director of ARI. “Without supporting adult smokers, Pakistan will not achieve the target of becoming a smokefree country.”

Tobacco claims the lives of up to half of its users who fail to quit. As one of the world’s leading causes of preventable death, it drives a devastating burden of cardiovascular disease, lung disease, strokes, and multiple forms of cancer.

The release of data, according to Arshad, will help organizations working on ending smoking in Pakistan to see in which areas of concerns their interventions are required. “The release of data and its comparison with the 2014 GATS data will provide valuable insights into tobacco use. This will be a critical step forward for public health.”

He stressed that the GATS 2024 findings are vital for provinces to recalibrate their tobacco control strategies. Provincial governments, he noted, require comprehensive support to reinforce and expand their tobacco control initiatives.

Tobacco control in LMICs face sustainability crisis, report warns

Scotland: A new report released by the Centre for Integrative Public Health Management (CIPHM) has raised concerns over the long-term sustainability of tobacco control programmes in low- and middle-income countries (LMICs), despite nearly two decades of international funding and policy support.

The findings show that none of the six countries achieved the threshold required to classify their tobacco control systems as “fully sustainable,” although performance varied widely between nations.

According to the report, Brazil emerged as the strongest performer with a score of 118 out of 130, reflecting robust institutions, strong enforcement mechanisms, dedicated budgets, and comprehensive implementation of tobacco control measures. Mexico and the Philippines followed with moderate scores, while Vietnam and Bangladesh demonstrated partial institutional progress.

Pakistan ranked lowest among the countries assessed, scoring only 35 out of 130. The report attributed Pakistan’s weak performance to limited institutional capacity, inconsistent taxation policies, inadequate dedicated funding, weak coordination mechanisms, and high dependence on tobacco-related revenues. The study argues that tobacco control sustainability should not be viewed merely as a health policy issue, but rather as a broader “political economy” challenge. Researchers noted that countries heavily reliant on tobacco taxation often face a “revenue trap,” where governments struggle to aggressively reduce tobacco consumption because of fiscal dependence on tobacco income. The report also reviewed the impact of the Bloomberg Initiative to Reduce Tobacco Use, launched in 2005 by Bloomberg Philanthropies. Since its inception, the initiative has committed more than US\$1.5 billion globally to support smoke-free laws, graphic warning labels, taxation reforms, advertising bans, and public awareness campaigns in developing countries.

In Pakistan, Bloomberg-supported projects contributed to strengthening the National Tobacco Control Cell, promoting smoke-free city initiatives, introducing graphic health warnings, and supporting tobacco taxation reforms between 2008 and 2011. Similar support was extended to other countries through collaboration with organizations such as the World Health Organization, The Union, and the Campaign for Tobacco-Free Kids. However, the CIPHM report concludes that external donor funding alone has not been sufficient to create durable, self-sustaining tobacco control systems in LMICs. The study identified major gaps in national budgeting, research capacity, governance structures, monitoring systems, and inter-ministerial coordination. Researchers stressed that many countries still lack dedicated budgets for tobacco control, long-term institutional planning, and trained personnel capable of sustaining programmes independently once international funding declines.

The report recommends a multi-dimensional strategy to strengthen sustainability, including improving institutional governance, diversifying government revenue sources, enhancing collaboration with civil society and the private sector, and gradually transitioning from donor dependence toward nationally financed programmes.

The report encourages open discussions with all stakeholders to achieve effective and sustainable tobacco control. CIPHM noted that existing sustainability frameworks do not adequately account for safer nicotine alternatives and called for broader stakeholder discussions on updating international assessment tools.

The organization further recommended comprehensive policy evaluations in all six countries to assess implementation gaps, resource allocation challenges, and alignment with evolving global approaches to reducing tobacco use.

<https://www.dailyparliamenttimes.com/2026/06/01/tobacco-control-programmes-in-developing-nations-face-sustainability-crisis-new-report-warns/>

Established in 2018, ARI is an initiative aimed at filling gaps in research and advocacy on ending combustible smoking in a generation. Supported by the Global Action to Ending Smoking (GA), ARI established the Pakistan Alliance for Nicotine and Tobacco Harm Reduction (PANTHR) in 2019 to promote innovative solutions for smoking cessation.

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