

**Product Display, Advertising, and
Promotion around Secondary Schools**



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Background and Introduction

Tobacco use is the leading cause of preventable death and disease across the globe.¹ Although global estimates of tobacco marketing expenditures are not available, US cigarette manufacturers alone are estimated to have spent over 26 billion US dollars between 2011 and 2013 on advertising and promotion.² Tobacco companies use deceptive and predatory marketing practices to increase consumption of their products, and to make tobacco use appear glamorous or socially acceptable while dismissing the products' adverse health effects.³ Article 13 of the World Health Organization's (WHO) Framework Convention on Tobacco Control (FCTC) calls for a comprehensive ban on all forms of Tobacco Advertising, Promotion, and Sponsorship (TAPS), including the retail display of tobacco products.⁴ Evidence shows that the tobacco industry responds to partial TAPS bans that regulate only certain types of TAPS strategies (such as television or radio) by re-directing their resources to market their brands on unregulated channels such as the point-of-sale (POS).⁵ Numerous longitudinal studies have demonstrated that exposure to tobacco product advertising and promotion increases the likelihood that youth will start to smoke.⁶ The display of tobacco products at the POS has the same effect and influence on behavior as traditional media advertising.⁷ Marketing in retail environments specifically has been shown to increase the likelihood of smoking initiation among youth.⁸ One study found that stores where adolescents frequently shop may contain nearly three times as many marketing materials and shelf space for popular tobacco brands.⁹

The country of Bangladesh signed the FCTC on June 16, 2003, and ratified the treaty on June 14, 2004.¹⁰ Among Bangladesh's population of nearly 161 million people,¹¹ an estimated 25.4% of adults, 9.2% of male youths, and 2.8% of female youths currently use tobacco products on a regular basis.¹² In May of 2013, Bangladesh issued Act Number 16 of 2013, the Act for the Amendment of Smoking and Tobacco Products Usage (Control) Act, 2005.¹³ Section 5 of this law provides that tobacco advertising signage, promotion, and product display are prohibited at the point-of-sale, where advertising is defined as "conducting any kind of commercial programs for encouraging the direct or indirect usage of tobacco or tobacco products."¹³ Bangladesh's tobacco control law currently does not require health warnings on tobacco advertising (as advertising is banned); signage at the point-of-sale indicating that sales to minors are prohibited; or the visible display at the point-of-sale of health warnings on tobacco products.¹³ A previous study by Environmental Council Bangladesh of tobacco retailers found that 38% of cigarette displays were provided by the tobacco industry.¹⁴ Their study also found that 75% of retailers reported being visited by representatives from the tobacco industry and that 60% of surveyed retailers had some sort of advertising posted. Despite the ban on advertising signage, product display, and promotion, these findings indicate that tobacco companies continue to provide marketing to tobacco retailers that contravene the law.

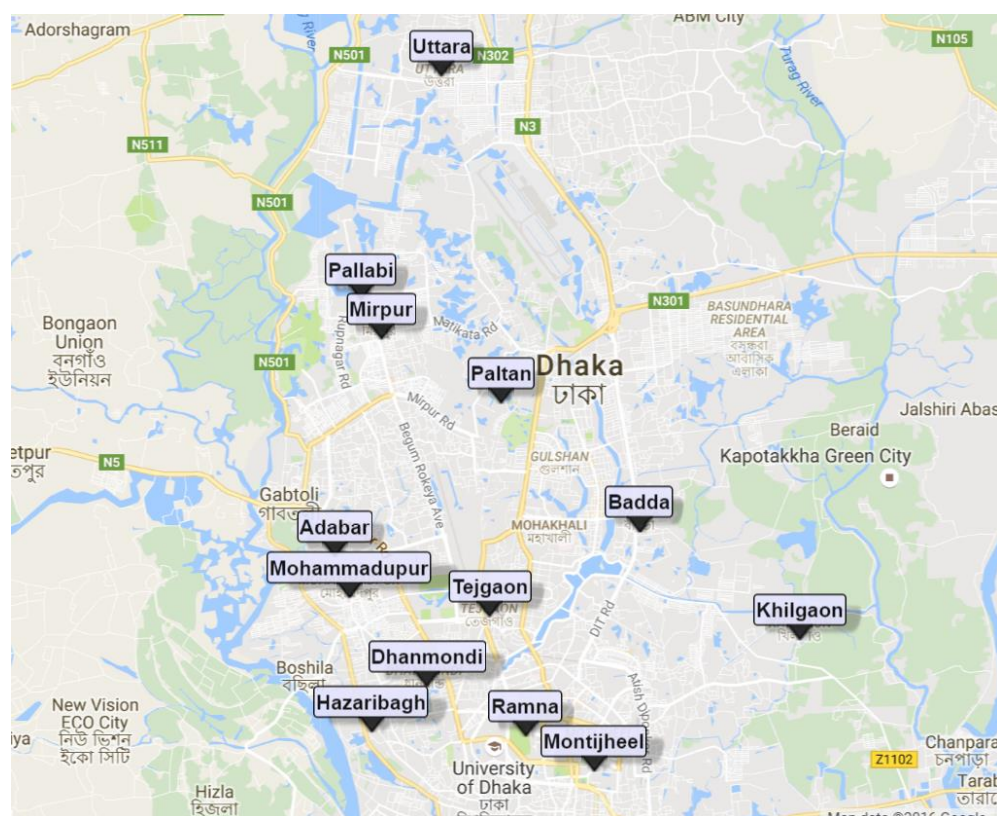
Methods

This report describes a study about tobacco marketing at the point-of-sale in Dhaka, Bangladesh. The work was led by the Institute for Global Tobacco Control (IGTC) at the Johns Hopkins Bloomberg School of Public Health (JHSPH). IGTC partnered with the Campaign for Tobacco Free Kids (CTFK), PROGGA knowledge for progress, a tobacco control advocacy organization, and the Bangladesh Center for Communication Programs (BCCP), a non-profit communications organization. CTFK, PROGGA, and BCCP provided guidance and context about the sampling framework, and IGTC designed the survey instrument and data collection protocol. Investigators from IGTC trained 6 paid BCCP data collectors to conduct the fieldwork and submit daily reports for review in real-time. The IGTC study team was in Dhaka for training and data collection to troubleshoot any logistical or technical issues. Data cleaning, validation, and analysis were carried out by IGTC.

Sampling Approach

This study surveyed tobacco retailers in the city of Dhaka, Bangladesh's capital and largest city with a population of 12 million people.¹⁵ Thirteen neighborhoods were selected within the city, with consideration for the neighborhoods' (1) school density; (2) retail density; (3) and ease of accessibility for data collectors traversing the city via public transportation (Figure 1). Using the Ministry of Education's database, Banbeis: Bangladesh Bureau of Educational Information,¹⁶ 136 secondary schools within the neighborhoods were selected and assigned unique identification codes. An online mapping and distance tool was used to define a sampling area radius of 100 meters surrounding each school, ensuring that none of the sampling areas overlapped. The study surveyed a convenience sample of grocers, tea stalls, tobacco stands, and mobile tobacco vendors within each sampling area that sold, displayed, or advertised tobacco products.

Figure 1. Selected Neighborhoods (n=13)



Survey Instrument

The survey instrument was designed to address key components of Bangladesh's tobacco control law that allow or regulate different types of tobacco product placement, promotion, health warnings, and sales restrictions, as well as known trends in POS marketing that may target youth (Figure 2). The survey also asked whether the store was within eyesight of the school and provided fields for data collectors to enter the sampling area code, retailer address, name brands of tobacco products displayed or advertised, and other notes or comments about the retailer.

Figure 2. Survey Instrument Content

Product Placement and Characteristics	Advertising Type and Characteristics	Type of Promotion
Cashier zone	Advertising signage	Loyalty scheme
Behind the cashier zone	Tobacco accessories with tobacco branding	Presence of brand representative
On a branded stand or cabinet	Other products using tobacco branding	Sponsorship of any event or activity
Eye level of children	Branding of the entire shop/stand	Imitation tobacco products
On a power wall	Digital signage	Contests or competitions
Near sweets, snacks, or soda	Presence of any non-Bengali words	Free gifts
Hanging from the ceiling	Mention of flavor	Free tobacco products
Mention of menthol on packs	Mention of menthol	Discounts
Mention of flavors on packs		Sale of single cigarettes
Packs posted on a display board		
Use of lights		
Signage and Visibility of Health Warnings		
Signage that sales are prohibited to youth under 18 years		
Visible warning labels on all tobacco packs		
All warning labels in Bengali		
Visible warning labels on advertisements		

Data Collection Protocol

Observations and photos were collected from retailers during normal business hours from July 19-21, 2016. Each data collector received a packet of sampling area maps including the unique school identification code and space to record the addresses of retailers in that area (Appendix A). Street names and radii boundaries were clearly visible on all sampling area maps. Data collectors identified grocers, tea stalls, tobacco stands, and mobile tobacco vendors within the sampling area by using the maps to follow a spiral-like walking pattern, observing the first 7 retailers they came to, within the confines of the 100-meter radius. Data collectors used nearest intersections and landmarks to identify the boundary of the radius. A limit on the number of retailers observed per school was instituted due to the high retail density in Dhaka. During a field test conducted by

BCCP, it became apparent that it would take many hours to observe all the retailers even within a 100 meter radius of a school, necessitating a maximum number of observations per school in order to survey a greater number of school areas.

The first 7 grocers, tea stalls, tobacco stands, and mobile tobacco vendors observed around each school were surveyed. If the retailer did not sell tobacco, only the date, address, geo-location, and store type were reported. If the retailer was a mobile tobacco vendor, data collectors also reported if the vendor sold candies, snacks, or sugary beverages, and were asked to take a picture of the vendor. More detailed observations about the display, advertising, and promotion of tobacco products were reported for grocers, tobacco stands, and tea stalls that sold tobacco. Data collectors wrote the address of each retailer they observed on the corresponding sampling area map. Observational data and photos of tobacco product displays, promotions, and advertisements were recorded and uploaded to a cloud-based database in real-time within Magpi, a mobile data collection application installed on smartphones. The mobile app automatically captured the date, geographic coordinates, and data collector name for each record uploaded to the dataset. The order of questions and format of response options were designed to facilitate rapid and discrete observation by data collectors. Data collectors also carried paper copies of the survey to use as an alternative to the mobile app in the event of any technical issue. At the end of each day, data collectors reported the address and sampling area code of each retailer they observed by taking pictures of their sampling area maps, where the address of each retailer had been written, and sending them to IGTC staff. The IGTC study team reviewed these photos daily in order to check the uploaded dataset and ensure that the mobile software application was functioning properly.

Training

Six paid university students attended a full day of training on how to implement the study protocol on July 18, 2016 – immediately before the data collection period. The IGTC study team explained in detail the purpose of the study, the current tobacco control law, the survey content, key terms and definitions, the Mapgi software application, and data collection procedures. Data collectors were instructed to behave as customers in order to discretely observe the retail environment and capture photos. In order to estimate the placement of products at the eye level of children, each data collector used a measuring tape to identify a 1-meter reference point on their body. The data collection team was trained to recognize required health warnings, signage announcing sales restrictions, display boards, and different types of branding and brand stretching. Data collectors were also instructed to document marketing that was visible from outside of the POS. Since the retailers in Bangladesh were open stalls, marketing visible from outside was operationalized as displays, advertisements, or promotions that could be seen without directly approaching the retailer. During the training, data collectors participated in a field test of the study protocol to practice using the survey, mobile app, and data collection procedures in nearby retailers.

Results

Data collectors observed 661 grocers, tea stalls, tobacco stands, and mobile tobacco vendors within a 100-meter radius of 110 schools – 591 of which sold tobacco products. Mobile tobacco vendors were analyzed separately due to the limited number of observations possible for this type of retailer. Out of a total of 84 mobile tobacco vendors observed, 39 also sold candies, snacks, or sugary drinks. Thirty-two of the mobile tobacco vendors that sold candies, snacks, or sugary drinks were within eyesight of a school.

Data collectors made observations around 110 schools, each with a sampling area of 100 meters. In these sampling areas, 507 out of 574 grocers, tea stalls, and tobacco stand observed sold tobacco products (Figure 3). More than half of the tobacco retailers were within eyesight of the school. Tobacco products were displayed around 105 of the school areas observed and at 491 retailers. Of the 110 schools sampling areas observed, only 5 did not have retailers visibly marketing tobacco products within 100 meters of the building.

Figure 3. School Sampling Zones and Tobacco Retailers Observed by Thana

District	School Sampling Zone Selected	School Sampling Zones Observed	Tobacco Retailers Observed
Uttara	17	15	74
Khilgaon	19	16	69
Mohammadpur	19	16	61
Motijheel	11	10	55
Ramna	13	10	45
Dhanmondi	14	14	42
Badda	7	6	38
Pallabi	10	6	37
Mirpur	8	4	25
Tajgaon	5	4	20
Hazaribagh	4	3	15
Adabar	5	3	11
Paltan	2	2	8
Gulshan	2	1	7
Total	136	110	507

One hundred sixty tobacco retailers of those observed posted advertising signage from the tobacco industry at the point-of-sale (Figure 4), and 98 of these retailers were within eyesight of a school. Advertising signage was commonly observed in retailers and only 17 out of 160 retailers with advertising signage had any kind of voluntarily displayed health warning on all posted advertisements. It appears that the population is subjected to tobacco advertising without the juxtaposition of the health consequences of tobacco product use.

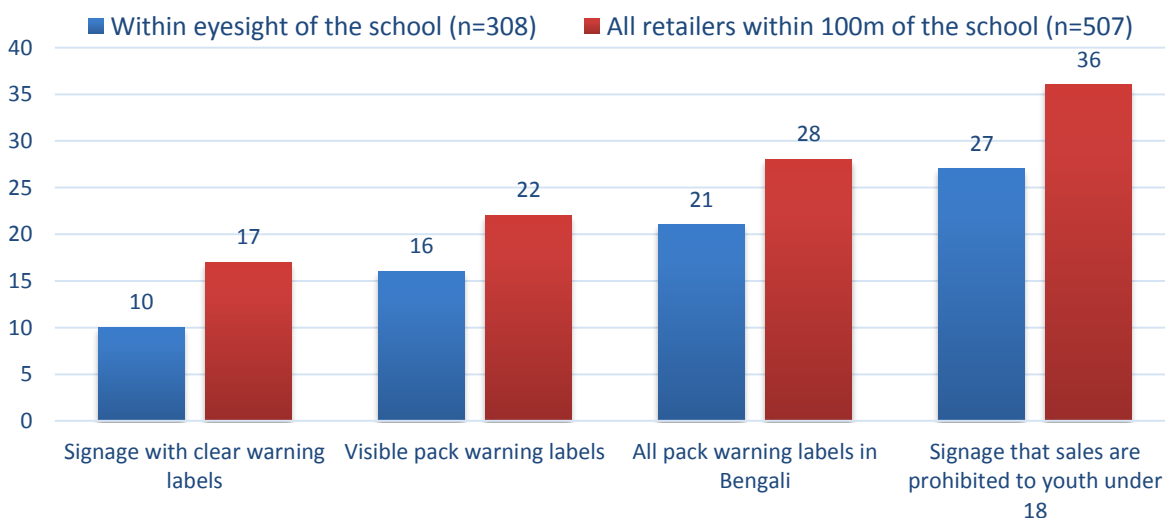
Figure 4. Winston advertising signage at a Point-of-Sale



While warning labels may have been present on tobacco products, these warnings were only visible on all displayed tobacco products at 4% of tobacco retailers. Many tobacco products were displayed so that the warning label was obscured, either by the structure of the display case, or having the sides, rather than the face of the package visible. There were also many visible packs that had warning labels that were not in Bengali.

Very few (36) retailers voluntarily displayed any type of age restriction sign and 27 of these retailers were within eyesight of a school (Figure 5).

Figure 5. Number of Retailers with Visible Health Warnings and Age Restriction Signage

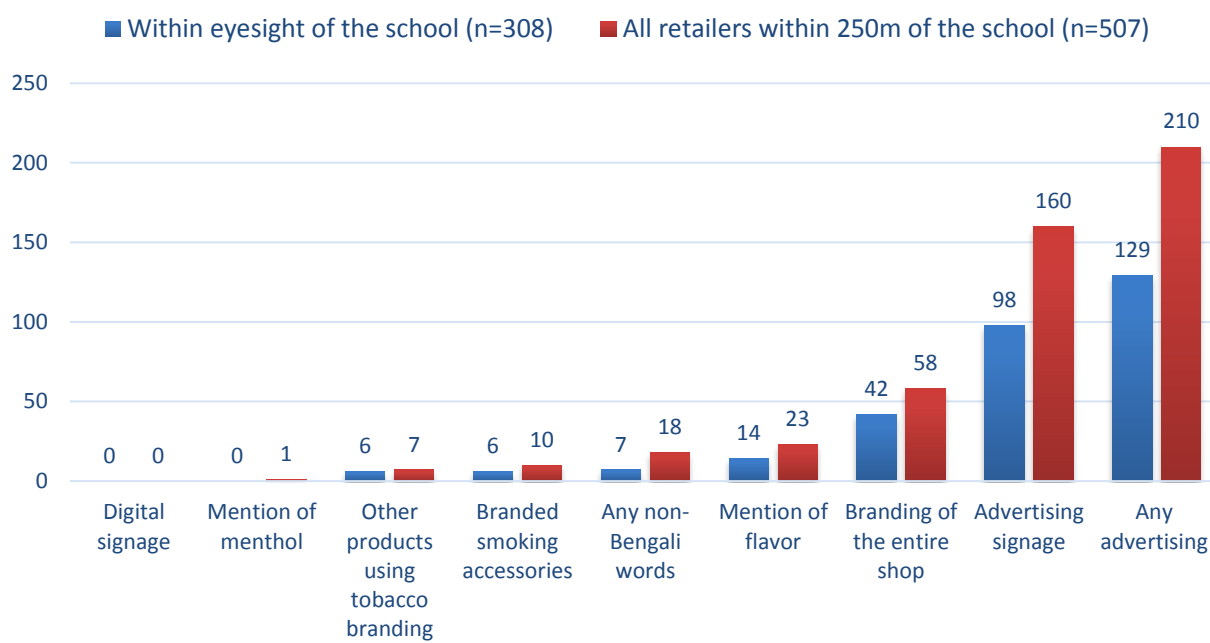


Many shops and stands were completely branded, with posters for specific brands completely wrapping some tobacco stands (Figure 6). Flavor was mentioned on tobacco advertising signage at 23 observed retailers and non-Bengali words were used on signage at 18 observed retailers. Almost a third of observed tobacco retailers had advertising signage for tobacco products. Over 40% of observed retailers used at least one of the listed advertising strategies (Figure 7).

Figure 6. Winston Branded Tobacco Stand



Figure 7. Number of Tobacco Retailers with Tobacco Product Advertising



Some retailers gave away free tobacco products to promote brands. Few retailers used other promotional marketing tactics, such as discounts and free promotional gifts (Figure 8). Sale of single cigarettes, however, was very common, with 500 retailers (99%) selling single cigarettes, 303 of which were within eyesight of schools. Single cigarettes, being less expensive than a full pack, might be more accessible to youth who have less expendable income.

Figure 8. Number of Tobacco Retailers using Tobacco Product Promotion

	Within eyesight of the school (n=308)	All retailers within 100m of the school (n=507)
Sale of single cigarettes	303	500
Free tobacco product	4	10
Contests or competitions	2	2
Brand representative	2	5
Discounts	1	1
Promotional gifts	0	2
Imitation tobacco products	0	1
Loyalty scheme	0	0
Sponsorship of event or activity	0	0

Almost all tobacco retailers displayed tobacco products in some way. Tobacco products were often displayed in the cashier zone, and were frequently displayed at the eye level of children (Figure 9). Some retailers displayed tobacco products on display boards and on branded stands or cabinets (Figure 10). Six retailers also displayed tobacco products with mention of flavor (Figure 11).

Figure 9. Number of Retailers with Tobacco Products Displayed

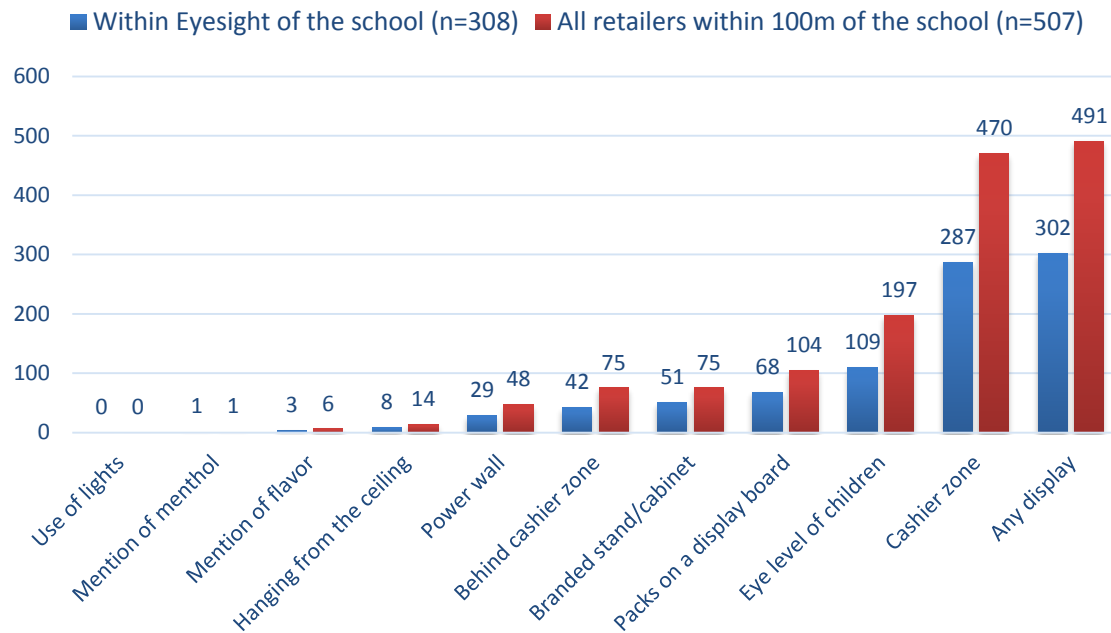


Figure 10. Cigarettes on a Branded Display Board at the Eye Level of Children



Figure 11. Cigarettes with Strawberry and Apple flavor



Data collectors documented which brands were most heavily marketed at each tobacco retailer. Gold Leaf, Benson & Hedges, and Star were the most frequently document brands in grocers, tea stalls, and tobacco stands, followed by Navy, Sheikh, and Hollywood (Figures 12 and 13).

Figure 12. Tobacco Brands Displayed at the Point-of-Sale

Brands Displayed at the POS	# of Retailers
Gold Leaf	493
Benson & Hedges	476
Star	469
Navy	465
Sheikh	455
Hollywood	437
Marlboro	293
Derby	290
Marise	221
Brighton	211
Pilot	156
Pall Mall	144
Winston	126
Bond Street	95
Java Black	27

Figure 13. Popular Brands Visible at the Point-of-Sale



Of the 507 grocers, tea stalls, and tobacco stands that displayed tobacco products, 487 retailers displayed tobacco products with candies, snacks, or sugary drinks (Figure 14). Many of these displays were located in the cashier zone, hanging from the ceiling, and at the eye level of children (Figure 15).

Figure 14. Number of Retailers with Tobacco Products Displayed near Candies, Snacks, or Sugary Drinks

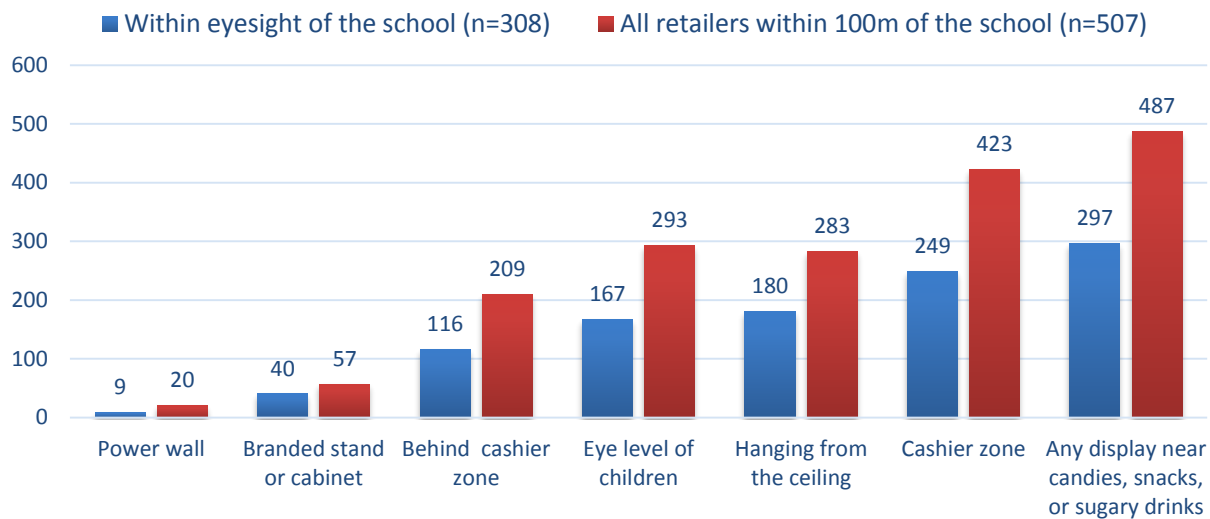


Figure 15. Cigarette Packs Displayed near Candy



Over 80 school areas had at least one retailer who had tobacco marketing that was visible to people who were passing by. While on their way to school, children are likely walking by these retailers and being exposed to tobacco marketing.

Discussion

This study identified numerous examples of mobile tobacco vendors, grocers, tea stalls, and tobacco stands that sell tobacco in close proximity to schools and thus are easily accessible to students.

Advertising signage is still frequently posted at the point-of-sale, and tobacco products are displayed at most retailers. Packaging for tobacco products was often posted on display boards where they serve as advertisements. These display boards could be quite large, and would likely attract the attention of children, especially when candies were displayed directly above them. Tobacco product displays are the most frequent type of tobacco product marketing at the point-of-sale around the schools observed. In many stores near schools tobacco products were displayed alongside products that appeal to children and at the eye level of children. Almost all tobacco retailers sold single cigarettes, giving children easy and affordable access to tobacco products. Although Bangladesh has a mostly comprehensive ban on TAPS, these laws are often contravened and children are still being exposed to aggressive tobacco marketing.

Limitations

This study used a strategic selection of districts, and a convenience sample of schools and the retail locations surrounding them. Therefore, the results may not be representative of all types of tobacco retailers or generalizable to all areas of Bangladesh. Only the first 7 retailers were surveyed, and this may not have been representative of all retailers within a 100 meter radius of the schools selected

Conclusions

Comprehensive bans of tobacco product marketing can only be effective when the tobacco industry is made to follow the law. Bangladesh's tobacco control law aims to "provide provisions for controlling production, use, sale and purchase of smoking and tobacco products and advertisements thereof," which addresses the fundamental tenants of the FCTC to discourage the smoking and use of tobacco products.¹⁷ While Bangladesh has, for the most part, fulfilled its legal obligation to the FCTC by passing a mostly comprehensive ban on TAPS, lack of compliance with tobacco marketing bans at the point-of-sale impact the effectiveness of the law and result in tobacco marketing near schools. Aggressive marketing was often visible outside the point-of-sale, exposing children to this marketing on their way to school. It would also be beneficial for Bangladesh to require health warnings on tobacco advertising; signage at the point-of-sale indicating that sales to minors are prohibited; and the visible display at the point-of-sale of health warnings on tobacco products - items not required by the current law. This study demonstrates that harmful tobacco products and advertisements are in areas that are visible and accessible to minors. An enforced ban of tobacco product display, advertising signage, and promotion in retail locations would more effectively protect the public from the harms of tobacco products.

Key Terms and Definitions

Advertising (signage): branded print or digital/electronic media such as posters, banners, flyers, or shelf liners that are intended to promote awareness and favorable opinions of a tobacco brand or product

Brand stretching: the presence of non-tobacco items that carry a tobacco brand name

Cashier zone: directly on top of, in front of, or to the side of the counter or cash register where consumers make a purchase

Eye level of children: placement of products 1 meter or less from the ground

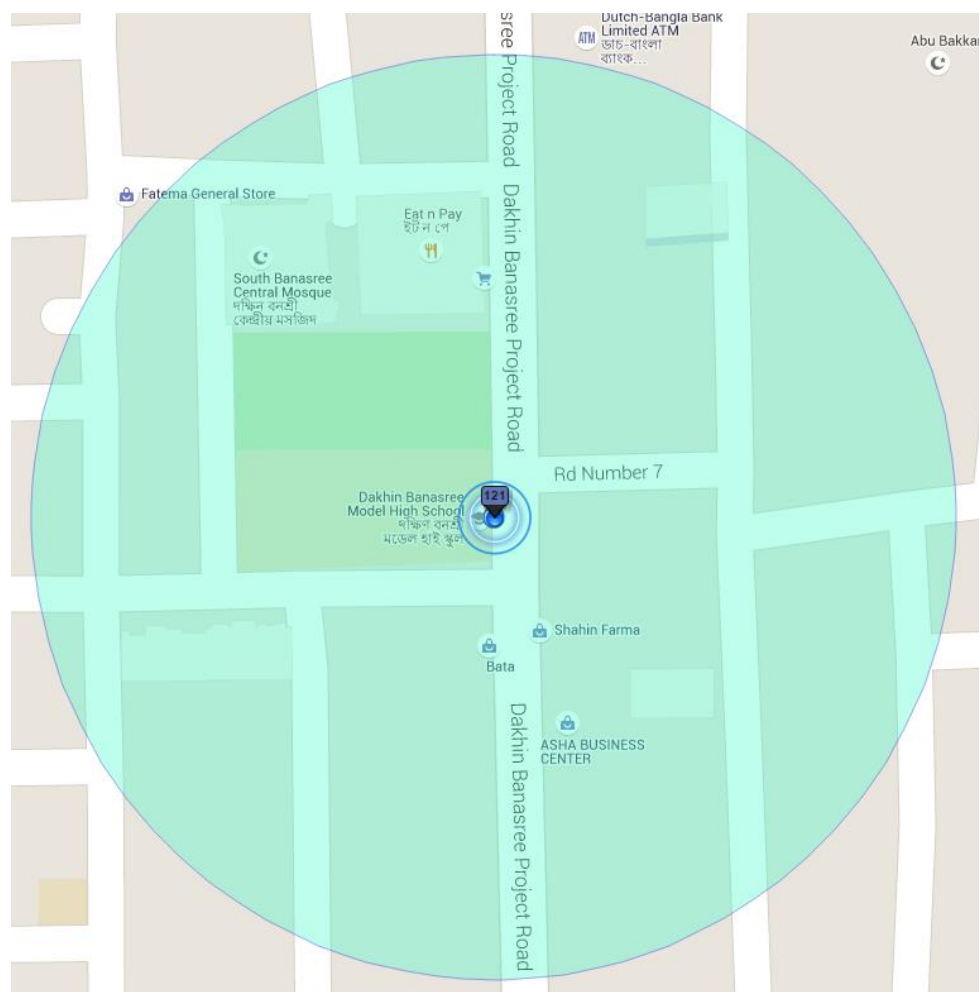
Power wall: an excessive display of tobacco products showing multiple packs on multiple shelves

Product display: physical packs of tobacco products that are visible to potential consumers

Promotion: special or limited time offer that are intended to result in the purchase of a tobacco product

Appendix A. School Sampling Area Map

121. Dakhin Banasree Model High School, 29 Dakhin Banasree Project Road, KHILGAON



Please record the address of each store you observe. If needed, continue lettering and addresses on next page.

A.	F.
B.	G.
C.	H.
D.	I.
E.	J.

References

- ¹ WHO. WHO report on the global tobacco epidemic, 2015 Raising taxes on tobacco. [Accessed 2016 Aug 17] Available at: http://www.who.int/tobacco/global_report/2015/en/
- ² Federal Trade Commission. Cigarette Report for 2013. Issued 2016. [Accessed 2016 Aug 17] Available at <https://www.ftc.gov/system/files/documents/reports/federal-trade-commission-cigarette-report-2013/2013cigaretterpt.pdf>
- ³ Davis RM, Gilpin EA, Loken B, Viswanath K, Wakefield MA. The role of the media in promoting and reducing tobacco use. Tobacco control monograph No. 19. (2008); 359-428.
- ⁴ WHO. Framework Convention on Tobacco Control, 2003 [Accessed 2016 Mar 11] Available at http://www.who.int/fctc/text_download/en/
- ⁵ Dewhirst T. POP goes the power wall? Taking aim at tobacco promotional strategies utilized at retail. Tobacco Control 2004; 13(3): 209-10.
- ⁶ Lovato C, Watts A, Stead LF. Impact of tobacco advertising and promotion on increasing adolescent smoking. American Journal of Public Health 2004;94(12):2081-3.
- ⁷ Thomson G, Hoek J, Edwards R, Gifford H. Evidence and arguments on tobacco retail displays: marketing an addictive drug to children? New Zealand Medical Journal 2008; 121(1276):87-98.
- ⁸ Slater SJ, Chaloupka FJ, Wakefield M, Johnston LD, O'Malley PM. The impact of retail cigarette marketing practices on youth smoking uptake. Archives of Pediatric Adolescent Medicine 2007; 161(5):440-5.
- ⁹ Henriksen L, Feighery EC, Schleicher NC, Haladjian HH, Fortmann SP. Reaching youth at the point-of-sale: cigarette marketing is more prevalent in stores where adolescents shop frequently. Tobacco Control 2004; 13(3):315-8.
- ¹⁰ WHO. FCTC Implementation Database. [Accessed 2016 July 29] Available at: https://treaties.un.org/pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IX-4&chapter=9&clang=_en
- ¹¹ The World Bank. Data: Population, total. [Accessed 2016 Mar 11] Available at: <http://data.worldbank.org/indicator/SP.POP.TOTL>
- ¹² WHO. Report on the global tobacco epidemic, 2015; Country profile: Bangladesh. [Accessed 2016 Aug 1] Available at: http://www.who.int/tobacco/surveillance/policy/country_profile/bgd.pdf
- ¹³ Bangladesh National Parliament. Act NO. 16 of 2013: An Act for the Amendment of Smoking And Tobacco Products Usage (Control) Act, 2005. (2 May 2013). [Accessed 29 July 2016] Available at: <http://tobaccocontrollaws.org/files/live/Bangladesh/Bangladesh%20-%20TC%20Amdt.%20Act%202013.pdf>
- ¹⁴ Bhuiyan, Huhammad E. H., Ovi, Frahana H, Alam, Mahbub, Farheen, Isaba. Documentation on Tobacco Advertising, Promotion, and Sponsorship in Bangladesh. Environment Council Bangladesh, 2014. [Accessed 2016 Aug 1] Available at: <http://ecbangladesh.org/wp-content/uploads/2015/09/Documentation-of-Tobacco-advertising-Promotion-and-sponsorship-in-Bangladesh.pdf>
- ¹⁵ Bangladesh Bureau of Statistics. Bangladesh at a glance: Dhaka division. [Accessed 2016 Aug 1] Available at: http://www.bbs.gov.bd/Census2011/Dhaka/Dhaka/Dhaka_C02.pdf
- ¹⁶ Ministry of Education. Banbeis Bangladesh Bureau of Educational Information and Statistics. All schools lists. [Accessed 2016 Aug 1] Available at: <http://www.banbeis.gov.bd/new/>
- ¹⁷ Bangladesh National Parliament. An Act to provide provisions for controlling production, use, sale, and purchase of smoking and tobacco products and advertisements thereof. Act No. XI of 2005. [Accessed 2 Aug 2016] Available at: <http://www.tobaccocontrollaws.org/files/live/Bangladesh/Bangladesh%20-%20Tobacco%20Control%20Act.pdf>

Acknowledgements

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