Promoting Evidence-Based Strategies to Fight the Global Tobacco Epidemic

The International Tobacco Control Policy Evaluation Project

ITC Korea National Report

FINDINGS FROM THE WAVE 1 TO 3 SURVEYS (2005-2010)

NOVEMBER 2012
Findings from the ITC Korea Wave 1 to 3 Surveys

ITC Korea National Report

2005-2010

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“The Korean government joined the international efforts to reduce supply and demand of tobacco products by ratifying the Framework Convention on Tobacco Control (FCTC) in 2005. Notably, the year 2012 is a significant year for Korea as we host the fifth Conference of the Parties of the FCTC, bringing together delegations from 176 countries. As host of the COP5, we are delighted to release this timely ITC Korea Report.”

Chemin Rim
Minister of Health and Welfare
Republic of Korea
Message

For centuries, human life expectancy has been consistently prolonged with remarkable advances in medical science. However, smoking-related mortality has substantially increased. Every year over 5,000,000 people around the world die from smoking, and about 600,000 from second-hand smoke. It is estimated that social and economic costs associated with smoking exceed five trillion Won per annum in Korea.

To promote the health of our people and reduce harms of tobacco use, the Korean government enacted the Public Health Promotion Act in 1995. With diverse policy efforts including expansion of smoke-free zones, toughened anti-smoking campaigns, and provision of cessation clinic services in public health centers, the adult smoking rate in the country dropped from 35% in 1998 to 27% in 2010. However, the smoking rate among male adults in Korea is still among the highest in the world. And youth smoking requires more attention.

The Korean government joined the international effort to reduce supply and demand of tobacco products by ratifying the Framework Convention on Tobacco Control (FCTC) in 2005. It is the first international treaty negotiated under the auspices of the WHO and the most widely embraced treaty in UN history. Notably, the year 2012 is a significant year for Korea as we host the fifth Conference of the Parties of the FCTC, bringing together delegations from 176 countries. As host of the COP5, we are delighted to release this timely ITC Korea Report.

According to the report, we need to go further in protecting citizens from the harmful effects of second-hand smoke. We are aware that smokers in Korea want more health information on cigarette packs. And the ITC Project has proven in several countries the importance of graphic warnings in awakening smokers to the harms of nicotine and motivating them to quit. We have a plan to adopt these new initiatives.

We are also proud of our national facilities to help smokers quit. The ITC Korea Survey shows that our government-supported smoking cessation clinics are widely attended compared to other countries. We have evidence from other studies that substantiates the cost-effectiveness of these clinics.

Our government is working to introduce stricter regulations. We will require not only pictorial warnings but detailed ingredients on cigarette packs. The sponsorship of events by tobacco companies will be banned as well. We are committed to strengthening tobacco control based on the findings of this report. Thank you.

Chemin Rim
Minister of Health and Welfare
Republic of Korea
The mission of the Korean National Cancer Center (NCC) is to improve national health and welfare by reducing the incidence and mortality of cancer through research, patient care, education and training, and support for the national cancer control programs.

Tobacco use accounts for 30% of all cancer deaths in the Republic of Korea and therefore the NCC understands the importance of tobacco control in cancer prevention. We support research on tobacco control, and we have been fortunate to partner with the International Tobacco Control Policy Evaluation (ITC) Project over the past 7 years on the ITC Republic of Korea Survey.

ITC Project methods have been recognized by the International Agency for Research on Cancer (IARC) as leading the way in using rigorous scientific approaches to understanding population-level interventions such as tobacco control policies. The ITC Korea Survey is a prospective longitudinal study of a nationally representative sample of almost 2000 adult (19 years of age or older) smokers. Smokers were surveyed using computer assisted telephone interviews (CATI) in 2005 (Wave 1), 2008 (Wave 2), and 2010 (Wave 3).

ITC Korea Survey findings point to the need for stronger tobacco control measures in our country.

For example, Koreans continue to be exposed to second-hand smoke in workplaces and public places. In 2010, almost one-third (32%) of smokers reported that they observed smoking indoors at their workplace. The prevalence of smoking indoors is much higher in hospitality venues. In 2010, more than two-thirds (69%) of smokers noticed smoking indoors in restaurants — the highest rate among 10 high-income ITC countries and much higher than in nearly all low- and middle-income countries in the ITC Project (Brazil, Mexico, Malaysia, Mauritius, and Thailand), lower than only China and Bangladesh.

The large decline in price as a reason to quit from 38% of smokers in 2005 to 27% of smokers in 2008 and 2010, coupled with our knowledge that increasing tobacco taxes is the most effective way to decrease smoking prevalence, points to the urgent need to implement substantial cigarette price increases.

The low effectiveness of our small, text-only warnings across all ITC indicators and the strong support among smokers for more health information on packs is an urgent call for no further delays in implementing large, pictorial warnings.

There is a strong infrastructure in place in the Republic of Korea to help smokers to quit. Nationwide government-supported smoking cessation clinics provide free behavioural counseling, nicotine replacement therapy (NRT) and a toll-free Quitline. ITC Korea Survey data demonstrates that use of these services is reasonably strong compared to rates of use of these services in other ITC countries. But we know that it is possible to further increase usage by better promoting these services and increasing smokers’ motivation to use them.

Physicians and other health care professionals can increase successful quitting by providing advice to quit and linking smokers with other cessation support and services.
The ITC Korea Survey shows that half of smokers who visited their doctors received advice to quit in 2010. Although this rate is higher than about half of ITC countries surveyed, including the Netherlands, France, Germany, and Ireland, there is room for improvement to reach the levels achieved in Australia, Canada, and the United States, where more than two-thirds of smokers visiting their physician obtained advice/assistance to quit.

This report — the culmination of three survey waves over 5 years — provides clear evidence on the current low effectiveness of smoke-free, warning label, and price and taxation policies in the Republic of Korea, compared to other ITC countries, even compared to many low- and middle-income countries in the ITC Project.

This report of the ITC Korea Project provides a powerful message that more needs to be done in our country to follow the FCTC guidelines. Doing so will not only decrease tobacco use in Korea, but will also reduce the health burden caused by smoking-related cancers and other chronic diseases.

Sincerely,

Jin-Soo Lee, M.D., Ph.D.
President, National Cancer Center
Message

As in many countries in the world, smoking is the leading cause of death in the Republic of Korea. More than 55,000 people die each year from smoking-related diseases. Our country began to take action to reduce smoking in the mid-1990s, and the result was a tremendous decrease in smoking rates. From 1998 to 2007, smoking rates among males decreased dramatically—from 66.3% to 45.0%. But since 2007, smoking rates have started to go back up, so that in 2010, the male smoking rate was 48.3%. Although women are still much less likely to smoke than men, a similar trend in smoking rates occurred. Female smoking rates declined from 6.5% in 1998 to 5.3% in 2007, but then went back up to 6.3% in 2010.

What was responsible for our great successes in reducing smoking rates so dramatically for a decade? And what was responsible for the alarming increase in the smoking rates since 2007? It is clear that both are related to presence or absence of tobacco control policies, programs, and other interventions.

In 1995, our country demonstrated leadership in tobacco control with the implementation of the Health Promotion Act. This groundbreaking tobacco control legislation provided the framework for comprehensive tobacco control in the Republic of Korea. Under the Act, all forms of tobacco advertising on television, radio, newspapers, and outdoors signs were prohibited. In addition, text warnings on cigarette packs were standardized, smoke-free areas were designated in several public buildings, and a National Health Promotion Fund was established from taxes on cigarettes.

In 2004, the Government implemented a 500 Won increase (approximately 29%) on the average retail price per cigarette pack. The following year, in 2005, the Republic of Korea became one of few countries to establish nationwide government-supported smoking cessation clinics.

And in May 2005, our country became a Party to the WHO Framework Convention on Tobacco Control (FCTC), the world’s first health treaty. The FCTC establishes for all parties—176 countries to date—a clear and definite path toward stronger tobacco control policies. Those countries choosing to follow that path can expect to see reductions in tobacco use.

But in the years that followed the ratification of the FCTC, our country began to slow the pace of our efforts to reduce tobacco use. As a result, we have not made strong and rapid progress towards meeting the obligations of the FCTC. We have lagged behind other member countries, particularly in the implementation of comprehensive smoke-free laws, pictorial health warnings, restrictions on packaging and labelling, and increasing price and tax on cigarettes. And the consequences can be seen in the increases in smoking rates. There is an urgent need for stronger and more rapid efforts in tobacco control.

Much of the evidence from international studies on the effectiveness of FCTC policies comes from the International Tobacco Control Policy Evaluation Project (the ITC Project),
which has conducted many evaluation studies of FCTC policies across more than 20 countries. A large proportion of the evidence base for the effectiveness of FCTC policies comes from ITC Project studies.

Since 2005, we have been fortunate to benefit from the partnership between the ITC Project and researchers centered at the National Cancer Center. The results of three waves of the ITC Korea Survey conducted among adult smokers in the Republic of Korea in 2005, 2008, and 2010 provide evidence that much still needs to be done to strengthen tobacco control in our country. Current smoke-free laws, cigarette warning labels, and packaging and labelling restrictions do not meet the FCTC Guidelines for Article 8 and Article 11 and are not effective. Above all, since the large cigarette tax increase of 2004, there has been no increase in taxation. The ITC Korea Survey data shows that affordability of cigarettes has increased between 2005 and 2010 and as a result, smokers face very little incentive to quit smoking – a consequence that is reflected in the Republic of Korea’s smoking prevalence data.

In all, the ITC Korea findings demonstrate that over the past 5-10 years, we have seen an abrupt loss of momentum that we had going in tobacco control—momentum that had established our country as a leader on what can be done to drive down tobacco use. The ITC Korea findings provide ample evidence of how progress in tobacco control has come to a near stand-still.

We are encouraged by the Ministry of Health’s recent announcement of plans to implement policy changes to strengthen tobacco control. However, in order to reduce the prevalence of smoking in the Republic of Korea and reduce smoking-related morbidity and mortality, the government needs to quickly act to increase tobacco prices and fully implement the FCTC Guidelines. ITC Korea Survey results show that smokers are supportive of strong tobacco control measures – more than 6 out of 7 smokers think that the government should do more to tackle the harm of smoking.

This report provides us with an important guidance document for the development of more effective evidence-based tobacco control policies in the Republic of Korea. We are grateful to the ITC Project at the University of Waterloo for collaborating with us to undertake this much needed study.

Sincerely,

Hong Gwan Seo, M.D., Ph.D.
President of Korean Association on Smoking or Health
“In order to reduce the prevalence of smoking in the Republic of Korea and reduce smoking-related morbidity and mortality, the government needs to quickly act to increase tobacco prices and fully implement the FCTC Guidelines. ITC Korea Survey results show that smokers are supportive of strong tobacco control measures - more than 6 out of 7 smokers think that the government should do more to tackle the harm of smoking.”

Hong Gwan Seo, M.D., Ph.D.
President of Korean Association on Smoking or Health
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“The low effectiveness of our small, text-only warnings across all ITC indicators and the strong support among smokers for more health information on packs is an urgent call for no further delays in implementing large, pictorial warnings”

Jin-Soo Lee, M.D., Ph.D.
President, National Cancer Center
The International Tobacco Control Policy Evaluation Project (the ITC Project) is a multi-country prospective cohort study designed to measure the psychosocial and behavioural impact of key policies of the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) in more than 20 countries.

In 2005, the ITC Project at University of Waterloo began to partner with Dr. Hong Gwan Seo and colleagues at the National Cancer Center, Republic of Korea. The two organizations began to work together to create the ITC Korea Project. The ITC Korea Wave 1 Survey, conducted in December 2005, was made possible with funding from the National Cancer Center, Republic of Korea. Waves 2 and 3 of the Survey, conducted from October to December 2008 and October to December 2010, were funded largely through grants from the National Cancer Institute and Ministry of Health and Welfare, with supplemental funding from Canadian Institutes of Health Research (CIHR) and Ontario Institute of Cancer Research (OICR).

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BACKGROUND

The ITC Project Surveys

The International Tobacco Control Policy Evaluation Project (the ITC Project) is the first-ever international cohort study of tobacco use. Its overall objective is to measure the psychosocial and behavioural impact of key national level policies of the WHO Framework Convention on Tobacco Control (FCTC). The ITC Project is a collaborative effort with international health organizations, researchers, and policymakers in more than 20 countries so far, inhabited by more than 50% of the world’s population, 60% of the world’s smokers, and 70% of the world’s tobacco users. In each country, the ITC Project is conducting longitudinal cohort surveys to assess the impact and identify the determinants of effective tobacco control policies in each of the following areas:

- Health warning labels and pack descriptors
- Pricing and taxation of tobacco products
- Tobacco advertising and promotion
- Smoke-free legislation
- Education and support for cessation

All ITC surveys are developed using the same conceptual framework and methods, and the survey questions, which include more than 150 questions directly relating to policy impact, are designed to be identical or functionally equivalent across all ITC countries in order to allow strong cross-country comparisons. The ITC Project aims to provide an evidence base to guide policies enacted under the FCTC, and to systematically evaluate the effectiveness of these legislative efforts.

The ITC Korea Survey

The ITC Korea Survey is a national survey conducted by researchers at the National Cancer Center, Republic of Korea in collaboration with the ITC Korea Project team centered at the University of Waterloo in Canada. The main objectives of the ITC Korea Survey are:

1) To examine patterns of smoking behaviour and opinions associated with smoking among adults in the Republic of Korea.

2) To examine the impact of tobacco control policies in the Republic of Korea.

3) To compare smoking behaviour and the impact of policies between the Republic of Korea and other ITC countries.

The ITC Korea Survey was conducted after the implementation of several major tobacco control policies in the Republic of Korea including restrictions on advertising, promotion, and sponsorship (1995), standardization of text warnings (1995), a substantial price and tax increase (2004), several major anti-smoking campaigns (1998-2005), and establishment of national cessation clinics (2005). After the Wave 1 (2005) Survey was completed, a national Quitline was established (2006). After the Wave 2 (2008) Survey was conducted, a text warning about carcinogens in cigarette smoke was implemented (early 2009), and local governments were given authority to designate outdoor smoke-free areas (April 2010). Figure 1 (page 17) provides an overview of the ITC Korea Survey dates in relation to the implementation of tobacco control policies in the Republic of Korea.

The ITC Korea Survey findings presented in this report provide evidence of the impact of these tobacco control policies on smokers in the Republic of Korea and identify strengths and weaknesses in the implementation of the FCTC.
KEY FINDINGS

Smoking Behaviour and Smokers’ Perceptions

1. The majority of smokers (96% in 2010) in the Republic of Korea reported that they are daily cigarette smokers. They smoke on average less than one pack (17 cigarettes) a day and virtually all smokers (more than 99%) smoke factory-made cigarettes only.

2. The vast majority of smokers (88% in 2010) wish they had never started smoking. Almost half of smokers (43% in 2010) view smoking “negatively” or “very negatively” and over 80% (86% in 2005, 88% in 2008, 83% in 2010) believe that Korean society disapproves of smoking.

3. The majority of smokers in the Republic of Korea support stronger tobacco control measures. More than 6 out of 7 think that the government should do more to tackle the harm of smoking (86% in 2005, 87% in 2008, 86% in 2010). 62% of smokers in 2010 thought that the government should sue the tobacco companies to recover health care costs. A considerably high percentage of smokers (39% in 2010) would approve of completely banning all tobacco products.

4. Across all three survey waves, taste was the most commonly reported reason among smokers for choosing their current cigarette brand (67% in 2005, 70% in 2008, 69% in 2010), followed by tar and nicotine (48% in 2005, 58% in 2008, 52% in 2010) and “may not be as bad for your health” (34% in 2005, 24% in 2008, 21% in 2010).

5. Price of the brand was cited least often (7% of smokers in 2008, 5% of smokers in 2010) as a factor affecting brand choice decisions.

6. Pack design has become an increasingly important factor in brand selection, as it was identified as a reason for choosing their current brand by 10% of smokers in 2008 and increased to 20% of smokers in 2010.

7. In 2010, almost one-third (29%) of smokers reported having ever tried herbal cigarettes. 3% of those who have tried herbal cigarettes are daily herbal cigarettes users. 4% of those who have tried them use them less than daily but at least once a week, and 2% of those who have tried them smoke them less than weekly, but at least once a month. 80% of those who have tried herbal cigarettes don’t use them at all. The majority (74%) of herbal cigarette smokers use them to help quit smoking, more than half (58%) use them to cut down on smoking, and 43% use them because they believe herbal cigarettes to be less harmful.

8. The majority of smokers (80% in 2010) in the Republic of Korea have heard about electronic cigarettes. Only 16% of smokers who have heard of electronic cigarettes reported ever trying them and 15% of those who have tried them, use them daily.
9. Approximately three-quarters (76% in 2010) of smokers in the Republic of Korea who have heard of e-cigarettes think that these products are less harmful than regular cigarettes. 20% believe they are equally harmful.

10. Almost two-thirds (64% in 2010) of those who use e-cigarettes, use them to help quit. Almost half of those who use them do so because they believe them to be less harmful than regular cigarettes (49% in 2010), to smoke in smoke-free areas (47%), and to cut down on smoking regular cigarettes (47%).

11. The most common source of purchase of e-cigarettes is from a friend or relative (49% in 2010) or from the internet (24%).

**Smoking Cessation**

12. Approximately 80% of smokers at each wave reported that they have tried to quit smoking at some point in the past (81% in 2005, 83% in 2008, and 78% in 2010). The percentage of smokers not planning to quit in the next 6 months has gradually increased over 5 years from 58% of smokers in 2005, 62% in 2008, to 64% in 2010.

13. The majority of smokers are not confident about their ability to successfully quit. Less than a quarter of smokers at each wave (19% in 2005, 23% in 2008, 22% in 2010) were “very sure” or “extremely sure” that they would succeed at quitting.

14. Concern for personal health and concern about the effects of smoke on non-smokers were the reasons most commonly reported by smokers to think about quitting (82% and 73% of smokers respectively in 2010). Disapproval from friends and family and wanting to set an example for children were also frequently cited reasons to quit (62% and 55% respectively in 2010).

15. In 2010, tobacco control policies, such as smoke-free laws, health warnings, anti-smoking advertising, and price of cigarettes were cited by less than a third of smokers as reasons to quit. 30% of smokers cited smoking restrictions at work and smoking restrictions in public places as reasons to quit. 27% cited price of cigarettes, 21% cited advertising/information about the health risks, and 13% cited warning labels as reasons for quitting. These are low compared to other high-income countries in the ITC Project, and suggest that more could be done in the Republic of Korea to encourage smokers to consider quitting by strengthening tobacco control policies. Moreover, all of these policy-related reasons were less frequently cited in 2010 than they were in 2005 and 2008, with the exception of smoking restrictions at work, which increased slightly from 26% in 2008 to 30% in 2010. Price was the reason for quitting that showed the largest decrease between 2005 and 2010, decreasing from 38% of smokers in 2005 to 27% of smokers in 2008 and 2010.
16. Approximately half of smokers (53% in 2008 and 2010) who visited their doctor or health professional received advice to quit. This is approximately the same percentage as in China, but lower than in Thailand and Malaysia where more than two-thirds of smokers who visited a health professional reported receiving advice to quit.

17. The Republic of Korea has a strong national infrastructure to assist smokers in quitting. It is one of very few countries to have government-supported nationwide smoking cessation clinics. The majority of smokers (69% in 2008 and 71% in 2010) had heard about smoking cessation clinics in public health centers. Although less than a quarter of all smokers (12% in 2008 and 16% in 2010) had actually visited a smoking cessation clinic, this percentage is higher than in France, Germany, Netherlands, Ireland, Australia, and New Zealand, according to ITC Surveys conducted in these countries. Half (50% in 2008 and 46% in 2010) of smokers in the Republic of Korea are interested in using cessation clinics.

18. 10% of smokers in 2010 had heard of the Quitline, and 2% of all smokers had actually used the service. One-third of smokers (34%) in 2010 said that they would be interested in using a quitline to receive free counselling to help quit smoking.

19. The majority (87%) of smokers in 2010 “support” or “strongly support” a law requiring national health insurance to cover stop-smoking medications.

Smoke-free Public Places and Workplaces

20. The Republic of Korea has not implemented a comprehensive ban on indoor smoking in workplaces and public places as recommended in the FCTC Article 8 Guidelines. Although observed smoking indoors in workplaces has decreased from 47% of smokers in 2005 to 32% in 2010, the decrease is very slight compared to other countries in which workplace bans have been implemented, where smoking in workplaces has decreased to less than 10%. The level of observed smoking in indoor workplaces is higher than other high-income ITC countries such as United States, Canada, Australia, France, and Ireland, and higher than middle-income ITC countries such as Brazil, Mexico, Malaysia, and Mauritius.

21. The Republic of Korea has the highest rate of observed smoking in restaurants and cafés among 10 high-income ITC countries by an enormous margin. In 2010, 69% of smokers noticed smoking indoors in restaurants, only a slight decrease from 2008 when 75% of smokers reported noticing smoking indoors in these venues. This level of observed smoking in restaurants and cafés is much higher than in nearly all low- and middle-income countries in the ITC Project (Brazil, Mexico, Malaysia, Mauritius, and Thailand), lower than only China and Bangladesh.

22. Smokers’ support for complete smoking bans in restaurants and cafés nearly doubled from 17% in 2005 to 30% in 2008, and 29% of smokers in 2010.

23. The Republic of Korea has the highest rate of observed smoking in bars among 16 high- and middle-income countries. Across all three survey waves, 97% of smokers noticed smoking in pubs or bars at their last visit.

24. Smokers’ support for complete smoking bans in bars and pubs has increased since 2005 (6% of smokers) but still remains low at 11% of smokers in 2010. It should be noted, however, that this level of support is similar to the level of support among smokers in Ireland prior to their highly successful implementation of a comprehensive smoke-free law (13%).
25. The majority of smokers (63%) “support” or “strongly support” the Health Promotion Act which designates certain public places as non-smoking areas. In 2010, there was strong support among smokers for a complete outdoor ban at school zones (71%), crosswalks (49%), and outdoor public playgrounds (38%). More than a quarter of smokers supported bans in parks (30%), within 5 meters of a building entrance (29%), and at tourist attractions (27%).

26. The prevalence of smoking in cars with non-smoking passengers and child passengers has decreased over time. In 2005, half of smokers (49%) said they never smoke in cars with non-smokers, increasing to 65% in 2008 and 70% in 2010. Smoking in cars with children decreased from 17% of smokers in 2008 to 8% in 2010.

27. There is strong support among smokers for a ban on smoking in cars with children. 95% of smokers in 2008 and 94% in 2010 said that they would support such a law.

28. The prevalence of home smoking bans in the Republic of Korea has steadily increased between 2005 and 2010 from almost a third (29%) of smokers in 2005 to over half (53%) of smokers in 2010.

**Health Warning Labels**

29. The FCTC Article 11 Guidelines call for countries to implement pictorial warnings covering at least 50% of the principal surfaces of the pack. To date, the Republic of Korea still has smaller text-only warning labels. ITC Korea Survey findings demonstrate that these warnings are not effective among the majority of smokers and in general, all measures of warning label effectiveness have shown a decrease between 2005 and 2010.

30. Noticing warnings decreased slightly from 40% of smokers in 2005 and 2008 to 38% at 2010.

31. Reading/looking closely at health warnings decreased from 35% of smokers in 2005 to 26% in 2008 and 25% in 2010.

32. Health warnings made 34% of smokers think about the harms of smoking in 2005 and 2008. This decreased slightly to 32% in 2010.

33. Health warnings made 17% of smokers think about quitting in 2005. This decreased to 12% of smokers in 2008 and 2010.

34. Only 5% of smokers in 2008 and 4% in 2010 said that they had made an effort to avoid looking at or thinking about the labels.

35. In 2005, 16% of smokers reported that the warnings had stopped them from having a cigarette when they wanted one at least once. This decreased to 12% in 2008 and 11% in 2010.
36. Tar and nicotine information has been required on cigarette packs since 2002. In 2005, 10% of smokers said they had read or looked closely at this information “often” or “very often” in the last month. This percentage increased to 27% in 2008 and 29% in 2010.

37. In 2010, 19% of smokers said they “often” or “very often” noticed the information about carcinogens in cigarettes that was required on cigarette packs as of 2008. 37% reported that the carcinogen information makes them think about the risks of smoking, and 20% said that the information makes them more likely to quit.

38. Over half (55%) of smokers in 2008 and 2010 reported that they want more health information on cigarette packs. The Republic of Korea has the third highest percentage of smokers of 15 ITC countries wanting more health information on cigarettes packs.

39. In 2010, the majority of smokers (81%) reported that they “support” or “strongly support” a law requiring quitting information on packs, and 83% “support” or “strongly support” a law requiring a quitline number on packs.

### Misleading Brand Descriptors

40. Article 11 of the FCTC calls for countries to ban the use of misleading descriptors (such as “low tar”, “light”, “ultra-light”, or “mild”) and packaging designs that are likely to be misleading about the product’s harmfulness (i.e., the use of lighter colours to convey that the brand is less harmful). To date, the Republic of Korea has not done so. Almost half (45%) of smokers believed that light cigarettes are smoother on the throat and chest, and almost a third (30%) believed that those who smoke light cigarettes take in less tar and that light cigarettes are less harmful (28%).

41. In 2010, about half of smokers believed that their current brand of cigarettes is smoother on the throat and chest (52%), and lighter in taste (51%).

42. Between 2008 and 2010, pack design became more important and health reasons less important in brand selection. Pack design as a reason for choosing their current brand increased from 10% of smokers in 2008 to 20% of smokers in 2010. In 2008, 24% of smokers identified “the brand may not be as bad for health” as a reason for choosing their current brand. This percentage decreased slightly to 21% in 2010.

43. More than half of smokers support the implementation of plain packaging legislation: 53% of smokers in 2008 and 55% in 2010 “agreed” or “strongly agreed” that tobacco companies should be required to sell cigarettes in plain packages.

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**Australia’s cigarette plain packaging**
44. Article 13 of the FCTC calls for countries to implement comprehensive bans on tobacco advertising and promotion. To date, the Republic of Korea has not implemented a comprehensive ban. Tobacco advertising is still present and noticed in several venues, including newspapers and magazines, and in retail stores where tobacco is sold. In 2010, 37% of smokers noticed cigarettes or tobacco products being advertised on store windows or inside stores where tobacco is sold in the last 6 months. Despite restrictions on advertising in newspapers and magazines (no advertising is permitted in publications intended for women and children; ads are permitted 60 times per year in magazines not targeted towards these groups), 22% of smokers noticed advertising in newspapers and magazines in the last 6 months. 19% noticed ads on posters and billboards in the last 6 months.

45. Tobacco sponsorship of social, cultural, musical, and sports events is permitted in the Republic of Korea, though sponsorship of events targeted toward women and youth is not allowed, and only the name of the sponsor may be advertised, not the product. Sponsored sports events were more commonly reported than sponsored arts events, but less than 10% of smokers reported seeing or hearing about sponsored events of either type in 2010.

46. While the Republic of Korea has implemented many different anti-smoking campaigns over the last decade, still less than a quarter of smokers (15% in 2005, 25% in 2008, 14% in 2010) said that they had “often” or “very often” noticed anti-smoking or quitting information in the last 6 months. This level of noticing is lower than in nearly all high-income countries in the ITC Project.

47. The majority of smokers said they had noticed such information specifically on television (73% in 2005, 76% in 2008, 61% in 2010).

48. Cigarette packs were almost equally as prominent a source of information as television advertisements (58% in 2005, 69% in 2008, 56% in 2010), pointing to the value of health warnings as a cost-effective method for informing the public of the harmfulness of cigarettes.
49. While smokers’ awareness of the health effects of smoking has generally increased across survey waves, overall knowledge was still fairly low in 2010. Just over half of smokers were aware that second-hand smoke can cause heart attacks in non-smokers (56%) and that smoking can cause strokes (54%). Knowledge gaps were also evident for blindness (39%), bladder cancer (30%), and breast cancer (28%).

Tobacco Price and Taxation

50. In 2004, the Republic of Korea increased tobacco taxes by 500 Korean Won (approximately USD $0.50) per pack. Since that time, there has been no tax increase, and the ITC Korea Survey shows the negative impact of this lack of tax increase on efforts to reduce tobacco use.

51. Affordability of cigarettes has increased between 2005 and 2010 with an average annual increase in the affordability index of 1.69%; this demonstrates that the price of cigarettes has not increased in line with income growth. In 2010, smokers only spent on average 3.1% of their income on cigarettes — the lowest percentage of all of the high-income countries in the ITC Project. The Republic of Korea was one of only two of the nine high-income ITC countries included in the analyses where cigarette affordability increased over time.

52. Current price and tax measures are not having a strong effect on smoking behavior. In 2010, very few smokers (only 5%) said that price was a reason for choosing their brand, and only a third (35%) of smokers said that they “often” or “very often” think about the money they spend on cigarettes – among the lowest of high-income ITC countries. Price of the brand was cited least often as a factor affecting brand choice decisions (7% of smokers in 2008 and 5% of smokers in 2010). All indicators of price and tax policy effectiveness showed a decrease over time, and this points to the need for changes in tax policies to reduce demand for cigarettes.

53. There is support among smokers in the Republic of Korea for stronger price and tax policies in Korea. In 2010, approximately a third (31%) of smokers recognized that raising cigarette prices would be effective in reducing smoking prevalence in the Republic of Korea.

54. While the majority of smokers report that they buy their cigarettes from retail stores and there is very little evidence of tax avoidance in the Republic of Korea, the majority (67% in 2008 and 64% in 2010) of smokers say that they support restricting the number of places where cigarettes are sold.
The prevalence of smoking among adult males in the Republic of Korea has gradually decreased since data on smoking prevalence was first collected in 1980, when 79.3% of adult males and 12.6% of (mostly older) adult females smoked. 1 Between 1998 to 2007, the prevalence of smoking among males has decreased dramatically – from 66.3% to 45.0%. However, since 2007, smoking rates have increased. In 2010, male prevalence among males was 48.3%. Although smoking prevalence among females is much lower, a similar trend has occurred. Female smoking rates have declined from 6.5% in 1998 to 5.3% in 2007. In 2010, prevalence rates increased to 6.3%. 2 However, a urine cotinine study conducted in 2010 among adult females under 19 years of age suggests that the female smoking prevalence rate may be much higher than indicated by self-reported data collected in the National Health and Nutrition Survey. According to this measurement study, the smoking rate among this population in 2010 was 13.9%. 3

Smoking Prevalence

The prevalence of smoking among adult males in the Republic of Korea has gradually decreased since data on smoking prevalence was first collected in 1980, when 79.3% of adult males and 12.6% of (mostly older) adult females smoked. 1 Between 1998 to 2007, the prevalence of smoking among males has decreased dramatically – from 66.3% to 45.0%. However, since 2007, smoking rates have increased. In 2010, male prevalence among males was 48.3%. Although smoking prevalence among females is much lower, a similar trend has occurred. Female smoking rates have declined from 6.5% in 1998 to 5.3% in 2007. In 2010, prevalence rates increased to 6.3%. 2 However, a urine cotinine study conducted in 2010 among adult females under 19 years of age suggests that the female smoking prevalence rate may be much higher than indicated by self-reported data collected in the National Health and Nutrition Survey. According to this measurement study, the smoking rate among this population in 2010 was 13.9%. 3

Despite the large gender gap in adult smoking in the Republic of Korea, the gap is much narrower among youth smokers. In 2010, the prevalence of cigarette smoking among students aged 13-18 was 12.1% overall, with 16.6% of males and 7.1% of females currently smoking. 4

The Republic of Korea’s Health Plan 2020 aims to decrease the prevalence of smoking among adult males to 29% by the year 2020. 5
Packaging and Labelling of Tobacco Products

Article 11 of the FCTC states that each Party shall adopt and implement effective packaging and labelling measures. The Article 11 Implementation Guidelines, which were adopted in November 2008, state that health warnings should include graphic images, cover at least 50% of the front and back of the pack, and include distinctive borders to make the warnings more prominent.6

Text-only health warnings on cigarette packages were first introduced in the Republic of Korea in 1976, and though the warning messages have changed several times since then, no pictorial health warnings have yet been implemented, and the size of the warnings remains below FCTC recommendations at 30% of the front and back of the pack.

The wording of the warning messages was standardized in 1986 under the Tobacco Business Act, and the content, size, and location of the warnings were standardized in 1995 when the National Health Promotion Act came into effect.7 The Enforcement Decree of the Tobacco Business Act states that the Ministry of Finance and Economy shall define three or more health warnings to be on tobacco packs, and each health warning shall be circulated for two years. The National Health Promotion Act regulates the content and size of the warnings, stating that the warning should describe that smoking can cause various kinds of disease, and should be placed on the front and back sides of the cigarette package. The Enforcement Decree of the National Health Promotion Act provides more detail on the warning requirements, stating that the warning message should begin with the word “Warning:” and be placed inside a rectangle that covers 30% or more of the front and back areas of individual tobacco packs. The colours of the health warnings are to be complementary colours “which should be distinctive to colors of individual tobacco pack design”, the font should be Gothic lettering, and the warning should be placed at the bottom of the front and back of the pack.8 Table 1 summarizes the text warning labels that have appeared on packs from 1976 to 2011.

In addition to these regulations, the back of the package must state that it is prohibited under law to sell cigarettes to minors under the age of 19, and the sentence “Cigarette smoke contains cancer-causing substances such as naphthylamine, nickel, benzene, vinyl chloride, arsenic and cadmium” has been required on packages since December 15, 2008.9

Article 11 of the FCTC also requires Parties to implement measures to ensure that tobacco packaging and labelling are not misleading, deceptive, or likely to create the false impression that a particular tobacco product is less harmful than other tobacco products. This includes a ban on terms such as, but not limited to, “low tar”, “light”, “ultra-light”, or “mild”. Currently, the Republic of Korea does not prohibit misleading descriptors on tobacco packaging.

The Ministry of Health and Welfare of the Republic of Korea plans to propose a bill of amendment to the National Health Promotion Act in December 2012 to require the phrase “the amount of tar differs by the smokers’ smoking habits” and the phone number of the Quitline run by the Ministry of Health to be added to the existing health warnings.10 On August 6th, 2012, the Ministry of Health and Welfare also announced that it plans to revise the National Health Promotion Act to require pictorial health warnings on cigarette packs and ban words such as “light” or “mild”. The Ministry said that they hope to revise the law by the end of the year and begin enforcing the new rules by early 2013.11
## Table 1: Text warning label messages in the Republic of Korea 1976 – 2011

<table>
<thead>
<tr>
<th>Year</th>
<th>Warning Labels in Korean (with English translation)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1976 to 1989</td>
<td>건강을 위하여 지나친 흡연을 삼갑시다 (For your health, please refrain from smoking too much)</td>
</tr>
<tr>
<td>Dec 1989 to 1996</td>
<td>흡연은 폐암 등을 일으킬 수 있으며, 특히 임산부와 청소년의 건강에 해롭습니다 (Smoking may cause lung cancer and it is especially dangerous for teenagers and pregnant women)</td>
</tr>
<tr>
<td>Mar 1996 to Mar 2005</td>
<td><strong>Front:</strong> 흡연은 폐암 등 각종 질병의 원인이 되며, 특히 임신부와 청소년의 건강에 해롭습니다 (Smoking causes lung cancer and other diseases and it is especially dangerous for teenagers and pregnant women)&lt;br&gt;<strong>Back:</strong> 19세 미만 청소년에게 판매할 수 없습니다 (It is illegal to sell cigarettes to people under 19); 금연하면 건강해지고 장수할 수 있습니다 (You can be healthy and live longer if you quit); 흡연은 중풍과 심장병도 일으킵니다 (Smoking also causes stroke and heart diseases); 흡연은 사랑하는 자녀의 건강도 해칩니다 (Smoking also damages your beloved children); 당신이 흡연하면 다른 사람의 건강도 해칩니다 (Smoking damages others)</td>
</tr>
<tr>
<td>Apr 2005 to Apr 2007</td>
<td><strong>Front:</strong> 건강을 해치는 담배 그래도 피우시겠습니까? (Smoking damages your health. Do you still want to smoke?)&lt;br&gt;<strong>Back:</strong> 19세 미만 청소년에게 판매할 수 없습니다 (It is illegal to sell cigarettes to people under 19); 청소년에게 담배를 판매하는 것은 불법입니다 (It is illegal to sell cigarettes to people under 19); 금연하면 건강해지고 장수할 수 있습니다 (You can be healthy and live longer if you quit); 흡연은 중풍과 심장병도 일으킵니다 (Smoking also causes stroke and heart diseases); 흡연은 사랑하는 자녀의 건강도 해칩니다 (Smoking also damages your beloved children); 당신이 흡연하면 다른 사람의 건강도 해칩니다 (Smoking damages others)</td>
</tr>
<tr>
<td>Apr 2007 to Apr 2009</td>
<td><strong>Front:</strong> 흡연은 폐암 등 각종 질병의 원인이 되며, 특히 임신부와 청소년의 건강에 해롭습니다 (Smoking causes lung cancer and other diseases and it is especially dangerous for teenagers and pregnant women)&lt;br&gt;<strong>Back:</strong> 19세 미만 청소년에게 판매 금지! 당신 자녀의 건강을 해칩니다 (It is prohibited to sell cigarettes to people under 19! It hurts your children's health)</td>
</tr>
<tr>
<td>Apr 2009 to Apr 2011</td>
<td><strong>Front:</strong> 건강에 해로운 담배, 일단 흡연하게 되면 끊기가 매우 어렵습니다 (Smoking damages your health. Once you start smoking, it is very difficult to quit)&lt;br&gt;<strong>Back:</strong> 19세 미만 청소년에게 판매 금지! 당신 자녀의 건강을 해칩니다 (It is prohibited to sell cigarettes to people under 19! It hurts your children's health)</td>
</tr>
</tbody>
</table>
| Apr 2011+       | **Front:** 흡연은 폐암 등 각종 질병의 원인이 되며 내가족, 이웃까지도 병들게 합니다 (Carcinogenic agents such as naphthylamine, nickel, benzene, vinyl chloride, arsenic, cadmium are included in cigarette smoke)<br>**Back:** 19세미만 청소년에게 판매할 수 없습니다. 청소년에게 담배를 판매하는 것은 불법입니다 (It is prohibited to sell cigarette to people under 19. It is illegal) 담배연기에는 발암성 물질인 나프틸아민, 니켈, 벤젠, 비닐 크로릴레이드, 비소, 카드뮴이 들어있습니다 (Carcinogenic agents such as naphthylamine, nickel, benzene, vinyl chloride, arsenic, cadmium are included in cigarette smoke)
Pricing and Taxation

Increasing taxes on tobacco products is considered to be one of the most effective components of a comprehensive tobacco control strategy, particularly among young people. Article 6 of the FCTC obligates countries that have ratified the treaty to adopt pricing and taxation measures that reduce tobacco consumption, such as sales restrictions and limitations on international travelers importing tax and duty-free tobacco products.

The introduction of the Republic of Korea's National Health Promotion Act in 1995 called for a National Health Promotion Fund to be created using taxes levied from tobacco products. In December 2004, the government revised the National Health Promotion Act to increase tobacco taxes by 500 Korean Won per pack, through a tobacco consumption tax and health promotion charge, which was to be used for health promotion activities. This resulted in a 29% price increase, bringing the prices of the two leading cigarette brands to 2,000 (approximately 1.77 USD) and 2,500 Korean Won per pack. This was considered to be a very large price increase for Korea, and was the first time a tobacco tax increase had been made with the purpose of reducing smoking rates. According to the National Health Promotion Act, the Fund created from tobacco taxes is to be used for projects such as anti-smoking education, surveys and research in health care, prevention, diagnosis, and treatment of diseases and cancer, and various other health promotion projects.

There has not been a tobacco tax increase in the Republic of Korea since the December 2004 increase, and currently, the price of the highest-selling cigarette brand remains at 2,500 Korean Won, with taxes making up 62% of the retail price (53% excise tax and 9% value added tax). In July 2012, a member of the ruling party in the Republic of Korea proposed a bill to increase tobacco taxes by linking the excise tax on tobacco to changes in the consumer price index so that cigarette prices would adjust with inflation. However, a similar bill proposed in 2010 was eventually discarded.

The Republic of Korea's tobacco prices are at the lowest level among the Organisation for Economic Co-operation and Development (OECD) countries, and the low rate of increases in the price of tobacco products has been identified as the main cause of the continued high prevalence of smoking in the Republic of Korea. A 2007 study that evaluated cigarette affordability in 60 cities using a cigarette price to daily income ratio (CPDIR) found that the city of Seoul had a very high cigarette affordability (CPDIR = 0.07), and was ranked as having the 13th highest affordability of the 60 cities measured.

One successful tobacco control story for taxation in the Republic of Korea is that until 2009, soldiers in the Korean military were given free, duty-free, or extra money for cigarettes. This was considered to be part of the reason that military personnel have a higher smoking prevalence than civilians. However, the government phased out the policy of supplying tax-free cigarettes so that by 2009, soldiers no longer received allowance for cheap cigarettes.

Taxation of e-cigarettes

Electronic cigarettes (e-cigarettes) are a type of electronic nicotine delivery system that looks like a cigarette but uses battery-powered heat to vaporize nicotine, along with other chemicals and flavours, and does not contain tobacco. As such, they are often marketed as a smoking cessation device that can be used in non-smoking areas and is free of second-hand smoke concerns, but still delivers nicotine to the smoker. However, the safety of e-cigarettes and their efficacy as a smoking cessation device has not been confirmed by scientific research, and the WHO recommends that e-cigarettes should be regulated (or possibly banned), data should be provided to support claims about their safety, and the public should be informed about the possible risks of these devices.

E-cigarettes have been available in the Republic of Korea since 2007, and the sale of these products has been rapidly growing due to aggressive marketing and growing health concerns about cigarettes. In an attempt to regulate these devices, the Korean government placed e-cigarettes containing no nicotine under the jurisdiction of the Korea Food and Drug Administration and classified them as a health supplement. E-cigarettes containing nicotine were classified as a type of cigarette and placed under the authority of the Ministry of Finance, who regulated the Tobacco Business Act to include e-cigarettes. After this, a health promotion tax was placed on e-cigarettes containing nicotine, so that they are now taxed as regular cigarettes. However, they are still not subject to some of the other regulations for cigarettes, including advertising and promotion restrictions.
Tobacco Market and Illicit Trade

Illicit trade is an important issue in tobacco control because it can reduce the impact of price and tax increases on tobacco products, as well as other tobacco control policies such as health warnings on tobacco packs and youth access to cigarettes. Article 15 of the FCTC requires parties to implement effective measures against all forms of illicit trade of tobacco products.

The Republic of Korea opened its market to transnational tobacco companies (TTCs) in 1988, after the United States petitioned against what they deemed unfair trade barriers to foreign cigarette brands.\(^{26}\) At the time, KT&G was a state-owned tobacco monopoly, but since 2002 it has been fully privatised.\(^{27}\) After this market opening, KT&G steadily lost market share, as TTCs increased their market share using aggressive marketing tactics.\(^{28}\) There are four tobacco firms that now dominate the tobacco industry in the Republic of Korea: KT&G, which holds about a 70% market share, and Philip Morris International (PMI), Japan Tobacco International (JTI), and British American Tobacco (BAT), which together hold about a 30% market share.\(^{29}\)

According to the Tobacco Atlas (citing 2011 Euromonitor data), only 0.4% of the total cigarette market in the Republic of Korea consists of illicit cigarettes.\(^{30}\) However, in the Republic of Korea’s 5-year report to the WHO on implementation of the FCTC, they reported that they do not have data on the percentage of smuggled tobacco products in the tobacco market. They also do not require any marking that assists in determining the origin of the product or that identifies legally sold products.\(^{31}\)

Illegal tobacco product transactions are strictly regulated by Korea’s Tobacco Business Act and Tariff Act. Article 12 of the Tobacco Business Act states that “Tobacco manufactured by a manufacturer shall be sold by such manufacturer, and tobacco imported from foreign countries shall be sold by such import and sale business operator” and “no person other than a retailer shall sell any tobacco to the consumers”. In addition, there are strict requirements of those who intend to operate a tobacco manufacturing business, and punishments for any person who has illegally manufactured, imported, or sold tobacco, including fines and imprisonment.\(^{32}\)

Smoke-free Public Places and Workplaces

Article 8 of the FCTC recognizes that exposure to tobacco smoke causes death, disease and disability, and requires Parties to adopt effective measures to provide protection from exposure to second-hand smoke.

Smoke-free policies have been in place in the Republic of Korea since the enactment of the National Health Promotion Act in 1995. This Act designated non-smoking areas in several facilities such as large buildings, theaters, stores, hospitals, schools, concert halls, gyms, and public transportation facilities. Other facilities were later added to the list, including public baths in 1999; youth arcades, game rooms, large restaurants, comic book stores, government buildings, and nursery schools in 2003; and factories, local government buildings, and indoor work rooms in 2006. The majority of these facilities are only required to have non-smoking areas, with the only 100% smoke-free public places being elementary and middle schools, medical centers, and nursery/childcare facilities.\(^{33,34}\)

In April 2010, an amendment to the National Health Promotion Act gave more authority to local governments to expand outdoor smoke-free areas and to levy fines to violators. The capital city of Seoul has since enforced smoking bans in several high-traffic outdoor areas. In June 2011, Seoul city government banned smoking at three major plazas in central Seoul – Chuggye Plaza, Gwanghwamun Square, and Seoul Plaza – and imposed a fine of 100,000 Won (approximately 88 USD) to anyone caught smoking there.\(^{35}\)
In December 2011, the smoking ban was expanded to 314 bus stops and 20 city government-run parks, with fines of 100,000 Won going into effect March 1, 2012. In June 2012, the city extended the ban once again to 1,950 non-smoking areas including parks, children’s playgrounds, squares, and bus stations. By March, 2012, 85 local district offices had banned smoking on boulevards and various public spots, including ten metropolitan or provincial governments: Seoul, Busan, Daegu, Incheon, Gwangju, Daejeon, Ulsan, South Jeolla, South Gyeongsang and Jeju.

In June 2012, the Ministry of Health and Welfare issued an advance notice of an amendment to the National Health Promotion Act that would expand non-smoking areas at the National level. Restaurants, which currently are only required to designate more than half of their business area as non-smoking, will now be required to make the entire business area non-smoking. This will apply to restaurants larger than 150m² from December 8, 2012, to restaurants larger than 100m² from January 1, 2014, and to all other restaurants from January 1, 2015. In addition, expressway service areas and designated cultural heritages were added to the regulations as non-smoking areas.

Education, Communication, and Public Awareness

Under Article 12 of the FCTC, Parties must promote and strengthen public awareness of tobacco control issues through education and public awareness programs on the health risks of tobacco consumption and the benefits of cessation; the Parties must also provide public access to information on the tobacco industry and tobacco control training for health workers, educators, and decision-makers.

The National Health Promotion Act, enacted in 1995, obligates state and local governments to educate and publicize to citizens that cigarette smoking is harmful to health, and adds that governments may support persons or organizations conducting research on anti-smoking.

The Republic of Korea had a low-intensity anti-tobacco media campaign in 1995, and a national anti-smoking campaign got started in 1998, which included a celebrity anti-smoking advertisement strategy.
A more comprehensive anti-smoking campaign including television advertisements and ads featuring television stars began in 2000, after a large increase in the budget for these advertisements.\(^{44, 45}\) A particularly effective television advertisement in 2002 featured one of the Republic of Korea's most popular comedians, Joo-il Lee, who was dying of lung cancer from smoking and encouraged others to quit.\(^{46, 47}\)

In 2005, anti-smoking campaigns were diversified to other television campaigns such as documentaries and concerts, to other forms of media such as internet and posters, and to target groups such as children, women, and military personnel. The expenditures on these campaigns were also increased to 6 billion Won, from 1.6 billion in 2000.\(^{48, 49}\)

Since the expansion of anti-smoking campaigns in 2005, many different campaigns have taken place each year in the Republic of Korea, including specific campaigns targeted toward young children, elementary school students, teenagers, college students, military personnel, and women. These included, among many others, the 2006 ‘Tell the Truth’ television and radio campaign aimed at smokers who continue to smoke despite knowledge of the risks and disapproval from their family, the 2008 ‘Say No’ campaign encouraging non-smokers to say ‘no’ to smoking and including the ‘No, No, No!’ song by popular artists, and the 2009 campaign for a ‘Smoke Free Healthy Korea’.\(^{50}\)

### Tobacco Advertising, Promotion, and Sponsorship

Article 13 of the FCTC requires Parties to adopt effective measures against tobacco advertising, promotion, and sponsorship. Guidelines for Article 13 recommend a comprehensive ban on tobacco advertising, promotion, and sponsorship (or restrictions that are as comprehensive as possible). Included among the recommended measures are bans on: cross-border advertising, promotion, and sponsorship; display of tobacco products at point of sale; tobacco product vending machines; internet sales; and attractive packaging and product features.

The National Health Promotion Act (1995) restricts tobacco advertising on television, radio, in newspapers, and outdoor signage, and prohibits the free distribution of tobacco products. However, tobacco advertising is permitted in the following cases:

- **Advertisements inside a designated retailer's place of business.** This excludes advertisements which can be seen from the outside of the business.

- **Up to 60 published advertisements per year in magazines published no more than once per week, and foreign periodicals published more than once per year.** Periodicals published domestically and written in foreign characters are exempt from these restrictions. Publications intended for women and youth cannot have any tobacco advertising.

- **Sponsorship of social, cultural, musical, and sports events (excluding events for women and youth). Only the name of the sponsor may be advertised and not the product.**

- **Advertisements inside international aircraft or passenger ships.**

Additional regulations from the National Health Promotion Act and the Tobacco Business Act require that advertisements should not include more than the name and kind of the tobacco item, should not directly or indirectly encourage non-smokers to smoke, should not depict a women or youth as a human figure, or include content or forms which are against the contents or intention of the health warning label. Also, health warnings explaining the health risks of smoking are required on any magazine advertisements as well as any stickers and poster advertisements displayed in a retailer's business place.\(^{51}\)

Given these regulations, the primary channels that tobacco industries use to legally market their products to consumers are through print media with predominantly male readership, retail merchandising at point of sale, and cigarette packaging.\(^{52}\)
Cessation

Article 14 of the FCTC promotes the implementation of programs for smoking cessation, including programs for diagnosing, counselling, preventing, and treating tobacco dependence, as well as facilitating accessible and affordable treatments.

The Republic of Korea is one of the few countries in the world to provide nationwide government-supported smoking cessation clinics. The clinics have been operating in 253 public health centers, as well as some other settings, since 2005, and offer behavioural counselling as well as nicotine replacement therapy (NRT). The counselling and NRT are provided free-of-charge in public health center-based clinics. When smokers enroll for counselling, they attend at least three visits at the clinic: the first involves questionnaires, a nicotine dependence test and carbon monoxide measurement, counselling on quitting, and free NRT, if needed. The second and third visits involve carbon monoxide measurement, counselling for withdrawal symptoms, and NRT. After that, counselling continues for 6 months through face-to-face visits, telephone, and e-mail. If the individual has abstained from smoking for 6 months, he or she is classified as having successfully quit and clinic service is discontinued. If the individual does not successfully quit within 6 months, he or she can re-enroll in the program.54, 55

A recent study that evaluated Korea’s smoking cessation clinic effectiveness in 2009 found that 354,554 smokers used the cessation clinics that year; 78% of them had quit after 4 weeks, 40% remained quit after 6 months, and the estimated 1-year quit rate was 28%. The study also found that based on cost per service user and cost per life saved, the clinics provided a highly cost-effective service.56

In addition to the smoking cessation clinics, a national Quitline, or telephone-based cessation service, was launched in 2006 after a successful pilot experiment in 2005. The Quitline has been operated by the National Cancer Center since 2007, with financial support provided by the Ministry of Health and Welfare through funding raised from cigarette taxes. With both a toll-free telephone number and a website (http://quitline.hp.go.kr), the Quitline provides private counselling and support for people who want to quit smoking but cannot make it to clinics or wish to protect their privacy.57, 58 An evaluation of Quitline user satisfaction and its impact on smoking cessation in the Republic of Korea between 2007 and 2009 revealed that 8.7% of adult users (after exclusion of users who relapsed and subsequently re-enrolled) maintained smoking cessation and successfully completed the 1-year Quitline program; 17.4% maintained cessation but had not yet completed the 1-year program period. Those who were satisfied with the contents of the counselling and the coaching protocol had an increased probability of achieving successful cessation. Those who were satisfied with Quitline services reduced the number of cigarettes smoked per day. Coaching skill was the key driver of user satisfaction, while service accessibility, contents of counselling, and coaching protocol were factors that need to be improved for reaching their importance accounted by users.59
Methods

Overview

The International Tobacco Control Policy Evaluation Project (the ITC Project) is an international research collaboration across more than 20 countries – Canada, United States, United Kingdom, Australia, Ireland, Thailand, Malaysia, Republic of Korea, China, Mexico, Uruguay, New Zealand, France, Germany, the Netherlands, Bhutan, Mauritius, Brazil, India, Bangladesh, Kenya, and Zambia. The primary objective of the ITC Project is to conduct rigorous evaluation of the psychosocial and behavioural effects of national level tobacco control policies of the Framework Convention on Tobacco Control (FCTC). The ITC Project is conducting large-scale annual prospective cohort surveys of tobacco use to evaluate FCTC policies in countries inhabited by over half of the world’s smokers. Each ITC Survey includes key measures for each FCTC policy domain that are identical or functionally similar across all ITC countries to facilitate cross-country comparisons. The evaluation studies conducted from the ITC Surveys take advantage of natural experiments created when an ITC country implements a policy: changes in policy-relevant variables in that country from pre- to post-policy survey waves are compared to other ITC countries where that policy has not changed. This research design provides high levels of internal validity, allowing more confident judgments regarding the possible causal impact of the policy. For description of the conceptual model and objectives of the ITC Project, see Fong et al. (2006)\(^{60}\); for description of the survey methods, see Thompson et al. (2006).\(^{61}\)
The International Tobacco Control Policy Evaluation Project in the Republic of Korea (the ITC Korea Project) was created in 2005 to rigorously evaluate the psychosocial and behavioural effects of tobacco control legislation in the Republic of Korea using methods that the ITC Project has employed in many other countries throughout the world. The project objective is to provide an evidence base to guide policies enacted under the FCTC and to systematically evaluate the effectiveness of these legislative efforts.

The ITC Korea Survey: Waves 1 to 3

In 2005, the Korean National Cancer Center (NCC) partnered with the University of Waterloo in Canada to create the ITC Korea Survey. The ITC Korea Survey has three evaluation objectives:

1. To examine patterns of smoking behaviour among adults in the Republic of Korea.
2. To examine the impact of tobacco control policies in the Republic of Korea.
3. To compare smoking behaviour and the impact of policies between the Republic of Korea and other ITC countries.

The Wave 1 Survey was conducted between December 1 and December 20, 2005, less than one year after the Republic of Korea ratified the FCTC. The Wave 2 Survey was conducted between October 15 and December 19, 2008, i.e., after the implementation of the national Quitline. Wave 3 of the ITC Korea Survey was conducted between October 6 and December 10, 2010, after the implementation of mandatory text warnings about carcinogens in cigarette smoke and legislation giving local governments authority to designate outdoor smoke-free areas. Figure 1 illustrates the timeline of the ITC Korea Wave 1 to 3 Surveys in relation to the implementation of tobacco control policies and related initiatives.
Sampling Design

The ITC Korea Survey is a prospective longitudinal study of adult (19 years of age or older) smokers. For the Wave 1 Survey, random-digit dialing was used to ensure random selection of households (with land lines) within strata defined by 16 geographic areas (urban and rural) (see Fig. 2). Allocation of the smoker sample to strata was proportional to the estimated size of the adult population. The next birthday method was used to select a maximum of two respondents (one female adult smoker and one male adult smoker) in households with multiple smokers. In Wave 1, a cohort of 1002 adult smokers was surveyed using computer assisted telephone interviews (CATI).

The study sample in Waves 2 and 3 included cohort participants from the previous waves, as well as newly recruited respondents (the replenishment sample) replacing respondents who were lost to recontact. The households of these new participants were selected based on the same sampling design as Wave 1.

Wave 2 was also designed to increase the total sample size to a desired size of 2000. Due to the three-year gap between Wave 1 and 2, only 441 recontact respondents from Wave 1 could be reached (the retention rate was 44.0% and the corresponding attrition rate was 56.0%). 1377 replenishment respondents were interviewed resulting in a total sample size of 1818 respondents. Wave 3 consisted of 1029 respondents from Wave 2 (the retention rate was 56.6% and the corresponding attrition rate was 43.4%) and 724 replenishment respondents for a total sample size of 1753 adult smokers and former smokers. Further information on the methods of the ITC Korea Surveys can be found in the ITC Korea Technical Reports available at www.itcproject.org.62, 63, 64

Characteristics of the Wave 1 to 3 Sample

ITC Korea Surveys were conducted by Gallup Korea. Smokers were defined as having smoked more than 100 cigarettes in their lifetime and at least one cigarette in the past 30 days. Table 2 provides sample sizes at each wave. Table 3 provides the demographic characteristics of the survey participants at each wave.

Table 2. Total unique respondents interviewed in the Republic of Korea, by wave

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<td>Wave 3</td>
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Table 3. Demographic characteristics of the ITC Korea sample, by wave

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*In Wave 1, quitters only include those respondents who have quit within the past month, whereas in Wave 2 and 3, quitters include those who quit any time within the past month to more than one year ago.
Content of the ITC Korea Survey

The ITC Korea Survey was developed by the project team with members from both the Republic of Korea and the University of Waterloo, Ontario, Canada. Most of the survey methods and survey questions were adapted from the standardized protocols and surveys that have been used in ITC surveys conducted in 21 other countries around the world. In the ITC Korea Survey, each respondent who was categorized as a smoker or quitter was asked to respond to the following types of questions:

Smokers responded to questions on:

1. **Smoking- and cessation-relevant questions.** Smoking history and frequency, as well as current smoking behaviour and dependence, and quitting behaviours;

2. **Knowledge and basic beliefs about smoking.** Knowledge of the health effects of smoking and important beliefs relevant to smoking and quitting, perceived risk, and perceived severity of tobacco-related diseases;

3. **Policy-relevant questions.** Awareness of, impact of, and beliefs relevant for each of the FCTC demand reduction policy domains (warning labels, taxation/price, advertising/promotion, smoke-free policies, light/mild descriptors);

4. **Other important psychosocial predictors** of smoking behaviour and potential moderator variables (e.g., normative beliefs, self-efficacy, intentions to quit);

5. **Individual difference variables** relevant to smoking (e.g., depression, stress, time perspective);

6. **Demographics** (e.g., age, gender, marital status, income, education).

The protocol and questionnaires of the ITC Korea Survey were first developed in English and then translated by the team members. The translations were then reviewed by a third party who has knowledge of Korean linguistic nuances. The ITC Korea Survey questionnaires are available at [http://www.itcproject.org/countries/southkorea](http://www.itcproject.org/countries/southkorea).
Analytic Approach

This report presents findings from the first 3 waves of the ITC Korea Survey (2005-2010). The focus of this report is to inform tobacco control policy development by evaluating the effectiveness of policies as they are implemented in the Republic of Korea over time. Comparisons with other ITC countries are also drawn. This section describes the analytic approach used in this report, including methods used to control for time-in-sample effects and the covariates used in the survey logistic model.

Time-in-sample effects

The longitudinal nature of the ITC Korea Survey allows for the measurement of behavioural responses to tobacco control policies among smokers in the Republic of Korea before and after a new policy is introduced. During the 5 years that the first 3 waves of the ITC Korea Survey were conducted, respondents were lost to attrition, as they are in any longitudinal cohort study. In order to maintain a sufficient sample size, new respondents were recruited at Waves 2 and 3 to replace the Wave 1 and Wave 2 respondents that were not successfully interviewed. Therefore, at Wave 2 and Wave 3, the total set of respondents consists of individuals with different levels of prior participation in the ITC Survey. For example, the Wave 3 sample of respondents consists of 284 smokers and quitters who have participated in all 3 survey waves, 745 smokers and quitters who have participated in 2 survey waves (Wave 2 and Wave 3), and 724 smokers who have participated in 1 survey wave (those who were newly recruited in Wave 3). The composition of the sample is important because responses to survey questions have been shown to vary systematically as a function of the number of times that a respondent has completed the ITC Survey. Newly recruited respondents may vary in their responses compared to those with one prior wave, who may vary from those with two prior waves, and so on. These documented effects are known as “time-in-sample” (TIS) effects and have been found in the ITC Surveys in other countries as well.

The analytic methods described next provide adjustments for time-in-sample and some other potentially confounding effects.

Analytic methods

In order to assess changes in any of the many variables measured in the ITC Korea Survey over time, data from all three waves of the ITC Korea Survey are used to estimate the longitudinal trends in a measure of interest, unless otherwise stated. Quitters are only included in the analysis where the measure of interest is especially relevant for quitters. The analytical data set for smokers in Waves 1 to 3 is based on 3097 unique smokers and has a total of 4292 observations. Among these 4292 observations, 995 are from Wave 1 smokers, 1737 are from Wave 2 smokers, and 1560 are from Wave 3 smokers.

If the same questions are asked across waves and an outcome of interest is categorical then a complex survey logistic regression approach is used to generate standardized or adjusted values of the descriptive statistics (proportions) over time, where feasible. Variables like sex, age group, smoking status, wave, and time-in-sample (the number of times a respondent has participated in the survey, a time-varying quantity over time) can be included in the model as covariates, and the measure of interest is used as the response variable. Strata and cluster information as well as survey weights are also taken into account. Based on the logistic model generated, the time-specific least squares means of the response variable can be calculated using the parameter estimates from the regression model, assuming the overall distributions of the covariates in the data combined across all waves. This approach is called a logistic regression adjustment for descriptive statistics. Similarly, if the measure of interest is continuous, a complex survey regression model is used for adjustment. It should be noted that the resulting predicted means (percentages) depend on the set of covariates chosen for the model. In this report, covariates such as sex, age group, smoking status (daily smokers vs. non-daily smokers), wave, and time-in-sample are used for adjustment except where indicated. Since time-in-sample has the largest impact on adjustments, the estimates are referred to as “adjusted for time-in-sample”. SAS 9.2 is used to calculate both adjusted and unadjusted means.

In cross-country comparisons, since the country samples vary in their composition, the same kind of adjustment is applied. Multi-country comparisons control for differences in age, smoking status, and time-in-sample.
FINDINGS

SMOKING BEHAVIOUR AND SMOKERS’ PERCEPTIONS

The ITC Korea Survey measures many aspects of smoking behaviour, such as cigarette consumption, brand choice, and types of products used. At Wave 3 (2010), new questions about herbal cigarettes and electronic cigarettes were added. Several brands of herbal cigarettes are marketed in Korea as safer cigarettes and as an aid to help smokers stop smoking. Electronic cigarettes have been available in the Republic of Korea since 2007 and have been growing in popularity.

The ITC Survey also includes several measures of smokers’ perceptions and opinions about smoking, such as beliefs about society’s attitude toward smoking, and questions to determine the level of support for stronger government action in tobacco control.

Smoking Behaviour

Cigarette purchasing and consumption

Nearly all smokers at each survey wave (96%) reported that they were daily cigarette smokers (rather than non-daily smokers, such as weekly or monthly). Among the daily smokers, the average number of cigarettes smoked was less than one pack per day (average of 18 cigarettes per day at Waves 1 and 2 and 17 per day at Wave 3).

Almost all of the smokers surveyed report smoking factory-made cigarettes; the prevalence of roll-your-own tobacco use in the Republic of Korea was less than 1% at each survey wave. In addition, the majority of smokers reported buying their cigarettes by the pack rather than in cartons or loose cigarettes: 84% of smokers at Wave 1 and 88% at Wave 2 said that their last cigarette purchase was a pack.

Reasons for choosing current brand

Smokers who had been smoking their current brand for less than a year were given a list of possible reasons for choosing their current brand, and asked if any of those factors was part of their decision to smoke that brand.

At Wave 3, the most often cited brand choice factor was taste (69% of smokers), followed by the tar and nicotine levels (52%), belief that the brand may not be as bad for their health (21%), the design of the pack (20%), their friends smoke that brand (12%), the brand may help them quit (12%), and the price of the brand (5%).

Trends in reasons for brand choices from Waves 1 to 3 can be seen in Figure 3. The large increase in pack design as a reason for brand selection from 10% of smokers at Wave 2 to 20% of smokers at Wave 3 is particularly concerning. Cigarette package design is not regulated in the Republic of Korea, but is used by the tobacco industry as a primary means of marketing and conveying brand image. A further implication of these findings is that the lack of pictorial warnings on packs is providing the tobacco industry with an unrestricted opportunity to use pack designs and colours to convey the impression of a safer cigarette.
Herbal Cigarettes – Behaviours and Perceptions

In the Republic of Korea, both herb-only and herbal-tobacco blended cigarettes are available. The herb-only brand has been approved by the Korean Food and Drug Administration (KFDA) as a smoking cessation aid. Four brands of herbal-tobacco cigarettes have been produced in the Republic of Korea since 2002, after the privatization of the Korea Tobacco and Ginseng state monopoly. These cigarettes are promoted by their manufacturer as reducing the harms of smoking, however these claims are not supported by scientific studies. The ITC Korea Wave 3 (2010) Survey asked smokers whether they had heard of herbal cigarettes or tried them, frequency of use of herbal cigarettes, reasons for use, sources of purchase, and perceptions of harm.

Awareness of herbal cigarettes

84% of smokers in the Republic of Korea have heard of herbal cigarettes.
Almost two-thirds (64%) of smokers who use e-cigarettes, use them to help them quit smoking. Almost half (49%) use them because they think they are less harmful.

**Where people heard of herbal cigarettes**

The majority of those who have heard about herbal cigarettes found out about them through a friend or relative (31%), television or radio (29%), or newspapers or magazines (15%).

**Ever tried herbal cigarettes**

29% of smokers reported that they have ever tried herbal cigarettes.

**Sources of purchase**

The majority (40%) of smokers who bought herbal cigarettes bought them from sources not listed in the survey, 29% bought them from a friend or relative, 10% bought them from a convenience store, gas station or deli-shop etc., and 8% bought them on the Internet.

**Frequency of use among those who have ever tried herbal cigarettes**

3% of those who have ever tried herbal cigarettes are daily users. 4% use them less than daily, but at least once a week; 2% use them less than weekly, but at least once a month, and 12% use them less than monthly. 80% of those who have tried herbal cigarettes don’t use them at all.

**Smokers’ reasons for using herbal cigarettes**

The majority (74%) of smokers who have used herbal cigarettes used them to help quit smoking. More than half (58%) used them to cut down on smoking. 43% use them because they are less harmful and 4% use them because they taste better (see Fig. 4).

**Figure 4. Smokers’ reasons for using herbal cigarettes, Wave 3 (2010)**

* Interpret with caution (high sampling variability)
Perceptions of harm

The majority (70%) of cigarette smokers in the Republic of Korea think that herbal cigarettes are less harmful than regular cigarettes. 24% believe that they are equally harmful than regular cigarettes; 7% think they are more harmful than regular cigarettes.

These results suggest that herbal cigarettes are providing smokers in the Republic of Korea with what they believe is a less harmful cigarette. However, more studies need to be conducted to provide evidence that herbal cigarettes are a safe product and an effective method of quitting smoking.

Electronic Cigarettes – Behaviours and Perceptions

There is growing concern about the use of electronic cigarettes (e-cigarettes) in the Republic of Korea. The ITC Korea Wave 3 (2010) Survey included a set of new questions to assess smokers’ awareness of e-cigarettes, the extent to which they are used, reasons for using e-cigarettes, perceptions of harm, and sources of purchase.

Awareness of electronic cigarettes

The majority of smokers (80%) at Wave 3 reported that they have heard about e-cigarettes. Television or radio (43%) and friends or relatives (33%) were the most common ways that smokers heard about e-cigarettes. Smokers also reported hearing about e-cigarettes through the Internet (8%), somewhere else (not a store, shop, or other mainstream establishment) selling cigarettes (8%), and newspapers and magazines (7%).

Use of electronic cigarettes

Among smokers who have heard of e-cigarettes, 16% have ever used them at Wave 3. Of this 16% of smokers who have ever tried e-cigarettes, 15% use e-cigarettes daily, while half (52%) use e-cigarettes less than daily. Among the corresponding 84% of smokers who have never used e-cigarettes at Wave 3, over one-third (37%) are interested in trying e-cigarettes.

Smokers’ reasons to use electronic cigarettes

Almost two-thirds (64%) of smokers in the Republic of Korea who currently use e-cigarettes at Wave 3 reported that they use e-cigarettes to help them quit smoking (see Fig. 5). Almost half of these current users reported using e-cigarettes because they are less harmful (49%), to smoke in areas where regular cigarettes are banned (47%), and to help cut down the number of regular cigarettes they smoke (47%). Only 6% of current e-cigarette users reported that they use e-cigarettes because of the taste.

Figure 5. Reasons for electronic cigarette use among smokers who currently use electronic cigarettes, Wave 3 (2010)*
Beliefs about the harm of electronic cigarettes

At Wave 3, approximately three-quarters (76%) of smokers in the Republic of Korea who have heard of e-cigarettes think that e-cigarettes are less harmful than regular cigarettes, while 20% believe they are equally harmful. The remaining 3% believe that e-cigarettes are more harmful than regular cigarettes.

Purchases of electronic cigarettes

Among smokers who have ever tried e-cigarettes at Wave 3, the most common source of purchase is from a friend or relative (49%) or from the Internet (24%). Other sources include from somewhere else (not a store, shop, or other mainstream establishment) selling cigarettes (17%), and from advertisements on the television or radio (6%).

Smokers’ Perceptions

Perceived norms about smoking

The ITC Korea Surveys included several measures of perceived norms about smoking. These measures show that smokers view smoking negatively and believe that Korean society disapproves of smoking.

When asked about their overall opinion of smoking, almost half of smokers said that it was “negative” or “very negative”, though this percentage decreased slightly over time: 49% of smokers at Wave 1 had a negative opinion of smoking, followed by 40% at Wave 2 and 43% at Wave 3. The majority of smokers in the Republic of Korea also believe that society disapproves of smoking. Over 80% of smokers at all three waves (86% at Wave 1, 88% at Wave 2, 83% at Wave 3) “agreed” or “strongly agreed” that their society disapproves of smoking.

Regret and support for government action

The ITC Korea Survey assessed the extent to which smokers regret that they smoke by measuring the proportion of smokers who “agreed” or “strongly agreed” with the statement “If you had to do it over again, you would not have started smoking”. Almost 90% of smokers “agreed” or “strongly agreed” with this statement. The majority of smokers support a stronger role for government in implementing tobacco control measures, including specific measures such as suing tobacco companies to recover health care costs, banning cigarettes, and banning all tobacco products completely (see Fig. 6).

Across all three waves, nearly 90% of smokers (88% at Waves 1 and 3, 86% at Wave 2) “agreed” or “strongly agreed” that if they had to do it again, they would not have started smoking.

The ITC Korea Survey provides evidence that smokers support the Korean Government in playing a stronger role in tobacco control.

- The vast majority (more than 6 out of 7 smokers) reported that the government should do more to tackle the harm of smoking (86% at Wave 1, 87% at Wave 2, 86% at Wave 3).
- Close to two-thirds of smokers (66% at Wave 2, 62% at Wave 3) said they “support” or “strongly support” the government suing tobacco companies to recover health care costs caused by tobacco use.74
- More than half of smokers (63% at Wave 1, 56% at Wave 2, 61% at Wave 3) “agreed” or “strongly agreed” that tobacco products should be more tightly regulated.
- More than a third of smokers (37% at Wave 2, 39% at Wave 3) at both Waves 2 and 3 “agreed” or “strongly agreed” with a complete ban on all tobacco products.75
Conclusions

ITC Korea Waves 1 to 3 (2005-10) Survey results found that nearly all smokers are daily smokers who smoke factory-made cigarettes. In choosing their current brand, over half of smokers cited the taste and levels of tar and nicotine as important factors in their brand choice. Pack design has become an increasingly important factor in brand selection.

Smokers generally have negative views of smoking; the majority of smokers say that they regret having started smoking and believe that society disapproves of smoking.

The majority of smokers support stronger government action to protect the public from the harms of smoking. Six out of seven smokers say the government should do more to tackle the harm of smoking. Almost two-thirds think the government should sue tobacco companies to recover health care costs. More than half think that tobacco products should be more tightly regulated and more than one-third support a complete ban on all tobacco products.

The majority of smokers in the Republic of Korea have heard about herbal cigarettes. Less than one-third of smokers have tried them and only 3% of those who have tried them are daily users. The majority of smokers who use herbal cigarettes use them to help quit or cut down on cigarette smoking or because they believe they are less harmful than cigarettes. Further studies are needed to determine the prevalence of use of herbal-tobacco blends and perceptions of harm and reasons for use. Given the lack of ban on misleading descriptors on tobacco packaging and the lack of graphic warnings on packs in the Republic of Korea, it is possible that smokers perceive herbal-tobacco brands as less harmful products.

Electronic cigarettes (e-cigarettes) are growing in popularity in the Republic of Korea. ITC Korea Wave 3 Survey findings demonstrate that the majority of smokers have heard about e-cigarettes, with television or radio being the main medium for hearing about them. While only 16% of smokers surveyed had ever used e-cigarettes, over a third of smokers who haven’t used e-cigarettes said that they are interested in trying them. The most commonly cited reason for using e-cigarettes was for help quitting smoking, which is a concern because the efficacy of e-cigarettes as a cessation device has not been scientifically demonstrated.

Figure 6. Percentage of smokers who support various government actions against the harm of tobacco, by wave*

* The solid lines represent percentages adjusted for time-in-sample while the dashed lines represent the corresponding unadjusted percentages
Guidelines for the implementation of Article 14 of the FCTC encourage Parties to create or strengthen programmes and health-care systems that motivate attempts to quit and provide wide access and resources to support tobacco users who wish to quit. In 2005, the Republic of Korea became one of the few countries in the world to provide national government-supported smoking cessation clinics, which offer free behavioural counselling and nicotine replacement therapy (NRT) to smokers who wish to quit. In addition, a national Quitline (telephone-based cessation service) has been in place since 2006, offering smokers counselling and support for quitting.

The ITC Korea Surveys evaluate smokers’ intentions to quit and reasons for thinking about quitting, as well as their awareness and use of cessation services in the Republic of Korea, including use of cessation clinics and the telephone Quitline.
Smokers were also not very confident in their ability to quit smoking. When asked “how easy or hard would it be for you to quit smoking if you wanted to?”, the majority of smokers at each wave (80% at Wave 1, 85% at Wave 2, 84% at Wave 3) said that it would be “somewhat” or “very” hard to quit. All smokers, regardless if they intended to quit, were also asked “If you decided to give up smoking completely in the next 6 months, how sure are you that you would succeed?”. Less than a quarter of smokers at each wave (19% at Wave 1, 23% at Wave 2, 22% at Wave 3) said that they were “very” or “extremely” sure they would succeed at quitting.

Reasons to Quit Smoking

The ITC Korea Waves 1 to 3 Surveys asked smokers to report on the reasons that led them to think about quitting smoking in the last 6 months, regardless of whether they currently intended to quit. At Wave 3, the most frequently cited reasons for thinking about quitting were (see Fig. 8):

1. Concern for personal health (82%)
2. Concern about effects of smoke on non-smokers (73%)
3. Close friends and family disapprove of smoking (62%)
4. Wanting to set an example for children (55%)
5. Society disapproves of smoking (48%)

Across Waves 1 to 3, more than three-quarters of smokers cited concern for their health (80% at Wave 1, 79% at Wave 2, 82% at Wave 3) and the effect of their cigarette smoke on non-smokers (73%, 69%, 73%) as reasons that had led them to think about quitting.

Over half of smokers also said that disapproval from family and friends (62% at Waves 2 and 3) and wanting to set an example for children (58%, 60%, 55%) had led them to think about quitting at each wave. Approximately half of smokers (48%) at Wave 3 cited society's disapproval of smoking as a reason for quitting, increasing from 44% at Wave 1 and 42% at Wave 2.

Reasons for quitting related to tobacco control policies have shown a declining trend between Wave 1 and Wave 3. The largest decline between Wave 1 and Wave 3 was reported for price as a reason to quit which decreased from 38% of smokers at Wave 1 to 27% of smokers at Wave 2 and Wave 3. Similarly, smoke-free policies at work and in public places have declined over time as a reason for quitting. At Wave 1, a third (35%) of smokers cited smoking restrictions at work as a reason to quit. This decreased to a quarter (26%) of smokers at Wave 2 and increased slightly to 30% of smokers at Wave 3. Smoking policies at work similarly declined from a third (35%) of smokers at Wave 1 to 32% at Wave 2 and 30% at Wave 3.

Advertising or information about the health risks of smoking declined over time from 30% of smokers at Wave 1 to 26% at Wave 2 and 21% at Wave 3.

Advice to quit from a health professional similarly declined from 31% of smokers at Wave 1 to 27% at Wave 2 and 23% at Wave 3.

Free or low cost stop-smoking medications were a reason to quit for 11% of smokers at Waves 1 and 2, and 12% of smokers at Wave 3.

Telephone quitlines were the least frequently identified reason — 6% of smokers across all three survey waves identified quitlines as a reason to think about quitting.

In general, these findings suggest concerns for one’s own health and the health of others and disapproval among friends, family and society are the most common reasons for thinking about quitting among smokers in the Republic of Korea. Smokers also identified setting an example for children as an important reason for quitting. Reasons for quitting that can be influenced by stronger FCTC policy implementation, including the price of cigarettes, smoking restrictions, advertising/information about the health risks, receiving advice to quit from a health professional, and health warnings on cigarette packs, were the least common reasons for thinking about quitting and all showed decreasing influence on quitting thoughts over time.
Figure 8. Percentage of smokers who thought about various reasons to quit “somewhat” or “very much” in the last 6 months, by wave.
Awareness and Use of Cessation Services

Several questions about cessation services in the Republic of Korea, including visits to doctors, smoking cessation clinics, and Quitline services, were added to the ITC Korea Waves 2 and 3 Surveys to evaluate smokers’ awareness and use of these services.

At both Waves 2 and 3, just under half of smokers (47% at Wave 2 and 49% at Wave 3) had visited a doctor or other health professional in the last 12 months (or since the last survey date for recontact respondents). Of these smokers, 53% at both waves had received advice to quit smoking at their visit, 4% received additional help or a referral to another service to help them quit, 1% received a prescription for stop-smoking medication, and 5% (6% at Wave 2) received a pamphlet or brochure on how to quit (see Fig. 9).

Free smoking cessation clinics and a telephone-based Quitline service have been available in the Republic of Korea since 2005 and 2006, respectively, before Wave 2 of the ITC Korea Survey. Smokers at Waves 2 and 3 were asked if they had heard about or used these services, and if they would be interested in using them.

The majority of smokers (69% at Wave 2 and 71% at Wave 3) had heard about smoking cessation clinics in public health centers. Less than a quarter (18% at Wave 2 and 22% at Wave 3) of those smokers (or 16% of all smokers) had actually visited a smoking cessation clinic (see Fig. 10). All smokers were then asked: “Smoking cessation clinics in public health centers provide you with free counseling and free medication to help you quit smoking. Would you be interested in visiting a smoking cessation clinic in a public health center, to receive such services?” About half of smokers at each wave (50% at Wave 2 and 46% at Wave 3) responded they would be interested in using these services.

Smokers were much less aware of the Quitline service: only 9% of smokers at Wave 2 and 10% at Wave 3 had heard of the Quitline. A small percentage (15% at Wave 2, 20% at Wave 3) of these smokers (or 2% of all smokers) had actually used the services (see Fig. 10). All smokers were asked: “A quitline service will provide you with free counselling to help you quit smoking. Would you be interested in using a quitline to receive free counselling?”, and less than half said that they were interested, with a decrease from 44% at Wave 2 to 34% at Wave 3.

All smokers at Waves 2 and 3 were also asked if they had received advice or information about quitting from various sources in the last year (or since their last survey date), but less than 10% of smokers had received advice from any source. The most cited source was local smoking cessation services (10% of smokers at Wave 2 and 8% at Wave 3 had received advice from them), followed by the Internet (6% at Wave 2 and 5% at Wave 3), and telephone or quitline services (3% at each wave) (see Fig. 10).
Support and Opinions about Smoking Cessation Services

Smokers at Wave 3 were asked how effective they think smoking cessation services are in reducing the smoking rate in Korea, and about a third (32%) responded that these services are “moderately” or “very” effective in reducing the smoking rate. Smokers were also asked if they would support or oppose a law requiring national health insurance to cover stop-smoking medications, and the majority (87%) said that they would “support” or “strongly support” such a law.
The Republic of Korea has a strong infrastructure to assist smokers in quitting. ITC Surveys show that smokers’ use of government-supported smoking cessation clinics in Korea (16% in 2010) is higher than in France, Germany, Netherlands, Ireland, Australia, and New Zealand.

Conclusions

The Republic of Korea offers free smoking cessation clinics (including counselling and medication) for smokers, as well as a free telephone Quitline service. At the time these services were evaluated in 2010, smoking cessation clinics were operating on a much larger scale than the Quitline. Smoking cessation clinics were located in 250 public health centres throughout the Republic of Korea and staffed by approximately 700 coaches in total, while the Quitline was staffed by 13 coaches.

Awareness and use of cessation clinics among smokers in the Republic of Korea is high compared to other ITC countries. In 2010, the rate of use of cessation clinics (16% of smokers) was higher than in Canada, US, Netherlands, New Zealand, and Australia. Although only 2% of Korean smokers used the Quitline in 2010, one-third of smokers reported that they are interested in using this service to help them to quit.

Approximately half of smokers (53% in 2008 and 2010) who visited their doctor or health professional received advice to quit. This is approximately the same percentage as in China, but lower than in Thailand and Malaysia where more than two-thirds of smokers who visited a health professional reported receiving advice to quit. There is an opportunity to make Korean smokers more aware of the quitting resources available to them free of charge and ensure that they are accessible to smokers in all areas.

However, smokers must also be motivated to quit smoking in order to use cessation services, and ITC findings demonstrate that while the majority of smokers have made a quit attempt in the past, the majority also have no immediate plans to quit smoking in the future. They are also not confident that they would succeed in quitting if they tried. The main reasons for thinking about quitting among smokers are personal reasons, including their own health and the health of non-smokers, family and societal disapproval, and wanting to set an example for children. Tobacco control policy-related factors, such as the price of cigarettes, health warnings on cigarette packs, and smoking restrictions, were not cited as reasons for thinking about quitting by many smokers, and were mentioned by fewer smokers at each wave. While anti-smoking advertising was not identified as a specific reason for thinking about quitting smoking, it likely had an influence on smokers’ thinking about the health risks and health of non-smokers, which were the two most often reported reasons for thinking about quitting. Overall, these findings demonstrate the need for stronger tobacco control policies and information about the harms of smoking in the Republic of Korea in order to motivate smokers to quit smoking.
SMOKE-FREE PUBLIC PLACES AND WORKPLACES

Smoke-free policies have been in place in the Republic of Korea since the enactment of the National Health Promotion Act in 1995, which required designated non-smoking areas in several facilities. In 2006, between Wave 1 (December 2005) and Wave 2 (October to December 2008) of the ITC Korea Survey, the list of buildings requiring designated smoking areas was expanded, including the addition of factories, local government buildings, and indoor work rooms. However, the only 100% smoke-free public places designated by law are elementary and middle schools, medical centers, and childcare facilities.

In April 2010, between Wave 2 and Wave 3 (October to December 2010) of the ITC Korea Survey, the Act gave authority to local governments to expand outdoor smoke-free areas, and since then, several cities including Seoul have enforced smoking bans in various high-traffic outdoor areas including plazas, bus stops, and parks. The Ministry of Health and Welfare plans to amend the National Health Promotion Act to phase in a complete ban on smoking in restaurants by January 1, 2015. The ban will apply to restaurants larger than 150m\(^2\) as of December 8, 2012, then to restaurants larger than 100m\(^2\) from January 1, 2014.

Smoking in Indoor Workplaces

Around three-quarters of smokers surveyed at each wave said that they currently worked outside of the home (77% at Wave 1, 72% at Wave 2, and 73% at Wave 3). The ITC Korea Survey asked smokers who work outside their home if they had noticed people smoking in indoor areas where they work in the last month (see Fig. 11). At both Wave 1 and Wave 2, almost half of the smokers who work outside the home said that people had smoked indoors at their workplace in the last month (47% at Wave 1, 46% at Wave 2), but this percentage dropped to 32% at Wave 3.

Figure 11. Percentage of smokers who work outside their home who noticed people smoking indoors at their workplace in the last month, by wave

![Figure 11](chart.png)
Support for Smoking Bans in Indoor Workplaces

Smokers at all three survey waves were asked if they think smoking should be allowed in all indoor areas of workplaces, some areas, or not at all. Support for complete indoor smoking bans in workplaces (those who replied “not at all”) increased from 19% at Wave 1 to 31% at Wave 2, then remained about the same at Wave 3, with 32% supporting a complete ban (see Fig. 12). The majority of smokers at each wave said that smoking should be allowed in “some” indoor areas of workplaces (78% at Wave 1, 66% at Wave 2, 64% at Wave 3).

Smoking in Restaurants and Cafés

Smokers who had visited a restaurant or café in the last 6 months were asked whether they had noticed anyone smoking indoors during their last visit. The majority of respondents reported that there was smoking inside the restaurant or café, with 76% of smokers responding “yes” at Wave 1, 75% at Wave 2, and a slight decrease to 69% at Wave 3 (see Fig. 13). ITC cross-country comparisons indicate that the Republic of Korea has the highest rate of observed smoking in restaurants among 10 high income ITC countries (see Fig. 14).
Figure 14. Percentage of smokers and former smokers who observed smoking in restaurants at last visit, by country

*Countries with complete smoking bans in restaurants in effect at time of survey
Support for Smoking Bans in Restaurants and Cafés

Support for complete smoking bans in restaurants and cafés nearly doubled from Wave 1 to Wave 2. At Wave 1, 17% of smokers reported that smoking should “not be allowed at all” in indoor areas of restaurants and cafés. Support increased to 30% at Wave 2, then remained about the same at Wave 3, with 29% of smokers believing that smoking should not be allowed inside restaurants (see Fig. 15).

Smoking in Bars or Pubs

Smoking inside drinking establishments (bars or pubs) is extremely prevalent in the Republic of Korea. At each survey wave, nearly all (97%) of the smokers who had been to a bar or pub in the last 6 months reported that people were smoking inside at their last visit (see Fig. 16). The Republic of Korea has the highest rate of observed smoking in bars among 16 high- and middle-income ITC countries (see Fig. 17).
Figure 17. Percentage of smokers and former smokers who observed smoking in bars if visited a bar in the last 6 months, by country

- United States 2010-11: Females 29.5%, Males & Males 27.2%
- Ireland* 2006: Females 3.0%, Males & Males 5.5%
- Netherlands 2011: Females 47.3%, Males & Males 54.1%
- Canada* 2010-11: Females 2.7%, Males & Males 1.4%
- Australia* 2010-11: Females 6.8%, Males & Males 5.8%
- Germany 2009: Females 46.1%, Males & Males 53.9%
- France* 2008: Females 3.3%, Males & Males 3.5%
- United Kingdom* 2010-11: Females 3.5%, Males & Males 2.9%
- Scotland* 2007: Females 2.2%, Males & Males 3.4%
- Republic of Korea 2010: Females 11.2%, Males & Males 13.3%
- Uruguay* 2010: Females 63.9%, Males & Males 66.0%
- Brazil 2009: Females 45.3%, Males & Males 41.9%
- Mexico 2011: Females 40.9%, Males & Males 44.1%
- Mauritius* 2011: Females 91.5%, Males & Males 91.5%
- Thailand* 2009: Females 44.1%, Males & Males 41.9%
- China 2009-10: Females 91.5%, Males & Males 91.5%

*Countries with complete smoking bans in bars in effect at time of survey

High income

Middle income
Support for Smoking Bans in Bars and Pubs

Smokers’ support for complete smoking bans in bars and pubs in the Republic of Korea is low. Only 6% of smokers surveyed at Wave 1 responded that smoking should “not be allowed at all” in indoor areas of drinking establishments. This percentage increased slightly to 12% at Wave 2, then remained about the same (11%) at Wave 3 (see Fig. 18).

Support for Smoking Bans in Outdoor Public Places

The ITC Korea Survey also assessed smokers’ support for complete smoking bans in a number of outdoor public places. This includes areas that local governments were given the authority to make smoke-free in 2010 (between Wave 2 and Wave 3), and indeed, that some cities already have made smoke-free. The Wave 2 and Wave 3 Surveys asked smokers: “Thinking about the outdoor areas of other public places, for each of the following, do you think that smoking should be allowed in all outdoor areas, in some outdoor areas, or not allowed in outdoor areas at all?”, followed by a list of public places (see Fig 19).

Smokers’ support for a complete smoking ban in outdoor eating areas of restaurants and cafés and pubs and bars increased slightly between Wave 2 and Wave 3 but remains low. The percentage of respondents who replied that smoking should not be allowed in outdoor areas of restaurants or cafés at all increased from 4% at Wave 2 to 10% at Wave 3. In addition, support for no restrictions on outdoor smoking in these outdoor venues weakened during this time. The percentage of smokers who believed that smoking should be allowed in ALL outdoor eating areas decreased by almost half from Wave 2 (57%) to Wave 3 (28%). Similarly, support for a complete smoking ban in outdoor areas of drinking establishments such as pubs and bars increased from 3% to 4% between Wave 2 and Wave 3, but the percentage who thought that smoking should be allowed in all outdoor areas of drinking establishments dropped from 60% at Wave 2 to 48% at Wave 3.

Support for complete smoking bans at bus stops, parks, and on crowded streets all increased from Wave 2 to Wave 3 as well. The percentage of smokers who said that smoking should not be allowed in any outdoor areas of bus stops increased from 30% at Wave 2 to 44% at Wave 3, parks increased from 18% to 30%, and crowded streets increased from 29% to 36%. The percentage of smokers who thought that smoking should be allowed in all areas of those places ranged from only 10% to 17%.

The Wave 3 Survey also assessed support for smoking bans at several additional outdoor areas. There was strong support among smokers for a complete outdoor ban at school zones (71%), crosswalks (49%), and outdoor public playgrounds (38%). More than a quarter of smokers supported bans within 5 meters of an entrance to a non-smoking building (29%) and at tourist attractions (27%).
Smoking in Private Vehicles and in the Home

The ITC Korea Waves 1 to 3 Surveys also assessed the prevalence of smoking in private vehicles when non-smokers are present. The percentage of smokers who said that they “never smoke” when they are in a car or other private vehicle with non-smokers increased from Wave 1 to Wave 3. At Wave 1, 49% of smokers said they never smoke in cars with non-smokers, compared to 65% at Wave 2 and 70% at Wave 3.

The Waves 2 and 3 Surveys included additional questions about smoking in cars with children present. The percentage of smokers who reported that they had smoked in a car with children in it at least once in the last month decreased by about half from Wave 2 to Wave 3, 17% of smokers had smoked in a car with children present at least once at Wave 2, while only 8% had done so at Wave 3.

Support for a law that banned smoking in cars when children are in them remained extremely high at both waves: 95% of smokers at Wave 2 and 94% at Wave 3 said that they would support such a law. Smokers at Wave 3 were also asked about their own rules about smoking in cars with children. Less than 1% of smokers said that smoking is allowed in their car(s) when there are children in them; the majority (88%) said that smoking is never allowed in any of their cars if children are present.
Conclusions

The Republic of Korea has steadily increased the scope of smoke-free public places that are designated by law over the last several years, but the law is still not comprehensive. As a result, although smoking in public places such as workplaces, restaurants, and bars, has decreased from Wave 1 (2005) to Wave 3 (2010), smoking prevalence in public places is still among the highest of all ITC countries, especially in restaurants and bars, where the majority of respondents noticed smoking indoors at their last visit.

More comprehensive smoke-free laws at the National level and strong enforcement of these laws are needed in the Republic of Korea in order to protect employees and non-smokers from second-hand smoke. Findings from the ITC Korea Survey suggest that there is support among smokers for such laws.

Support for smoke-free laws has increased from Wave 1 to Wave 3 for indoor workplaces, restaurants, bars, and several outdoor areas, and support for a complete smoking ban in outdoor school zones is especially high (71%) among smokers. The increase in public support for smoking bans in all outdoor areas after several local governments have implemented smoking bans in various high-traffic outdoor areas is consistent with other ITC research showing that support for smoke-free laws increase after bans are implemented. In fact, the majority (63%) of smokers at Wave 3 said that they support local laws designating smoke-free areas.

Knowledge of and Support for Smoke-free Laws

Between Wave 2 and Wave 3 of the ITC Korea Survey, local governments were given the authority to designate outdoor smoke-free public places. Awareness of this revision of the law was assessed at Wave 3 with the question: “Are you aware that the government recently revised the National Health Promotion Law (May 27, 2010) that says the local governments can designate certain places of public jurisdiction as non-smoking areas by ordinance to offer protection from smoking harms and promote health of local population?” Only 38% of smokers responded that they were aware of the revised law.

The Wave 3 Survey also assessed support for local/provincial laws that designate certain public places as non-smoking areas, and the majority (63%) of smokers said that they “support” or “strongly support” such laws.

In addition, smokers were asked how effective they thought that several different interventions would be in reducing the smoking rate in the Republic of Korea. Roughly a third of smokers (32%) thought that expanding the smoking ban to all public places would be “moderately” or “very” effective in reducing the smoking rate, and a third (32%) of smokers also said that stronger enforcement of smoke-free laws would be effective.
HEALTH WARNING LABELS

Text-based health warnings about the harms of smoking have appeared on cigarette packs in the Republic of Korea since 1976, though the content of the warning messages has changed several times since then. In December 2008, between Wave 2 and Wave 3 of the ITC Korea Survey, the sentence “Cigarette smoke contains cancer-causing substances such as naphthylamine, nickel, benzene, vinyl chloride, arsenic and cadmium” was required on cigarette packages.

Today, the health warnings do not meet the standard set by the Article 11 Guidelines adopted at the November 2008 Conference of the Parties. There is no requirement for the use of pictures and the labels cover only 30% of the front and back of the package. The quitline number is required to be inserted on cigarette packs as of December 8, 2012. The Korean Ministry of Health and Welfare has announced plans to revise the National Health Promotion Act by the end of 2012 to require pictorial warnings on cigarette packs and will begin enforcement in 2013.

Changes in Warning Effectiveness Over Time

The ITC Korea Surveys include a broad set of questions to assess health warning effectiveness, including measures of label salience, cognitive and behavioural responses to the warnings, and support for the warnings.

The survey results indicate that the text warnings on cigarette packs in the Republic of Korea are not effective among the majority of smokers and in general, their effectiveness has decreased over time (see Fig. 21).

Noticing health warnings

The majority of smokers at all three waves did not often notice the health warnings on cigarette packages. At both Wave 1 and Wave 2, 40% of smokers reported that they had noticed the warnings “often” or “very often” in the last month, and at Wave 3, this percentage dropped slightly to 38%.

Reading/Looking closely at health warnings

The percentage of smokers who read or looked closely at the warnings decreased from Wave 1 to Wave 3. At Wave 1, 35% of smokers reported that they had “often” or “very often” read or looked closely at the warning labels in the last month. This percentage decreased to 26% at Wave 2 and 25% at Wave 3.

Thinking about the harms of smoking

Approximately one-third of smokers at each survey wave said that the labels make them think about the health risks of smoking. At both Wave 1 and Wave 2, 34% of smokers said that the warnings make them think about the risks “somewhat” or “a lot”, which decreased slightly to 32% at Wave 3.
Thinking about quitting

Smokers at each wave were asked “to what extent, if at all, do the warning labels on cigarette packs make you more likely to quit smoking?”. At Wave 1, 17% of smokers said that the warnings made them “somewhat” or “a lot” more likely to quit, but this percentage decreased to only 12% of smokers at both Wave 2 and Wave 3.

Avoiding warning labels

The strong majority of smokers at both Wave 2 and Wave 3 said that they had not made any effort to avoid the warning labels in the last month. Only 5% of smokers at Wave 2 and 4% of smokers at Wave 3 said that they had made an effort to avoid looking at or thinking about the labels.82

Foregoing a cigarette

The percentage of smokers who said that the warnings had stopped them from smoking at least once in the last month was also low and decreased across survey waves. At Wave 1, 16% of smokers said that the warnings had stopped them from having a cigarette when they wanted one at least once, which decreased to 12% at Wave 2 and 11% at Wave 3.

Figure 21. Impact of health warnings on smokers’ perceptions and behaviours in the last month, by wave*

* The solid lines represent percentages adjusted for time-in-sample while the dashed lines represent the corresponding unadjusted percentages
Tar, Nicotine, and Carcinogen Information on Cigarette Packs

Tar and nicotine information has been required on packs since 2002 after an amendment to the presidential decree of the Tobacco Business Act. Smokers at all three survey waves were asked how often they had read or looked closely at the information about tar and nicotine on cigarette packs. The percentage of smokers who said that they read the tar and nicotine information increased from Wave 1 to Wave 3, though less than a third of smokers looked at the information. At Wave 1, 10% of smokers said they had read or looked closely at the information “often” or “very often” in the last month, which increased to 27% at Wave 2 and 29% at Wave 3.

After the Government required a sentence about the carcinogens in cigarettes to be written on cigarette packages in December 2008, additional survey questions about this new information were added to the Wave 3 Survey in 2010. The findings from these new survey questions showed that the majority of smokers do not notice the new carcinogen information, and do not say that the information makes them think about the risks of smoking or quitting. Only 19% of smokers said that they had “often” or “very often” noticed the carcinogen information in the last month, 37% said that the carcinogen information makes them think about the risks of smoking, and 20% said that the information makes them more likely to quit.

![Figure 22. Percentage of cigarette smokers who think there should be more, less, or the same amount of health information on cigarette packages, by country](image)
Support for more Information on Cigarette Packs

The majority of smokers at Waves 2 and 3 said that they wanted more health and quitting information to appear on cigarette packs. When asked “do you think that cigarette packs should have more health information than they do now, less information, or about the same amount as they do now?”, over half (55%) of smokers at both Wave 2 and Wave 3 responded that cigarette packs should have “more health information”; only 6% of smokers said that packs should have “less health information”. Korea has the third highest percentage of male smokers wanting more health information on cigarette packs of 15 ITC countries, as shown in Fig. 22.

Smokers also want to see more information about quitting on cigarette packs. At Wave 3, smokers were asked if they would support or oppose a law that required cigarette packs to include information on how to stop smoking, and a law that required cigarettes to have a telephone quitline number printed on the pack. The majority of smokers supported both laws: 81% said that they would “support” or “strongly support” a law requiring quitting information on packs, and 83% would support a law requiring a quitline number on packs.

Conclusions

The FCTC recommends that health warnings on cigarette packs contain large, graphic images about the health risks of smoking. These recommendations are based on findings from ITC studies and other scientific research demonstrating that pictorial warnings are more effective than text warnings.

Results from the ITC Korea Survey provide compelling evidence of the need for stronger, pictorial health warnings in Korea, as smokers generally found the current text-only warnings that only cover 30% of the pack to be ineffective, and warning effectiveness has decreased over time.

The majority of smokers do not often notice the warnings or read them closely, and the warnings do not make them think about the risks of smoking or about quitting. In addition, each of those four measures of effectiveness decreased from Wave 1 to Wave 3. The warnings also do not appear to impact smokers’ behaviour: only 4% of smokers at Wave 3 had made any effort to avoid the warnings and only 11% said that the warnings had stopped them from having a cigarette at least once. Between Wave 2 and Wave 3, cigarette packs were required to contain a sentence on the carcinogens in cigarette smoke. However, at Wave 3, the majority of smokers had not often noticed this carcinogen information, or said that the information made them think about the risks or quitting.

The Korean Government should swiftly act on its recent promise to implement pictorial health warnings on cigarette packages in order to meet their obligations under the FCTC and improve the effectiveness of cigarette health warnings. Findings from the ITC Korea Survey suggest that smokers support such changes: the majority of smokers said that they want more health information, information on how to quit, and a telephone quitline number to appear on cigarette packages.
MISLEADING BRAND DESCRIPTORS

Many smokers mistakenly believe that so-called “light”, “mild”, or “low-tar” cigarettes are safer than regular cigarettes, despite the evidence that they are no less harmful. Article 11 of the FCTC requires Parties to implement measures to ensure that tobacco packaging and labelling are not misleading, deceptive, or likely to create the false impression that a particular tobacco product is less harmful than other tobacco products. This includes a ban on terms such as “low tar”, “light”, “ultra-light”, or “mild”. However, even after removal of these terms, there is evidence that some smokers continue to falsely believe that certain cigarette brands are less harmful than others. Tobacco companies continue to promote these incorrect beliefs through elements of package design such as colour (e.g., using lighter colours, and colours such as blue or silver in their packaging for brands that once were known as “light” brands). Article 11 Guidelines recommend that Parties adopt plain packaging in order to curb the tobacco industry’s use of package design techniques that may suggest that some products are less harmful than others.

The Republic of Korea does not prohibit misleading descriptors on tobacco packaging, though the government announced in August 2012 that they plan to revise the law to ban words such as “light” or “mild” and begin enforcing the ban by early 2013.

Smokers’ Perceptions of their Current Brand

After identifying their current brand of cigarettes, smokers at Waves 2 and 3 were asked about their perceptions of their brand’s harmfulness and taste compared to other cigarette brands. Although the majority of smokers recognized that their brand was no different in harmfulness, about half of smokers said that their brand tasted lighter and was smoother on their throat (see Fig. 23).

Figure 23. Smokers’ perceptions of the current brand of cigarettes they smoke in comparison to other brands, by wave

![Graph showing smokers' perceptions of current brand]
When asked “based on your experience of smoking, do you think that the brand you usually smoke might be a little less harmful, no different, or a little more harmful, compared to other cigarette brands”, less than one quarter of smokers (20% at Wave 2 and 17% at Wave 3) said that their brand was a little less harmful. 66% of smokers at Wave 2 and 71% of smokers at Wave 3 responded that their brand was “no different” in harmfulness.

Smokers were also asked if their brand is lighter or more intense in taste, and harsher or smoother on their throat in relation to other cigarettes. About half of smokers at both Wave 2 and Wave 3 said that their cigarettes are lighter in taste (51%) and smoother on their throat (52%). About 30% of smokers (29% at Wave 2 and 28% at Wave 3) said that their brand is more intense in taste, and 20% (at both waves) said that their brand is harsher on their throat.

Smokers' Beliefs About “Light” Cigarettes

The Wave 2 and Wave 3 ITC Korea Survey asked smokers: “Do you think that some types of cigarettes could be less harmful than other types, or are all cigarettes equally harmful?” The majority of smokers at both waves (89% at Wave 2 and 88% at Wave 3) responded that all cigarettes are equally harmful.

Despite this knowledge, many smokers still hold false beliefs about light cigarettes, however, in general these false beliefs decreased over time (see Fig. 24). At Wave 1, 31% of smokers “agreed” or “strongly agreed” that light cigarettes are less harmful than regular-strength cigarettes. This percentage decreased to 28% at Wave 3. More than half (55%) of smokers at Wave 1 agreed that light cigarettes are smoother on their throat or chest, followed by 52% of smokers at Wave 2 and 45% at Wave 3. Finally, 39% of smokers at Wave 1 agreed that smokers of light cigarettes take in less tar than smokers of regular-strength cigarettes, compared to 37% at Wave 2 and 30% at Wave 3.

**Smokers’ perceptions of “light” cigarettes, by wave**

![Figure 24. Smokers’ perceptions of “light” cigarettes, by wave](image)

* This question was not asked at Wave 2.

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It is clear that if the Republic of Korea wants to reduce misconceptions that there are less harmful cigarettes, they should go well beyond banning the words “light” and “mild”. The Korean Government should consider Australia’s proposed plain packaging legislation that will standardize the appearance of all cigarette packs.

Support for Plain Packaging

Wave 2 and 3 of the ITC Korea Survey asked smokers if they agree or disagree with the statement: “Tobacco companies should be required to sell cigarettes in plain packages - that is, in packs without any brand names or fancy designs.” Over half of smokers at each wave (53% at Wave 2 and 55% at Wave 3) said that they “agree” or “strongly agree” that cigarettes should be sold in plain packaging.

Conclusions

While the majority of smokers in the Republic of Korea say that all cigarettes are equally harmful, and over two-thirds of smokers recognize that their own brand is no different in harmfulness than other brands, false beliefs about “light” cigarettes persist. At Wave 3, 28% of smokers said that lights are less harmful, 45% said that they are smoother on the throat, and 30% said that smokers of light cigarettes take in less tar. In addition, about half of smokers say that their own brand tastes lighter and is smoother on their throat in comparison to other brands.

From the experiences of other countries, it is clear that if the Republic of Korea wants to reduce misconceptions that there are less harmful cigarettes, they should go well beyond banning the words “light” and “mild”. The Korean Government should strongly consider Australia’s proposed plain packaging legislation that will standardize the appearance of all cigarette packs in order to curb the tobacco industry’s use of colours and package designs to promote false beliefs. In fact, the ITC Korea Survey provides evidence that the majority of smokers in the Republic of Korea (55% at Wave 3) support plain packaging as a means to end deceptive marketing of cigarettes.
TOBACCO ADVERTISING, PROMOTION, AND SPONSORSHIP

Article 13 of the FCTC requires Parties to implement effective measures against tobacco advertising, promotion, and sponsorship. The Republic of Korea prohibits tobacco advertising on television, radio, newspapers, outdoor signage, and in any advertisements directed at women and children, and bans the free distribution of tobacco products. However, tobacco advertising is permitted at the point of sale, in print media with predominantly male readership, and through sponsorship of social, cultural, and sports events (except those for women and youth). There have been no major changes in these regulations since Wave 1 of the ITC Korea Survey.

Tobacco Advertising

The ITC Korea Wave 1 to Wave 3 Surveys (2005-10) evaluated the effectiveness of the tobacco advertising regulations in the Republic of Korea by asking smokers whether they had noticed cigarettes or tobacco products being advertised in a variety of venues over the last 6 months. The findings below indicate that the bans have been effective in curbing advertising on radio, and in general there has been a decline in all forms of advertising over time. However, tobacco advertising is still present and noticed in several venues, including newspapers or magazines, and in retail stores where tobacco is sold (see Fig. 25).

Figure 25. Percentage of smokers who noticed cigarette or tobacco products being advertised in various venues and media in the last 6 months, by wave
Radio

Tobacco advertising on the radio is prohibited in the Republic of Korea, and correspondingly, less than 5% of smokers (5% at Wave 1; 4% at Waves 2 and 3) reported noticing tobacco advertising on the radio in the last 6 months.

Posters and billboards

Tobacco advertising is prohibited on outdoor signage, but may appear at sponsored events and on posters in retail stores. As a result, many smokers reported noticing tobacco advertising on posters and billboards. At Wave 1, 45% of smokers said that they had noticed tobacco advertising on posters and billboards in the last 6 months, which decreased to 26% at Wave 2 and 19% at Wave 3.

Newspapers and magazines

Tobacco advertising is permitted in several types of magazines and publications, such as magazines published no more than once per week, foreign periodicals published more than once per year, and domestically published periodicals published in foreign characters. However, publications intended for women or youth are not allowed to contain any tobacco advertising. Despite these restrictions, many smokers reported noticing tobacco advertisements in newspapers and magazines: 33% of smokers at Wave 2 and 22% at Wave 3 said that they had noticed such advertisements in the last 6 months.

Retail stores where tobacco is sold

*Tobacco advertising in retail stores*

Tobacco advertising is permitted inside a designated tobacco retailer’s place of business, but advertisements that can be seen from outside the business are not allowed.

When asked if they had noticed cigarettes or tobacco products being advertised on store windows or inside stores where tobacco is sold in the last 6 months, over half of smokers (55%) at Wave 1 responded “yes”. This percentage decreased to 52% at Wave 2 and 37% at Wave 3 (see Fig. 25).

Respondents at Waves 2 and 3 were asked more specific questions about tobacco advertisements they may have seen inside stores where tobacco products are sold. When asked “in the last month, have you seen any signs or pictures or other things like clocks with cigarette brands or logos inside shops or stores?”, about a third of smokers (35% Wave 2; 31% at Wave 3) responded “yes” (see Fig. 27).

Smokers at Wave 3 were also asked if they had ever chosen to buy a brand other than their usual brand in the last 6 months because they noticed a promotion for that brand in a store. 17% of smokers said that they had purchased another brand because they noticed a special price for it, and 21% said they purchased a brand because they noticed a promotion for it, such as an ad or display.

*Cigarette displays in retail stores*

In addition to tobacco advertisements inside retail stores, cigarette packages themselves are also visible inside stores in the Republic of Korea, which can serve as another source of tobacco advertising and brand imagery. The strong majority of smokers at both Wave 2 (91%) and Wave 3 (90%) reported that they had seen cigarette packages being displayed inside stores in the last month, including on shelves or on the counter.
Tobacco Sponsorship

Tobacco sponsorship of social, cultural, musical, and sports events is permitted in the Republic of Korea, though sponsorship of events targeted toward women and youth is not allowed, and only the name of the sponsor may be advertised, not the product.

There is a long history of tobacco company sponsorship of sports teams by KT&G, the leading tobacco company in the Republic of Korea. KT&G held a state monopoly on the production of cigarettes until 2001. For many years, KT&G owned four sports teams called KT&G basketball team, KT&G table tennis team, KT&G badminton team, and KT&G volleyball team. The KT&G logo on the shirts of sports players was visible on televised sportscasts. KASH (Korean Association on Smoking or Health) criticized ownership of sports teams by the tobacco company. In September 2010, KT&G decided to move all the sports teams to Korea Ginseng Company (KGC) a subsidiary company of KT&G. Today, only the KGC logo appears on sports players uniforms.

The ITC Korea Waves 1 to 3 Surveys asked smokers if they had heard about any sports or cultural events sponsored by or connected with brands of cigarettes or tobacco companies in the last 6 months. While sponsored sports events appeared to be more common than sponsored arts events, at Wave 3 few smokers reported hearing about either types of sponsored events (see Fig. 26).

Less than 10% of smokers reported hearing about a sports event sponsored by either a brand of cigarettes or a tobacco company in the last 6 months: 9% of smokers at Wave 3 had heard about a sports event connected to a brand (compared to 12% at Wave 1 and 16% at Wave 2), and another 9% had heard about a sports event connected to a tobacco company (compared to 11% at Wave 1 and 22% at Wave 2). The reasons for the increase in noticing tobacco companies and brands connected to sporting events at Wave 2 are not clear. The decrease at Wave 3 may be related to the change in sports team logos from KT&G to KCG.

ITC Korea Survey results suggest that sponsorship of arts events by tobacco companies is a rare occurrence in Korea. At all three survey waves, 2% of smokers said that they had heard about an arts event sponsored by a brand, and 2% of smokers had heard about a company-sponsored arts event at Wave 1 and Wave 2, followed by a slight decrease to only 1% at Wave 3.

Figure 26. Percentage of smokers who were exposed to various forms of cigarette or tobacco sponsorship in the last 6 months, by wave
Tobacco Promotion

The ITC Korea Survey also included several questions related to tobacco promotion, such as free gifts or discounts on tobacco products. Free distribution of tobacco products is prohibited in the Republic of Korea, but promotional discounts are not banned. In general, tobacco promotion did not seem to be often noticed by smokers responding to the survey, and noticing decreased over time.

Smokers at all three waves were asked: “Thinking about everything that happens around you, in the last 6 months, how often have you noticed things that promote smoking?” Less than 5% of smokers reported that they had noticed promotion of smoking “often” or “very often” in the last 6 months (5% at Wave 1, 4% at Wave 2, 3% at Wave 3).

Smokers were also asked how often they had noticed specific types of tobacco promotion in the last 6 months (see Fig 27). Less than 10% of smokers at Wave 3 had noticed each type of promotion, including signs, posters, or branded items promoting cigarettes in bars or pubs (7%), clothing or other items with a cigarette brand name or logo (10%), internet sites promoting cigarettes or tobacco products (2%), e-mail messages promoting tobacco (1%), mail promoting tobacco (less than 1%)92, leaflets (1%), and competitions linked to cigarettes (2%). In response to questions about promotional discounts or free gifts, 7% of smokers at Wave 3 said they had noticed free samples of cigarettes in the last 6 months, 4% noticed free gifts or special discount offers on other products when buying cigarettes, and 1% noticed special price offers for cigarettes. Wave 1 and Wave 2 results are provided in Figure 27.

Figure 27. Percentage of smokers who were exposed to various forms of cigarette or tobacco promotion in the last 6 months, by wave* †

* The solid lines represent percentages adjusted for time-in-sample while the dashed lines represent the corresponding unadjusted percentages

† Those forms of cigarette or tobacco promotion that were noticed at a frequency of less than 5% at each wave were not included in the graph (i.e., special price offers, promotional mail, email, leaflets, and websites, and competitions linked to cigarettes)
Support for Tobacco Advertising and Promotion Bans

The ITC Korea Waves 2 and 3 Surveys found strong support among smokers for complete bans on promotion of cigarettes and tobacco advertisements and displays in stores (see Fig. 28).

When asked “Do you support complete bans on tobacco advertisements inside shops and stores?”, 76% of smokers at Wave 2 and 71% of smokers at Wave 3 responded “somewhat” or “a lot”. Less than a third of smokers (25% at Wave 2 and 31% at Wave 3) said they do not support a complete ban at all.

Smokers were also asked if they support complete bans on displays of cigarettes inside shops and stores, and 55% of smokers at Wave 2 and 50% of smokers at Wave 3 responded that they support a cigarette display ban “somewhat” or “a lot”.

Finally, smokers were asked if they agree or disagree with the statement: “There should be no promotion of cigarettes”. Around two-thirds of smokers at both waves (67% at Wave 2 and 65% at Wave 3) said they “agree” or “strongly agree” that there should be no cigarette promotion.

Conclusions

There are some marketing restrictions on tobacco products in the Republic of Korea, and in general, findings from the ITC Korea Wave 1 to 3 Surveys (2005-10) demonstrate that restrictions such as radio advertising bans and promotion and sponsorship bans are effective. However, tobacco advertising is still permitted and noticed in several venues, especially in newspapers and magazines, as well as in retail stores where tobacco is sold. In addition, cigarette packages themselves can serve as a form of advertising when on display in retail stores, and the majority of smokers reported noticing cigarette displays in stores.

There is strong support among smokers in the Republic of Korea for complete bans on tobacco advertising and promotion. The majority of smokers support complete bans on cigarette promotion, bans on tobacco advertisements in stores, and bans on cigarette displays in stores, all of which are also recommended by the FCTC.
EDUCATION, COMMUNICATION, AND PUBLIC AWARENESS

Article 12 of the FCTC requires Parties to promote and strengthen public awareness of tobacco control issues using all available communication tools. Parties are required to provide broad access to public awareness programs on the health risks of tobacco use and exposure to tobacco smoke, including the addictive characteristics of tobacco consumption and the benefits of cessation.

The Republic of Korea’s National Health Promotion Act, enacted in 1995, obligates governments to educate and publicize the harms of smoking to the public. Many anti-smoking campaigns have been prominent in the Republic of Korea since the Act went into force, including the launch of celebrity anti-smoking campaigns in 2000, and an expansion to several types of media and audiences in 2005.

The ITC Korea Wave 1 to 3 Surveys (2005-10) assessed the salience of anti-smoking and quitting campaigns across a variety of media and sources, and also measured changes in smokers’ knowledge of specific health effects of smoking and second-hand smoke.

Sources of Information on the Dangers of Smoking or Encouraging Quitting

Smokers at all three survey waves were asked how often, in the last 6 months, they had noticed advertising or information that talks about the dangers of smoking or encourages quitting. Less than a quarter of smokers at each wave (15% at Wave 1, 25% at Wave 2, 14% at Wave 3) said they had noticed such information “often” or “very often” in the last 6 months.

Noticing anti-smoking information was more prominent when smokers were asked how often they had noticed such information in a variety of specific places (see Fig. 29). At all three survey waves, the most commonly cited sources of information on the dangers of smoking or encouraging quitting were television (73% at Wave 1, 76% at Wave 2, 61% at Wave 3), cigarette packs (58% at Wave 1, 69% at Wave 2, 56% at Wave 3), newspapers or magazines (45% at Wave 1, 43% at Wave 2, 36% at Wave 3), and posters or billboards (43% at Wave 1, 45% at Wave 2, 36% at Wave 3). Sources that were cited less often were store windows or inside stores (22% at Wave 1, 19% at Wave 2, 16% at Wave 3), the radio (21% at Wave 1, 18% at Wave 2, 13% at Wave 3), the Internet (12% at Wave 1, 22% at Wave 2, 23% at Wave 3), at the movies (7% at Wave 1, 11% at Wave 2, 8% at Wave 3), and leaflets (6% at Wave 1, 7% at Wave 2, 6% at Wave 3). Noticing information declined slightly for all sources from Wave 1 to Wave 3, except for the movies, Internet, and leaflets.
Information from Tobacco Companies

Tobacco companies themselves sometimes provide information on the harms of smoking and run campaigns aimed at preventing youth smoking, although these programs are generally not seen as employing effective strategies.\textsuperscript{93, 94} Smokers at all three survey waves were asked if they had noticed advertising or information from tobacco companies in the last 6 months which dealt with the topic of youth smoking or more generally with the dangers of smoking. Youth smoking information was noticed more than information on the dangers of smoking: around a quarter of smokers said they had seen advertising from tobacco companies on the topic of youth smoking in the last 6 months (24\% at Wave 1, 26\% at Wave 2, 23\% at Wave 3) and around 10\% noticed information on the dangers of smoking (10\% at Wave 1, 8\% at Waves 2 and 3).

Smokers at Wave 3 were also asked if they think that tobacco companies are sincere in their efforts to improve the health of their consumers, and the majority of smokers (82\%) responded “no”.

* The solid lines represent percentages adjusted for time-in-sample while the dashed lines represent the corresponding unadjusted percentages.

Figure 29. Percentage of smokers who noticed information on the dangers of smoking or encouraging quitting in the last 6 months, by wave*
Awareness of the Harms of Smoking

Smokers at all three survey waves were given a list of health effects and diseases that may be caused by smoking cigarettes, and were asked if they believe smoking causes each one. In general, knowledge of the health effects of smoking was low among Korean smokers (see Fig. 30). At Wave 3, less than three-quarters of smokers believed that smoking causes wrinkling and aging of the skin (75%), peripheral vascular disease (74%), impotence in male smokers (64%), heart attacks in non-smokers from second-hand smoke (56%), and stroke in smokers (54%). Less than half of smokers said that smoking causes blindness (39%), bladder cancer (30%), and breast cancer (28%). However, for all health effects that were asked about at multiple waves (with the exception of wrinkling and aging of the skin), knowledge increased slightly over time. Smokers’ awareness of mouth and throat cancer and asthma in children were assessed only in the Wave 1 and Wave 2 surveys, respectively. Approximately three-quarters of smokers (77% for mouth and throat cancer, 74% for asthma in children) were aware of these smoking-related health effects.

Figure 30. Percentage of smokers who believe that smoking causes the following health conditions or outcomes, by wave*

* The solid lines represent percentages adjusted for time-in-sample while the dashed lines represent the corresponding unadjusted percentages.
Awareness of the Chemicals in Cigarette Smoke

Smokers at Wave 3 were also asked about their knowledge of the chemicals contained in cigarette smoke, after cigarette packages began containing the sentence: “Cigarette smoke contains cancer-causing substances such as naphthylamine, nickel, benzene, vinyl chloride, arsenic and cadmium” in 2008. Smokers were asked whether the chemicals carbon monoxide, lead, cadmium, and benzene are found in cigarette smoke. Knowledge was highest for carbon monoxide (86%), followed by cadmium (70%), benzene (68%), and lead (58%).

It was not possible to evaluate whether the text warning about carcinogens in cigarette smoke increased smokers’ awareness of these chemicals. While more than two-thirds of smokers were aware of the presence of cadmium and benzene in 2010, two cancer-causing substances specifically mentioned in the warning, knowledge was only measured after the text warning was implemented. Also, public education campaigns addressing carcinogens in cigarette smoke were launched during the time that the labels were in place, so it was not possible to separately evaluate the effects of the text warning on smokers’ knowledge in isolation from other public education initiatives.

Conclusions

While the Republic of Korea has implemented many different anti-smoking campaigns over the last decade, still less than a quarter of smokers said that they had often noticed anti-smoking or quitting information in the last 6 months. However, the majority of smokers said they had noticed such information specifically on television, suggesting that television campaigns have been successful in reaching smokers.

Cigarette packs were almost equally as prominent a source of information as television advertisements, pointing to the value of health warnings as an extremely cost-effective method for informing the public of the harmfulness of cigarettes.

While smokers’ awareness of the health effects of smoking has generally increased across waves, knowledge is still fairly low, especially knowledge of blindness, bladder cancer, and breast cancer caused by smoking. Sustained funding for ongoing anti-smoking campaigns, in addition to strong pictorial health warnings on cigarette packages, are recommended to address specific gaps in smokers’ knowledge of the harms of cigarette smoking.
TOBACCO PRICE AND TAXATION

Increasing tobacco taxes that result in increasing prices is widely recognized as the most effective tobacco control measure. Article 6 of the FCTC obligates Parties to adopt pricing and taxation measures in order to reduce tobacco consumption.

In December 2004, tobacco taxes in the Republic of Korea were increased by 500 Korean Won per pack, and the funds were earmarked for the National Health Promotion Fund to be spent on tobacco control and health promotion projects. But there has not been a significant tobacco tax increase since 2004, and as a result, Korea’s tobacco prices remain low, with cigarettes increasing in affordability. While the Consumer Price Index in Korea has increased by 20.7% from 2005-11, the price of cigarettes has not kept up with increases in inflation.95

The ITC Korea Wave 1 to 3 Surveys (2005-10) assessed smokers’ perceptions of the cost of smoking and the extent to which the price of cigarettes influences their brand selection and thoughts about quitting, as well as the location of their last purchase of cigarettes and support for limiting the number of places where cigarettes are sold.

Price and Brand Choice

Smokers who had been smoking their current brand for less than one year were given a list of possible reasons for choosing their brand and were asked if each reason was a part of their decision to smoke their brand. Price has become less of a consideration in brand selection over time. At Wave 1, 16% of smokers said that price was a reason for choosing their brand, dropping to 7% at Wave 2. At Wave 3, price was the least cited reason for choosing their brand, with only 5% of smokers reporting it was a factor in their decision (see Fig 31).

Concern about Money Spent on Cigarettes

One indicator of whether the price of cigarettes is high enough to significantly reduce demand is whether smokers are concerned about the money they spend on cigarettes. Smokers at all three survey waves were asked if they agree or disagree that they spend too much money on cigarettes. At Wave 1, 56% of smokers said they “agree” or “strongly agree” that they spend too much money on cigarettes, but this percentage decreased to only about half of smokers at Waves 2 and 3 (51% and 50%, respectively).

At Wave 1 only, smokers were also asked how often they think about the money they spend on smoking. Only about a third of smokers (35%) said they think about their money spent on smoking “often” or “very often”, which is one of the lowest rates among all high-income ITC countries surveyed (see Fig. 32).
Figure 31. Reasons for choosing their current brand among smokers who have smoked their current brand for less than one year, by wave*

* The solid lines represent percentages adjusted for time-in-sample while the dashed lines represent the corresponding unadjusted percentages.

† Very few females responded to these questions. These estimates are for male smokers only (i.e., female smokers were excluded in the model).
Figure 32. Percentage of smokers who thought “often” or “very often” about the money they spend on smoking in the last month, by country.
Price as a Reason to Quit Smoking

Another indicator that was used to determine whether the price of cigarettes is high enough to significantly reduce demand is whether smokers mention price as a reason for thinking about quitting smoking. The ITC Survey provides a list of possible reasons for thinking about quitting smoking, and for each item, smokers (regardless of whether they reported intending to quit) were asked how much it led them to think about quitting (“not at all”, “somewhat”, or “very much”) in the last 6 months. Just as price has had less influence on smokers’ brand choice over time, it has also factored less frequently as a reason to quit. The percentage of smokers who said that the price of cigarettes led them to think about quitting “somewhat” or “very much” decreased by about ten percentage points from Wave 1 (38%) to Wave 2 (27%), then remained the same from Wave 2 to Wave 3 at only 27% of smokers (see Fig. 33).

Cigarette Affordability

Data from the ITC Surveys also allows for an analysis of cigarette affordability, which refers to the quantity of resources (or income) that is required to purchase a pack of cigarettes. Higher affordability, for example, means that the price of a pack of cigarettes would require a lower percentage of one’s daily income.

An Affordability Index (the reciprocal of the percentage of daily income spent on an average dose of cigarettes) was constructed using ITC Korea Survey data to determine the change in cigarette affordability in the Republic of Korea between Wave 1 (2005) and Wave 3 (2010). This analysis took into account ITC data on price paid for the most recent cigarette purchase, number of cigarettes smoked per day, and household income. The results show that cigarettes became more affordable from Wave 1 to Wave 3, with an average annual increase in the affordability index of 1.69% (see Fig. 34). This means that smokers only spend on average 3.1% of their income on cigarettes — the lowest percentage of high income countries in the ITC Project. Korea was one of only two of the nine high-income ITC countries included in the analyses where cigarette affordability increased over time.

As another measure of cigarette affordability, the ITC Korea Waves 2 and 3 Surveys asked smokers: “In the last 6 months, has there been a time when the money you spent on cigarettes resulted in not having enough money for household essentials such as food?” The survey results provide additional evidence that cigarettes are very affordable in the Republic of Korea. At Wave 2, only 6% of smokers said there had been a time that they didn’t have enough money for household essentials because of money spent on cigarettes, decreasing further to 4% of smokers at Wave 3.
Figure 34. Affordability of cigarettes and change in affordability per year in 16 countries

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<th>Country</th>
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<th>AffInd Latest</th>
<th>Change</th>
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Figure 34 presents for 16 ITC countries: (a) Data presented for Mauritius is for Wave 2 (2010) and Wave 3 (2011). Data for all other countries is for the year of the first survey wave and of the most recent wave, (b) **CPDIR Latest**: the CPDIR (cigarettes per day / income per day) at the most recent survey wave, (c) **AffInd Latest**: the Affordability Index (the reciprocal of CPDIR) for the most recent wave.*

*Change in Affordability Index per year = (AffIndMost Recent - AffIndFirst) / (Difference in days between Date of SurveyFirst fieldwork at the 1/3 timepoint of the survey interviewing period and Date of SurveyMost Recent fieldwork at the 1/3 timepoint of the survey interviewing period) / 365. The date corresponding to 1/3 of the survey interviewing period was chosen because it was the approximate point at which 50% of the respondents had been interviewed for that survey wave in each country.
Tax Avoidance

Tax avoidance involves legal purchasing behaviour with the objective to pay less or no taxes, such as cross-border shopping, duty-free shopping, and internet purchases. Results of the ITC Korea Surveys indicate that the majority of smokers in the Republic of Korea are not taking steps to avoid taxes.

At Waves 2 and 3, fewer than 5% of smokers said that they had made an effort to buy cigarettes that are less expensive than they can get from local stores (5% at Wave 2, 3% at Wave 3).

Analysis of data on where smokers last purchased their cigarettes also showed little evidence of tax avoidance. The majority (98%) of smokers at all three survey waves reported that they last bought cigarettes for themselves at a supermarket or convenience store. The most common source of purchase was supermarkets, grocery stores, or drug stores (79% at Wave 1, 63% at Wave 2, 55% at Wave 3), followed by convenience stores (19% at Wave 1, 36% at Wave 2, 43% at Wave 3).

Smokers were also asked if, in the last 6 months, they had bought cigarettes from the internet, phone, or outside the country, and again, very few smokers responded that they had done so. Less than 10% of smokers at all three waves had purchased cigarettes from outside the country in the last 6 months (8% at Waves 1 and 3, 10% at Wave 2), and less than 1% of smokers at each wave had purchased cigarettes from the internet or phone.

Smokers’ Support for Increasing Prices and Restricting Retail Locations for Cigarettes

Smokers at Wave 3 were asked how effective they think raising cigarette prices would be in reducing the smoking rate in Korea. About a third of smokers (31%) responded that raising prices would be “moderately” or “very” effective.

The Waves 2 and 3 ITC Korea Surveys also asked smokers if they would support or oppose a law restricting the number of places where cigarettes are sold. Around two-thirds of smokers at both waves (67% at Wave 2, 64% at Wave 3) said they would “support” or “strongly support” such a law.

Conclusions

Findings from the ITC Korea Survey provide evidence of the need for substantial tobacco price increases in Korea. There has not been a tobacco tax increase in the Republic of Korea since 2004 and affordability of cigarettes has increased over time as the price of cigarettes has not increased in line with income growth in the Republic of Korea. In comparison with other high income countries, cigarettes in the Republic of Korea are considerably more affordable and thus demand for cigarettes has continued to rise.

Current price and tax measures are not having a strong effect on smoking behavior. Very few smokers said that price was a reason for choosing their brand, and only a third of smokers said that they often think about the money they spend on cigarettes or that the price of cigarettes made them think about quitting. All measures relating to price and tax also showed decreasing effectiveness over time.

There is support among smokers in the Republic of Korea for more progressive price and tax policies. Approximately a third of smokers recognize that raising cigarette prices would be effective in reducing smoking prevalence in Korea. While the majority of smokers report that they buy their cigarettes from retail stores and there is very little evidence of tax avoidance in the Republic of Korea, the majority of smokers say that they support restricting the number of places where cigarettes are sold.
CONCLUSIONS AND IMPLICATIONS
OF THE FINDINGS

The Korean Government has long recognized the need to reduce the prevalence of smoking by implementing tobacco control measures across a broad range of policy domains.

Even before the Republic of Korea ratified the FCTC in May 2005, significant progress had been made in implementing tobacco control policies. In 1995, the National Health Promotion Act was enacted which banned advertising on television, radio, newspapers, and outdoor signs. The Act also standardized the requirements for mandatory text warnings on 30% of the front and back of the pack, and no-smoking areas were designated in a number of public buildings and public transportation. In December 2004, the Act was revised to implement a substantial increase of 500 Won per pack on cigarette taxes. In addition to these tobacco control initiatives under the National Health Promotion Act, well-funded anti-smoking media campaigns were launched in 2000 and 2005. National government-supported smoking cessation clinics were also established in March 2005.

After ratifying the FCTC in May 2005, fewer tobacco control initiatives were implemented: A Quitline was established in 2006, a mandatory text warning about six carcinogens found in cigarette smoke was required on packs in 2008, and local governments were given authority to designate outdoor smoke-free areas in 2010.

The ITC Korea Wave 1 to Wave 3 Surveys (2005-2010) provide evidence that although many tobacco control policies have been implemented in the Republic of Korea, they do not meet the requirements and guidelines of the FCTC in several critical domains. Furthermore, although the Korean Government has announced several forthcoming amendments to the National Health Promotion Act, in many cases the timeframes for implementation do not reflect the urgency that is required to protect non-smokers from the harmful effect of second-hand smoke and to reduce the prevalence of cigarette smoking.

This section identifies successes and challenges in tobacco control policy implementation in the Republic of Korea, and provides recommendations for government actions to strengthen tobacco control across the policy domains of the FCTC.
Smoking Behaviour and Smokers’ Perceptions

Successes

Smokers in the Republic of Korea hold perceptions about their smoking and views about societal norms that are favourable for quitting smoking. The vast majority of smokers (88% in 2010) regret taking up smoking and almost half (43% in 2010) have negative views about their smoking. Over 80% of smokers believe that Korean society disapproves of smoking.

The majority of smokers in the Republic of Korea are supportive of stronger tobacco control measures. More than 6 out of 7 smokers think that the government should do more to tackle the harm of smoking. Almost two-thirds of smokers (62% in 2010) think that the government should sue the tobacco companies to recover health care costs. Over a third of smokers (39% in 2010) support a complete ban on all tobacco products. It is clear that the Korean people, even smokers, support stronger and more urgent action in tobacco control. This is an indication that the Government can move forward more swiftly in its tobacco control efforts.

Challenges

Cigarette prices are low and have not kept pace with inflation. As a result prices have had minimal influence on: (1) purchasing decisions, (2) smoking behavior, and (3) motivating smokers to quit. Details of the weakness of current taxation policies are presented below. Price of the brand was cited least often (7% of smokers in 2008 and 5% of smokers in 2010) as a factor affecting brand choice decisions. Pack design has become an increasingly important factor in brand choice, doubling from 10% of smokers in 2008 to 20% of smokers in 2010.

Although the prevalence of use of herbal cigarettes and e-cigarettes is currently low, the majority of smokers who use these products, as well as smokers who do not use them, perceive that these products are less harmful and can assist in quitting. Tobacco control advocates in the Republic of Korea are concerned about the increasing market for e-cigarettes.

Recommendations

The Korean Government should implement strong increases in cigarettes taxes/prices in order to reduce cigarette affordability and consumption. The Government should implement regulations on pack design to curb the use of the pack by the tobacco industry as a means to market cigarettes and to deceive the public by conveying the image of a less harmful product. The Government should closely follow international research and policy developments for regulation of e-cigarettes. Further analysis of ITC Korea Survey data should be conducted to understand the demographics of e-cigarette use. Further research on the use of herbal cigarettes should be conducted to understand the potential health harms and their effectiveness as a cessation aid. The prevalence of smoking herbal-tobacco cigarette blends in the Republic of Korea, reasons for use, and perceptions of harmfulness should be conducted to guide strategies for targeted communication and regulation of these products.
Smoking Cessation

Successes

Most smokers require several quit attempts before they succeed. More than three-quarters of smokers (81% of smokers at Wave 1, 83% at Wave 2, 78% at Wave 3) in Korea have tried to quit at some point in the past. Although only a third of smokers (42% at Wave 1, 38% at Wave 2, 36% at Wave 3) have plans to quit in the next 6 months, smokers are concerned about the effects of smoking on their personal health and the effect of second-hand smoke on non-smokers as important reasons to think about quitting.

Awareness and use of cessation clinics among smokers in the Republic of Korea is high compared to other ITC countries. In 2010, almost three quarters of smokers (71%) were aware of cessation clinics in public health centers; 16% of smokers had visited these clinics. ITC data shows that the rate of use of cessation clinics is higher than in Canada, US, Netherlands, New Zealand, and Australia.

Ten percent smokers were aware of the Quitline in 2010 and 2% of smokers used the Quitline. In 2010, over four out of five (81%) smokers reported that they “support” or “strongly support” a law requiring quitting information on cigarette packs, and 83% “support” or “strongly support” a law requiring a Quitline number on packs.

Challenges

Although a strong infrastructure is in place to support smokers in quitting, current tobacco control policies are not providing strong motivation for smokers to think about quitting and make quit attempts as they have in other ITC countries, such as Australia, Canada, and New Zealand. In 2010, smoke-free laws, health warnings, anti-smoking advertising, and price of cigarettes were cited by less than a third of smokers (30%; 13%, 21%, 27% respectively) as reasons to quit. Moreover, all of these policy-related reasons were less frequently cited in 2010 than they were in 2005 and 2008, with the exception of smoking restrictions at work.

Advice to quit from a physician or health professional has a strong influence on smokers’ quit success. Half of smokers (53%) who visited their doctor received advice to quit in 2010. This is approximately the same percentage as in China but lower than in Thailand and Malaysia where more than two-thirds of smokers who visited a health professional reported receiving advice to quit. Smokers are not well connected to cessation services that are available to them.

Recommendations

Strong tobacco control policies including comprehensive smoke-free laws, pictorial health warnings, strong anti-smoking campaigns, and pricing that decreases affordability of cigarettes need to be implemented in the Republic of Korea. To be most effective in encouraging smokers to quit, policies should be implemented and enforced according to FCTC recommendations and guidelines.

Efforts to further improve linkages to cessation clinics and the Quitline by increasing physician awareness of these services and promoting these services on the outside of cigarette packs and in pack inserts are recommended. For example, the Canadian health warnings include 8 rotating pack inserts that provide quitting tips including information on reasons to quit, benefits of quitting, and information about the Quitline.
Smoke-free Public Places and Workplaces

Successes

Reductions in observed smoking in workplaces, restaurants, and cafés have been achieved between 2005 and 2010. However, the prevalence of indoor smoking in these venues, and in bars and pubs where no reductions have been achieved, is still considerably higher than in countries that have implemented nationwide comprehensive smoking bans. There is growing support among smokers for complete bans on smoking in restaurants and cafés, nearly doubling from 17% in 2005 to 29% in 2010.

The prevalence of smoking bans in smokers’ homes and cars has increased between 2005 and 2010, suggesting a growing awareness of the harms of second-hand smoke. The prevalence of home smoking bans in the Republic of Korea has steadily increased from almost a third (29%) of smokers in 2005 to over half (53%) of smokers in 2010.

The prevalence of smoking in cars with children has decreased from 17% of smokers in 2008 to 8% in 2010. Similarly, the prevalence of smoking bans in cars with non-smoking passengers increased from half of smokers (49%) in 2005 to 78% of smokers in 2010.

There is almost unanimous support for a ban on smoking in cars with children. 95% of smokers in 2008 and 94% in 2010 said that they would support such a law.

Weaknesses

The Republic of Korea has not implemented a comprehensive ban on indoor smoking in workplaces and public places as called for in the FCTC Article 8 Guidelines. The ITC Korea Survey demonstrates the consequences of weak implementation of smoke-free laws. In 2010, almost one-third (32%) of smokers reported that they observed smoking indoors at their workplace. The prevalence of smoking indoors is much higher in hospitality venues.

In 2010, more than two-thirds (69%) of smokers noticed smoking indoors in restaurants - the highest rate of observed smoking in restaurants and cafés among 10 high income ITC countries by an enormous margin and much higher than in nearly all low- and middle-income countries in the ITC Project (Brazil, Mexico, Malaysia, Mauritius, and Thailand), lower than only China and Bangladesh.

The Republic of Korea has the highest rate of observed smoking in bars among 16 high and middle income countries. Across all three survey waves, 97% of smokers noticed smoking in pubs or bars at their last visit, clear evidence that voluntary guidelines are not effective.

Although smokers’ support for complete smoking bans in bars and pubs is still low at 11% of smokers in 2010, this level of support is similar to the level of support among smokers in Ireland (13%) prior to that country’s highly successful implementation of a comprehensive smoke-free law. ITC evaluation of the Irish ban showed that observed smoking in bars/pubs decreased from 98% to 5%.
Recommendations

The Republic of Korea’s recently announced phase-in plan for a National smoke-free law in restaurants has a long timeframe for full implementation (Jan 1, 2015 in all restaurants). This means that Koreans will continue to be exposed to the harmful effects of second-hand smoke for several more years. The Korean Government should consider reducing the timeframe for full implementation and extend the ban to include indoor workplaces, bars, and pubs.

The Korean Government should implement a strong plan for implementation, enforcement, and evaluation of smoke-free laws. Implementation should follow the FCTC Article 8 Guidelines including information campaigns to educate the public about the harms of second-hand smoke and the importance of smoke-free laws in protecting public health. A strong system for enforcement and strict penalties for violations is required. Long-term evaluation of smoke-free laws through air quality monitoring and post-implementation surveys of smokers is important for evaluating impact on exposure, smokers’ behaviors and attitudes, compliance and enforcement, and public support for the laws and for expanding smoke-free laws to other public places.

Health Warning Labels

Successes

Cigarette packs are a prominent source of health information for smokers in the Republic of Korea. Warning labels on packs were almost equally as prominent a source of information as television advertisements (58% in 2005, 69% in 2008, 56% in 2010) pointing to the value of health warnings as a cost-effective method for informing the public of the harmfulness of cigarettes.

There is strong support among smokers for more health information on packs. Over half (55%) of smokers in 2008 and 2010 reported that they want more health information on cigarette packs. The Republic of Korea has the third highest percentage of smokers of 15 ITC countries wanting more health information on cigarettes packs.

Challenges

To date, despite initiatives to design and implement pictorial warnings, the Republic of Korea still has small text-only warning labels on cigarette packs. ITC Korea Survey findings demonstrate that these warnings are not effective among the majority of smokers. In fact, all measures of warning label effectiveness have shown a decrease between 2005 and 2010 and for most indicators, effectiveness is at levels far below those countries that have implemented pictorial warnings including middle-income countries such as Thailand, Malaysia, Mexico, Brazil, and Mauritius.

Recommendations

The Republic of Korea should swiftly implement the FCTC Article 11 Guidelines, which call for countries to implement large, rotating, pictorial warnings covering at least 50% of the principal surfaces of the pack, including graphic images of the harms of smoking. This will help to increase knowledge of the harms of smoking and motivate quitting as pictorial warnings have been shown to do in many ITC countries.
Misleading Brand Descriptors

Successes

The Korean government announced in August 2012 that they plan to revise the law to ban words such as “light” or “mild” and will begin enforcing the ban by early 2013. Smokers in the Republic of Korea support strong policies to curb the tobacco industry’s use of misleading descriptors and packaging designs. Tobacco companies should be required to sell cigarettes in plain packages. Over half of smokers at each wave (53% at Wave 2 and 55% at Wave 3) said that they “agree” or “strongly agree” that cigarettes should be sold in plain packages—that is, in packs without any brand names or fancy designs.

Challenges

Article 11 of the FCTC obligates countries to remove misleading descriptors from brand names such as “low tar”, “light”, “ultra-light”, or “mild.” Moreover, the Article 11 Guidelines further obligates countries to prohibit other strategies such as using lighter colors and/or the names of lighter colors (such as “Blue” or “White”), which have been shown by research studies to be just as effective in misleading consumers to believe that such brands are somehow less harmful. The Republic of Korea has not taken action on these important policy matters. In fact, in 2002, the Government began requiring cigarette companies to add information about tar and nicotine levels—an action that is known to contribute to the problem of misleading consumers to believe that some brands are less harmful than others.

Although the majority of smokers (79%) did not choose their brand based on harmfulness, it appears that many smokers may hold false beliefs about the harmfulness of their brand, which is promoted by certain product features, in addition to misleading information about tar and nicotine levels an action that is known to contribute to the problem of misleading consumers to believe that some brands are less harmful than others.

The lack of regulations banning misleading descriptors and packaging designs is of particular concern because smokers are increasingly making brand selection decisions based on the pack design.

Recommendations

ITC research conducted in other countries (e.g., United Kingdom and Uruguay) has demonstrated that bans on misleading descriptors are not effective because the tobacco industry uses colours, pack colours, and innovative pack designs to convey misleading perceptions about brands. The industry also uses techniques in the design of the cigarette itself, such as the use of additives, increasing filter ventilation, and changing the blend of the tobacco in the cigarette, in order to give smokers a “smoother” sensation, which does not correspond to the potential harmfulness of the cigarette. Therefore, the forthcoming ban on the terms “light” and “mild” does not represent any substantial progress toward removing misperceptions.

The Korean Government should strongly consider Australia’s proposed plain packaging legislation that will standardize the appearance of all cigarette packs.

Further research is needed to explore whether smokers of light brands of cigarettes are more likely to hold false beliefs about the harmfulness of their brand and about light cigarettes in general. In addition, there is a need for experimental studies to better understand how pack design characteristics influence smokers’ brand decisions and perceptions of harm. The ITC Project is currently engaged in such studies.
**Tobacco Advertising, Promotion, and Sponsorship**

**Successes**

The Korean Government has implemented bans on tobacco advertisements on television, radio, newspapers, and advertisements aimed at women and children, and outdoor signage. The ITC Korea Survey provides evidence that fewer smokers at each survey had noticed tobacco advertising in stores, newspapers and magazines, posters and billboards, and radio. Across all three survey waves, less than 5% of smokers heard advertising for cigarettes or tobacco products on the radio.

Although tobacco company sponsorship of social, cultural, musical, and sports events is permitted in the Republic of Korea, with the exception of events targeted toward women and youth, the prevalence of sponsorship of sports and arts events has decreased over time and less than 10% of smokers reported noticing such sponsorship in 2010.

Free distribution of tobacco products is prohibited in the Republic of Korea, but promotional discounts are not banned. In general, tobacco promotion did not seem to be often noticed by smokers responding to the survey, and noticing decreased over time. Less than 10% of smokers in 2010 had noticed each of the following forms of promotion: signs, posters, or branded items promoting cigarettes in bars or pubs, clothing or other items with a cigarette brand name or logo, internet sites promoting cigarettes or tobacco products, e-mail messages promoting tobacco, mail promoting tobacco, leaflets and competitions linked to cigarettes.

Less than 10% of smokers in 2010 said they had noticed free samples of cigarettes in the last 6 months, noticed free gifts or special discount offers on other products when buying cigarettes, or noticed special price offers for cigarettes.

There is strong support among smokers for stronger restrictions on tobacco advertising and promotion. Almost three quarters of smokers support banning tobacco advertisements in stores and half of smokers support a complete ban on displays of cigarettes at point of sale. Around two-thirds of smokers in 2008 and 2010 support a ban on all forms of cigarette promotion.

**Challenges**

The Republic of Korea has not implemented a comprehensive ban on tobacco advertising and promotion, including a ban on display of tobacco at point of sale. In 2010, more than a third of smokers noticed tobacco advertising in store windows or inside stores where tobacco is sold; almost a quarter of smokers noticed advertising in newspapers and magazines.

**Recommendations**

The Korean Government should fully implement the FCTC Guidelines for Article 13 and ban all forms of tobacco advertising and promotion.
**Education, Communication and Public Awareness**

**Successes**
Korea has implemented several anti-smoking campaigns and has increased its funding for these campaigns. As a result many smokers report noticing information on the harms of smoking on television.

**Challenges**
Although the Republic of Korea has implemented many different anti-smoking campaigns over the last decade, still less than a quarter of smokers said that they had often noticed anti-smoking or quitting information in the last 6 months.

Although smokers’ awareness of the health effects of smoking has generally increased across waves, knowledge is still fairly low. In 2010, just over half of smokers were aware that second-hand smoke can cause heart attacks in non-smokers (56%) and that smoking can cause strokes (54%). Knowledge gaps were also evident for blindness, bladder cancer, and breast cancer caused by smoking.

**Recommendations**
Sustained funding for ongoing anti-smoking campaigns, in addition to strong pictorial health warnings on cigarette packs, are recommended to address specific gaps in smokers’ knowledge of the harms of cigarette smoking.
Tobacco Price and Taxation

Successes

There is support among smokers in the Republic of Korea for stronger price and tax policies. In 2010, approximately a third (31%) of smokers recognized that raising cigarette prices would be effective in reducing smoking prevalence in the country.

Although the majority of smokers report that they buy their cigarettes from retail stores and there is very little evidence of tax avoidance in the Republic of Korea, the majority (67% in 2008 and 64% in 2010) of smokers say that they support restricting the number of places where cigarettes are sold.

Challenges

Tobacco taxes have not increased in the Republic of Korea since 2004, when tobacco taxes were increased by 500 Korean Won (approximately USD $0.50) per pack.

The ITC Korea Survey results show the negative impact of this lack of tax increase on efforts to reduce tobacco use. All indicators of price and tax policy effectiveness showed a decrease over time.

Affordability of cigarettes has increased between 2005 and 2010 with an average annual increase in the affordability index of 1.69%; this demonstrates that the price of cigarettes has not increased in line with income growth. In 2010, smokers only spent on average 3.1% of their household income on cigarettes — the lowest percentage of all 16 countries in the ITC Project for which affordability analyses have been conducted, that is, cigarettes are relatively less expensive in the Republic of Korea with respect to percentage of income than they are in other high-income countries including the United States, France, Germany, United Kingdom, the Netherlands, Australia, and New Zealand. Consequently, smokers face very little incentive to quit from the price of cigarettes.

Indeed, in 2010, very few smokers (only 5%) said that price was a reason for choosing their brand, and only a third (35%) of smokers said that they “often” or “very often” think about the money they spend on cigarettes – among the lowest of high-income ITC countries. Price of the brand was cited least often as a factor affecting brand choice decisions (7% of smokers in 2008 and 5% of smokers in 2010).

Recommendations

Increasing tobacco taxes in ways that result in increasing prices is widely recognized as the most effective tobacco control strategy. There is an urgent need for substantial tobacco price and tax increases in the Republic of Korea in order to reduce the affordability of cigarettes, and to reduce the demand for cigarettes.

Further economic analysis of longitudinal ITC Korea Survey data on price and consumption of cigarettes is recommended in order to provide the Korean Government with information to make decisions on a strategy for implementing cigarettes price and tax increases in ways that optimize revenue and reductions in smoking prevalence.
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“Our government is working to introduce stricter regulations. We will require not only pictorial warnings but detailed ingredients on cigarette packs. The sponsorship of events by tobacco companies will be banned as well. We are committed to strengthening tobacco control based on the findings of this report.”

Chemin Rim
Minister of Health and Welfare
Republic of Korea
References


69. Very few respondents reported using roll-your-own tobacco making point estimates and confidence intervals very unreliable.
70. Note that because very few women responded to the questions about choosing their brand for pack design and because it’s the same as friends, the adjusted data for those two variables excludes female smokers.
72. The data in this sentence should be interpreted with caution due to high sampling variability.
73. The data in this section should be interpreted with caution due to high sampling variability.
74. This question was not asked at Wave 1.
75. This question was not asked at Wave 1.
76. The percentage of smokers who had ever tried to quit at Wave 3 is based on replenishment respondents only.
77. Family disapproval as a reason for quitting was not asked at Wave 1.
78. Very few female smokers had used a quitline service, so females were excluded from the model for this variable. The frequencies still adjust for age, daily smoker, and time-in-sample.
79. Note that the Wave 3 percentage reported in the ITC cross-country comparison figure for the Republic of Korea is slightly different than the reported Wave 3 longitudinal frequency due to differences in statistical adjustment methods.
80. Note that the Wave 3 percentage reported in the ITC cross-country comparison figure for the Republic of Korea is slightly different than the reported Wave 3 longitudinal frequency due to differences in statistical adjustment methods.
82. This question was not asked in a comparable manner at Wave 1.
83. This question was not asked at Wave 1.


85. These questions were only asked at Wave 3.


91. Note that this question was not asked in the Wave 2 Survey.

92. Note that due to the small prevalence of noticing promotion by mail, this percentage is not adjusted for whether or not the smoker is a daily smoker.


94. Wakefield, M., McLeod, K., & Perry, C.L. (2006). “Stay away from them until you’re old enough to make a decision”: Tobacco company testimony about youth smoking initiation. Tobacco Control, 15(Suppl IV), iv44-iv53.


The International Tobacco Control Policy Evaluation Project

The ITC Project
Evaluating the Impact of FCTC Policies in...

20+ countries • 50% of the world’s population
60% of the world’s smokers • 70% of the world’s tobacco users

Australia
Bangladesh
Bhutan
Brazil
Canada
China (Mainland)
France
Germany
India
Ireland
Kenya
Malaysia
Mauritius
Mexico
Netherlands
New Zealand
Republic of Korea
Thailand
United Kingdom
Uruguay
United States of America
Zambia

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