

**Report**

**Third Party Validation**

**“Institutionalizing Sustainable  
Tobacco Control Mechanism in Pakistan”**

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## List of Abbreviations

Abbreviation	Description
<b>ABP</b>	Association for Better Pakistan
<b>BI</b>	Bloomberg Initiative
<b>CEO</b>	Chief Executive Officer
<b>COPD</b>	Chronic obstructive pulmonary disease
<b>DHA</b>	District Health Authority
<b>EMR</b>	Electronic Medical Record
<b>ETO</b>	Excise and Taxation Officer
<b>FCTC</b>	Framework Convention on Tobacco Control
<b>HISDU</b>	Health Information and Service Delivery Unit
<b>KPIs</b>	Key Performance Indicators
<b>NCD</b>	Non-Communicable Diseases
<b>NTCC</b>	National Tobacco Control Cell
<b>TCL</b>	Tobacco Control Laws
<b>TSFC</b>	Tobacco Smoke Free Cities Project
<b>The Union</b>	International Union against Tuberculosis and Lung Disease
<b>TPV</b>	Third Party Validation
<b>TVA</b>	The Punjab Tobacco Vend Act – 1958

## Executive Summary

This Validation Report presents a comprehensive assessment of the achievements, findings and recommendations derived from the project titled “Institutionalizing Sustainable Tobacco Control Mechanism in Pakistan” implemented by Association for Better Pakistan (ABP) in Punjab Province. The project aimed to institutionalize sustainable tobacco control mechanisms at the sub-national level, focusing on policy reforms, integration with healthcare programs, monitoring and reporting of tobacco control laws.

The validation process employed a robust methodology comprising of in-depth interviews (IDIs) with key stakeholders, document reviews and data analysis. This rigorous approach ensured a comprehensive and objective evaluation of the project's outcomes.

The validation process revealed a series of remarkable achievements. The first objective pertains to holding consultative meeting with the Provincial Stakeholders for Gap Analysis of Tobacco Control Implementation in Punjab, to review the situation of the Tobacco Control Measures and to develop a way forward for policy guidelines for sustainability of Tobacco Control Measures. The validation process confirmed that these guidelines were developed through a consultative process with the relevant stakeholders in a Provincial Level consultative meeting chaired by the Director Health Services Punjab. These guidelines were disseminated to the relevant stakeholders by the Program Manager NCD Program. These guidelines, a critical component of sustainable tobacco control, have provided a solid foundation for future Tobacco Control interventions in Punjab Province.

Moving to the second objective related to Coordination with Provincial Stakeholders for integration of Tobacco Control with other Health Sector Programs like TB and NCD. With the continuous liaison and engagement with the stakeholders, Smoking has been made part of the EMR of Punjab TB Control Program and data is being collected for use of smoking among the TB Patients. The validation process was able to corroborate the significance of these meetings through in-depth interviews (IDIs) with stakeholders. Moreover, regarding the integration with NCD Program, the Tobacco Control focal person has been designated in the Prevention and Control of NCD Program Punjab. This is for the first time that a Tobacco Control focal person has been designated in the program. The active coordination and follow-up conducted by the project team, as highlighted in the validation note, were instrumental in fostering collaboration among various agencies and enhancing the integration of Tobacco Control measures into existing healthcare programs.

The validation of the third objective, i.e., supporting the Tobacco Vendors Act and other Tobacco Control Laws implementation efforts of Punjab Provincial Government in identified Districts by monitoring and reporting, showed that the launch of a mobile application in the targeted Districts was based on collaboration with the Tobacco Smoke Free Cities (TSFC) Project, Tobacco Control Cell Islamabad. The mobile application's effectiveness in empowering the public to report violations of tobacco control laws was evident. The project's role in raising awareness about the application and encouraging its use by the general public was unequivocally established. This collaboration is pivotal in leveraging technology for the advancement of tobacco control efforts. The convening of Joint Stakeholders' Meetings, the issuance of directives and the initiation of Tobacco Vendors Licensing for the first time in partner districts all underscored the project's proactive approach in ensuring the

implementation of relevant laws. The collaboration established by the project played a vital role in addressing violations and improving enforcement.

The report concludes with a set of recommendations aimed at sustaining the project's success and advancing tobacco control efforts in Punjab. These recommendations encompass the continuation of initiatives, legal amendments, clarity in licensing processes, enhanced public awareness, technology enhancements, stakeholder engagement, capacity building, research, data collections and legislative advocacy.

The validation process demonstrates that the project achieved its objectives comprehensively. The outcomes, as reflected in the agreed-upon indicators, have been delivered and verified. Collaboration, technology, adaptability and stakeholder engagement were identified as key factors contributing to the project's success. The report highlights the importance of these lessons learned for future public health initiatives and similar projects. The project serves as a testament to what can be achieved through collective action in advancing public health goals.

## 1. Project Outlook

Association for Better Pakistan implemented a project titled “Institutionalizing sustainable tobacco control mechanism in Pakistan”. The project was the continuation of the last phase of BI funded project on establishing sustainable funding mechanism for tobacco control at national and subnational level. In that phase the framework for implementation of TC Laws was developed and a directive was circulated to the Deputy Commissioners of all the districts of Punjab to implement TC laws. The current project started in October 2021 and is aimed to complete in September 2023. It was implemented at the Provincial as well in the Districts of Multan, Khanewal, Lodhran and Sargodha. Following is the brief insight of the project;

**Purpose:** To institutionalize sustainable tobacco control mechanism at sub-national level through policy reforms and integration as well as through implementation and monitoring of TVA, 1958 in selected districts of Punjab.

### **Objectives:**

**Objective 1:** To develop provincial policy guidelines to countering existing and emerging TC challenges

#### **Outcome Indicators of Objective 1:**

- a. Situation Analysis Report to identify the policy gaps in implementation of Tobacco Control Program
- b. Development and passage of Provincial Guidelines on Sustainable Tobacco Control Mechanism
- c. Monitoring report on Tobacco Control existing and emerging Challenges

**Objective 2:** To support Punjab Government for institutionalizing the sustainable Tobacco Control Mechanism through integration of Tobacco Control in other health programme like NCD and TB

#### **Outcome Indicators of Objective 2:**

- a. No. of consultative meetings with the relevant stakeholders
- b. Baseline data report of funding & sustainability status in Punjab
- c. Directive issued for the integration of tobacco control measures in the provincial healthcare programs

**Objective 3:** To support the Tobacco Vendors Act and Tobacco Control Laws implementation efforts of Punjab Provincial Government in identified districts by monitoring and reporting

#### **Outcome Indicators of Objective 3:**

- a. Launch of mobile application in the selected districts of south Punjab
- b. Monitoring & reporting of violation
- c. Two Bi-Annual monitoring reports on monitoring and violation statuses of tobacco control laws implementation
- d. Trend report on the violation of TC laws
- e. Third party validation report

## 2. Validation Methodology:

Rabta Kar development consultants were engaged by ABP to conduct comprehensive third-party validation of the project. As part of the assignment, Rata Kar performed the following tasks;

### Task 1: Development of Validation Methodology

- a. Development of a clear and comprehensive methodology designed to validate the project in accordance with the specified scope of work.
- b. Approval from ABP management for the proposed methodology.
- c. Development of necessary tools required for collecting the essential data and information.
- d. Sharing of a quality assurance plan for data collection, and prior approval from ABP management to ensure data integrity and reliability.

### Task 2: Data Collection

- a. Data collection using the agreed-upon framework, methodology, and validation tools.

### Task 3: Data Analysis, Reporting and Presentation

- a. Conduct a thorough analysis of the collected data, extracting key findings and insights.
- b. Prepare a comprehensive report based on the data analysis and present it to the appropriate authority.
- c. Facilitate a Dissemination Meeting to showcase the methodology employed and highlight key findings.

## 2.1 Approach and Methodology

To conduct a comprehensive Third-Party Validation (TPV) of the project and ascertain the achievement of the project objectives vis-à-vis their progress/achievements against the Key Performance Indicators (KPIs), ABP engaged Rabta Kar Development Consultants to carry out the validation exercise and to identify and document the achievements of the project.

To carry out a thorough external validation of the project, Rabta Kar adopted a participatory and inclusive approach. Rabta Kar's method was tailored to suit the scope, requirements and timeline of this validation efficiently. A qualitative research design was suggested, which included document review, Key Informant Interviews (KIIs) and the systematic identification and documentation of important lessons learned and key achievements of the project. Throughout this process, Rabta Kar's aim was to conduct a fair and evidence-based validation of the project's accomplishments, with a strong focus on engaging key stakeholders who were vital to its implementation.

The validation exercise was carried out at Lahore and Islamabad to cover the stakeholders based there and in two of the four target districts, i.e. Multan and Khanewal, to take the opinion of the stakeholders based at the district level.

The methodology adopted by Rabta Kar followed four major phases presented in following diagram.

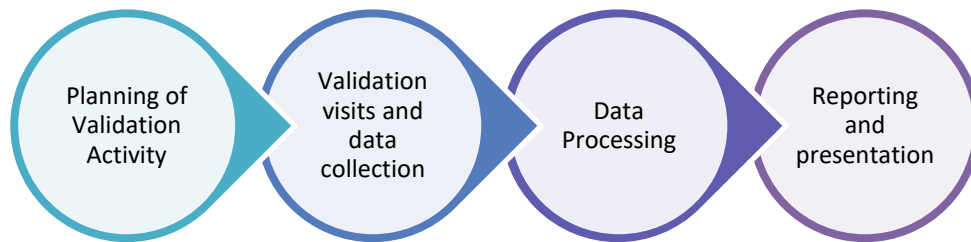


Figure 1: Phases of validation process

### 2.1.1 Planning of Validation Activity

The first step in agreed methodology was the assignment planning. Rabta Kar team conducted a comprehensive inception meeting with the officials of ABP and briefed them about overall planning of the assignment. The meeting helped in fully understanding of the assignment objectives, its use, and level of efforts to be required. Finalization of validation methodology, sample design and its parameters, timelines and validation protocols.

#### **Acquisition of project related documents and their review**

ABP team shared all project related documents with Rabta Kar. All the project documents were thoroughly reviewed by team consisting of Aftab Ahmed Awan and Faisal Shuaib to understand the Assignment objectives and level of efforts to be intended. This review supported Rabta Kar to develop Validation implementation plans including team composition, validation visits' protocols, coordination mechanism, define data processing and cleaning protocols and submission of deliverables.

#### **Inception Report**

The inception report submitted by Rabta Kar included information about the background of validation exercise, overall scope of the assignment, planning of all activities, validation methodology, overall assignment plan, deliverables, list of personnel along with their names and responsibilities for different tasks, methodology, implementation arrangements, team composition and submission of deliverable etc.

#### **Development of IDI Questionnaire**

The IDI questionnaires have been carefully designed to align with the project's objectives, outcome indicators, and specific areas of inquiry. Based on the project's objectives and stakeholder input, comprehensive questionnaires have been designed which include open-ended questions to elicit

detailed responses. The questions cover a range of topics, such as project implementation, challenges faced, achievements and stakeholder engagement. The key questionnaires are attached at **Annex-I**.

## 2.1.2 Validation Visits and Data Collection

### Document Review for Third-Party Validation of the Tobacco Control Project:

The project's third-party validation process relied heavily on document review. It consisted of a careful analysis of various documents related to the project to collect objective and verifiable evidence. The process through which these documents were developed was also reviewed. The purpose of this document review was to evaluate the project's progress and achievement of the intended results. The following is the list of document that were reviewed

1. Project Proposals and Agreements
2. Project Work Plans and Timelines
3. Policy Guidelines and Directives issued by Provincial and District Authorities
4. Reports and Monitoring Data
5. Consultative Meetings' Records
6. Mobile Application Usage and Reporting

Data Document review was done rigorously to provide a fair assessment of the project's achievements and alignment with the objectives. The document review provided valuable information on the project's design, implementation, and outcomes. It helped to verify the project's achievements and challenges. The document review was conducted in a systematic and rigorous manner to ensure an impartial and evidence-based assessment of the project.

### In Depth Interviews (IDIs)

In-Depth Interviews (IDIs) are an essential qualitative data collection method that was employed as part of the third-party validation process. A total of seven IDIs were conducted, each serving as an opportunity to gather detailed insights and perspectives from key stakeholders involved in or affected by the project. The ethical aspects of the data collection were brought into consideration while conducting the interviews.

### Details of IDIs and Meetings Conducted as part of Evaluation

Sr. No	Respondent
01	<b>Provincial Health Department</b> Dr. Shahid Hussain Magsi, Provincial TC Focal Person
	<b>District Excise and Taxation Department</b> 1. Mr. Aslam Shahbaz: Excise Inspector Licensing, Khanewal 2. Rao Shakeel Ahmed: Excise Inspector Licensing, Multan
02	<b>District Health Authority</b>

	<ul style="list-style-type: none"> <li>• Dr. Adul Majeed Bhatti: CEO DHA Khanewal</li> <li>• Dr. Ibrar Ahmed: Program Director, DHDC Khanewal</li> <li>• Dr. Arshad Abbas: DHO – DHA Multan and TC Focal Person</li> </ul>
<b>03</b>	<b>The Union</b> Mr. Khurram Hashmi, Sr. Technical Advisor – The Union, Pakistan
<b>04</b>	<b>TSFC</b> Rana Aftab Ahmed – Project Manager TSFC
<b>05</b>	<b>Heartfile</b> Ihtiram ul Haq Khattak – Sr. Program Manager
<b>06</b>	<b>ABP Project Team</b> Shadman Aziz – Project Manager Zafar Iqbal – Dy. Project Manager Tahir Khan – Operations Manager – Multan

Table 1 List of In-depth Interviews

### 2.1.3 Data Processing:

The data collected from the IDIs underwent rigorous qualitative data analysis. The process encompassed the following steps:

1. **Transcription:** Recorded interviews were transcribed verbatim, ensuring accuracy and completeness.
2. **Data Reduction:** Data was condensed and organized into manageable categories and themes.
3. **Theme Identification:** Overarching themes and patterns emerging from the interviews were identified. These themes encompassed project successes, challenges, stakeholder perspectives, and recommendations.
4. **Interpretation:** Data was interpreted within the context of the project's objectives and outcome indicators. This involved understanding the significance of the themes and their implications.
5. **Report Writing:** Findings from the IDIs were presented in a comprehensive report. The report included summaries of each interview, thematic analysis, and insights drawn from stakeholder perspectives.

The IDIs provided valuable qualitative data that, when systematically analyzed, contributed to the impartial third-party validation of the project's achievements and challenges. They shed light on the perspectives of key stakeholders involved in or affected by the project's implementation.

### 2.1.4 Data Reporting:

Rabta Kar Development Consultants recognizes the importance of systematically identifying and documenting critical lessons learned and key achievements from the third-party validation processes, which included document review and in-depth interviews (IDIs). The objective has been to extract

valuable insights that contributed to an objective and comprehensive validation of the project's achievements. The process included the following steps:

1. **Thematic Analysis:** Rabta Kar employed a rigorous thematic analysis process for both the document review and IDIs. This involved systematically identifying, coding, and categorizing data into meaningful themes and patterns. Themes encompassed project achievements, challenges, stakeholder perspectives, and recommendations. Thematic analysis ensured a structured and systematic approach to information extraction.
2. **Cross-Referencing:** During the thematic analysis, the consultants cross-referenced information obtained from different data sources. This involved aligning findings from document review with insights gathered from the IDIs. The cross-referencing process validated information and ensured consistency and corroboration of key achievements and lessons learned across multiple sources.
3. **Stakeholder Perspectives:** In addition to summarizing findings, Rabta Kar has highlighted the perspectives and voices of the key stakeholders interviewed during the IDIs. Their insights have been integrated into the documentation to provide a holistic view of the project's impact and effectiveness.
4. **Comprehensive Reporting:** Lessons learned and key achievements have been documented comprehensively in the final validation report. Each finding has been attributed to specific project objectives and indicators, establishing a direct linkage between project outcomes and the insights gathered. The report presents a clear narrative of the project's successes, challenges, and areas for improvement based on thematic analysis and cross-referencing.
5. **Recommendations:** Building on the identified lessons learned and key achievements, the team has provided actionable recommendations. These recommendations have developed with a focus on enhancing project outcomes and sustainability, addressing challenges, and optimizing stakeholder engagement.

Through these systematic approaches, Rabta Kar Development Consultants has not only identified and documented critical lessons learned and key achievements of the project but also has ensured that the findings have been presented in a structured, reliable, and actionable manner for the benefit of the project stakeholders and the broader community involved in tobacco control efforts in Punjab province, Pakistan.

## 2.2 Ethical Consideration

The Consultants are deeply committed to upholding the highest ethical standards in all stages of the third-party validation process for the "Institutionalizing sustainable tobacco control mechanism in Pakistan" project. Ethical considerations are paramount to ensure the integrity, respect, and confidentiality of all stakeholders involved. Here's how Rabta Kar ensured and adhered to the ethical principles:

**1. Informed Consent:** Before conducting in-depth interviews (IDIs), Rabta Kar prioritized obtaining informed consent from all participants. This included government officials, ABP team members and other relevant stakeholders. Participants were provided with clear information about the purpose of the interviews, the confidentiality of their responses, and their right to withdraw at any time without consequences.

**2. Confidentiality:** All data collected during the validation process, including interview recordings and transcriptions, are being treated with strict confidentiality. Personal identifiers were removed or anonymized to protect the privacy of participants. Only authorized personnel involved in the validation have access to the data.

**3. Voluntary Participation:** Participation in the IDIs was entirely voluntary. Participants did not face any form of coercion or pressure to share information. Rabta Kar also respected their decisions whether to participate or decline without consequences.

**4. Data Security:** All data collected, including interview recordings and documents, was securely stored and protected against unauthorized access. Measures are in place to safeguard data integrity and confidentiality.

**5. Impartiality:** Rabta Kar is committed to conducting an impartial and objective third-party validation. Rabta Kar did not engage in any activities that may create conflicts of interest or bias in the validation process.



### 3 Findings:

In this chapter, we delve into the findings of the third-party validation process, with a primary focus on validating the achievements of the project in alignment with the agreed-upon deliverables / outcomes. The preceding chapters have detailed the methodologies employed during the validation, including document review and in-depth interviews (IDIs) with key stakeholders. This chapter focuses on the core of this endeavor; the tangible results and outcomes of the project, as validated against the defined objectives.

The project's overarching objectives were established with the aim of advancing tobacco control efforts in Punjab, Pakistan, by addressing various facets of sustainability, integration, and implementation. Each objective was associated with specific outcome indicators designed to provide a clear and measurable assessment of progress. The project's achievements vis-à-vis these outcome indicators are given below, offering a comprehensive evaluation of its impact on the landscape of tobacco control in the region.

**Objective 1: Developing Provincial Policy Guidelines,** the first objective was to develop provincial policy guidelines to address both existing and emerging challenges in tobacco control. The outcome indicators for this objective included:

- Development of a Situation Analysis Report to identify policy gaps,
- Development and passage of Provincial Guidelines on Sustainable Tobacco Control Mechanism
- Generation of a monitoring report on existing and emerging challenges in tobacco control.

**Objective 2: Supporting Institutionalization of Tobacco Control;** The second objective aimed to support the Punjab Government in institutionalizing a sustainable tobacco control mechanism by integrating it into other health programs, specifically the Non-Communicable Diseases (NCD) and Tuberculosis (TB) Control Programs. Outcome indicators encompassed:

- Number of consultative meetings held with relevant stakeholders to assess a baseline on funding and sustainability status in Punjab,
- Issuance of directives for the integration of tobacco control measures into provincial healthcare programs.

**Objective 3: Supporting Implementation of Tobacco Control Laws;** The third objective revolved around supporting the implementation efforts of the Punjab Tobacco Vend Act – 1958 (TVA-1958) and other tobacco control laws in selected districts of South Punjab through monitoring and reporting. Outcome indicators included:

- Successful launch of a mobile application in the targeted districts,
- Continuous monitoring and reporting of violations,
- Submission of two Bi-Annual monitoring reports on the status of tobacco control laws implementation
- Development of a trend report highlighting violations,
- Third-party validation report

The discussion with the representative of donor also revealed that the project was aligned with the Union overall objectives and work in Pakistan. Since the launch of National Tobacco Control Strategy, the focus is shifting towards the establishment and sustainability of provincial tobacco control programs and the project has contributed a lot towards that. As regards the achievements of the project objectives, the project has gone even beyond the set targets. The coordination with the stakeholders at the District and Provincial level is also remarkable. The project has also developed good working relations and inter-grantee coordination including with TSFC and Heartfile and carried out joint interventions in the project. There is need to build on this project success towards the establishment of sustainable tobacco control program.

The project has also faced a number of challenges, including the ownership by the stakeholders and coordination within different stakeholders, like Health and Excise & Taxation Department. ABP team, through continuous coordination and joint working sessions, successfully overcame these challenges. The effective coordination was the key to success for this project.

In the course of the project implementation, the Union shared International experiences and learning. Any time there was need of technical backstopping, the Union provided the required information or reviewed the documents / tools developed. The overall guidance and project planning & implementation support was also provided by the Union.

In the ensuing sections, we will evaluate the extent to which these outcome indicators have been realized, providing a comprehensive assessment of the project's accomplishments and its contributions to advancing tobacco control efforts in Punjab.

### 3.1 Validation of Objective 1:

**Objective-1: To develop provincial policy guidelines to countering existing and emerging TC challenges**

Outcome Indicators	Status of achievement	Means of Verification
1. Situation Analysis Report to identify the policy gaps in implementation of Tobacco Control Program	Completed	Situation Analysis Report and Guidelines for the Tobacco Control were developed in consultation with the Directorate General Health Services Punjab, NCD Program, Punjab TB Control Program and other relevant stakeholders.
2. Development and passage of Provincial Guidelines on Sustainable Tobacco Control Mechanism	Completed	

3. Monitoring report on Tobacco Control existing and emerging Challenges	Completed	Executed in collaboration with other The Union Partners
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**Table 2 Validation of Objective 1 Outcome Indicators**

The first key outcome revolves around the Situation Analysis Report, which aimed to identify policy gaps in the implementation of tobacco control interventions. This report's validation process, involved a review of project documents and in-depth interviews with key stakeholders.

A consultative meeting was convened on December 29, 2021, at the Directorate General of Health Services (DGHS) Office in Lahore. During this meeting, the ABP team presented the situational analysis report, which served as the cornerstone for gap analysis and policy guideline development. The discussions held during this session not only facilitated enhanced coordination and collaboration among stakeholders but also led to the issuance of directives to relevant departments, emphasizing the practical impact of the Situation Analysis Report in shaping and informing policy measures. This validation reaffirms the project's success in achieving this outcome indicator. The Situation Analysis Report and the meeting minutes have been appended as **Annexure -II** to this validation report.

The second outcome pertains to the crafting and endorsement of Provincial Guidelines for a Sustainable Tobacco Control Mechanism. The validation process, in this case, involved an examination of the guidelines, confirming their comprehensiveness and relevance to the tobacco control landscape in Punjab. Moreover, discussions with key stakeholders who participated in the December 29, 2021, consultative meeting held at the DGHS Office in Lahore confirmed the development and dissemination of these guidelines by DGHS and ABP to pertinent stakeholders. These guidelines present the existing state of tobacco control measures based on the situational analysis report and provide a clear roadmap for policy and strategy, with a significant emphasis on sustainability. The responsibilities of relevant departments for the practical implementation are also part of these guidelines. The Provincial Guidelines for a Sustainable Tobacco Control Mechanism have been provided as **Annexure - III** to this validation report.

The third outcome is related to the generation of a monitoring report that addresses both current and emerging challenges in tobacco control. This achievement has been validated through a review of project documents and IDI with the Sr. Program Manager Heartfile. A study titled "Tobacco and New Nicotine Products in Pakistan – a Landscaping Study" was conducted in collaboration with Heartfile as part of a network of partners of The Union and aimed to comprehensively examine the landscape surrounding new nicotine products within Pakistan. The study spanned a considerable timeframe, from February to September 2022, and encompassed thirty cities across all four provinces and two regions, covering a wide scope of data collection and analysis. The draft of this comprehensive study is under review and may be available by early 2024. The validation team has gone through the draft report, by identifying policy gaps and evaluating available policy options, this study significantly contributes to shaping evidence-based tobacco control policies and informs decision-makers on whether to ban or regulate these products in Pakistan. It also serves as a valuable tool to assess whether these products act as a gateway to smoking or as aids for smokers looking to quit the habit. The IDI with the Sr. Program

Manager was conducted to ascertain the quality of input provided by ABP. He expressed that ABP provided support in the collection of data. The support and input provided by ABP was highly appreciated by Heartfile representative. It was reported by Heartfile that valuable inputs provided by ABP team helped in strengthening the data collection tools and enriched the study. The timeliness of the data collection and quality of the data shared was also appreciated in the interview. Moreover, the feedback on first draft report was also very valuable for the finalization of report.

## 3.2 Validation of Objective 2:

### Objective 2: Institutionalizing the sustainable Tobacco Control Mechanism

Outcome Indicators	Status of achievement	Means of Verification
1. Directive issued for the integration of tobacco control measures in the provincial healthcare programs	<p>Tobacco control has been integrated with the following programs;</p> <ol style="list-style-type: none"> <li>1. NCD (With the designation of Tobacco Control Focal Person for the first time)</li> <li>2. TB Control Program (EMR Reporting of smoking data among the TB Patients)</li> </ol>	<p>Notification of the designation of Focal Person</p> <p>Notification of the inclusion of “smoking” in the EMR of TB control program and analysis of the EMR data</p>

Table 3: Validation of Objective 2 Outcome Indicators

The accomplishment of the outcome indicator, involving consultative meetings with key stakeholders was validated through a multi-faceted approach. This validation process combines in-depth interviews (IDIs) with stakeholders and a review of meeting minutes. Stakeholders' IDIs provided firsthand insights into the frequency and the nature of discussions held during these crucial meetings. They underscored the collaborative essence of these gatherings as platforms for transparent discussions and problem-solving.

The ABP started the implementation on the project, in October 2021, with a meeting with Director General Health Services Punjab and formally requested the support of the Directorate as well as nomination of a provincial focal person for Tobacco Control efforts in Punjab. In response to it, the first ever tobacco control focal person was nominated in Punjab from the NCD project. It was also the start of collaboration and integration of Tobacco Control into NCD project. Similarly when the project started its operations at the District level, the District Focal Persons were nominated by the concerned DHAs. The request letter and the notification for the nomination of Provincial and District focal persons are attached at **Annex-IV**.

The validation was also carried through an examination of meeting minutes, which recorded deliberations, decisions and actions taken during each meeting.

The compilation of baseline data on funding and sustainability in Punjab and the integration of tobacco control measures into provincial healthcare programs was done through review of the meeting reports

capturing this information and shared with the validation consultants. It was initially brought into discussion during the Provincial Consultative Meeting held in December 2021. The ABP team facilitated this meeting, highlighting areas lacking sustainability and integration, underlining their critical importance for advancing tobacco control efforts in Punjab. Following this, the project initiated a formal request to the Director General Health Services (DGHS) Punjab for the integration of tobacco control measures with other health sector programs. This collaborative is documented in the project records, attached as **Annexure V**. The project team conducted a series of meetings with the Program Manager of the Punjab TB Control Program and other relevant stakeholders to sensitize them about the significance of integration within the broader healthcare context. As a result of these collaborative efforts and under the directives of DGHS, the Program Manager of the TB Control Program directed the Project Director of the Health Information and Service Delivery Unit (HISDU) to incorporate a field related to "smoking" within the Electronic Medical Record (EMR) system, as outlined in **Annexure VI**. This integration now enables the monthly reporting of smokers' data among TB patients, contributing to evidence-based policy making for tobacco control and enhancing its sustainability.

### 3.3 Validation of Objective 3:

**Objective 3: To support the Tobacco Vendors Act and Tobacco Control Laws implementation efforts of Punjab Provincial Government in identified districts by monitoring and reporting**

Outcome Indicators	Status of achievement	Means of Verification
1. Launch of mobile application in the selected districts of south Punjab	Mobile Application Launching sessions held in all the four districts	Reports of the District Launches  Photographs & Attendance Sheets  Validation through IDIs by the Provincial and District Authorities
2. Facilitate the district authorities to issue licenses under the Punjab TVA-1958	Licenses are issued in District Multan, Lodhran and Khanewal. In Sargodha, E&T department is likely to issue licenses very soon.	Licenses issued by the authorities  IDIs with the District Excise and Taxation Departments
3. Monitoring & reporting of violation	The project has faced some challenges in these deliverables as the database reports of the Smoke Free Pakistan Mobile Application could not be generated due to some technical issue. However, the issue was resolved by TSFC in last quarter and reports being generated are	Mobile application functioning
4. Four Bi-Annual monitoring reports on monitoring and violation statuses of tobacco control laws implementation		IDIs with the District Health Authorities' officers
5. Trend report on the violation of TC laws		Database reports

	analyzed and shared with the district authorities	
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**Table 4: Validation of Objective 3 Outcome Indicators**

The validation process for the successful launch of a mobile application in the targeted districts has been executed primarily through in-depth interviews (IDI) with representatives of the Tobacco Control Cell Islamabad and District Health Authorities of Multan and Khanewal. The “Smoke Free Pakistan” mobile application, developed by the Tobacco Control Cell, Government of Pakistan, empowers the public to report violations of tobacco control laws in public spaces. Accessible through the Google Play Store, the user-friendly platform allows individuals to report various types of violations, including breaches related to points of sale, proximity to educational institutions, smoking incidents in public areas, and compliance with signage requirements mandated by prevailing laws.



The mobile application was initially launched on March 9, 2020, under the auspices of the Commissioner Karachi but encountered certain limitations during its initial phase. A collaborative effort with ABP was undertaken to raise awareness about the application among the general populace, significantly enhancing its usage and effectiveness. The partnership between the project and the Tobacco Control Cell Islamabad has not only increased public engagement but has also facilitated the structured collection of vital data, channeled to the relevant authorities for appropriate actions. Some of the database reports are attached at **Annex-VII**.

Another significant achievement was the initiation of Tobacco Vendors Licensing in partner districts, issuing licenses under the 1958 Act. This step has not only strengthened the implementation of laws but also laid the foundation for curbing violations. Stakeholders highlighted the pivotal role played by the ABP project in fostering coordination and collaboration among different stakeholders, instrumental in initiating the licensing process for tobacco vendors. Additionally, health department officials incorporated tobacco control into awareness campaigns conducted by the District Health Authority, conducting sessions in educational institutions to raise awareness about the harmful effects of tobacco.

While these achievements are commendable, the stakeholders also highlighted the challenges which persist in the licensing process, including the outdated nature of the law, which does not encompass new products, and ambiguity regarding license fees and fee collection. Addressing these challenges is pivotal to further improving the implementation of tobacco control laws. The collaboration and coordination exhibited in these endeavors underscore the significance of multi-stakeholder engagement in advancing the cause of tobacco control, fostering cooperation among relevant departments, and contributing to a broader public health agenda. These collaborative efforts exemplify the power of

collective action in achieving comprehensive and effective tobacco control measures. Tobacco Vendor Licenses issues by the project partner districts are attached at Annex-VIII.



## 4 Conclusion

The validation process undertaken to assess the project's achievements and outcomes has provided evidence of its significant success. Across various outcome indicators outlined in the project proposal, the detailed validation has demonstrated that the project has not only met but exceeded its objectives in a thorough manner.

With regards to development and passage of Provincial Guidelines on Sustainable Tobacco Control Mechanism, the validation process confirmed that these guidelines were not just created but actively discussed and shared with relevant stakeholders by the Prevention and Control of NCD Program Punjab. It shows the ownership of these guidelines by the concerned government program. These guidelines, a critical component of sustainable tobacco control, have provided a solid foundation for future policy directions.

Moving to consultative meetings held with relevant stakeholders, the validation process was able to substantiate the connotation of these meetings through in-depth interviews (IDIs) with the relevant stakeholders. The active coordination and follow-up conducted by the project team, as highlighted in the validation note, were instrumental in fostering collaboration among various departments and enhancing the integration of tobacco control measures into existing healthcare programs. The integration of Tobacco Control into the NCD program and TB Control Program are the innovative ones at the provincial or national one. It will contribute to the sustainability of tobacco control interventions at the provincial level.

The launch of a mobile application in the targeted districts was based on discussions with the Tobacco Control Cell Islamabad. The mobile application's effectiveness in empowering the public to report violations of tobacco control laws was evident. The project's role in raising awareness about the application and encouraging its use by the general public was unequivocally established.

Finally, convening of Joint Stakeholders' Meetings, the issuance of directives, and the initiation of Tobacco Vendors Licensing in model districts underscored the project's proactive approach in ensuring the implementation of tobacco control laws. The issuance of Tobacco Vendors' Licenses in the partner districts was also an innovation in these districts and issued for the first time. The directives issued by the concerned Divisional Directors Excise, Taxation and Narcotics Control Departments will also ensure the sustainability of this activity and the issuance of licenses shall be continued after the project intervention. The collaboration fostered by the project played a pivotal role in addressing violations and prioritizing enforcement interventions.

In conclusion, the validation process provides strong evidence that the project has not only achieved its stated objectives but has done it effectively. The outcomes and impact of the project, as reflected in the agreed-upon outcome indicators, have been delivered and verified through a rigorous validation process. The collaborative efforts, coordination, and proactive approach demonstrated throughout the project's implementation have not only contributed to the success of tobacco control efforts in Punjab but also underscored the importance of collective action in advancing public health initiatives. This

project serves as a testament to what can be achieved when stakeholders unite in pursuit of a common goal, ultimately benefiting the broader community involved in tobacco control efforts in Punjab.



## 5 Lessons Learnt

The successful implementation of the tobacco control project in Punjab has yielded important lessons that can inform future public health initiatives and similar projects. These lessons highlight the importance of strategic planning, collaboration, adaptability, and a keen understanding of local contexts in achieving project objectives. Here are some key lessons learned:

1. **Collaboration is the Key:** The project's achievements were significantly amplified through collaboration and partnerships with various stakeholders, including government departments, health authorities and partner organizations. Collaborative efforts not only ensured the project's success but also facilitated the integration of tobacco control measures into existing healthcare programs.
2. **Awareness and Education Drive Impact:** Raising awareness about tobacco control measures and educating the public about the harmful effects of tobacco use are essential components of any successful project.
3. **Technology Enhances Engagement:** The utilization of a mobile application to empower citizens in reporting tobacco control violations demonstrated the potential of technology in public health initiatives. Leveraging user-friendly apps can be a powerful tool to actively involve the community in reporting and enforcement efforts.
4. **Comprehensive Guidelines are Vital:** The development and passage of comprehensive provincial guidelines for sustainable tobacco control mechanisms provided a solid framework for future advocacy and policy implementation. Clear guidelines are essential for bridging the policy gaps and maintaining project sustainability.
5. **Challenges are Opportunities:** The identification of challenges, such as outdated legislation, fee collection ambiguities, and gaps in policy, presents opportunities for advocacy and policy reform. Addressing these challenges is integral to long-term success.
6. **Local Context Matters:** Understanding the local context, including cultural norms and socioeconomic factors, is essential for tailoring interventions and messages effectively. Project strategies aligned with the specific needs and realities of Punjab province.
7. **Coordination Drives Results:** The coordination and follow-up efforts undertaken by the project team were instrumental in achieving objectives and fostering collaboration among different agencies. Regular meetings and communication channels kept stakeholders engaged and motivated.

In conclusion, the lessons learned through the project serve as a valuable resource for enhancing the effectiveness of similar initiatives.

## 6 Recommendations:

Based on the findings of the validation, the consultants make the following recommendations;

1. **Continuation of Initiatives:** It is imperative to ensure the continuity of the initiatives started through the project. This includes sustained efforts for improving tobacco control and to control novel tobacco products like Velo and Vape etc. The project's successful coordination and collaboration should serve as a foundation for ongoing efforts to enhance tobacco control.
2. **Advocacy for Legal Amendments:** Advocate for amendments in tobacco control laws to address the challenges posed by emerging tobacco products and ensure that they are banned or regulated effectively. This should include advocating for comprehensive coverage of new tobacco products and aligning the legal framework with evolving industry trends.
3. **Clarity in Licensing Process:** The project highlighted challenges related to the licensing process under the Tobacco Vend Act. Recommendations should be made to authorities for amending the Act to provide greater clarity regarding the licensing process, licensing fee structure, and the designated head of account for fee deposits. Clear and concise regulations will facilitate compliance and enforcement. It will also be helpful in scaling up the intervention in other districts of Punjab.
4. **Enhanced Public Awareness:** Continue public awareness campaigns to educate the community about the dangers of tobacco use and the importance of reporting violations. These campaigns should target different age groups and demographics to ensure a broad reach.
5. **Technology Enhancements:** Invest in the continuous improvement of the mobile application for reporting tobacco control violations. Regular updates and enhancements to the app can improve user experience and increase its effectiveness in enforcing tobacco control laws.
6. **Stakeholder Engagement:** Maintain active engagement with stakeholders, including government departments, health authorities, and community organizations, to sustain the collaborative spirit and collective efforts observed during the project. Regular meetings and communication channels should be preserved.
7. **Capacity Building:** There is a need to invest in ongoing capacity building for government officials and healthcare professionals involved in tobacco control efforts especially authorized persons. Continuous training and skill development will empower them to effectively enforce and implement tobacco control laws.
8. **Research and Data:** Encourage research and data collection on tobacco control trends and challenges, including the impact of novel tobacco products. Reliable data is essential for evidence-based policymaking.
9. **Advocacy for Increased Funding:** Advocate for increased funding for tobacco control initiatives at the provincial level. Adequate financial resources are essential for sustaining and expanding efforts in the fight against tobacco use.

10. **Community Involvement:** Promote community involvement in tobacco control efforts through the establishment of community-based awareness programs and initiatives. Engaged communities can serve as powerful advocates for tobacco control.
11. **Legislative Advocacy:** Engage in continuous advocacy efforts aimed at strengthening tobacco control legislation, including measures to reduce tobacco advertising, promotion, and sponsorship, and to create smoke-free environments.

By implementing these recommendations, the future projects can build upon the achievements of the current project and contribute to the ongoing fight against tobacco use in Punjab. These measures will not only enhance the sustainability of tobacco control efforts but also contribute to the broader public health goals of creating a tobacco-free society.



**In-depth Interview Guidelines – District Excise and Taxation Department****Consent form**

**Project Title:** Institutionalizing Sustainable Tobacco Control Mechanism in Pakistan

**Researcher:** Aftab Ahmed Awan (Rabta Kar Development Consultants)

**Conducting Organization:** Association for Better Pakistan (ABP)

**Date:** \_\_\_\_\_

**Introduction:**

You are invited to participate in an Individual In-Depth Interview (IDI) as part of the third-party validation process for the project titled "Institutionalizing Sustainable Tobacco Control Mechanism in Pakistan," implemented by the Association for Better Pakistan (ABP). Aftab Ahmed Awan, representing Rabta Kar Development Consultants, will conduct this interview. This document aims to provide you with information about the nature and purpose of the interview. The purpose of this IDI is to gather valuable information and insights from stakeholders and government officials regarding the project's progress, challenges, and impact. Your participation is integral to the validation process and will contribute to improving the effectiveness of the project. The interview will take approximately 45 minutes. Your participation in this interview is entirely voluntary, and you have the right to decline to answer any questions or withdraw from the interview at any time without facing any consequences. Your decision to participate or not will not impact your current or future relationship with ABP, Rabta Kar Development Consultants, or any other organization involved in the project.

**Confidentiality:**

Your participation and the information you provide will remain strictly confidential. All data collected will be de-identified, ensuring your anonymity.

**Consent:**

I have read and understood the information provided in this Informed Consent Form. I have had the opportunity to ask questions and have received satisfactory answers. I voluntarily agree to participate in the Individual In-Depth Interview (IDI).

Participant's Name: \_\_\_\_\_

Participant's Designation: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Interviewer's Name: Aftab Ahmed Awan

Signature: \_\_\_\_\_

## **Questionnaire**

### **Achievements:**

1. Regarding the Joint Stakeholders' Meetings with the Excise & Taxation and Health Departments in Punjab to assess the implementation status of Tobacco Control Laws, could you share the main discussions and outcomes of these meetings? How useful have these meetings been
2. How has the letter issued by the Director of the Excise & Taxation Department to the District ETOs for the implementation of the Tobacco Vendors Act (TVA) helped? How has the progress of this implementation unfolded since then?
3. When has the process to issue licenses initiated in your district?
4. What can you tell us about the initiation of Tobacco Vendors Licensing in the partner districts? Have there been any notable challenges or successes in this process?
5. The TSFC Mobile Application was launched in all four districts for reporting violations of Tobacco Control Laws. Could you share insights into the usage and effectiveness of this application in monitoring and reporting violations?

### **Challenges:**

5. In your experience, what have been the primary challenges encountered in the implementation of Tobacco Control Laws and the Punjab TVA-1958 within your district?
6. Have there been any specific obstacles or difficulties in coordinating efforts with other departments and stakeholders to ensure the successful enforcement of these laws?
7. What steps are taken to overcome these challenges?

### **Achievements and Lessons Learned:**

7. What achievements or positive outcomes have you observed in the enforcement of Tobacco Control Laws during the project's implementation?
8. From your perspective, what are the most significant lessons learned from this project in terms of improving the implementation of Tobacco Control Laws in your district?

### **Recommendations:**

9. Based on your experience with this project, do you have any recommendations or suggestions for further enhancing the implementation of Tobacco Control Laws, especially in the context of the Punjab TVA-1958?
10. Is there anything else you would like to add or any additional insights you believe are important for the validation of the project's achievements and its impact on tobacco control efforts in your district?

Thank you for your valuable input, and your participation in this interview is greatly appreciated.

## In-depth Interview Guidelines – District Health Authority

### Consent form

**Project Title:** Institutionalizing Sustainable Tobacco Control Mechanism in Pakistan

**Researcher:** Aftab Ahmed Awan (Rabta Kar Development Consultants)

**Conducting Organization:** Association for Better Pakistan (ABP)

**Date:** \_\_\_\_\_

### Introduction:

You are invited to participate in an Individual In-Depth Interview (IDI) as part of the third-party validation process for the project titled "Institutionalizing Sustainable Tobacco Control Mechanism in Pakistan," implemented by the Association for Better Pakistan (ABP). Aftab Ahmed Awan, representing Rabta Kar Development Consultants, will conduct this interview. This document aims to provide you with information about the nature and purpose of the interview. The purpose of this IDI is to gather valuable information and insights from stakeholders and government officials regarding the project's progress, challenges, and impact. Your participation is integral to the validation process and will contribute to improving the effectiveness of the project. The interview will take approximately 45 minutes. Your participation in this interview is entirely voluntary, and you have the right to decline to answer any questions or withdraw from the interview at any time without facing any consequences. Your decision to participate or not will not impact your current or future relationship with ABP, Rabta Kar Development Consultants, or any other organization involved in the project.

### Confidentiality:

Your participation and the information you provide will remain strictly confidential. All data collected will be de-identified, ensuring your anonymity.

### Consent:

I have read and understood the information provided in this Informed Consent Form. I have had the opportunity to ask questions and have received satisfactory answers. I voluntarily agree to participate in the Individual In-Depth Interview (IDI).

Participant's Name: \_\_\_\_\_

Participant's Designation: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Interviewer's Name: Aftab Ahmed Awan

Signature: \_\_\_\_\_

## Questionnaire

### Achievements and Impact:

1. From the perspective of the Health Department, could you share your observations and insights regarding the project's impact on tobacco control efforts in the district? What achievements have you noticed?
2. How has the collaboration between the Health Department and other stakeholders, such as the Excise & Taxation Department, contributed to advancing tobacco control measures in the district?
3. In your view, have there been specific public health improvements or reductions in tobacco-related health issues as a result of the project's activities? If so, could you elaborate on these improvements?

### Health Issues Related to Tobacco Use:

4. Can you describe the prevalent health issues and challenges in the district that are directly linked to tobacco use? What are the most pressing concerns?
5. How has the project addressed or mitigated these health issues caused by tobacco use? Are there specific interventions that have proven to be particularly effective?

### Challenges and Lessons Learned:

6. What challenges or obstacles has the Health Department encountered in implementing tobacco control measures and addressing tobacco-related health issues in the district?
7. From your perspective, what are the key lessons learned from this project in terms of improving public health outcomes and reducing the negative health effects of tobacco use?

### Recommendations for Future Efforts:

8. Based on your experience with this project, what recommendations or strategies do you believe should be considered for future initiatives aimed at combating tobacco-related health issues in the district, particularly related to the implementation of Tobacco Control Laws?
9. Are there any additional resources, support, or partnerships that the Health Department would find beneficial in its ongoing efforts to address tobacco-related health concerns?

Is there any other information or insights you would like to share regarding the project's impact on public health and tobacco control efforts in the district?

## In-depth Interview Guidelines – Provincial Stakeholders – Lahore

### Consent form

**Project Title:** Institutionalizing Sustainable Tobacco Control Mechanism in Pakistan

**Researcher:** Aftab Ahmed Awan (Rabta Kar Development Consultants)

**Conducting Organization:** Association for Better Pakistan (ABP)

**Date:** \_\_\_\_\_

### Introduction:

You are invited to participate in an Individual In-Depth Interview (IDI) as part of the third-party validation process for the project titled "Institutionalizing Sustainable Tobacco Control Mechanism in Pakistan," implemented by the Association for Better Pakistan (ABP). Aftab Ahmed Awan, representing Rabta Kar Development Consultants, will conduct this interview. This document aims to provide you with information about the nature and purpose of the interview. The purpose of this IDI is to gather valuable information and insights from stakeholders and government officials regarding the project's progress, challenges, and impact. Your participation is integral to the validation process and will contribute to improving the effectiveness of the project. The interview will take approximately 45 minutes. Your participation in this interview is entirely voluntary, and you have the right to decline to answer any questions or withdraw from the interview at any time without facing any consequences. Your decision to participate or not will not impact your current or future relationship with ABP, Rabta Kar Development Consultants, or any other organization involved in the project.

### Confidentiality:

Your participation and the information you provide will remain strictly confidential. All data collected will be de-identified, ensuring your anonymity.

### Consent:

I have read and understood the information provided in this Informed Consent Form. I have had the opportunity to ask questions and have received satisfactory answers. I voluntarily agree to participate in the Individual In-Depth Interview (IDI).

Participant's Name: \_\_\_\_\_

Participant's Designation \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Interviewer's Name Aftab Ahmed Awan

Signature: \_\_\_\_\_

## **Questionnaire**

### **Achievements:**

1. To address the first project objective of developing provincial policy guidelines for countering tobacco control challenges, could you provide insights into the key achievements related to this objective?
2. How was the Situation Analysis Report utilized and shared with stakeholders, and what measures were taken to bridge the identified gaps in tobacco control measures?
3. Regarding the collaborative studies on Non-Nicotine Products (NNPs) and Smokeless Tobacco Products, could you elaborate on the project's involvement and the significance of these studies in the context of tobacco control efforts?

### **Challenges:**

4. From your perspective, what challenges or hurdles were encountered during the development of provincial policy guidelines and the implementation of tobacco control measures in Punjab? How were these challenges addressed?

### **Achievements and Lessons Learned:**

5. Can you share examples of positive outcomes or achievements resulting from the project's efforts in developing policy guidelines and enhancing tobacco control measures in Punjab?
6. What are the most significant lessons learned from this project concerning the development of effective policy guidelines and the sustainability of tobacco control measures?

### **Recommendations:**

7. Based on your experience with this project, do you have any recommendations or suggestions for further advancing tobacco control efforts in Punjab, particularly in the context of policy development and implementation?
8. Are there additional areas or initiatives you believe should be prioritized in future efforts aimed at countering tobacco control challenges in the province?

Is there any other information or insights you would like to share regarding the project's impact on policy development and tobacco control measures in Punjab?

## Guidance Notes for the Meetings with the Donor and the Project Team

### In-depth Interview Guidelines

#### Consent form

**Project Title:** Institutionalizing Sustainable Tobacco Control Mechanism in Pakistan

**Researcher:** Aftab Ahmed Awan (Rabta Kar Development Consultants)

**Conducting Organization:** Association for Better Pakistan (ABP)

**Date:** \_\_\_\_\_

#### Introduction:

You are invited to participate in an Individual In-Depth Interview (IDI) as part of the third-party validation process for the project titled "Institutionalizing Sustainable Tobacco Control Mechanism in Pakistan," implemented by the Association for Better Pakistan (ABP). Aftab Ahmed Awan, representing Rabta Kar Development Consultants, will conduct this interview. This document aims to provide you with information about the nature and purpose of the interview. The purpose of this IDI is to gather valuable information and insights from stakeholders and government officials regarding the project's progress, challenges, and impact. Your participation is integral to the validation process and will contribute to improving the effectiveness of the project. The interview will take approximately 45 minutes. Your participation in this interview is entirely voluntary, and you have the right to decline to answer any questions or withdraw from the interview at any time without facing any consequences. Your decision to participate or not will not impact your current or future relationship with ABP, Rabta Kar Development Consultants, or any other organization involved in the project.

#### Confidentiality:

Your participation and the information you provide will remain strictly confidential. All data collected will be de-identified, ensuring your anonymity.

#### Consent:

I have read and understood the information provided in this Informed Consent Form. I have had the opportunity to ask questions and have received satisfactory answers. I voluntarily agree to participate in the Individual In-Depth Interview (IDI).

Participant's Name: \_\_\_\_\_

Participant's Designation: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Interviewer's Name: Aftab Ahmed Awan

Signature: \_\_\_\_\_

## Questionnaire

### Achievements:

1. What motivated The Union to support this specific project, and how does it align with The Union's broader goals and mission?
2. How does the project align with the other projects funded by The Union and how would you rate the collaboration between all these projects?
3. From your perspective, how effectively were the project activities and interventions implemented by the project team? Were there any challenges or successes that stood out?
4. Were there any particular project activities or initiatives that you found to be innovative or particularly impactful in achieving the project's objectives?
5. Can you comment on the level of collaboration and coordination observed between the Union, the project team, and other stakeholders involved in project implementation?
6. Were there any unexpected challenges or external factors that influenced the project's outcomes or required adaptations during implementation?
7. In your opinion, how well did the project address emerging challenges in the field of tobacco control, such as new nicotine products and evolving industry trends?


### Challenges:

8. In your experience, what have been the primary challenges encountered in the implementation of Tobacco Control Laws and the Punjab TVA-1958 in Pakistan?

### Sustainability and Recommendations:

9. Based on your experience with this project, do you have any recommendations or suggestions for further enhancing the implementation of Tobacco Control Laws, especially in the context of the Punjab TVA-1958?
10. Considering the sustainability of the project's impact, what measures or strategies do you believe should be put in place to ensure that the achievements of the project endure beyond its initial implementation phase?
11. Is there anything else you would like to add or any additional insights you believe are important for the validation of the project's achievements and its impact on tobacco control efforts in Pakistan and in particular in Punjab?

Thank you for your valuable input, and your participation in this interview is greatly appreciated.



**Minutes of the Meeting**  
**"Provincial Stakeholders' Consultative Meeting on Tobacco Control"**  
**December 29, 2021 at 11:30 AM**  
**Board Room of DGHS Office, 24-Cooper Road Lahore**



A consultative meeting of the provincial stakeholders on tobacco control was held under the Chair of Dr. Shahid Hussain Magsi, Director Health Services, Punjab on 29<sup>th</sup> December, 2021 at 1130 hours in the Board Room of DGHS-Punjab Office, Lahore. Dr. Iftikhar Hussain (Provincial Focal Person for Tobacco Control, NCDs Program, Punjab) moderated the meeting and shared the agenda. A brief introduction of the participants was done. The agenda of the meeting was to assess the status of tobacco control policies in Punjab, identify policy gaps and explore the opportunities for making coordinated efforts to bridge the gaps thereby achieving national and international targets. Detailed agenda of the meeting is at Annex-I and the list of participants is at Annex-II.

Dr. Shahid Hussain Magsi, Director Health Services (CDC) welcomed the participants specially the ABP team, for participation in the stakeholders' meeting and apprised the participants on the objectives of the meeting. He said that implementation on laws has always been a challenge. He said that it is a matter of mass awareness and there is need to include Health Education in the school/college curriculum. An effective health education can be a tool to prevent a number of diseases. He quoted an example of US health system where Rs. 3.2 billion was saved through effective health education program. He endorsed the recommendation by Dr. Faisal to work on Rehabilitation Program to support quitting.

**Remarks: Dr. Faisal, Dy. Program Manager – Prevention & Control of NCDs program**  
 In his remarks Dr. Faisal briefed about the NCD program. He said that tobacco is the root cause of almost all the NCDs including Cancer and Cardiovascular Diseases (CVDs). He added that the program has recently collaborated with the district administrations (DCs of all districts) for the implementation of tobacco control laws. He emphasized the need for collaborative approach to ensure implementation of laws. He also said that there should be Rehabilitation Program to facilitate the persons who want to quit smoking. He added that there is need for comprehensive measures to control tobacco use, the first and foremost is the significant increase in price through taxation. A success story in this regard is that of the Australia where prices are increased considerably and it reduced the tobacco use.

**Situation Analysis vis-à-vis National and International Targets**  
 It was followed by the presentation by ABP representative in which current global and national tobacco use situation, the hazards of tobacco use, its economic burden, National and International obligations, laws and their implementation status were discussed.

In the discussion during presentation, Dr. Shaban Nadeem said that it is an area of concern that a large number of youth is indulging in tobacco use on daily basis. Although there is law about

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prohibition of sale to minors and sale around the educational institutions, but implementation is a concern.

Dr. Shahid Magi said that second-hand tobacco is also an area which is affecting those who are not even smokers. It is a challenge to control the tobacco use at public places and public transport as well.

Dr. Faizal added to the discussion that the laws are very comprehensive and there is need for the mechanism to implement them. The program approved PC-I has the provision of advocacy measures only.


The participants also discussed the Situation Analysis Tool to ascertain the current situation of tobacco control in Punjab and chalked out the recommendations to improve the tobacco control situation. The situation analysis is attached at Annex-III.


The meeting concluded with the vote of thanks by the chair.

#### Key decisions:


Following decisions were taken in the meeting:

- i. **Cessation Clinic:** Association for Better Pakistan will pilot the cessation clinics in 4-districts i.e. Lahore, Multan, Rawalpindi and Bahawalpur. NCDs program will provide the necessary supervisory support for establishment. The model of DHQ Hospital Gujranwala, where cessation clinic is established, shall also be reviewed. The results of this pilot shall be monitored and it will be up-scaled to all the 36 districts.
- ii. **Taxation:** Regarding the taxation measures there is need for advocacy at federal level, Association of better Pakistan and NCDs Program shall also raise voice if there are Budget Suggestions requested in this regard.
- iii. **Provincial Tobacco Control Cell:** NCDs program will advocate establishment of a dedicated Provincial Tobacco Control Cell along with allocation of dedicated resource to ensure coordinated efforts for tobacco control measures.

  
Dr. SHAHID HUSSAIN MAGI  
Director Health Services (CDC)  
Directorate General of Health Services Punjab

  
B. TIRHAR HUSSAIN SYED  
Provincial Focal Person for Tobacco Control  
Regional Manager (Operations)  
NCDs Program, DGHS, Punjab

  
Dr. FAIZAL MASOOD  
Dy. Program Manager  
Prevention & Control of NCDs, Program,  
DGHS, Punjab

  
SHADMAN AZIZ  
Project Manager  
Association for Better Pakistan

**Agenda of the Meeting**

Prevention & Control of Non Communicable Diseases – Punjab  
Directorate General Health Services – Punjab

"Provincial Stakeholders' Consultative Meeting on Tobacco Control"

December 29, 2021 at 11:30 AM  
Board Room of DGH5 Office, 24-Cooper Road Lahore

**Objectives:**

1. To assess the current status of implementation of Tobacco Control laws in Punjab
2. Explore the opportunities for making coordinated efforts to achieve national and international targets

Sr. No.	Activity	TimeLine	Facilitator
1.	Welcome Note	11:30 – 11:45	DG Health Services Punjab
2.	Opening Remarks – NCDs and Tobacco Control in Punjab	11:45 – 12:00	Program Manager – NCD
3.	Situation Analysis of the Provincial Tobacco Control Program vis-à-vis National & International Target	12:00 – 12:15	Focal Person Tobacco Control & Representative ABP
4.	Open discussion, way forward to address the key issues	12:15 – 12:45	Focal Person Tobacco Control & Representative ABP
5.	Closing remarks & Vote of Thanks	12:45 – 1:00	Program Manager – NCD
6.	Lunch	1:15	

## Annex – III Provincial Guidelines on Tobacco Control Measures

### Provincial Guidelines and Recommendations Sustaining Tobacco Control Measures in Punjab December 29, 2021 – Lahore

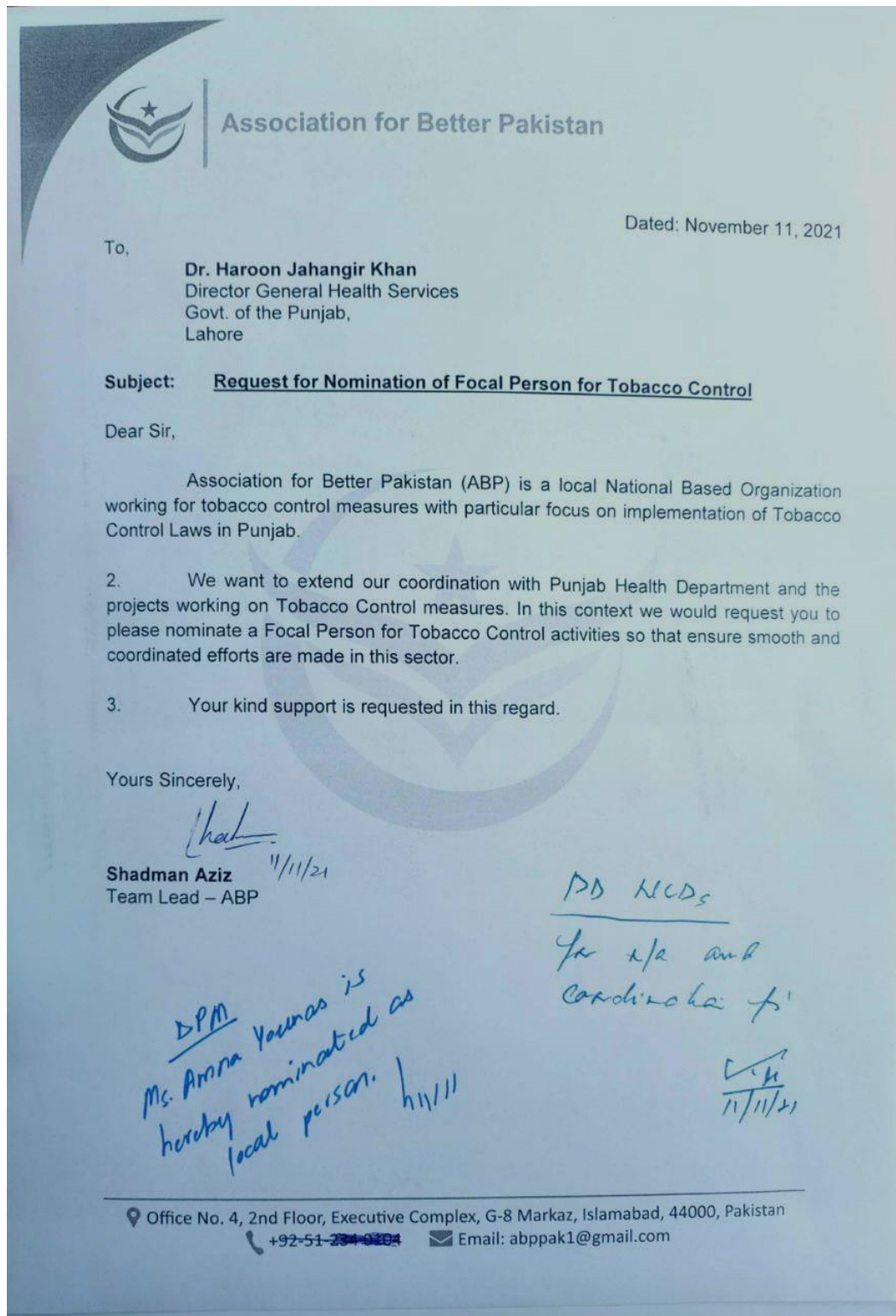
Indicator	Current Status	Recommendation	Responsibility
<b>Policy / Strategy Measures</b>			
<b>FCTC – 5.2</b> <b>(a)</b> Establish or reinforce and finance a national <b>(provincial)</b> coordinating mechanism or focal points for tobacco control;  <b>(Provincial Tobacco Control Focal Person for coordinated efforts)</b>	The tobacco control focal person has been nominated, however, the program shall revise the nomination and designate focal person by designation.	Revised nomination shall be issued shortly.	NCD Program
<b>(b)</b> Adopt and implement effective legislative, executive, administrative and/or other measures and cooperate, as appropriate, with other Parties in <b>developing appropriate policies</b> for preventing and reducing tobacco consumption, nicotine addiction and exposure to tobacco smoke.  1. Provincial Tobacco Control Strategy to guide the	There was a strategy, but it is	A new tobacco control strategy shall be	NCD Program in

Indicator	Current Status	Recommendation	Responsibility
implementation of Tobacco Control Program	outdated and needs to be revised.	developed.	coordination with ABP
2. Provincial Tobacco Control Action Plan	No formal work plan as it is through the district administration	May be developed if there are resources to implement the tobacco control program	NCD Program in coordination with ABP
3. Policies to protect people from Tobacco Smoke i.e. Smoke Free Public Places	No formal policy, it is carried out through district administration, but it is a big challenge.	There is need to develop comprehensive strategy to cope up with this issue	NCD Program in coordination with ABP
4. Policy & guidelines for cessation	No such policy on cessation at the moment.	It is the need of the hour, there should be a policy and opportunity for smokers to quit.	NCD Program in coordination with ABP
5. Separate strategy to tackle new/emerging challenges such as e-cigarettes/vaping, Electronic Nicotine Delivery System (ENDS) and Electronic Non-Nicotine Delivery System (ENNDS)	It is not a challenge, rather ENDS and ENNDS are supporting measures to quit smoking. These are not also prohibited by law.	There is need to further explore it and develop a policy accordingly.	NCD Program in coordination with ABP
<b>FCTC – 5.3:</b> In setting and implementing their public health policies with respect to tobacco control, Parties shall act to protect these policies from commercial and other vested interests of the tobacco industry in accordance with national law.			
<b>(Policy in place to guide</b>	Tobacco Industry has not yet	There should be policy, as per FCTC-5.3,	NCD Program in

Indicator	Current Status	Recommendation	Responsibility
<b>interactions between public officials and the tobacco industry to ensure transparency of the interaction)</b>	interacted with any of us. It is not a challenge at the moment. It may be an issue at Federal level since policies and taxation measures are taken there.	to guide interaction with tobacco industry.	coordination with ABP
<b>Legislation:</b>			
<b>The Punjab Tobacco Vend Act – 1958</b> (Prohibition against dealing in manufactured tobacco without <b>Dealer's License</b> )  (Any amendment in the act to revise fine-amount and facilitation in implementation)	The Punjab Tobacco Vend Act – 1958 is in place  Not amended so far	  Act shall be reviewed jointly and amendments will be proposed	  NCD Program in coordination with ABP
<b>Prohibition of Smoking and Protection of Non-Smoker's Health Ordinance, 2002</b>  (Provincial legislation)	No provincial legislation at the moment. It is being implemented through district administration.	Ordinance shall be reviewed and implementation measures shall be taken.	NCD Program in coordination with ABP
<b>Cigarette (Printing of Warning) Ordinance, 1979: Amendment in 2002</b>  (Ban on possessing, selling or offering for sale packets of cigarettes without health warning)	No provincial legislation at the moment. It is federal subject.	Ordinance shall be reviewed and implementation measures shall be taken.	NCD Program in coordination with ABP
<b>Enforcement</b>			

Indicator	Current Status	Recommendation	Responsibility
Dealers' License for dealing in manufactured tobacco products	There is no provision of implementation in PC-I, nor a workforce to facilitate implementation. For enforcement NCD program writes to the Deputy Commissioners and they share the compliance reports.	There is need for a dedicated tobacco control cell and a dedicated focal person to coordinate all the tobacco control related legislative, enforcement, monitoring and evaluation.	NCD program through ABP
Ban on smoking in places of public work or use			
Ban on smoking in public service vehicles			
Regulation of tobacco advertisements			
Ban on sale of cigarettes to under-18s			
Ban on sale or storage of cigarettes/tobacco products in/near educational institutions			
Mandatory display of “No Smoking” signs at public places			
Ban on possessing, selling or offering for sale packets of cigarettes without health warning			
Monitoring of Tobacco Use & Prevention Policies			
Provincial data of tobacco users	There is data of about 1 million patient reported with NCDs in Punjab, their data and disease history record is available. There is no other mechanism in place to collect data of the tobacco users.	The patients data shall be consolidated to find the tobacco as a root cause of disease in NCDs and tobacco related mortality and morbidity	NCD program
Tobacco related morbidity & mortality recording system			

Indicator	Current Status	Recommendation	Responsibility
Provincial level surveys (GATS/GYTS)	There is no such survey planned, if WHO is conducting such survey in 2022, it may be requested to them to provide provincial data as well.	WHO support may be sought in this regard.	NCD Program in coordination with ABP
Economic burden of tobacco	No such study conducted	May look forward to support from different stakeholders to support this survey	NCD Program in coordination with ABP
<b>Sustainability</b>			
Allocation of resources	Approved PC-I is there but it is only for advocacy and awareness raising activities.	There is need for resources for other activities like monitoring, enforcement and legislation etc.	NCD Program in coordination with ABP
Provincial Tobacco control cell	There is no such cell at the provincial level.	There is need for a cell and dedicated resource (focal person) to coordinate the tobacco control activities.	NCD Program in coordination with ABP
Linkages with other programs e.g. TB control program for integration of interventions (cessation) and reporting of data	There is no formal integration. At the moment there is no such tobacco control intervention (like cessation) which can be integrated.	There is need to pilot these services and then develop linkages to facilitate other programs as well.	NCD Program in coordination with ABP
Provincial Level budget allocation for Capacity Building on Tobacco Control (Pool of experts)	No such pool of experts exists at the moment.	There is need for capacity building of a pool of experts to guide the tobacco control interventions.	NCD Program in coordination with ABP
Inclusion of civil society in implementation of Tobacco Control Program (Advocacy, Mass Mobilization Campaigns etc.)	There is no role of civil society in the implementation of tobacco control program.	Civil society organizations need to be engaged in the awareness and implementation activities.	NCD Program in coordination with ABP





2-63-64  
No. / NCDs / 2021  
OFFICE OF THE PROGRAM MANAGER,  
PREVENTION AND CONTROL OF  
NON-COMMUNICABLE DISEASES, PUNJAB.  
Dated: 17<sup>th</sup> November, 2021


To

Dr. Haroon Jahangir,  
Director General Health Services, Punjab,  
Lahore.

**SUBJECT: NOMINATION OF FOCAL PERSON FOR TOBACCO CONTROL**

Reference to the letter dated 11-11-2021 received from the Directorate regarding the subject cited above.

2. Prevention and Control of Non-Communicable Diseases Program (P&SHD). Punjab is hereby nominating **Miss Amna Younas (Mob # 0321-7042732)** as Focal Person for Tobacco Control activities to ensure smooth and coordinated efforts in Punjab.

  
**DEPUTY PROGRAM MANAGER  
PREVENTION AND CONTROL OF  
NON-COMMUNICABLE DISEASES**

**C.c:**

1. PA to Deputy Secretary (VP), P&SHD
2. Master file



**OFFICE OF THE CHIEF EXECUTIVE OFFICER DHA, KHANEWAL**

**Tel : 065-9200137, Fax : 065-9200140**

**E-Mail: edohealthkhanewal@punjab.gov.pk**

No. **39831** /Estt. DHA Khanewal Dated **26/9/2022**

To,

The Incharge  
Anti-Tobacco Program Punjab,  
Lahore

Subject:

**NOMINATION OF FOCAL PERSON FOR ANTI-TOBACCO PROGRAM.**

Kindly refer to the subject cited above.

Dr. Syed Mohsin Abbas, District Health Officer (MS) Khanewal (Contact No. 0301-8638572) is hereby nominated as a Focal Person from District Health Authority Khanewal for Anti-Tobacco Program Punjab, please.

*Mohsin Abbas*  
**Chief Executive Officer  
DHA Khanewal**

No. /Estt. DHA Khanewal

Copy is forwarded for information to: -

1. The Secretary, Govt. of the Punjab P&SHC Department Lahore.
2. The Secretary, Govt. of the Punjab P&SHD South Punjab Multan.
3. The Director General Health Services Punjab Lahore.
4. The Deputy Commission/Administrative DHA Khanewal.
5. All the District Health Officers, DHA Khanewal.
6. Concerned Officer.

*[Signature]*  
**Chief Executive Officer  
DHA Khanewal**



Primary & Secondary  
Healthcare Department

Email: [edohealth.sargodha@punjab.gov.pk](mailto:edohealth.sargodha@punjab.gov.pk)  
Phone :048-9230030

OFFICE OF THE  
CHIEF EXECUTIVE OFFICER  
DISTRICT HEALTH AUTHORITY  
SARGODHA

No. 6884 /E&A,

Dated Sargodha the 30/09/ /2022

To,

The Incharge  
Tobacco Control Program  
Lahore

SUBJECT: NOMINATION OF FOCAL PERSON FOR TOBACCO CONTROL PROGRAM

Kindly refer to the subject cited above.

Dr. Irfan Ahmad, Deputy District Health Officer Tehsil Sargodha (Contact No: 0333-4555126) is hereby nominated as Focal Person for Tobacco Control Program District Health Authority Sargodha.

This is for your kind information and further necessary action please.

  
CHIEF EXECUTIVE OFFICER  
DISTRICT HEALTH AUTHORITY  
SARGODHA

Even No. & Date.

Copy forwarded for information to

1. The Secretary Govt. of the Punjab P&SHD Punjab Lahore.
2. The Secretary Govt. of the Punjab South Punjab Multan.
3. The Director General Health Services Punjab Lahore.
4. The Deputy Commissioner/ Administrator DHA Sargodha.
5. The District Health Officer (PS)(HR&MIS) DHA Sargodha.
6. Dr. Irfan Ahmad, Deputy District Health Officer Tehsil Sargodha.

CHIEF EXECUTIVE OFFICER  
DISTRICT HEALTH AUTHORITY  
SARGODHA

GOVERNMENT OF PUNJAB,  
PRIMARY AND SECONDARY HEALTH CARE DEPARTMENT  
**OFFICE OF THE CHIEF EXECUTIVE OFFICER, DISTRICT HEALTH AUTHORITY**

KUCHEHRY ROAD, MULTAN

Phone 061-9200902 Fax 061-9200903

No.

8341

/CEO(DHA), Dated

26/09/2022

To

**The Incharge,  
Anti-Tobacco Program, Punjab,  
Lahore.**

Subject: - **NOMINATION OF FOCAL PERSON OF ANT-TOBACCO PROGRAM.**

Kindly refer to the subject cited above.

It is submitted that Dr. Arshad Abbas, District Surveillance Coordinator, Multan (Cell No. 0300-5641680), is nominated as Focal Person for Anti-Tobacco Program, District Health Authority, Multan.

This is for your kind information and further necessary action please.

  
**CHIEF EXECUTIVE OFFICER,  
DISTRICT HEALTH AUTHORITY  
MULTAN.**

No. \_\_\_\_\_/CEO (DHA).

Copy forwarded for information to the :-

1. Deputy Commissioner / Administrator, DHA, Multan.
2. District Health Officer (HRM & MIS, PS, MS), DHA, Multan.
3. Dr. Arshad Abbas, District Surveillance Coordinator, Multan.

  
**CHIEF EXECUTIVE OFFICER,  
DISTRICT HEALTH AUTHORITY  
MULTAN.**

OFFICE OF THE  
CHIEF EXECUTIVE OFFICER  
DISTRICT HEALTH AUTHORITY  
LODHAN

Phone#0608921030

No. 17727 /CEO(DHA), dated Lodhran the 12/9/ 2022.  
To

The Incharge,  
Anti-Tobacco Program Punjab,  
Lahore.

Subject: **NOMINATION OF FOCAL PERSON FOR ANTI-TOBACCO PROGRAM**

Kindly refer to the subject cited above.


Dr. Riaz Hussain, Deputy District Health Officer, Duniyapur (Cell#0321-7907393) is hereby nominated as a Focal Person from DHA Lodhran for Anti-Tobacco Program please.


  
Chief Executive Officer  
District Health Authority  
Lodhran

No. \_\_\_\_\_/CEO(DHA),

Copy is forwarded for information to:-

1. The Secretary, P&SHD Punjab Lahore/(South Punjab) Multan.
2. The Director General Health Services Punjab Lahore.
3. The Deputy Commissioner/Administrator (DHA) Lodhran.
4. The District Health Officer (PS)/(MIS&HRM) Lodhran.
5. Officer concerned.

  
Chief Executive Officer  
District Health Authority  
Lodhran

**Association for Better Pakistan**

Dated: April 20, 2022

To,  
**Dr. Haroon Jahangir Khan**  
Director General Health Services  
Govt. of the Punjab,  
Lahore

Subject: **REQUEST FOR INTEGRATION OF TOBACCO CONTROL COMPONENT OF NCD PROGRAM WITH TB CONTROL PROGRAM AND PUNJAB AIDS CONTROL PROGRAM**

Dear Sir,


Please refer to the Provincial Consultative Meeting held on December 29, 2021 at the Directorate General Health Services Punjab regarding the tobacco control measures in Punjab. Wherein, there was a discussion regarding the integration of tobacco control component of NCD program with the TB Control Program and Punjab AIDS Control Program in the following areas;

1. Prevalence data of tobacco use among people with TB and/or HIV.
2. Screen TB and HIV patients for tobacco consumption.
3. Deliver tobacco cessation interventions / encourage patients to quit smoking

2. As reduction in tobacco consumption contributes significantly to the prevention and treatment of TB, as well as the effective management of HIV. The WHO FCTC also establishes a minimum standard for action on tobacco control, and recommends parties seek links between tobacco control and HIV and TB services (Guidelines attached) by addressing these comorbidities through integrated responses, rather than disease-specific ones, is critical in the era of the 2030 Agenda for Sustainable Development.

3. Your kind support is requested in this regard that a notification may please be issued to integrate these programs in the above mentioned areas.

Yours Sincerely,


  
**Shadman Aziz**  
Project Manager – ABP

Encl:


- Minutes of Provincial Consultative Meeting dated December 29, 2022.
- WHO Guidelines on integration of Tobacco Control with TB & HIV

📍 Office No. 4, 2nd Floor, Executive Complex, G-8 Markaz, Islamabad, 44000, Pakistan

📞 +92-51-2340104 📧 Email: abppak1@gmail.com



**PROVINCIAL TB CONTROL PROGRAM PUNJAB**  
 DIRECTORATE GENERAL HEALTH SERVICES PUNJAB  
 24-COOPER ROAD, LAHORE.  
 Email: [punjabtp@gmail.com](mailto:punjabtp@gmail.com) PH. +92-42-99203793-99



No. 3860 Dated 26/05/2022

To,

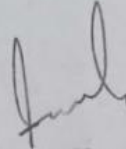
Project Director HISDU,  
P&SHC Department,  
Punjab

**Subject: Changes Required in EMR**

With reference to subject cited above, HISDU developed an EMR system for provincial TB Control Program, which is being piloted in district Narowal. The initial feedback from end users as well as the TB Program demands some changes in the EMR which are given below.

1. Edit and Delete button is required in Admin Login (for TBCP).
2. For DTC Login only Edit button is required. If in case, health facility adds incorrect data, the district level may be able to correct and amend the information. There should be 01 week grace time for this correction
3. DTC login must ensure access to view all health facilities data for the respective districts only.
4. TB 07 & TB 09 reports are generated through all facilities and DTCs have to validate its data. DTC login must have the option to export the report in different file formats (format is attached).
5. Data validation through EMR.
6. EMR Number generates 15 digits. Nationally the TB registration no. consists of province code/district code/health facility code/patient no/year. It is preferred that similar numbers maybe generated for TB patients.
7. OPD prompt must be limited to current month only.
8. Variables of monthly reports may please be added in filters (list of variables attached).
9. In basic information page one field maybe added smoker with yes/no option.

It is requested that the above mentioned changes maybe done for smooth functioning of the EMR.

  
**Program Manager**  
 Provincial TB Control Program, Punjab

**C.C:**

1. Additional Secretary Vertical Programs, P&SHC Department, Govt. of the Punjab.
2. Director General Health Services, Punjab.
3. Master File.

## Annex – VII Mobile Application Database Reports

Violations Data Sheet by 09 2023				
ID	Location	General Voilation	Voilation	Date
804021	Duniya pur city lodhr	Point of Sale	Sale of cigarette without license	7/9/2023
804020	Kazmi chok duniya lodhran	Violation at public place	Smoking at Public Transport	7/9/2023
804019	Kazmi chok duniya lodhran	Violation at public place	Smoking at Public Transport	7/9/2023
804018	Kazmi chok duniya lodhran	Violation at public place	Smoking at Public Transport	7/9/2023
804017	Kazmi chok duniya pur lodhran	Point of Sale	Sale of cigarette without license	7/9/2023
804016	Duniya pur lodhran	Violation at public place	Smoking at any other Public Place	7/9/2023
804015	Duniya pur lodhran	Violation at public place	Smoking at any other Public Place	7/9/2023
804014	Duniya pur lodhran	Violation at public place	Smoking at any other Public Place	7/9/2023
804013	Duniya pur lodhran	Point of Sale	Sale of cigarette without license	7/9/2023
804012	Duniya pur lodhran	Violation at public place	Smoking at any other Public Place	7/9/2023
804011	Duniya pur lodhran	Point of Sale	Sale of cigarette without license	7/9/2023
804010	Multan road lodhran	Point of Sale	Sale of cigarette without license	7/9/2023
804009	Multan road lodhran	Violation at public place	Smoking at any other Public Place	7/9/2023
804008	Multan road lodhran	Point of Sale	Sale of cigarette without license	7/9/2023
804007	Multan road lodhran	Point of Sale	Sale of cigarette without license	7/9/2023
804006	New kuchahary lodhran	Violation at public place	Smoking at any other Public Place	7/9/2023
804005	Super chok lodhran	Point of Sale	Sale of cigarette without license	7/9/2023
804004	Super chok lodhran	Point of Sale	Sale of cigarette without license	7/9/2023
804003	Super chok lodhran	Point of Sale	Sale of cigarette without license	7/9/2023
804002	Jalalpur mor lodhran	Violation at public place	Smoking at any other Public Place	7/9/2023
804001	Jalalpur mor lodhran	Point of Sale	Sale of cigarette without license	7/9/2023



No 10 /TV/2022-23

**OFFICE OF THE EXCISE & TAXATION OFFICER**  
 License Branch, Office # 51, Upper Floor.  
 E & T Offices MDA Chowk Multan  
 Contact 0344 7055262

**CERTIFICATE OF REGISTRATION**  
 [Provisional (See Sec 3)]

(To be displayed at the ordinary place of business of the holder)

Subject to the provisions of the Punjab Vend Act 1958 and the Rules framed there under, provisional permission is granted to:

**Usman S/O Muhammad Idrees - Hafiz Ramzan**  
**Paan Shop**  
**Vehari Chowk, Multan**

...for the retail sale of Manufactured Tobacco (ONLY) at the vending store situated at the address given above. The provisional permission is for the purpose registering and regulating of their business subject to payment of fee as & when fixed by the government under the Terms & Conditions below.

1. The sale of tobacco is subject to the Punjab Juvenile Smoking Ordinance, 1959 and the other laws for the time being in force.
2. If the license holder changes his vend premises, he will inform the District Excise and Taxation Officer and get the necessary amendments/permissions incorporated in the license to use the license at the new vend.
3. Every licensee shall produce for the inspection of his license on the demand by any officer of Excise and Taxation department not below the rank of inspector.

*The certificate, unless renewed, is valid for the year ending 03.02.2024*  
*Note: The provisional registration is not a license to sell (novel) narcotics in any form explicitly or implicitly under the cover of the term tobacco.*

Multan, dated: 03.02.02023  
 NBP, Excise

Renewals



  
 DISTRICT M U L T A N



**EXCISE, TAXATION AND NARCOTICS  
CONTROL DEPARTMENT, LODHRAN**

Phone / Fax: (+92) 608-921022  
Email: mra.lodhran@gmail.com

No / Ex Dated: 11-09-2023

**CERTIFICATE OF REGISTRATION**

[Provisional (See Sec 3)]

(To be displayed at the ordinary place of business of the holder)

Subject to the provision of the Punjab Vend Act 1958 and the Rules framed there under, provisional permission is granted to:-

**M/S SOHAIL PAAN AND CIGARETTE SHOP**  
**LORRY ADDA LODHRAN.**

For the retail sale of Manufactured Tobacco (Only) at the vending store situated at the address given above. The provisional permission is for the purpose registering and regulating of their business subject to payment of fee as & when fixed by the government under the Term & Conditions below.

1. The sale of tobacco is subject to the Punjab Juvenile Smoking Ordinance 1959 and the other laws for the time being in force.
2. If the license holder changes his vend premises, he will inform the District Excise Taxation and Narcotics Control officer and get the necessary amendments/permissions incorporated in the license to use the license at the new vend.
3. Every License shall produce for the inspection of his license on the demand by the any officer of Excise and taxation department not below the rank of inspector.

The Certificate , unless renewed, is valid for the year ending **30.06.2024**.

**Note:** The provisional registration is not a license to sell (novel) narcotics in any form explicitly or implicitly under the cover of the term tobacco.

  
District Excise Taxation &  
Narcotics Control Officer Lodhran

**OFFICE OF THE EXCISE, TAXATION AND NARCOTICS CONTROL**

**OFFICER KHANEWAL**



117-B Civil Lines near Circuit House Khanewal  
Ph & Fax: +92-65-9200235 email: mrakhanewal@hotmail.com  
**NO. 416 / ET&NCKWL DATED:19-09-2023**

**CERTIFICATE OF REGISTRATION**

**[Provisional (Sec Sec3)]**

(To be displayed at the ordinary place of business of the holder)

Subject to the provisions of the Punjab Vend Act 1958 and the Rules framed there under, provisional permission is granted to:

**MR. MUHAMMAD HABIB S/O ABDUL RASHEED  
TAHIR RASHEED CIGARETTE, PAN SHOP & DRINK CORNER  
OLD BUS STAND, KHANEWAL**

For the retail sale of Manufacture Tobacco (Only) at the vending store situated at the address given above, the provisional permission is for the purpose registering and regulating of their business subject to payment of fee as & when fixed by the government under the Terms & Conditions below.

1. The sale of tobacco is subject to the Punjab Juvenile Smoking Ordinance 1959 and the other laws for the time being in force.
2. If the license holder changes his vend premises, he will inform the District Excise and Taxation Officer and get the necessary amendments / permissions incorporated in the license to use the license at the new vend.
3. Every licensee shall produce for the inspection of this license on the demand by any officer to Excise and Taxation Department not below the rank of inspector.

The certificate, unless renewed, is valid for the year ending **30-06-2024**.

Note: The provisional registration is not a license to sell (Novel) narcotics in any form explicitly or implicitly under the cover of the term tobacco.



**EXCISE AND TAXATION OFFICER  
DISTRICT KHANEWAL**

*[Handwritten signature]*  
19/9/23.

Khanewal Dated: \_\_\_\_\_  
NBP, Excise  
Renewals

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_