This is a pre-copyedited, author-produced PDF of an article accepted for publication in Nicotine and Tobacco Research following peer review. The version of record [Khan SA, Zahra FT, Farzeen M, Khan A, Siddiqi K, Bauld L & Moodie C (2025) The perceptions of nicotine pouches (Velo) among adolescents in Pakistan: A qualitative study. Nicotine and Tobacco Research, Art. No.: ntaf223.] is available online at: https://doi.org/10.1093/ntr/ntaf223

Title

The perceptions of nicotine pouches (Velo) among adolescents in Pakistan: A qualitative study

Authors

Sheraz Ahmad Khan (PhD)[1], Fatima Tu Zahra (MSPH)[1], Midhat Farzeen (MSPH)[1], Amina Khan (MPH)[1], Kamran Siddiqi (PhD)[2], Linda Bauld (PhD)[3], Crawford Moodie (PhD)[4]

Affiliations

[1] The Initiative, Islamabad, Pakistan

[2] Hull York Medical School, University of York, UK

[3] Usher Institute and Behavioural Research UK, University of Edinburgh, Edinburgh, United Kingdom

[4] Institute for Social Marketing and Health, University of Stirling, Stirling, United Kingdom

Corresponding author

Dr Sheraz Ahmad Khan PhD, MPH, MBBS.

The Initiative, office suite 103. Iqbal Heights. Korang Road, Bani Gala, Islamabad.

Email: drsheraz.ak@gmail.com Tel: +92 340 0008282

ORCID: 0000-0001-6679-905

ABSTRACT

Introduction: There has been a rapid rise in nicotine pouch sales in Pakistan. One brand, Velo, dominates the market. No study has explored how adolescents view this product.

Methods: We conducted 16 focus groups with 10-16 year-olds (n=113) between October 2023 and April 2024. Groups were segmented by sex and school-going status (in school, out-of-school) to explore perceptions of Velo. Participants' use of nicotine products was not recorded at recruitment. Participants were from all four provinces of Pakistan and the federal capital, Islamabad. Groups lasted between 60 and 80 minutes.

Results: We identified four themes: 1) *Exposure*: Participants reported exposure to nicotine pouches displayed at the point-of-sale (POS), and through peers and social media. 2) *Accessibility*: Velo was perceived as easily accessible as participants did not feel that the shopkeepers would refuse purchase. 3) *Appeal*: Velo was considered stylish and a luxury product, a modern alternative to traditional smokeless tobacco. Appeal was shaped by the packaging, discrete use, display at POS, and social media. 4) *Harm*: Some participants considered Velo harmful, mentioning addiction, vomiting and headaches; and potentially as hazardous as cigarettes. For others, it was safer than tobacco, given that the packaging resembled confectionery and had no health warnings to indicate the products were harmful.

Conclusions: Our findings suggest that regulating nicotine pouches to reduce adolescent exposure and perceived accessibility, could help reduce product appeal. Research is needed on the health effects of nicotine pouches on adolescents.

Keywords: Nicotine pouches, Qualitative, Adolescents, Marketing

Implications

The study highlights adolescents' exposure to Velo, its easy accessibility, and its appeal as a stylish, modern alternative to traditional smokeless tobacco. Velo packs had no health warnings, contributing to the perception that they are safe. Our findings can potentially guide

regulatory measures to restrict adolescent access to nicotine pouches, including age restrictions, point-of-sale regulations, and the introduction of health warnings.

Introduction

Nicotine pouches are oral nicotine products that are placed between the lip and gum. Since their introduction about a decade ago, sales have increased rapidly.[11] There has been a rapid proliferation in the number of nicotine pouch brands but the market leader in the United States (US), the largest global market for nicotine pouches, is Zyn (Philip Morris), with Velo (British American Tobacco) the market leader outside the US.[2] The perception of reduced harm compared to traditional tobacco may be helping to drive uptake among **people who use** tobacco. [3,4] The ability to use nicotine pouches in places where smoking or vaping is not permitted may be another driver.[5] However, less is understood about appeal of these products to youth outside the US.

There has been academic interest in perceptions and use of nicotine pouches, although most research has been with adults in the US.[6–8] There are fewer studies with young people, an important population given the potential attractiveness of youth and non-users towards nicotine pouches.[9,10] For instance, flavoured nicotine pouches have been found to appeal to younger people,[7] and adolescents exposed to social media marketing of nicotine pouches have higher product trial intentions than those not exposed.[11] Surveys with adolescents have found that less than 1% reported trying nicotine pouches in the Netherlands,[4] with ever-use 2.3% in Germany,[12] and 3.3% in the United Kingdom.[13] To the best of our knowledge, no qualitative research with adolescents has been conducted to explore their awareness and perceptions of this product.

A challenge of novel nicotine products is that they are not necessarily covered within existing policies and regulatory approaches vary. The World Health Organization (WHO) identified three categories of regulatory approaches. Some countries treat them as tobacco products and regulate them under tobacco control laws, others classify them as medicinal products (for

tobacco cessation) and ensure the products comply with therapeutic standards, while some countries have banned them due to public health concerns.[14] Regulatory frameworks are needed to attempt to balance the potential benefits of nicotine pouches to people who are currently using and trying to quit tobacco, while ensuring that nicotine naive youth are not attracted to these products.[15]

In Pakistan, the fifth largest country in the world by population, nicotine pouches are currently unregulated.[14] Between 2022 and 2023, the growth of nicotine pouches was higher in Pakistan than in any other country, with it now the fourth largest market globally by nicotine pouch sales.[14] Velo, sold by British American Tobacco (BAT), dominates sales in Pakistan.[14,16] It is not clear why Velo has become so popular in Pakistan, but as one of the world's largest markets for smokeless tobacco, consumers are accustomed to using oral products. As BAT do not have a share of the smokeless tobacco market in Pakistan they may see the country as a test market for South Asia and an opportunity to broaden their tobacco and nicotine portfolio within the country and region.[17] The absence of regulation for nicotine pouches also enables novel products like Velo to thrive. However, even for tobacco products, which are regulated in Pakistan, there is weak institutional capacity and deep entrenchment of tobacco interests in the regulatory environment, with enforcement of policies weak, fragmented and influenced by industry.[18,19]

Given the lack of understanding, globally, of how nicotine pouches are viewed by adolescents, we conducted a qualitative study in Pakistan with this age group. We explored adolescents' perspectives on the availability, marketing, appeal and perceived harm associated with Velo.

Methods

Design and sample

Focus groups were conducted with 113 adolescents in Pakistan between October 2023 and April 2024. To be eligible, participants had to be between 10 and 16 years of age. Groups were conducted in all four provinces (Balochistan, Khyber Pakhtunkhwa [KP], Punjab and Sindh) and the federal capital Islamabad. All participants were of Pakistani descent. We did not ask about ethnicity. Groups were segmented by sex and school enrollment status (in-school, out-of-school), with just over half of participants in-school (n=59, 52.2%) or female (n=57, 50.4%). Groups included between four and twelve participants, within the parameters of previous research.[20,21]

Participants were purposively recruited in Karachi, Peshawar, Quetta, Rawalpindi and Islamabad from schools, for in-school children, and from garages and sewing shops for out-of-school children, which is where these children commonly work.[22,23] They were recruited by the research team, using convenience sampling and with the support of a social mobiliser from their respective areas. It was explained to all potential participants that the study was concerned with tobacco and adolescent health in Pakistan. Demographic information (age, gender, school-going status) was captured via a recruitment questionnaire. We did not ask about use or susceptibility to nicotine products. Parental or guardian consent was secured by an opt-out method through a community facilitator, who explained what the study involved and that it would be audio recorded, and adolescents' assent was taken on the day of focus groups. This study adheres to the Consolidated Criteria for Reporting Qualitative Research (COREQ) checklist for qualitative reporting standards.[24]

Procedure

Groups were conducted in schools for in-school adolescents and at NGO offices or other appropriate locations for out-of-school participants. Each group was moderated by SAK and FTZ in Pashto (Peshawar) and Urdu (all other cities). FTZ is fluent in English and Urdu. SAK is fluent in English, Pashto and Urdu. Groups were audio-recorded with participants' assent,

transcribed and translated by the trilingual experts during transcription. Both researchers have backgrounds in public health and qualitative methods. The discussion was audio recorded with participants' assent. Only the moderators and participants, who were not previously known to the moderators, were present during the groups. A semi-structured topic guide was used to ensure that the groups were asked common questions, but otherwise participants led the discussion with the moderators following up on comments made. At the start of groups, participants were informed that all comments were valued. During groups we were sensitive to less vocal and also younger participants, given the broad age range within groups, and encouraged their views if they were willing to share these. Participants were initially asked about awareness of Velo nicotine pouches, and, subsequently, about their views on the product packaging, accessibility, appeal and perceived harm. Focus groups lasted for 80 minutes on average (mean=70, range=60-80). Discussions lasted longer with school-going participants.

The study received ethical approval from the University of York (HSRGC/2023/566/D) in the UK and the National Bioethics Committee in Pakistan (No.4-87/NBC-973/23/61). In line with the ethics approval, participants' autonomy, confidentiality and the principle of doing no harm were ensured during the study.

Analysis

The analysis was conducted using Braun and Clarke's framework for thematic analysis.[23] Similar approaches are recommended by Creswell[25] and Yin[26]. We used a combination of deductive and inductive strategies, as suggested by Cresswell and Poth.[25]

The first step in the iterative process involved familiarisation with the data. Data were entered into NVivo for coding, where the transcripts were read and re-read to capture explicit meanings and underlying patterns. Early reflections suggested that adolescents frequently confused Velo with everyday items such as cream and candy. References to TikTok as a motivating influence

recurred across groups. These initial impressions guided, but did not constrain, the development of codes.

Codes were then developed and modified through iteration and discussion within the team. Coding was carried out inductively from the data while also deductively informed by our research questions. For instance, the research focus on adolescent exposure to novel tobacco products prompted us to look at mentions of social media and peer influences. At the same time misidentification of Velo's packaging emerge organically from participants' accounts. A range of codes were generated, including "packaging as disguise," "shopkeepers selling to minors," "TikTok glamorisation," "peer pressure," and "perceived addictiveness."

As analysis progressed, codes were clustered together into candidate themes. Segments that referred to TikTok and peer demonstrations converged under a theme of exposure. Codes for easy shop access and adolescents purchasing for each other were grouped into accessibility. Misidentification of Velo as cosmetic or confectionary and its association with social class markers were brought together into the theme of appeal. The harm awareness theme. Emerged from codes that compared Velo to naswar, highlighted its stronger addictive potential, or noted immediate side effects such as headaches and vomiting.

We identified eight preliminary themes. The developing themes were iteratively reviewed and refined to ensure they were coherent and distinct. Some preliminary categories overlapped and were collapsed, for example "peer influence" and "TikTok videos" were brought together under exposure, while references to "social status" were absorbed into appeal. In this way, the initial eight categories were consolidated into four themes: Exposure, Accessibility, Appeal, and Harm.

The final refinement of themes focused on capturing their core meaning. Exposure encompassed both TikTok-driven glamorisation and peer pressure. Accessibility reflected unrestricted availability from shops and circulation within communities. Appeal was shaped

by packaging that disguised the product and its use as a status symbol; and harm awareness included both comparative judgments with traditional products and recognition of acute side effects.

SAK wrote the initial draft of the results, checking with FTZ to enhance reflective writing. The process also involved regular discussion with CM to enable SAK to be more reflexive.[23] Where there are differences by sex or school-going status, these are identified in the results.

Results

Exposure

Participants most commonly reported exposure to Velo or other nicotine pouches at the POS. Some thought that Velo was only available in high-end shops, whereas others stated it was much more widely available in shops. Several participants referred to the prominence of Velo in some retail settings, with some considering it to have greater visibility than other products such as naswar and cigarettes.

- *"It is very expensive and not readily available; only expensive shops carry it." (Group 4: Out-of-school girls)*
- *"I have seen these things in every shop and people using them." (Group 14: In-school male)*

Participants were also familiar with Velo through peers, family members, and social media, e.g.*"Velo is getting more common like vaping… I've seen children of my age using it."* (Group 16, Out-of-school girls). In general, boys were more likely to report exposure to Velo in shops and peer groups, while girls were more likely to mention exposure through social media and family members. Those in school reported exposure in schools and peer groups, while out-of-school participants had workplace exposure. Irrespective of where Velo had been seen, there was some confusion about what it was, being mistaken for non-nicotine products.

- *"I thought it was cream for a long time, then in 7th grade, I found out what Velo was." (Group 12: In-school girls)*
- *"Velo is packaged like cream or chocolate, so people don't realise it's addictive." (Group 6: Out-of-school girls)*

Accessibility

Nicotine pouches were viewed as easily accessible. The prominence of Velo within shops, and how it is displayed, made several participants think that they could get this product without difficulty.

- *"Their* (referring to Velo) *placement on displays makes them highly visible and easy for adolescents to purchase" (Group 12: In-school girls).*
- *"Velo is openly displayed, enhancing visibility and temptation for youth". (Group 5: Out-of-school boys).*

Some participants had used nicotine pouches, with boys more likely to indicate buying them directly from shops and girls through friends or male relatives. For out-of-school participants, workplace connections made buying easier. Participants commented that shopkeepers sell Velo and cigarettes without asking for age verification. Participants did not feel that they would be questioned by shopkeepers if attempting to purchase nicotine pouches, particularly if they said that it was for their parent(s); purchasing for elders is a common practice in Pakistan. The absence of regulation for nicotine pouches also fed into the view that it would not be difficult to obtain these products.

- *"Shopkeepers sell Velo to minors without asking any questions". (Group 2: In-school male)*
- *"The shopkeeper doesn't ask these 10 to 15-year-old children why they are taking this." (Group 12: In-school female)*
- *"Shopkeepers think they are buying for an adult in their home." (Group 14: In-school male)*

Appeal

Velo was considered a modern alternative to traditional smokeless tobacco. It was viewed by several participants, particularly in urban areas, as a luxury product. These perceptions seemed

to be shaped by the packaging, displays at POS, and social media. Velo packaging was seen as stylish and attractive, and reminded participants of non-tobacco products such as candy or creams. Participants commented that the display of Velo packs at the POS gave the impression that these products are high quality.

- *"I thought it was a candy when I first saw it in a shop." (Group 14: In-school male)*
- *"Packaging for Velo appears like a candy box. It has a beautiful and attractive design". (Group 12: In-school female)*
- *"Velo is displayed in glass cases, making it look premium and appealing." (Group 16: Out-of-school female)*

A number of participants viewed people who used Velo having desirable qualities, being seen as more affluent and educated than users of smokeless tobacco.

- *"Velo is a luxury product primarily used by affluent individuals". (Group 05: Out-of-school male)*
- *"It's mostly 'burger boys'* (people seen as rich and spoilt) *who use Velo because it's expensive." (Group 11: In-school male)*
- *"Velo symbolises style, affluence and being more educated than users of naswar". (Group 04: Out-of-school female)*

Participants said that Velo adverts made them seem appealing despite potential risks. Velo was perceived as trendy, with some participants stating that they wanted to emulate behaviours seen on the social media platform TikTok.

- *"Because of its design, people think it is something fancy, not tobacco." (Group 15: Out-of-school male]*
- *"Velo's advertisement is such that you don't know what it is at first." (Group 12: Out-of-school female)*

- *"People get influenced by watching TikTok… that's how interest is generated in Velo" (Group 11: In-school male)*

Harm

There were mixed perceptions of the harm of Velo, with some considering use as dangerous, associated with addiction and adverse reactions such as vomiting, oral health issues and

headaches, and potentially as harmful as cigarettes. This was generally a view held more by girls than boys, e.g. *"People who use Velo say it's less harmful, but I think it's just as bad as cigarettes"* (Group 16: Out-of-school girls). For others, it was deemed a safer alternative to traditional oral products such as naswar.

- *"Velo is more dangerous than cigarettes and naswar, causing headaches and nausea among users." (Group 12: Out-of-school female).*
- *"I think Velo damages the mouth more than regular naswar." (Group 15: Out-of-school male)*
- *"Velo's is promoted as a harmless product, but we know kids of our age who have vomited with using it and had lightheadedness". (Group 08: In-school male)*

The resemblance of Velo packaging to products deemed benign (e.g. candy, cream), or medicine, was considered to disguise potential risks. For example, *"When I saw Velo in the market, I didn't think it was harmful because it didn't look addictive like tobacco products"* (Group 15, Out-of-school boys). For some, the impression of a less harmful product was considered deceptive.

- *"It is small and white, like a medicine packet." (FGD-10, In-school male)*
- *"The packaging makes it look harmless, but it's just another addiction." (Group 14: In-school male)*
- *"The stylish packaging hides how harmful it is. It tricks people into thinking it's safe." (Group 14: In-school male)*

The perception of reduced harm was influenced by the absence of warnings on packs and the fact that Velo packs have no messaging in Urdu. Social media, too, played a role, with mention of 'Tik Tokers' stating that Velo is safe.

- *"While warning images on cigarette packs were noticed, there were no such images on Velo packs" (Group 02: In-school male)*
- *"Velo packs have no Urdu writing but only English". (Group 02: In-school male)*
- *"Tik Tokers say Velo is safe". (Group 14: In-school male)*

Discussion

We explored perceptions of Velo among in-school and out-of-school children in Pakistan, finding high exposure to this product through multiple channels, and easy accessibility. The product was seen as appealing due to the stylish packaging and resemblance to non-tobacco products like confectionery, with a generally desirable user image. There were conflicting views about potential harm.

We found that children are familiar with Velo, seeing this in shops, through peers or family, and in social media. The POS is a key marketing channel for tobacco and nicotine manufacturers.[27] British American Tobacco has invested in promoting Velo at the POS in Pakistan; it is common to see Velo display stands and retail advertising. Our findings suggest that many children have been exposed to this, given that they discussed the prominence of Velo in retail settings, and its prime placement. A recent study on the retail marketing strategies of nicotine pouches in Pakistan supports this, finding adverts for nicotine pouches in two-thirds of the shops observed, with most nicotine pouches displayed at eye-level for children (70%) and next to candy (59%).[23] This is consistent with the broader literature, where POS marketing appears to be common for nicotine pouches,[11] which may increase acceptability to younger people.[23]

There was high perceived accessibility of nicotine pouches in Pakistan. According to our participants, they were not likely to be questioned by shopkeepers if purchasing Velo. That there is no regulation on nicotine pouches in Pakistan is likely a factor, but culturally it is normal for children in Pakistan to purchase tobacco or nicotine products for their elders. Previous studies have similarly found that youth have access to nicotine pouches due to weak regulations and enforcement.[28] Despite these challenges, a minimum age of sale for the purchase of nicotine pouches (and any other novel nicotine products) is needed, and would enable this measure to be enforced, even if enforcement efforts for tobacco and nicotine

products in Pakistan are currently weak.[29] Regulation would be the priority, although it has been suggested that to improve compliance this could be complemented with retailer education, given that retailers in Pakistan often have limited awareness of potential risks associated with tobacco and nicotine products.[29,30]

Our findings point to the potential role of social media, and particularly TikTok, in shaping perceptions of Velo as safe and trendy. This aligns with previous research, highlighting the importance of social media as a platform for nicotine product marketing.[11] Content on platforms like TikTok and Instagram portray nicotine pouches as modern and sophisticated, downplaying potential risks.[31] Social media may contribute to the normalisation of nicotine products, and adolescent susceptibility to use these.[11,32]

There were mixed views about the risks associated with Velo, consistent with findings with young adults in the US.[10] For those who felt that Velo was less harmful than tobacco products (cigarettes, smokeless tobacco), pack design was an important factor. This was driven by the resemblance to products such as candy that were deemed innocuous, a tactic previously identified for tobacco products,[33] allied to the absence of clear warnings or any health messaging in Urdu. The lack of warnings in local languages on nicotine pouches has been recognised as contributing to misinformation and lowering perceived risk.[34] The findings suggest that the inclusion of prescribed warnings on nicotine pouches, including in Urdu, is warranted given confusion about what these products were among some adolescents.

A strength of the study is the inclusion of both in-school and out-of-school children, with the latter, a neglected population in most tobacco research, and having a sample from all four provinces in Pakistan and the federal capital. With respect to limitations, we did not segment groups by those who had tried nicotine pouches and those that have not. In addition, given the qualitative research design, the perceptions of our participants may not be representative of all

children of these age groups in Pakistan. We also had a broad age range within the groups (10-16 years), which may have affected how participants responded. Another limitation is that the transcriptions were single-coded.

In terms of future research, quantitative research exploring use of pouches among both adults and adolescents is needed in Pakistan, and in other Asian countries. Surveillance of how these products are promoted at the POS, and in social media, would also be of significant value. Studies are also needed on the health effects of nicotine pouches in children and young people, particularly those who have never used tobacco products.

Our findings add depth to the understanding of Velo marketing and perception among adolescents, particularly in regions with weaker regulatory frameworks. Velo, being appealing to adolescents, may find a broader buyer base with the potential for addiction. Adolescents are exposed to Velo through several pathways, highlighting the need for a multi-prong strategy to discourage adolescents from using these types of products. Since Velo is easily accessible, with no warnings and age restrictions, use of these and other nicotine pouches will likely rise without regulation.

FUNDING

This study is part of a project funded by UK Research and Innovation (UKRI) under the funding reference number MR/X004228/1.

DECLARATION OF INTERESTS

All the listed authors declare that they have no conflict of interest.

DATA AVAILABILITY

This paper is based on qualitative data from focus groups. The data is available in a pseudonymised format with the authors and can be shared for legitimate interests.

ACKNOWLEDGMENTS

We wish to acknowledge the support of Dr Naeem Awan and Dr Saira Kanwal at the Tobacco Control Cell in the Federal Ministry of Health for our study. We also acknowledge the support from the Federal Ministry of Education in facilitating our work. We are thankful to the individuals and organisations who helped us arrange the focus groups for OOS adolescents.

REFERENCES

1. Moodie C, Alexandrou G, Siddiqi K. Chasing a buzz: developments in the nicotine pouch market in the UK. *Tob Control*. Published online 2024. doi:10.1136/tc-2024-058679
2. 2FIRSTS. Unmasking Fake Nicotine Pouches. Tobacco Asia. Published 2024. Accessed June 8, 2025. https://www.tobaccoasia.com/features/unmasking-fake-nicotine-pouches/
3. Travis N, Warner KE, Goniewicz ML, et al. The potential impact of oral nicotine pouches on public health: a scoping review. *Nicotine Tob Res*. 2024;27(4):598-610. doi:doi.org/10.1093/ntr/ntae131
4. Havermans A, Pennings JLA, Hegger I, et al. Awareness, use and perceptions of cigarillos, heated tobacco products and nicotine pouches: A survey among Dutch adolescents and adults. *Drug Alcohol Depend*. 2021;229:109136. doi:10.1016/j.drugalcdep.2021.109136
5. Balwicki Ł, Kalinowska-Beszczyńska O, Wojtecka A, Basińska M. Future of nicotine pouches – users' perspective. *Eur J Public Health*. 2024;34(Supplement_3):ckae144.1140. doi:10.1093/eurpub/ckae144.1140
6. Patel M, Kierstead EC, Kreslake J, Schillo BA. Patterns of oral nicotine pouch use among U.S. adolescents and young adults. *Prev Med Reports*. 2023;34:102239. doi:10.1016/j.pmedr.2023.102239
7. Gaiha SM, Lin C, Lempert LK, Halpern-Felsher B. Use, marketing, and appeal of oral nicotine products among adolescents, young adults, and adults. *Addict Behav*. 2023;140:107632. doi:10.1016/j.addbeh.2023.107632
8. Liu J, Halpern-Felsher B. Popularity of Zyn and other nicotine pouch brands among U.S. adolescents, young adults, and adults in 2021. *Prev Med (Baltim)*. 2024;185:108068. doi:10.1016/j.ypmed.2024.108068
9. Harlow AF, Vogel EA, Tackett AP, et al. Adolescent Use of Flavored Non-Tobacco Oral Nicotine Products. *Pediatrics*. 2022;150(3):e2022056586. doi:10.1542/peds.2022-056586
10. Vogel EA, Barrington-Trimis JL, Kechter A, et al. Differences in Young Adults'

Perceptions of and Willingness to Use Nicotine Pouches by Tobacco Use Status. *Int J Environ Res Public Health*. 2022;19(5):2685. doi:10.3390/ijerph19052685
11. Kramer RD, Park-Lee E, Marynak KL, Jones JT, Sawdey MD, Cullen KA. Nicotine Pouch Awareness and Use Among Youth, National Youth Tobacco Survey, 2021. *Nicotine Tob Res*. 2023;25(9):1610-1613. doi:10.1093/ntr/ntad080
12. Hanewinkel R, Hansen J. Regional socioeconomic deprivation in Germany and nicotine use among children and adolescents. *Int J Environ Health Res*. 2024;34(2):1023-1033. doi:10.1080/09603123.2023.2195155
13. Brose L, Bunce L, Cheeseman H. Prevalence of Nicotine Pouch Use Among Youth and Adults in Great Britain—Analysis of Cross-Sectional, Nationally Representative Surveys. *Nicotine Tob Res*. Published online January 10, 2025:ntae295. doi:10.1093/ntr/ntae295
14. World Health Organization. WHO study group on tobacco product regulation. Report on the scientific basis of tobacco product regulation: eighth report of a WHO study group. WHO Technical Report Series, No. 1029. Published 2021. Accessed June 8, 2025. https://www.who.int/publications/i/item/9789240022720
15. Duren M, Atella L, Welding K, Kennedy RD. Nicotine pouches: a summary of regulatory approaches across 67 countries. *Tob Control*. 2024;33(e1):e32-e40. doi:https://doi.org/10.1136/tc-2022-057734
16. Melendez-Torres GJ, Thomas J, Lorenc T, O'Mara-Eves A, Petticrew M. Just how plain are plain tobacco packs: Re-analysis of a systematic review using multilevel meta-analysis suggests lessons about the comparative benefits of synthesis methods. *Syst Rev*. 2018;7(1):1-9. doi:10.1186/s13643-018-0821-7
17. Rossel S. Seeking Substitutes. Tobacco Reporter. Accessed June 2, 2025. https://tobaccoreporter.com/2023/05/01/seeking-substitutes-2/
18. Mirza Z, Munir D. Conflicting interests, institutional fragmentation and opportunity structures: an analysis of political institutions and the health taxes regime in Pakistan. *BMJ Glob Heal*. 2023;8(Suppl 8):e012045. doi:10.1136/bmjgh-2023-012045
19. Masud H, Sekalala S, Gill P, Oyebode O. Critical analysis of tobacco taxation policies in Pakistan after two decades of FCTC: Policy gaps and lessons for low- and middle-income countries. *Tob Induc Dis*. 2023;21(November):1-14. doi:10.18332/tid/173389
20. Guest G, Namey E, McKenna K. How many focus groups are enough? Building an evidence base for nonprobability sample sizes. *Field methods*. 2017;29(1):3-22. doi:10.1177/1525822X166390
21. Health Facility Guidelines I. Part D - Infection Control - Guideline Section - International Health Facility Guidelines. 2017;(June).
22. Jehangir Khan M, Nawaz Sadozai K, Khan K, Khan FM, Rehman Khattak M, Ali H. Determinants and Working Conditions of Child Labour: A Case Study of Children Working at Automobiles Workshop at Khyber Pakhtunkhwa (KP), Pakistan. *Arts Soc Sci J*. 2018;09(02):7. doi:10.4172/2151-6200.1000332
23. Khan REA. Socioeconomic Aspects of Child Labour-A Case Study of Children in Auto Workshops. *Lahore J Econ*. 2001;6(1).
24. Tong A, Sainsbury P, Craig J. Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups. *Int J Qual Heal Care*. 2007;19(6):349-357. doi:10.1093/intqhc/mzm042
25. Cresswell J. Qualitative inquiry & research design: Choosing among five approaches. Published online 2013.
26. Yin RK. *Case Study Research and Applications: Design and Methods*. 6th ed. Sage publications; 2017.
27. Robinson JD, Drobes DJ, Brandon TH, Wetter DW, Cinciripini PM. Evaluating Point

of Sale Tobacco Marketing Using Behavioral Laboratory Methods. *Tob Regul Sci*. 2016;2(4):414-425. doi:10.18001/TRS.2.4.11

28. Staff Reporter. State urged to make stricter policies to curb growing use of new nicotine products. *Dawn*. https://www.dawn.com/news/1861811. Published September 29, 2024.
29. Khan JA, Sohail AMAH, Maan MAA. Tobacco control laws in pakistan and their implementation: A pilot study in karachi. *J Pak Med Assoc*. 2016;66(7):875-879.
30. Rasool A, Ahmad S, Farooq U, et al. Compliance of anti-smoking regulations by cigarette industry in Pakistan. *J Ayub Med Coll Abbottabad*. 2011;23(3):94-96. http://www.ncbi.nlm.nih.gov/pubmed/23272445
31. Ling PM, Hrywna M, Talbot EM, Lewis MJ. Tobacco-Derived Nicotine Pouch Brands and Marketing Messages on Internet and Traditional Media: Content Analysis. *JMIR Form Res*. 2023;7(1):e39146. doi:10.2196/39146
32. Lipperman-Kreda S, Islam S, Wharton K, Finan LJ, Kowitt SD. Youth tobacco and cannabis use and co-use: Associations with daily exposure to tobacco marketing within activity spaces and by travel patterns. *Addict Behav*. 2022;126:107202. doi:10.1016/j.addbeh.2021.107202
33. Simpson D. USA/Brazil: the flavour of things to come. *Tob Control*. 2004;13(2):105-106.
34. Morean ME, Bold KW, Davis DR, Kong G, Krishnan-Sarin S, Camenga DR. "Tobacco-free" Nicotine Pouches: Risk Perceptions, Awareness, Susceptibility, and Use Among Young Adults in the United States. *Nicotine Tob Res*. 2023;25(1):143-150. doi:10.1093/ntr/ntac204

Table 1: Sample characteristics

Group number	City	School-going status	Gender	Number in group
1	Punjab (Rawalpindi)	In school	Female	8
2	Punjab (Rawalpindi)	In school	Male	10
3	Islamabad	In school	Female	6
4	Islamabad	Out of school	Female	12
5	Punjab (Rawalpindi)	Out of school	Male	11
6	KP (Peshawar)	Out of school	Male	6
7	KP (Peshawar)	Out of school	Female	5
8	Sindh (Karachi)	In school	Male	5
9	Sindh (Karachi)	In school	Female	6
10	Sindh (Karachi)	Out of school	Male	6
11	KP (Peshawar)	In school	Male	6
12	KP (Peshawar)	In school	Female	6
13	Balochistan (Quetta)	In school	Female	6
14	Balochistan (Quetta)	In school	Male	6
15	Balochistan (Quetta)	Out of school	Male	6
16	Balochistan (Quetta)	Out of school	Female	8