

TÜRKİYE'DE ARTAN SİGARA KULLANIMI: BİR KAMU POLİTİKASI BAŞARISIZLIĞI MI?

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Öz

Son yirmi yılda Türkiye, Dünya Sağlık Örgütü Tütün Kontrolü Çerçeve Sözleşmesi (DSÖ TKÇS; WHO FCTC) ve bu sözleşme kapsamında geliştirilen MPOWER stratejisini en erken benimseyen ve en kararlı şekilde uygulayan ülkelerden biri olarak kabul edilmektedir. Ancak, güçlü yasal uyum ve kapsamlı düzenleyici çerçeveye rağmen, sigara kullanım prevalansındaki azalma politika yapıcılarının beklentilerinin gerisinde kalmıştır. Bu çalışma, söz konusu tersine dönüşün nedenlerini incelemekte ve Türkiye’de tütün kontrolü alanında yaşanan sorunun politika eksikliğinden ziyade bir uygulama başarısızlığı olduğunu ileri sürmektedir. Mevzuat, uluslararası karşılaştırmalar ve ikincil veri kaynaklarından yararlanılarak gerçekleştirilen analiz sonucunda, politika etkinliğini zayıflatan üç temel unsur belirlenmiştir: (i) tütünün kültürel olarak normalleşmiş olması ve ekonomik bağımlılık yaratması, (ii) regüle edilmiş alternatif ürünlerin bulunmaması ve (iii) mevcut güçlü düzenlemelerin yetersiz ve tutarsız biçimde uygulanması. Çalışma, Türkiye deneyimini kamu politikalarında devlet başarısızlığı ve politika uygulama boşlukları üzerine yürütülen kuramsal tartışmalar çerçevesinde değerlendirmektedir. Bulgular, tütün bağımlılığının sosyo-kültürel ve ekonomik temelleri ele alınmadığı, alternatif nikotin ürünlerine yönelik düzenlenmiş bir çerçeve oluşturulmadığı ve ülke genelinde tutarlı bir denetim mekanizması sağlanmadığı süreçte Türkiye’nin tütün kontrolü politikalarının sınırlı sonuçlar üretmeye devam edebileceğini göstermektedir. Çalışma, uygulama kapasitesinin güçlendirilmesi, tütün üreticileri için tarımsal çeşitlendirmenin desteklenmesi ve halk sağlığı müdahalelerinin Türkiye’nin toplumsal gerçekliklerine uyarlanmasına yönelik politika önerileriyle son bulmaktadır.

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RISING SMOKING PREVALENCE IN TÜRKİYE: IS THERE A PUBLIC POLICY FAILURE?

Abstract

Over the past two decades, Türkiye has been recognized as one of the earliest and most committed adopters of the World Health Organization's Framework Convention on Tobacco Control (WHO FCTC) and its MPOWER strategy. However, despite this strong legislative alignment and comprehensive regulatory framework, the decline in smoking prevalence has fallen short of policymakers' expectations. This paper investigates the reasons behind this reversal, arguing that Türkiye's tobacco control challenge represents a case of implementation failure rather than policy absence. Drawing on legislation, international comparisons, and secondary data, the study identifies three core factors undermining policy effectiveness: (i) the cultural normalization and economic dependency associated with tobacco, (ii) the absence of a regulated alternative products framework, and (iii) weak and inconsistent enforcement of existing strong regulations. The analysis situates Türkiye's experience within broader theoretical debates on government failure and policy implementation gaps. Findings suggest that without addressing the socio-cultural and economic roots of tobacco dependence, integrating regulated alternative products, and ensuring consistent nationwide enforcement, Türkiye's tobacco control efforts may continue to yield limited results. The paper concludes with policy recommendations aimed at enhancing enforcement capacity, supporting agricultural diversification, and adapting public health interventions to Türkiye's social realities.

Keywords

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INTRODUCTION

Humans have been using tobacco products for hundreds of years. Over the past decades, international efforts to reduce tobacco use have intensified, particularly under the guidance of the World Health Organization (WHO). It outlines a set of evidence-based policy interventions for reducing smoking prevalence globally. Since the 2000s, numerous countries have reported success in controlling tobacco consumption by implementing policies such as increasing excise taxation, public smoking bans, and restrictions on advertising.

Türkiye, as one of the biggest tobacco producers, has always had high smoking rates historically. Türkiye has been actively involved in tobacco control efforts since the introduction of its initial regulations in 1996 (Sönmez, 2025). Following these initial regulations in the late 1990s, Türkiye ratified the World Health Organization Framework Convention on Tobacco Control (WHO FCTC) in 2004 (Çetinkaya et al., 2022). As Table 1 shows, Türkiye has been one of the countries that have imposed the most comprehensive restrictions on tobacco products. The country reinforced its commitment to tobacco control by formulating its first national strategy document alongside a five-year action plan in line with the WHO MPOWER framework in 2008, which would be revised in 2012 and 2018 (Sönmez, 2025).

Despite being one of the earliest and most applauded adopters of WHO tobacco control policies in the early 2000s, Türkiye is facing an unexpected reversal in smoking prevalence. With the adoption of almost all WHO-recommended policies, according to different calculations, Türkiye achieved comparatively low smoking incidence rates which is around 27% between 2002–2016. After a period of reduced cigarette consumption, the trend reversed, showing an increase from 2016 onward (Ozcebe et al., 2018).

Tobacco use estimates in Türkiye show slight variation depending on the source and definitional criteria. The nationally representative data from the Türkiye Health Survey 2025 indicates that 30.1% of individuals aged 15 and above smoke daily, with prevalence rates of 42.9% among men and 17.5% among women (Turkish Statistical Institute, 2026). These show 1 to 2 percentage points increase compared to previous research (Turkish Statistical Institute, 2023). For international comparison, the most recent dataset comes from 2021 and is included in the OECD's Health at a Glance 2023. The OECD report highlights that Türkiye has one of the highest daily smoking rates among OECD countries with 28%, compared to the OECD average of 15.9% (OECD, 2023). Even in the absence of any easing in tobacco control measures, the country's adult smoking rate had been expected to reach 30.1% in 2025, indicating a significant rise compared to previous years (Turkish Statistical Institute, 2026).

Recent global assessments also confirm that tobacco use remains one of the leading preventable causes of mortality, and emphasize that countries with strong policy frameworks may still experience stagnation or reversal in smoking prevalence when implementation gaps persist (World Health Organization, 2025a). This paradox calls into question the real effectiveness of Türkiye's tobacco control policies.

Table 1. Turkish Regulations Regarding the Use of Tobacco Products and Their Respective MPOWER Components.

Action	MPOWER Component	Date of Entry into Force	Purpose
Law No. 4207: Smoking ban in enclosed areas; bans on advertising, promotion, and sponsorship	Protect (P), Enforce (E)	December 10, 1996	To prevent passive smoking; to protect society from marketing pressure
Age Limit (Under 18 Sales Ban): Prohibition of selling tobacco products to those under 18	Enforce (E)	December 10, 1996	To prevent tobacco use among youth
Tobacco Excise Tax (ÖTV) Reforms (2003-2026)	Raise (R)	2003–2025 periodic increases	To reduce consumption by raising prices and to ensure revenue growth
WHO FCTC (Framework Convention on Tobacco Control) Signature and Ratification	Monitor (M)	April 28, 2004 (First signature) December 31, 2004 (ratification)	To participate in the global tobacco control framework
National Tobacco Control Program and Action Plan (2008–2012)	All components of MPOWER	December 2007 (launch)	To establish a comprehensive strategic roadmap
Amendment to Law No. 5727: Expanded smoke-free laws; severe penalties for violations	Protect (P), Enforce (E)	January 3, 2008 (law) July 19, 2009 (full implementation)	To expand smoke-free environments; to increase deterrence
Increased Graphic Health Warnings: Raising warning coverage on packages to 65%	Warn (W)	2012	To strengthen risk awareness about the harms of tobacco
Ratification of the FCTC Protocol to Eliminate Illicit Trade in Tobacco Products	Enforce (E)	January 12, 2018	To prevent illicit tobacco trade and reduce tax losses
Plain Packaging Implementation: Standardized packaging without logos or branding elements	Warn (W)	December 5, 2018 (law) January 5, 2020	To reduce the appeal of packages and break branding impact
Ban on Electronic Cigarettes and Similar Products: Complete ban on import, sale, advertising, and promotion	Enforce (E)	February 25, 2020	To prevent the access of youth and new users to these products

Source: Author's compilation based on Turkish legislation

Taken together, these trends point to an important policy paradox. Despite implementing an increasingly restrictive tobacco control framework, Türkiye has struggled to achieve a sustained reduction in smoking prevalence. At the same time, a number of countries with comparatively less prohibition-oriented regulatory approaches have experienced more substantial declines in smoking rates. Although such cross-country differences cannot be attributed to regulatory strictness alone, this divergence raises an important question about whether increasingly restrictive measures necessarily translate into better public health outcomes. The coexistence of stringent regulation and persistently high smoking prevalence in Türkiye therefore warrants closer examination of the factors that may be limiting the effectiveness of the country's tobacco control policies. The analysis proceeds in three stages. First, it evaluates the evolution of Türkiye's tobacco control framework in comparison with internationally recognized policy standards. Second, it identifies the principal structural factors that may explain the divergence between policy ambition and observed smoking prevalence. Finally, these factors are synthesized into an integrated explanatory framework consisting of three interrelated dimensions: (i) the cultural and economic embeddedness of tobacco, (ii) the absence of regulated harm reduction alternatives, and (iii) weaknesses in policy implementation and enforcement. This analytical strategy allows the study to move beyond descriptive policy analysis and provide a theoretically grounded explanation of Türkiye's recent tobacco control experience.

1. Methodology

This study adopts a qualitative explanatory research design to investigate the apparent paradox between Türkiye's comprehensive tobacco control framework and the recent increase in smoking prevalence. Rather than testing a causal hypothesis through statistical modelling, the study aims to explain why existing tobacco control policies have failed to produce the expected public health outcomes despite their extensive legal and institutional foundation.

The analysis is based on a systematic review of secondary sources, including national legislation, government strategy documents, reports published by international organizations such as the World Health Organization (WHO), OECD and the Food and Agriculture Organization (FAO), official statistics from the Turkish Statistical Institute (TurkStat), and peer-reviewed academic studies. These sources were selected because they collectively provide evidence on policy design, implementation practices, smoking prevalence, tobacco production, and international tobacco control experiences.

Analytically, the paper follows a theory-informed explanatory approach grounded in the public policy concepts of government failure and the implementation gap. These concepts serve as the analytical framework through which empirical evidence is interpreted. Rather than evaluating individual tobacco control measures in isolation, the study examines how institutional capacity, socio-cultural conditions, and regulatory choices interact to influence policy outcomes.

2. Literature Review

A substantial body of literature has examined the effectiveness of tobacco control policies across different countries, particularly within the framework of the World Health Organization's Framework Convention on Tobacco Control (WHO FCTC) and its MPOWER

strategy. These frameworks emphasize taxation, smoke-free environments, advertising bans, and public awareness campaigns, and health warnings on the packages as the core instruments for reducing smoking prevalence (Hiilamo et al., 2014). Empirical evidence from high-income countries consistently demonstrates that the comprehensive and sustained implementation of these measures leads to significant reductions in both smoking prevalence and tobacco-related mortality (Chaloupka et al., 2011; Ngo et al., 2017).

However, more recent research suggests that the effectiveness of tobacco control policies cannot be explained solely by their formal adoption. Scholars increasingly argue that implementation quality, institutional capacity, and policy coherence are equally, if not more, important determinants of success (Cairney et al., 2012; Smith et al., 2020). In this context, the concept of an 'implementation gap' has gained prominence in public policy literature, referring to situations where well-designed policies fail to achieve their intended outcomes due to weak enforcement, fragmented governance structures, or insufficient administrative capacity (Pressman and Wildavsky, 1973; Howlett and Ramesh, 2003).

This perspective has been reinforced by a growing number of empirical studies documenting cases of government failure in tobacco control across different country contexts. For instance, evidence from the Arab region indicates that despite formal commitment to international frameworks such as the WHO FCTC, many countries have struggled to effectively reduce smoking prevalence due to weak institutional capacity and limited enforcement (Maziak, 2011). Similarly, research from New Zealand demonstrates that even in high-capacity governance systems, regulatory effectiveness may be undermined by failures in enforcement and regulatory follow-through, particularly in relation to industry oversight and compliance mechanisms (Thomson, 2005). In Europe, Austria is frequently cited as an example of policy stagnation, where delayed regulatory action and weak political commitment contributed to persistently high smoking rates despite growing international pressure (Bachinger, 2004).

These cross-country findings suggest that tobacco control outcomes are strongly conditioned by state capacity and governance quality, rather than by the mere presence of regulatory frameworks. In environments characterized by weak enforcement, industry influence, or fragmented institutional responsibilities, governments may formally adopt comprehensive policies while failing to effectively operationalize them. As a result, a divergence emerges between policy commitments and public health outcomes.

In parallel, another important strand of the literature focuses on the role of harm reduction strategies in tobacco control. Countries such as the United Kingdom, Japan, and Sweden have incorporated alternative nicotine delivery products—including e-cigarettes, heated tobacco products (HTPs), and nicotine pouches—into their public health strategies (McNeill et al., 2018; Stoklosa et al., 2020; Ermann and Klefbom, 2024). A growing body of evidence suggests that these products can contribute to reductions in cigarette consumption when they function as substitutes rather than complements (Levy et al., 2013). However, this literature remains contested, with concerns related to youth uptake, dual use, and long-term health effects continuing to shape the policy debate (Fairchild, 2021).

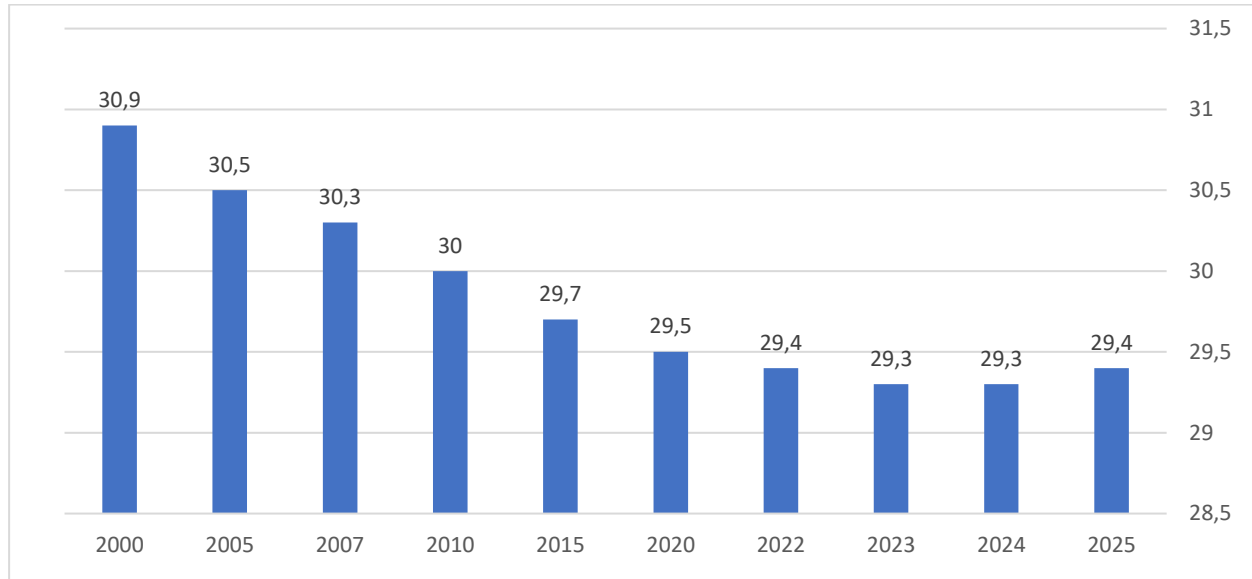
The increasing role of digital markets and cross-border access has further complicated the effectiveness of tobacco control policies. Studies show that online platforms and new media environments can undermine national regulations by facilitating access to restricted products, weakening enforcement capacity, and enabling informal distribution channels (Freeman, 2012; Caputi et al., 2017). This development is particularly relevant for countries that rely on prohibition-based approaches, as digitalization reduces the effectiveness of traditional regulatory tools.

In the Turkish context, the literature has largely focused on the rapid development of tobacco control policies and their alignment with international standards. Early studies highlight Türkiye as one of the most successful adopters of WHO-recommended measures, emphasizing the country's achievements in taxation, smoke-free legislation, and public awareness campaigns (Bilir, 2017). However, more recent studies point to a divergence between policy design and outcomes, highlighting the role of enforcement challenges, socio-economic factors, and changing consumption patterns (Ozcebe et al., 2018; Dağlı Güner et al., 2024). Despite these contributions, the existing literature remains fragmented. Cultural normalization of smoking, economic dependency on tobacco production, weak enforcement, and the absence of harm reduction alternatives are often examined in isolation, rather than within an integrated analytical framework. As a result, there is limited understanding of how these factors interact to shape smoking prevalence in Türkiye.

This study addresses this gap by synthesizing insights from public policy theory, global tobacco control literature, and country-specific dynamics to provide a more comprehensive explanation of Türkiye's rising smoking prevalence. By framing the issue through the lens of government failure in implementation, the paper argues that Türkiye's experience is not an exception, but rather part of a broader global pattern in which ambitious tobacco control policies fail to deliver expected outcomes due to limitations in enforcement, institutional capacity, and policy adaptation.

3. Policy Failure in Tobacco Control: Explaining the Implementation Gap

Tobacco use in Türkiye is a longstanding debate within society, and public policy decisions of the government play an important role in the design and construction of effective smoking control programmes. The WHO Global Health Observatory enables the tracking of country-level smoking prevalence data from 2000 onward. While the estimates were previously reported at five-year intervals, they have more recently been updated on an annual basis. Table 1 illustrates the historical evolution of smoking prevalence in Türkiye between 2000 and 2025.

Table 1. Smoking Prevalence In Türkiye Between 2000-2025

Source: WHO Global Health Observatory (2026)

According to the WHO Global Health Observatory, smoking prevalence in Türkiye can be tracked continuously from 2000 onwards. While these estimates were initially reported at five-year intervals, they have recently been updated annually, enabling a more detailed assessment of long-term policy outcomes. Despite more than two decades of comprehensive tobacco control measures, early ratification of the WHO Framework Convention on Tobacco Control (WHO FCTC), and repeated recognition by the WHO as one of the leading implementers of the MPOWER strategy, Türkiye has achieved only a modest reduction of approximately 1.5 percentage points in adult smoking prevalence over the past 25 years. This limited improvement raises important questions regarding the effectiveness of policy implementation and the ability of existing tobacco control measures to produce sustained public health outcomes. This apparent contradiction between strong regulatory design and deteriorating outcomes is not unique to Türkiye but reflects a broader challenge in public policy. While countries may adopt comprehensive legal frameworks, their effectiveness ultimately depends on implementation capacity, institutional coordination, and policy adaptability (Pressman and Wildavsky, 1973). In this context, Türkiye's experience increasingly resembles what the literature describes as an 'implementation gap', where formal policy compliance coexists with weak real-world outcomes (Smith et al., 2020).

Table 2 compares the evolution of smoking prevalence in Türkiye and neighboring countries between 2000 and 2025 based on WHO Global Health Observatory data of age-standardized current cigarette smoking prevalence. Although Türkiye has implemented one of the world's most comprehensive tobacco control frameworks over the past two decades and has been repeatedly recognized by the WHO as a leading example of MPOWER implementation, the decline in smoking prevalence has remained remarkably limited. Between 2000 and 2025, smoking prevalence in Türkiye decreased by only approximately 1.5 percentage points, whereas substantially larger reductions were observed in neighboring countries. During the same period, smoking prevalence fell by 20.7 percentage points in

Greece, 10.0 points in Azerbaijan, 8.2 points in Iran, 7.9 points in Armenia, 6.0 points in Cyprus, and 4.9 points in Bulgaria. Even Iraq, despite experiencing prolonged periods of political instability and armed conflict, recorded a larger decline (2.2 percentage points) than Türkiye (1.5 percentage points). These cross-country comparisons suggest that the limited reduction in smoking prevalence in Türkiye cannot be explained solely by regional trends. Rather, they point to a disconnect between the comprehensiveness of the country's tobacco control policies and their long-term effectiveness, reinforcing the need to examine the implementation gap and the structural factors limiting policy outcomes.

Table 2. Smoking Prevalence In Türkiye's Neighbour Countries, 2000–2025 (%)

Year	Armenia	Azerbaijan	Bulgaria	Cyprus ²	Georgia	Greece	Iran	Iraq	Türkiye
2000	32.2	23.3	40.7	33.8	30	48.1	14.8	19.1	30.9
2005	30.4	20.7	39.5	32.4	29.4	42.7	12.4	18.1	30.5
2007	29.7	19.7	38.9	31.7	29.2	40.9	11.6	17.9	30.3
2010	28.6	18.4	38.3	30.9	29	38.2	10.5	17.5	30
2015	27	16.4	37.2	29.8	28.5	34.2	8.9	17.1	29.7
2020	25.6	14.7	36.5	28.8	28.2	30.6	7.6	16.9	29.5
2022	25	14.2	36.3	28.3	28.1	29.2	7.2	16.9	29.4
2023	24.6	13.8	36	28.2	27.9	28.6	7	16.9	29.3
2024	24.5	13.5	35.9	28	28	28.1	6.8	17	29.3
2025	24.3	13.3	35.8	27.8	27.9	27.4	6.6	16.9	29.4
Decrease points in prevalence (%)	-7.9	-10.0	-4.9	-6.0	-2.1	-20.7	-8.2	-2.2	-1.5

Source: WHO Global Health Observatory (2026)

This comparative pattern makes Türkiye an analytically important case. The country does not suffer from an absence of tobacco control legislation; on the contrary, it has adopted and maintained a highly restrictive regulatory framework. Yet the long-term change in smoking prevalence remains weaker than in many neighboring countries with different institutional, economic, and political conditions. Therefore, the central question is not whether Türkiye has introduced tobacco control measures, but why these measures have not translated into stronger and more sustained reductions in smoking prevalence.

In Türkiye after 2020, when tobacco control laws did not soften but in fact became stricter, the reversal in smoking trends requires closer examination. From a public policy and economic perspective, government failure refers to a situation in which government intervention fails to achieve its intended objectives (Dye, 2017). Given the upward trend in

² The information in this document with reference to 'Cyprus' relates to the southern part of the Island.

smoking prevalence despite increasingly strict regulatory measures, Türkiye's case can be interpreted as a form of government failure rooted not in policy absence, but in implementation constraints.

Recent country-specific analyses support this interpretation. According to think-tank organisation The Economic Policy Research Foundation of Türkiye (TEPAV), Türkiye experienced a period of declining smoking rates following the initial implementation of comprehensive tobacco control policies; however, since 2020, smoking prevalence has entered a renewed upward trajectory despite the continuation of strict regulations (Cünedioğlu, 2025). This suggests that the initial success of policy interventions has not been sustained over time, raising questions about long-term policy effectiveness and institutional capacity.

At the same time, the structural characteristics of the tobacco sector complicate policy outcomes. The tobacco industry in Türkiye continues to hold significant economic value through agricultural production, employment, and export revenues, creating a complex policy environment in which public health objectives and economic considerations may conflict (Selçuki and Cünedioğlu, 2026; FAO, 2003). This dual character of tobacco as both a regulated harmful product and an economically embedded sector, limits the effectiveness of purely regulatory approaches and may reduce the political and administrative incentives for strict enforcement.

Moreover, global evidence suggests that tobacco control policies are particularly vulnerable to implementation challenges in environments characterized by strong regulation but weak enforcement capacity. Studies from both developed and developing countries indicate that the success of tobacco control depends less on the existence of laws and more on their consistent application, monitoring, and adaptation to changing market conditions (Maziak, 2011; Joossens and Raw, 2012).

Within this broader framework, Türkiye's rising smoking prevalence can be interpreted as the outcome of multiple interacting factors rather than a single policy failure. The divergence between regulatory ambition and policy outcomes reflects deeper structural issues related to social norms, economic dependencies, and institutional effectiveness. On the one hand, research shows that after the new tobacco control laws became effective in 2008, Türkiye maintained a strict tobacco control framework aligned with WHO recommendations, achieving notable progress in tobacco regulation (Ozcebe et al., 2018). On the other hand, more recent evidence points out that smoking rates have continued to stay flat, primarily due to weaknesses in the enforcement and implementation of these measures (Ünver, 2025).

This chapter seeks to shed light on this dilemma by examining three interrelated dimensions: (i) the cultural and economic embeddedness of tobacco, (ii) the absence of regulated alternative new category products, and (iii) the weak and inconsistent enforcement of existing regulations. By analyzing these dimensions together, the study aims to provide a more comprehensive explanation of why Türkiye's tobacco control policies, despite their strong legal foundation, have not sustained their initial success.

3.1 Cultural Acceptance and Economic Significance of Tobacco

One major reason for Türkiye's rising smoking prevalence might be the deep cultural normalization of tobacco use and the economic dependency of households on tobacco. In Turkish society, cigarettes are not only a personal habit but also a socially accepted behavior embedded in daily routines and social interactions. In many settings such as tea houses, workplaces, and traditional gatherings, smoking is perceived as a form of hospitality and social bonding, particularly among men (Bilir, 2017; Sönmez, 2025). This strong social acceptance and tolerance have weakened the perceived risks of tobacco use, despite widespread public awareness campaigns and graphic health warnings. In such a cultural environment, regulatory measures often face resistance, as they directly conflict with long-standing social norms. This phenomenon aligns with broader public policy frameworks which demonstrate that national regulatory designs are heavily dictated and sometimes constrained by prevailing cultural dimensions.

The cultural embeddedness of tobacco use in Türkiye is also historically rooted. Tobacco was introduced into the Ottoman Empire in the late 16th century and rapidly became widespread across different regions and social classes. Despite periodic bans during the Ottoman period, tobacco consumption persisted and gradually became an integral part of everyday life (Quataert, 2005). Over time, tobacco use became deeply intertwined with social practices, rituals, and identity, contributing to its long-term normalization. This cultural dimension is further reflected in everyday social practices and public discourse. Traditionally, smoking has been an integral part of social interaction in Türkiye, particularly in coffeehouses where conversation, hospitality, and tobacco use have long been intertwined. This cultural acceptance is also reflected in popular narratives that portray smoking as a means of relieving stress or as a simple pleasure of everyday life. In Turkish culture, similar expressions reinforce the perception of smoking as a socially embedded and culturally meaningful activity rather than merely a harmful behavior. Such representations contribute to the persistence of smoking habits by shaping social attitudes and perceptions.

The persistence of smoking in Türkiye can also be understood through mechanisms of social normalization and intergenerational transmission. Qualitative evidence suggests that young people are exposed to contradictory messages regarding tobacco use: while smoking among adolescents is generally regarded as socially undesirable, widespread adult smoking in homes, schools, coffeehouses, and other social environments simultaneously presents smoking as a normal feature of everyday adult life. In particular, smoking has historically been embedded in male social environments and associated with adulthood, military service, and economic independence. Such repeated exposure may weaken formal tobacco-control messages by reproducing smoking-related social norms across generations (Yuksel and Corbett, 2005).

Gender appears to be a significant determinant of tobacco and electronic cigarette use patterns in Türkiye. A recent study highlights that women in Türkiye are less likely than men to use both conventional tobacco products and electronic cigarettes, despite exhibiting similar levels of knowledge, attitudes, and beliefs about tobacco (Ünver, 2025). These findings are consistent with the existing scholarship and highlight the importance of integrating gender-

sensitive strategies into tobacco control policies, particularly with regard to male-oriented social norms and behavioral patterns.

In addition to cultural acceptance, the economic significance of tobacco plays a crucial role in sustaining tobacco consumption in Türkiye. The country has a long-standing tradition of tobacco cultivation spanning several centuries, and tobacco remains one of the most important cash crops in certain regions. Historical and economic analyses indicate that tobacco production has long been one of the most labour-intensive agricultural activities, supporting not only farmers but also a wide network of rural labor and processing industries (Food and Agriculture Organization [FAO], 2003).

Today, tobacco production continues to be geographically widespread across Türkiye. As of recent data, tobacco farming is carried out in multiple regions, particularly in the Aegean, Black Sea, and Southeastern Anatolia regions, reflecting its deep integration into the rural economy (Turkish Statistical Institute, 2025). This wide geographic distribution further reinforces the socio-economic importance of tobacco, as it provides livelihoods for tens of thousands of households.

From an economic perspective, tobacco has always been considered as excise revenue. Tobacco products are estimated to contribute to Türkiye's government budget by 563 billion TL (12 billion USD). Moreover, tobacco also constitutes an important export commodity. Türkiye exported tobacco products worth over 1 billion USD in 2024, supplying approximately 50 countries. This export performance highlights the continued relevance of tobacco within the country's broader trade structure and reinforces its strategic economic importance. Moreover, more than 50,000 registered tobacco farmers operate across the country, many of whom rely on tobacco as their primary source of income due to limited access to viable agricultural alternatives (Turkish Statistical Institute, 2025). Importantly, contemporary tobacco agriculture in Türkiye should not be understood solely as the continuation of traditional small-scale farming. Recent evidence indicates that contract farming has become the dominant organizational structure of domestic tobacco production. Between 2010 and 2023, contracted farmers accounted for approximately 85.6% of Türkiye's domestic tobacco output. This suggests that the economic embeddedness of tobacco extends beyond individual farming households and encompasses contractual relationships connecting agricultural production with the broader tobacco supply chain (Dinçer, 2025). In several provinces particularly in Adıyaman, Denizli, Batman, Manisa, and Uşak, tobacco production constitutes a major component of local economic activity. Case studies conducted at the provincial level further support this pattern. For instance, research on tobacco production in Uşak province demonstrates that tobacco cultivation remains a key source of income for rural households and relies heavily on family labor (Gül et al., 2022). Consequently, the economic dependence of rural populations on tobacco creates structural pressures on policymakers to maintain favorable conditions for tobacco production and sales.

Breaking this dependency has proven to be difficult. Although alternative crops have been proposed by policymakers and public health advocates, farmers frequently report that these alternatives lack stable markets, require higher production costs, or fail to provide comparable income security (Işıklı et al., 2001). Following the privatization of Tekel, some tobacco farmers transitioned into seasonal labor or exited production altogether, while others

continued tobacco cultivation despite declining profitability (Kayaalp, 2009). In some cases, farmers who continued tobacco production were found to have lower income levels compared to those who shifted to alternative activities (Tekdemir et al., 2024). In general, this situation creates a fundamental policy dilemma. On the one hand, public health policies aim to reduce tobacco consumption through taxation, regulation, and awareness campaigns in line with the WHO FCTC framework (World Health Organization, 2003). On the other hand, agricultural and regional development policies indirectly sustain tobacco production due to its economic importance. This tension may be conceptualized more broadly as a problem of policy incoherence between demand-side tobacco control and the political economy of tobacco supply. Gultekin-Karakas (2015) argues that, although Türkiye progressively introduced demand-side tobacco control policies after 1996, the country simultaneously continued to stimulate tobacco manufacturing and trade. From this perspective, the effectiveness of tobacco control cannot be evaluated solely through restrictions imposed on consumers; it must also be considered in relation to the economic structures and socio-cultural structure. The coexistence of restrictive demand-side measures with policies facilitating tobacco-related economic activity may therefore limit the overall coherence and effectiveness of tobacco control. This policy dilemma is rooted in a global fiscal paradox, where economic policy frequently clashes with health interventions.

This contradiction weakens the overall effectiveness of tobacco control policies. A rapid phase-out of tobacco cultivation without credible alternatives risks undermining rural livelihoods, increasing poverty, and accelerating rural-to-urban migration. At the same time, continued economic dependence on tobacco sends mixed signals to the public regarding the government's commitment to tobacco control. Therefore, without addressing both the socio-cultural normalization of smoking and the economic structures that sustain tobacco production, regulatory approaches alone are unlikely to achieve their intended outcomes.

3.2 Absence of Harm Reduction Alternatives

Another major factor contributing to Türkiye's rising smoking prevalence may be the absence of harm reduction alternatives in the country's tobacco control policy. Harm reduction strategies aim to provide less harmful alternatives for individuals who cannot or are not keen to quit nicotine entirely. This kind of new product examples include electronic cigarettes, heated tobacco products (HTPs), and oral nicotine pouches. While these products are not risk-free, a growing amount of international research indicates they are significantly less harmful than combustible cigarettes and can support smoking cessation when regulated effectively (McNeill et al., 2018). Evidence compiled by the World Health Organization (2023) demonstrates that permitting electronic cigarettes to be sold freely on the open commercial market does not yield a net benefit to public health. Instead, the WHO recommends that if governments choose not to ban electronic nicotine delivery systems (ENDS) entirely, they must enforce rigorous public health mandates. These include prohibiting all characterizing flavors, restricting device technical specifications (World Health Organization, 2023).

While it is indisputable that nicotine is a highly addictive substance, the global governance of electronic cigarettes exhibit significant fragmentation across different jurisdictions. According to the World Health Organization (2023), e-cigarettes were subject to some form of regulation in 121 countries, of which 34 prohibited their sale. This implies that

87 countries regulated e-cigarettes without imposing a complete sales ban, while an additional 74 countries had no specific regulations addressing e-cigarettes. Thus, Türkiye's comprehensive prohibition represents one of several regulatory approaches within a highly heterogeneous global policy landscape. According to World Health Organization (2025a), among 195 countries and territories, 19 had banned the sale of HTPs, while 176 had not imposed a sales ban. Among them, 69 specifically regulated HTPs in one form or another, while another 86 appeared to regulate them implicitly under conventional tobacco product regulations. Thus, a complete prohibition of HTP sales represented a relatively uncommon regulatory approach globally. Under the global mandates of the WHO FCTC, HTPs are explicitly classified as tobacco products rather than mere nicotine delivery devices (World Health Organization, 2025b). Consequently, the global regulatory landscape for both products are expanding rapidly. Many countries recognized the potential of these alternatives and implemented them in their fight against smoking. However, Türkiye has adopted a prohibitionist stance, banning the import, sale, and advertising of all these products. Since the 2013 legislative amendment, Türkiye has prohibited the advertising, indoor consumption, and retail sale of electronic cigarettes, reflecting an early regulatory stance against emerging nicotine delivery systems (Çetinkaya et al., 2022). Despite the legal ban on electronic cigarette sales in Türkiye, some studies note ongoing activity in digital spaces, including their promotion via social media, online sales, and the circulation of instructions for preparing and using these products (Dağlı Güner et al., 2024). On February 25, 2020, Presidential Decision No. 2149 was published in Türkiye's Official Gazette (Resmî Gazete), establishing a comprehensive ban on the import of electronic cigarettes, electronic hookahs, and all similar products designed to mimic the act of tobacco consumption. Additionally, the decision explicitly prohibits the importation of HTPs and other electronic nicotine delivery systems, marking a firm regulatory stance against the proliferation of emerging tobacco alternatives (Republic of Türkiye, 2020).

Over the past decade, several countries have incorporated reduced-risk nicotine products into comprehensive tobacco control strategies, complementing conventional measures such as taxation, smoke-free legislation, advertising restrictions, and cessation services. In the United Kingdom, nicotine vaping products (electronic cigarettes) have been actively integrated into smoking cessation policies, with public health authorities recognizing their potential to support adult smokers who would otherwise continue smoking. Government evidence reviews conclude that vaping has become the most commonly used cessation aid in England and is associated with higher quit success rates when combined with behavioral support (Office for Health Improvement and Disparities, 2022). In Japan, although electronic nicotine products remain restricted, the introduction and widespread adoption of heated tobacco products has coincided with an unprecedented decline in cigarette sales, suggesting that many smokers have substituted combustible cigarettes with lower-risk alternatives, while Sweden has achieved the lowest smoking prevalence in Europe through the long-standing availability of oral tobacco (snus) and, more recently, nicotine pouches as alternatives to cigarette smoking (Stoklosa et al., 2020; Ermann and Klefbom, 2024).

Together, these experiences illustrate that harm reduction products can complement, rather than replace, conventional tobacco control policies by expanding the range of cessation

and substitution options available to adult smokers. Table 3 reinforces this argument by showing the long-term decline in smoking prevalence in countries that have incorporated harm reduction alternatives into their broader tobacco control strategies. Between 2000 and 2025, smoking prevalence declined by 24.7 percentage points in the UK, 17.7 points in Sweden, and 15.9 points in Japan. While these reductions cannot be attributed solely to alternative nicotine products, the data suggest that harm reduction approaches may have complemented traditional tobacco control measures by expanding the range of available cessation and substitution pathways for adult smokers. Therefore, these country experiences provide a useful comparative reference for evaluating Türkiye's prohibition-based approach.

Table 3. Smoking Prevalence in Japan, the UK, and Sweden, 2000–2025 (%)

Year	Japan	UK	Sweden
2000	32.3	33.1	23.2
2005	28.1	25.1	17.4
2007	26.7	22.5	15.4
2010	24.6	19.1	13
2015	21.5	14.5	9.7
2020	18.8	11.1	7.3
2022	17.8	9.9	6.5
2023	17.3	9.4	6.1
2024	16.9	8.9	5.8
2025	16.4	8.4	5.5
Decrease points in prevalence	-15.9	-24.7	-17.7

Source: WHO Global Health Observatory (2026)

From a policy perspective, the debate over new category alternative products should extend beyond the question of whether they can facilitate smoking cessation to consider what threshold of evidence is sufficient to justify their inclusion within a harm reduction framework. Although systematic reviews and meta-analyses represent the highest levels of evidence synthesis, their conclusions inevitably depend on the quality, design, and comparability of the underlying studies, including which products are being used during the studies and whether they are compliant or uncompliant with the regulations. Using uncompliant products which are mostly illicit in the market may cause biased results. Consequently, uncertainty in the evidence base should be carefully weighed against both the potential benefits of providing lower-risk alternatives to smokers and the well-established

harms associated with continued combustible cigarette use. Although there are many countries that have integrated these new products into their tobacco control strategies, Türkiye has refused to adopt harm reduction alternatives. This policy decision may unintentionally contribute to the persistence or even increase of cigarette consumption. One of the main concerns behind this approach is the assumption that alternative products may increase nicotine addiction compared to traditional cigarettes (Jankowski et al., 2019; Yuan et al., 2015). However, for smokers with high nicotine dependence, complete cessation through sudden quitting or traditional nicotine replacement therapies may be unrealistic. In such cases, smokers may give up their attempts to quit or turn to illicit markets for alternative products.

Recent literature suggests that prohibition based approaches do not necessarily eliminate demand but may instead shift consumption toward informal or unregulated markets, particularly in digital environments where cross-border access is easier (Freeman, 2012; Caputi et al., 2017). This unintended consequence is especially relevant in Türkiye, where despite strict bans, awareness and usage of alternative products remain observable.

Without access to regulated alternatives, Türkiye limits its capacity to update tobacco control policy, reduce smoking prevalence, and align with evolving global best practices. These findings highlight a critical tension in Türkiye's tobacco control policy between precaution and innovation. While the government's prohibitionist stance is motivated by concerns over potential new forms of addiction, the lack of regulated harm reduction options may unintentionally reinforce dependence on combustible cigarettes. Based on international experiences, the current approach in Türkiye prioritizes the avoidance of uncertain future risks over the mitigation of well established harms associated with cigarette smoking. This raises an important policy question for policymakers: whether a carefully regulated harm reduction framework might be more effective in reducing smoking prevalence than a total ban.

3.3 Weak Enforcement of Existing Strong Regulations

A third major reason responsible for the rising smoking prevalence in Türkiye might be the weak enforcement of existing tobacco control laws. While Türkiye's legal framework is widely recognized as one of the most comprehensive and stringent in the world, its effectiveness ultimately depends on consistent monitoring and enforcement (Ozcebe et al., 2018; World Health Organization, 2019). Indeed, Türkiye has long been cited as a model country in tobacco control due to its early and ambitious implementation of WHO FCTC and MPOWER policies (Bilir, 2017). However, despite this strong regulatory foundation, recent evidence suggests that these policies have gradually lost their effectiveness in practice.

Recent policy analyses also confirm this divergence. According to a comprehensive assessment by the Economic Policy Research Foundation of Türkiye (TEPAV), tobacco control policies in Türkiye initially contributed to reductions in smoking prevalence, but after mid 2010s, tobacco use has entered a renewed upward trend despite the continued presence of strict regulations (Cünedioğlu, 2025). This divergence between strong regulatory design and weak outcomes reflects a broader phenomenon in public policy, where formal compliance does not necessarily translate into effective implementation (Pressman and Wildavsky, 1973; Howlett and Ramesh, 2003). In the Turkish case, the persistence—and even increase—of

smoking prevalence despite increasingly strict regulations suggests that enforcement has become the primary bottleneck in tobacco control.

A key dimension of this enforcement challenge relates to the growing role of illicit trade and cross-border dynamics. Tobacco smuggling remains a major concern, undermining both public health objectives and fiscal outcomes. International evidence shows that effective tobacco control requires not only domestic regulation but also strong border control and coordinated anti-smuggling strategies (Joossens and Raw, 2012). Without effective border enforcement, price-based policies such as excise taxes may lose their effectiveness as consumers shift toward cheaper illicit alternatives.

At the domestic level, Türkiye already has extensive restrictions on tobacco use, including comprehensive smoke-free laws, advertising bans, and plain packaging requirements. In fact, Türkiye was among the early adopters of full indoor smoking bans and has been internationally recognized for the breadth of its legal restrictions (Bilir, 2017). However, the problem increasingly lies not in the absence of regulation, but in its inconsistent application. In practice, smoking bans in hospitality venues are frequently violated, and enforcement mechanisms often lack the capacity to ensure compliance (Ozcebe et al., 2018).

An important dimension of this enforcement gap concerns the administrative and institutional complexity of tobacco control implementation in Türkiye. Although the Ministry of Health plays a central coordinating role, tobacco control is implemented through a multi-agency governance structure involving several ministries, local administrations, law-enforcement authorities, municipalities, and other public institutions. This institutional breadth is explicitly reflected in Türkiye's 2024–2028 Tobacco Control Strategy Document and Action Plan, which was developed through consultations with representatives of 19 institutions and assigns implementation, monitoring, and coordination responsibilities across different governmental actors. At the local level, implementation further depends on provincial coordination mechanisms, local administrative authorities, provincial health directorates, law-enforcement bodies, and municipalities. Smoke-free enforcement itself is supported by a nationwide inspection system through which locally assigned inspection teams investigate reported violations and transmit inspection records to the central system (Republic of Türkiye Ministry of Health, 2024). While such a multi-agency structure provides a broad institutional basis for tobacco control, it also makes effective implementation dependent on sustained inter-agency coordination, adequate inspection capacity, clear allocation of responsibilities, and consistent enforcement across local jurisdictions. Therefore, Türkiye's implementation gap should not be understood solely as a problem of individual non-compliance; it may also reflect the administrative challenge of translating an extensive national regulatory framework into continuous and uniform enforcement across different institutions and levels of government. This need for coordination extends beyond the enforcement of regulations. Tobacco control operates across a complex policy chain encompassing cultivation, production, distribution, taxation, marketing, sale, and consumption, with responsibilities distributed among different public institutions. An effective tobacco control strategy therefore requires a whole-of-government approach rather than interventions concentrated primarily on the consumption and retail stages. Responsibilities for taxation, public health, education, agricultural transition, market

regulation, and enforcement need to operate as complementary components of the same policy objective. From this perspective, implementation gaps may emerge not only from weak enforcement of individual regulations, but also from insufficient coordination and policy coherence across institutions responsible for different stages of the tobacco economy (Dinçer, 2025).

The implementation of smoke-free legislation in Türkiye relies on a multi-agency enforcement structure rather than a single administrative authority. Inspection teams coordinated at the provincial level may involve personnel from health authorities, law-enforcement agencies, and municipal police, making effective enforcement dependent not only on the existence of legal authority but also on sustained inter-agency coordination, adequately trained personnel, and sufficient inspection capacity at the local level. Recent local-level evidence also documents the persistence of smoke-free-area violations despite the existence of an established inspection system (Çelik and Almaz, 2026). Empirical evidence of this implementation gap is also observable at the establishment level. In a cross-sectional study covering 884 public venues across 12 Turkish cities, Navas-Acien et al. (2016) observed indoor smoking in 145 venues despite the existence of comprehensive smoke-free legislation, with particularly high levels of non-compliance in bars and nightclubs, traditional coffeehouses, and some institutional settings. The authors concluded that additional efforts were required to improve the implementation of smoke-free legislation. These findings provide direct evidence that Türkiye's tobacco-control challenge extends beyond regulatory design to the capacity to translate formal restrictions into consistent compliance in everyday settings (Navas-Acien et al., 2016). Taken together, these observations suggest that Türkiye's implementation gap should not be understood solely as a problem of individual non-compliance; it may also reflect the institutional difficulty of translating an extensive national regulatory framework into continuous and uniform enforcement at the local level. In this respect, Türkiye appears to possess considerably stronger regulatory capacity at the legislative level than implementation capacity at the local level.

TEPAV's earlier work similarly emphasizes that Türkiye is among the countries with the most comprehensive tobacco control frameworks, yet faces increasing demand for tobacco products despite these measures, highlighting a disconnect between policy design and real-world outcomes (TEPAV, 2020). This situation creates a disconnect between formal rules and everyday practices, weakening the credibility of regulations. The literature suggests that such enforcement gaps can lead to a phenomenon known as norm erosion, where individuals begin to perceive regulations as optional rather than binding (Cialdini and Goldstein, 2004). When rules are inconsistently enforced, compliance becomes selective, and social norms gradually shift in favor of non-compliance. In Türkiye, the gradual relaxation or uneven enforcement of smoking restrictions in public spaces appears to have contributed to such a dynamic, where regulations exist formally but are informally negotiated in daily life.

Moreover, the complexity and breadth of existing regulations may unintentionally contribute to public confusion and reduced compliance. When regulatory frameworks are extensive but inconsistently enforced, individuals may struggle to distinguish between strictly applied rules and those that are routinely ignored. This ambiguity reduces the deterrent effect of regulation and weakens its behavioral impact. These challenges are not unique to Türkiye.

Similar enforcement problems have been documented in several countries. For example, studies from Southern and Eastern Europe show that despite comprehensive smoke-free legislation, compliance remains uneven due to weak enforcement and persistent cultural acceptance of smoking (Filippidis et al., 2017). In countries such as Italy and Greece, partial enforcement of smoking bans has been associated with continued exposure to second-hand smoke and limited reductions in smoking prevalence (Gallus et al., 2011). Likewise, research from low- and middle-income countries highlights that enforcement capacity—rather than policy design—is often the key determinant of tobacco control outcomes (Maziak, 2011).

In addition, the rise of digital and informal markets has further complicated enforcement efforts. Online platforms enable access to restricted tobacco and nicotine products, bypassing national regulations and weakening traditional enforcement mechanisms (Freeman, 2012; Caputi et al., 2017). This is particularly relevant in Türkiye, where despite strict bans, alternative products remain accessible through informal and cross-border channels. Taken together, these findings suggest that Türkiye's tobacco control challenge is not primarily a problem of insufficient regulation, but rather of implementation capacity and enforcement consistency. The coexistence of strict laws and widespread non-compliance indicates a structural weakness in the policy enforcement system. Addressing this issue requires a multi-dimensional approach. Strengthening border controls and anti-smuggling measures is essential to prevent the erosion of price-based policies. At the domestic level, improving inspection capacity, ensuring consistent application of penalties, and enhancing institutional coordination are critical steps. Equally important is restoring the credibility of regulations by reducing ambiguity and ensuring that rules are visibly and uniformly enforced. Without such efforts, Türkiye's tobacco control framework risks becoming increasingly symbolic, where strong legislation exists on paper but fails to produce meaningful behavioral change in practice.

CONCLUSION AND FINAL REMARKS

Tobacco contains nicotine, a highly addictive substance. Because of this, researchers and policymakers must study this field closely and create complete policies. This study aimed to discuss the policy paradox of rising smoking prevalence in Türkiye, despite the country's formal early compliance with WHO-recommended strong tobacco control policies. While the legal framework is broad and comprehensive, the findings suggest that the main challenge lies not in policy design but in implementation and adaptation to Türkiye's unique socio-economic structure.

Consistent with the broader public policy literature, the findings reinforce the argument that the effectiveness of regulatory interventions depends not only on their formal adoption but also on their enforcement capacity and contextual alignment (Pressman and Wildavsky, 1973). In this respect, Türkiye's experience reflects a broader pattern observed in tobacco control, where strong legislative frameworks may fail to deliver expected outcomes when implementation gaps persist despite stringent anti-tobacco policies. (Smith et al., 2020).

Three interconnected factors that might appear to be driving the increase in smoking were identified. First, cultural norms and the continued social acceptance of smoking, combined with the economic importance of tobacco production, create structural barriers to

behavioral change. Second, the absence of regulated new alternatives limits cessation pathways, leaving smokers with a binary choice between quitting entirely or continuing cigarette consumption (McNeill et al., 2018). Third, multilateral enforcement of tobacco control laws reduces their deterrent effect and contributes to the normalization of non-compliance. While the country demonstrates high levels of formal compliance with international frameworks such as the WHO FCTC, the persistence of high smoking prevalence indicates a gap between policy intention and real-world outcomes. Taken together, these findings suggest that Türkiye's current situation can be interpreted as a case of government failure in implementation (Dye, 2017).

From a policy perspective, addressing this gap requires a more adaptive and integrated tobacco control strategy rather than more prohibition. First, reducing the socio-economic dependency on tobacco necessitates targeted rural development policies and credible alternative livelihood options for farmers. In this context, it is also important to recognize that tobacco production in Türkiye is not limited to officially registered farmers; a portion of production is carried out informally. Therefore, Türkiye's Department of Tobacco and Alcohol (TADAB), operating under the Ministry of Agriculture and Forestry, has been improving monitoring systems and bringing unregistered production under formal oversight. This can be an essential step toward both strengthening regulatory capacity and ensuring more effective policy implementation.

At the same time, reducing socio-economic dependency requires not only economic transformation but also long-term behavioral change. Public awareness efforts should be strengthened through nationwide communication strategies, including public service announcements and school educational campaigns. In particular, incorporating structured awareness programs starting from primary education could play a critical role in shaping long-term attitudes toward tobacco use by informing individuals about its health consequences from an early age. Second, a carefully designed regulatory framework for alternative products could provide additional pathways for reducing cigarette consumption while mitigating potential risks in the manner of many countries. A growing body of scholarly evidence suggests that the United Kingdom, Japan, and Sweden represent three distinct models of integrating non-combustible nicotine products into tobacco control. In the United Kingdom, e-cigarettes have been incorporated into smoking cessation policy, with official evidence reviews concluding that vaping can support quitting and reduce cigarette consumption among smokers. In Japan, the rapid diffusion of heated tobacco products has been associated with a marked decline in cigarette sales; Stoklosa et al. (2020) conclude that the introduction of HTPs 'likely reduced cigarette sales in Japan', although the overall public health impact depends on patterns of switching and dual use. In Sweden, the long-standing availability of snus, and more recently nicotine pouches, has been linked to exceptionally low cigarette smoking prevalence, with studies arguing that oral nicotine alternatives have contributed to Sweden's lower smoking rates and smoking-attributable mortality (Ramström et al., 2024). Taken together, these cases suggest that reduced-risk nicotine products may complement conventional tobacco control measures by providing substitution pathways for adult smokers who do not quit nicotine entirely. Third, simplifying and strengthening

institutional coordination and enforcement capacity is essential to ensure that existing regulations translate into effective behavioral change.

Without such measures, Türkiye may face increasing challenges in achieving its public health objectives and sustaining the progress made in tobacco control over previous decades, unlike many other countries. In particular, the country risks maintaining relatively high smoking prevalence rates compared to other OECD countries (OECD, 2023). In addition, if existing structural challenges remain unaddressed, there is a growing likelihood that illicit markets will continue to persist, potentially undermining both regulatory effectiveness and fiscal outcomes. From a broader public health perspective, the incomplete or inconsistent enforcement of tobacco control measures may lead to unintended consequences over time. Although Türkiye has implemented extensive regulations aimed at reducing tobacco use, the limited effectiveness of these measures in practice may result in continued or even increased exposure to tobacco-related risks. This, in turn, raises concerns about the long-term burden on the healthcare system, including the potential rise in tobacco-related diseases, illicit/unregulated products-related diseases, and associated healthcare expenditures.

Future research could build on this analysis by incorporating micro-level behavioral data, stakeholder perspectives, and cross-country comparative evidence by focusing more on Ministry of Health expenditures of tobacco-related diseases. Such approaches would provide a more comprehensive understanding of how policy design, enforcement capacity, and social dynamics interact to shape tobacco consumption patterns. In doing so, future studies could contribute to the development of more adaptive and context-sensitive tobacco control strategies, not only for Türkiye but also for other countries facing similar implementation challenges.

Declaration of Research and Publication Ethics

This study was conducted in line with academic research and publication ethics. All written and visual sources were properly cited, and plagiarism was strictly avoided. The data used in the literature review and discourse analysis were obtained from publicly accessible and ethically appropriate sources. No personal data were collected, and no procedure requiring ethical committee approval was included. There is no conflict of interest in this research.

Contribution Rates of Authors to the Article

This article is solely authored by the researcher, and no contributions from third parties have been incorporated.

Conflict of Interest Statement

The author declare that there is no conflict of interest regarding the publication of this paper. The author have no financial or personal relationships that could have influenced the work reported in this manuscript.

Ethical Approval Statement

Ethical approval is not required for this article. A signed consent form indicating that ethical approval is not necessary is included in the article's submission files on the system.

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