



GATS > Country Report: Tabulation Plan & Guidelines



**Global Adult Tobacco Survey
(GATS)
Country Report:
Tabulation Plan and Guidelines**

Final Edition July 2009

Notes to Analyst:

This document is intended to provide guidance on the reporting of findings from the Global Adult Tobacco Survey (GATS) in a country. The purpose of the GATS country report is to summarize the major findings of the survey in a format accessible to a variety of audiences. As a result, the report will contain mainly descriptive analysis. However, further multivariate analysis of the survey can be conducted to build upon the findings reported here.

Sample text and mock tables have been developed to provide a template for reporting, in terms of structure and content. The tables have been developed to capture important tobacco control measures that can be generated from the core GATS questionnaire. Many of the indicators are the same as those reported in the fact sheet and described in detail in an accompanying document entitled “Global Adult Tobacco Survey (GATS) Indicator Guidelines: Definition and Syntax”. The country report provides an opportunity to examine these indicators in more detail and present additional indicators likely to be of interest to a variety of audiences. However, not all tables will be relevant for all countries. In addition, some countries may want to include additional indicators generated from adapted country-specific questions included in their own surveys. The tables that are provided in this report are minimum required tables the country should produce, where applicable. In addition, although not presented here, figures should be used to present key findings as well. Figures, if used, should be a supplement to the tables recommended in this report.

The subgroups recommended for cross-tabulations with these indicators are described below and presented in the mock tables as well. In addition to these subgroups, countries may choose to examine the indicators by other relevant demographic/background characteristics. In reporting cross-tabulations, careful consideration should be given to the precision of subgroup estimates. In some cases, subgroups may be collapsed if there are insufficient observations. Recommendations on the minimum cell size needed for reporting are discussed below.

For most indicators, the reporting of percentages is preferred to facilitate comparisons between estimates. There are some measures, however, for which reporting of absolute numbers is informative. For example, it is useful to know how many smokers there are in a country or how many adults are exposed to secondhand smoke (SHS) in the workplace. In general, it is recommended that absolute numbers be presented, along with percentages, for estimates of smoking and smokeless tobacco use prevalence and SHS exposure. Many of the tables shown below on smoking will have analogous tables on smokeless tobacco or other smoked tobacco (bidis, waterpipe, etc). These were not presented below to avoid repetition, but should be added if relevant information has been collected for smokeless tobacco in the survey (e.g., awareness of anti-smokeless tobacco information).

Finally, the mock tables presented here represent suggested approaches for reporting findings from GATS. It is important to note that these tables have been constructed without the advantage of seeing the actual country data. The tables are likely to be modified after initial review of the data. For example, some subgroups may be collapsed if there are small sample sizes in some cells. These modifications should be left to the discretion of the country researchers in consultation with the GATS Analysis Review Committee (ARC).

Table symbols, notation, rounding

Italicized rows in tables are headers that are not meant to have accompanying statistics. General footnotes that refer to the entire table should be designated using the term “Note:” Specific footnotes should be designated using numbers, e.g., 1, 2, 3 ... Estimates based on less than 25 observations should be denoted with an ‘’, per recommendations below. It is recommended that percentages be reported to 1 decimal place and counts be reported to the nearest 1,000, with the exception of the unweighted counts in Tables 3.1 and 3.2.*

Reporting Point Estimates

When reporting point estimates, it is recommended to produce standard errors (SEs) using methods appropriate for analysis of complex survey data. (Taylor Series Linearization (TSL), Jackknife Repeated Replication (JRR) or Balanced Repeated Replication (BRR) are all appropriate; however, we recommend Taylor Series Linearization for reasons of comparability among GATS country reports). It is suggested to report the weighted point estimate along with the upper and lower bound 95% confidence interval (95% CI). Currently the default procedures in SUDAAN® and SPSS® calculate asymmetric confidence intervals for proportions while SAS® produces symmetric confidence intervals. STATA® can calculate both asymmetric and symmetric confidence intervals based on the syntax procedures. We recommend using t-tests to determine differences between subgroups. Differences between point estimates should be considered statistically significant at $p < 0.05$.¹

Reporting Subgroup Estimates

The recommended subgroups for reporting tobacco control indicators have been provided in the mock tables. Subgroups based on smoking status are also recommended where necessary, and are reflected in the mock tables provided. These include the following selected demographic/background characteristics from the core questionnaire.

¹ Use of trade names is for identification only and does not imply endorsement by the U.S. Department of Health and Human Services.

- Gender: Male, Female
- Age: It is recommended that 4 broad age groups be reported (15-24, 25-44, 45-64, 65+ years of age); however, these groups can be further separated if data allow (e.g., 15-19 and 20-24 years of age).
- Residence: Urban, Rural
- Education: It is recommended that education level be categorized into groups of similar size, which should translate into country relevant school categories or number of years of schooling. In addition, it is recommended to limit education categories to respondents who are 25+ years old because those younger than 25 may not have reached their full level of educational attainment.

Careful consideration should be given to the precision of subgroup estimates. In some cases, subgroups may be collapsed if there are insufficient observations (see “Minimum number of unweighted cases”). Additionally, other background characteristics may be added as relevant to the country. For example, many tobacco control measures may vary by socioeconomic status (SES). Countries may want to report findings by SES, defined by questions on assets, income, and/or employment status. Other relevant background characteristics may include adapted country-specific demographic variables such as religion, literacy, or geographic region.

Treatment of missing values

In general, missing and “don’t know” responses are excluded from indicator calculations. The main exception is for indicators describing knowledge, attitudes and beliefs, in which case “don’t know” responses are often included in the denominator. See “Global Adult Tobacco Survey (GATS) Indicator Guidelines: Definition and Syntax” for specific guidance on the treatment of missing data. These documents also include statistical software syntax for the indicators reported here.

Minimum number of unweighted cases

As mentioned above, all estimates should be presented along with the 95% confidence interval. For some subgroups, the sample size will be so low that the estimates should be considered unreliable and should be suppressed. It is recommended that any estimate based on an unweighted cell size of less than 25 should be reported in brackets [] with an asterisk. If the estimate is based on a cell size of less than 25, then it is recommended to footnote the cell with an asterisk denoting that the cell size is less than 25.

Page Limits

The recommended total page limit for a GATS country report is 120 pages (not including appendices). Each chapter of the report has been given recommended page limits that should be used as guidance when drafting the report. This limit may vary depending on the supplemental information inserted by each country. However, it is advised that the report adhere as closely as possible to the recommended page limit. The first 4 items listed below (Tables, Figures, Preface and Acknowledgements) are to be added by countries as appropriate.

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Executive Summary - 10 pages

- 1. Introduction - 6 pages*
- 2. Methodology - 7 pages*
- 3. Sample and Population Characteristics - 5 pages*
- 4. Tobacco Use - 30 pages*
- 5. Cessation - 10 pages*
- 6. Secondhand Smoke - 8 pages*
- 7. Economics - 10 pages*
- 8. Media – 15 pages*
- 9. Knowledge, Attitudes and Perceptions - 6 pages*

References – 10 pages

Appendix A: Questionnaire- provide country-specific GATS questionnaire (page number varies by country)

Appendix B: Sample Design - 8 pages

Appendix C: Estimation of Sampling Errors- 10 pages

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Executive Summary

[Recommended page limit: 10 pages]

[In this section, include:

- *Key findings from the survey*
- *Recommendations to be planned with the global community]*

1. Introduction

[Recommended page limit: 6 pages]

Tobacco use is a major preventable cause of premature death and disease, presently causing over 5 million deaths each year and expected to cause over 8 million deaths yearly by 2030. Unless current trends are changed, the vast majority of these deaths are projected to occur in the developing world. An efficient and systematic surveillance mechanism to monitor the epidemic is one of the essential components of a comprehensive tobacco control program.

The World Health Organization (WHO) – Tobacco Free Initiative (TFI) aims to reduce the global burden of disease and death caused by tobacco, thereby protecting present and future generations from the devastating health, social, environmental and economic consequences of tobacco consumption and exposure to tobacco smoke. This is accomplished through providing global policy leadership -- promoting the WHO Framework Convention on Tobacco Control (FCTC) and the MPOWER package² of tobacco policies as a key entry point to the FCTC. The FCTC encourages countries to adhere to its principles, and the TFI Program supports countries in their efforts to implement tobacco control measures through MPOWER.

In August 2006, the WHO and the United States Centers for Disease Control and Prevention (CDC) convened an expert consultation to discuss adult tobacco surveillance and made recommendations for the development of a standard survey protocol. The expert consultation also recognized the challenges of limited funding and methodological complexities when conducting systematic adult tobacco surveys and identified a lack of comparability in ongoing national surveys.

The Bloomberg Initiative to Reduce Tobacco Use offers resources to fill the data gap for measuring adult tobacco use globally and to optimize the reach and results of the ongoing Global Tobacco Surveillance System (GTSS), which originally was comprised of three school-based surveys for youth and selected adult populations: the Global Youth Tobacco Survey (GYTS), the Global School Personnel Survey (GSPS), and the Global Health Professions Students Survey (GHPSS).

The Global Adult Tobacco Survey (GATS) is a household survey that was launched in February 2007 as a new component of the ongoing GTSS. The GATS will enable countries to collect data on key tobacco control measures in the full adult population. Results from the GATS will assist countries in the formulation, tracking and implementation of effective tobacco control interventions, and countries will be able to compare results of their survey with results from other countries implementing GATS.

² The MPOWER package is a series of six proven policies aimed at reversing the global tobacco epidemic and include: **M**onitor tobacco use and prevention policies; **P**rotect people from tobacco smoke; **O**ffer help to quit tobacco use; **W**arn about the dangers of tobacco; **E**nforce bans on tobacco advertising, promotion, and sponsorship; and **R**aise taxes on tobacco.

The GATS is being implemented initially in 14 countries where more than half of the world's smokers live and that bear the highest burden of tobacco use: Bangladesh, Brazil, China, Egypt, India, Mexico, Philippines, Poland, Russian Federation, Thailand, Turkey, Ukraine, Uruguay and Vietnam.

The CDC, CDC Foundation, Johns Hopkins Bloomberg School of Public Health (JHSPH), RTI International, WHO and countries throughout the world are working together to design and implement GATS.

1.1 Burden of Tobacco in [Country]

[In this section, include information on:

- *Prevalence of tobacco smoking and smokeless tobacco use*
- *Tobacco Consumption Patterns and Trends: Use other surveys/national surveillance system*
- *Economic Impact of Tobacco Use*
- *Health Impact of Tobacco Use]*

1.2 Current Tobacco Control Policies in [Country]

[In this section, include information on:

- *FCTC status*
- *National legislation*
- *Current tobacco control initiatives ongoing in the country, such as smoke free legislation, advertisement campaigns, tobacco pricing and taxation.]*

1.3 Survey Objectives

The objectives of the GATS are:

- To systematically monitor adult tobacco use (smoking and smokeless) and track key tobacco control indicators in a nationally representative sample of [the Country]
- To track implementation of FCTC recommended policies outlined in the MPOWER package

2. Methodology

[Recommended page limit: 7 pages]

2.1 Study population

[In this section:

- *Describe sample and target population*
- *Describe eligibility criteria*
- *Remind readers of groups that may be excluded (e.g., military and other institutionalized populations)]*

2.2 Sampling Design

[In this section, describe Sample Review Committee finalized sampling design. Refer readers to Appendix B for more detail. Also include information on calculation of sample weights.]

2.3 Questionnaire

[This description should be modified to reflect the country-specific questionnaire.]

The GATS [Country] questionnaire consists of [eight] sections. A general description of each section is described below (the full questionnaire is provided in Appendix A):

- **Background characteristics:** Gender, age, education, work status, possession of household items.
- **Tobacco smoking:** Patterns of use (daily consumption, less than daily consumption, not at all), former/past tobacco consumption, age of initiation of daily smoking, consumption of different tobacco products, (cigarettes, pipes, cigars and other smoked tobacco), nicotine dependence, frequency of quit attempts.
- **Smokeless tobacco:** Patterns of use (daily consumption, less than daily consumption, not at all), former/past use of smokeless tobacco, age of initiation of daily use of smokeless tobacco, consumption of different smokeless tobacco products (snuff, chewing tobacco, betel quid, etc.), nicotine dependence, frequency of quit attempts.
- **Cessation:** Advice to quit smoking by health care provider, method used to try to stop smoking. Similar information is asked for cessation on smokeless tobacco as well.
- **Secondhand smoke:** Smoking allowed in the home, exposure to secondhand smoke at home, indoor smoking policy at work place, exposure in last 30 days in: work place, government buildings/offices, health care facilities, restaurants, public transportation. There are some additional optional items on

exposure that includes schools, universities, private workplaces, bars, night clubs, etc. as well as knowledge on serious illness in non-smokers due to secondhand smoke.

- **Economics:** Type of tobacco product and quantity bought, cost of tobacco product (s), brand, and type of product purchased and source of tobacco products.
- **Media:** Exposure to advertisement: television, radio, billboards, posters, newspapers/magazines, cinema, internet, public transportation, public walls, others; exposure to sporting events connected with tobacco; exposure to music, theatre, art or fashion events connected with tobacco; exposure to tobacco promotion activities; reaction to health warning labels on cigarette packages; exposure to anti-tobacco advertising and information. Similar questions are included for smokeless tobacco as well. The reference period for the questions in this section is 30 days.
- **Knowledge, attitudes and perceptions:** Knowledge about health effects of both smoking and smokeless tobacco.

2.4 Data Collection

[In this section include information on:

- *Implementing institution*
- *Field training/field staff*
- *Dates in field*
- *Method of capturing data (i.e., handheld)*
- *Languages used*
- *Confidentiality/informed consent]*

2.5 Statistical Analysis

[In this section include information on:

- *Statistical software utilized*
- *Method used for standard error calculation*
- *Refer to Appendix C for calculations of standard errors]*

3. Sample and Population Characteristics

[Recommended page limit: 5 pages]

Table 3.1: Number of households and persons interviewed and response rates by residence and region (unweighted) – GATS [Country], [Year].

	Residence		Region				Total
	Urban	Rural	Region 1	Region 2	Region 3	Region 4	
<i>Selected household</i>							
Completed							
Incomplete							
No screening respondent							
Nobody home							
Refused							
Unoccupied							
Address not a dwelling							
Other							
Total	100	100	100	100	100	100	100
Number of Sampled Households							
Household Response Rate							
<i>Selected person</i>							
Completed							
Incomplete							
Not eligible							
Not at home							
Refused							
Incapacitated							
Other							
Total	100	100	100	100	100	100	100
Number of Sampled Persons							
Person-level Response Rate							
Total Response Rate							

Note: We recommend reporting person level response rates by gender in text accompanying this table.

Table 3.2: Distribution of adults ≥ 15 years old by selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Weighted		Unweighted Number of Adults
	Percentage (95% CI ¹)	Number of Adults	
Overall			
<i>Age (years)</i>			
15-24			
25-44			
45-64			
65+			
<i>Gender</i>			
Male			
Female			
<i>Residence</i>			
Urban			
Rural			
<i>Education Level²</i>			
[Category 1			
Category 2			
Category 3]			

Note: The following observations were missing: [X] for age, [X] for gender, [X] for residence, and [X] for education.

¹ 95 % Confidence Interval

² Education level is reported only among respondents 25+ years old

This table provides the distribution of adults by various demographic characteristics. Missing values for each of the subgroups should be denoted in a footnote. The unweighted count provides information on cell size and gives a sense of how stable the estimates will be. The weighted values reflect population estimates, after applying sample weights. Refer readers to Appendix B for technical details on the sampling design and weighting procedures.

The variables listed in table 3.2 are recommended for use in cross-tabulations of tobacco use and tobacco control indicators, as illustrated in the mock tables presented below. In addition to the variables shown in table 3.2, countries may choose to report other demographic characteristics, such as religion, racial/ethnic background, employment status, wealth, marital status, literacy, or geographic region, as relevant. In reporting cross-tabulations, analysts should consider cell sizes. In some cases, subgroups may need to be collapsed if there are insufficient observations.

4. Tobacco Use

[Recommended page limit: 30 pages]

Table 4.1: Percentage of adults ≥15 years old, by detailed smoking status and gender – GATS [Country], [Year].

Smoking Status	Overall	Male	Female
	<i>Percentage (95% CI)</i>		
Current tobacco smoker			
Daily smoker			
Occasional smoker			
Occasional smoker, formerly daily			
Occasional smoker, never daily			
Non-smoker			
Former daily smoker			
Never daily smoker			
Former occasional smoker			
Never smoker			

Note: Current use includes both daily and occasional (less than daily) use.

This table provides a detailed description of smoking status among the population. Each of these indicators is calculated among all respondents in that group/category. All rows should have estimates, including the bolded “current tobacco smoker” and “non-smoker” rows. These two bolded estimates should add to 100%. Each level of indentation refers to subheadings that should add to the estimates above them (with the potential for rounding error). For example, the prevalence of “daily” and “occasional” smokers should add to the overall “current tobacco smoker” prevalence. Similarly, the prevalence of “occasional smoker, formerly daily” and “occasional smoker, never daily” should add to the “occasional smoker” prevalence. Many of the subcategories will almost never be used separately (e.g., “occasional smoker, formerly daily” and “occasional smoker, never daily”) and might be routinely combined. However, it is recommended that for this table, the detailed smoking status categories be reported. An analogous table should be constructed for smokeless tobacco use, if relevant for the country.

Table 4.2: Number of adults ≥15 years old, by detailed smoking status and gender – GATS [Country], [Year].

Smoking Status	Overall	Male	Female
<i>Number in thousands</i>			
Current tobacco smoker			
Daily smoker			
Occasional smoker			
Occasional smoker, formerly daily			
Occasional smoker, never daily			
Non-smoker			
Former daily smoker			
Never daily smoker			
Former occasional smoker			
Never smoker			

Note: Current use includes both daily and occasional (less than daily) use.

This table presents the numbers of smokers and non-smokers in the country, rather than the percentages shown in Table 4.1.

Table 4.3: Percentage of adults ≥15 years old who are current smokers of various smoked tobacco products, by gender and selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Any smoked tobacco product	Any cigarette ¹	Type of Cigarette		Other smoked tobacco ²
			Manufactured	Hand-rolled	
<i>Percentage (95% CI)</i>					
Overall					
<i>Age (years)</i>					
<i>Residence</i>					
<i>Education Level³</i>					
Male					
<i>Age (years)</i>					
<i>Residence</i>					
<i>Education Level³</i>					
Female					
<i>Age (years)</i>					
<i>Residence</i>					
<i>Education Level³</i>					

Note: Current use includes both daily and occasional (less than daily) use.

¹Includes manufactured cigarettes, hand rolled cigarettes, and kreteks.

²Includes [describe products included in “other” category here].

³ Education level is reported only among respondents 25+ years old.

This table describes the prevalence of current tobacco smoking and current use of specific products. Countries should adapt this table to report products with significant usage here, for example bidis or water pipes. If kretek usage is reported it should be documented in the table under “Type of Cigarette” along with “Manufactured” and “Hand-rolled”. The prevalence estimates include both daily and occasional (less than daily use). “Any smoked tobacco” includes any type of smoked tobacco, while “any cigarette” includes manufactured, hand-rolled, and/or kreteks, where applicable. It is important to note that the estimates reflect prevalence, not the percent distribution of product use; therefore, the denominator for each of these indicators is all respondents in each subgroup. For example, the estimate for manufactured cigarettes is the percentage of all respondents who are current smokers of manufactured cigarettes, not the percent of current smokers who smoke manufactured cigarettes. For this reason, the estimates should not be expected to add to 100%. Table 4.4 presents the same information in terms of absolute numbers.

Both tables 4.3 and 4.4 present results by gender. It is only recommended to present these detailed tables for each gender if the overall current tobacco smoking prevalence is above 5%. If criteria are not met for both genders, one that meets the criteria may be presented.

Table 4.4: Number of adults ≥15 years old who are current smokers of various smoked tobacco products, by gender and selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Any smoked tobacco product	Any cigarette ¹	Type of cigarette		Other smoked tobacco ²
			Manufactured	Hand-rolled	
<i>Number in thousands</i>					
Overall					
<i>Age (years)</i>					
<i>Residence</i>					
<i>Education Level³</i>					
Male					
<i>Age (years)</i>					
<i>Residence</i>					
<i>Education Level³</i>					
Female					
<i>Age (years)</i>					
<i>Residence</i>					
<i>Education Level³</i>					

Note: Current use includes both daily and occasional (less than daily) use.

¹Includes manufactured cigarettes, hand rolled cigarettes, and kreteks.

²Includes [describe products included in “other” category here].

³ Education level is reported only among respondents 25+ years old.

Table 4.5: Percentage distribution of adults ≥15 years old who are daily, occasional, or non-smokers, by gender and selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Smoking frequency			Total
	Daily	Occasional ¹	Non-smoker	
<i>Percentage (95% CI)</i>				
Overall				100.0
<i>Age (years)</i>				
15-24				100.0
25-44				100.0
45-64				100.0
65+				100.0
<i>Residence</i>				
Urban				100.0
Rural				100.0
<i>Education Level²</i>				
[Category 1				100.0
Category 2				100.0
Category 3]				100.0
Male				100.0
<i>Age (years)</i>				
15-24				100.0
25-44				100.0
45-64				100.0
65+				100.0
<i>Residence</i>				
Urban				100.0
Rural				100.0
<i>Education Level²</i>				
[Category 1				100.0
Category 2				100.0
Category 3]				100.0
Female				100.0
<i>Age (years)</i>				
15-24				100.0
25-44				100.0
45-64				100.0
65+				100.0
<i>Residence</i>				
Urban				100.0
Rural				100.0
<i>Education Level²</i>				
[Category 1				100.0
Category 2				100.0
Category 3]				100.0

¹ Occasional refers to less than daily use.

² Education level is reported only among respondents 25+ years old.

This table describes the smoking frequency of respondents. Because all respondents are either current daily smokers, occasional smokers, or non-smokers, the estimates of prevalence within each category should add to 100%.

Table 4.6: Percentage distribution of cigarettes smoked per day among daily cigarette smokers ≥ 15 years old, by gender and selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Number of cigarettes smoked on average per day ¹					Total
	<5	5-9	10-14	15-24	≥ 25	
	<i>Percentage (95% CI)</i>					
Overall						100.0
<i>Age (years)</i>						
15-24						100.0
25-44						100.0
45-64						100.0
65+						100.0
<i>Residence</i>						
Urban						100.0
Rural						100.0
<i>Education Level²</i>						
[Category 1						100.0
Category 2						100.0
Category 3]						100.0
Male						100.0
<i>Age (years)</i>						
15-24						100.0
25-44						100.0
45-64						100.0
65+						100.0
<i>Residence</i>						
Urban						100.0
Rural						100.0
<i>Education Level²</i>						
[Category 1						100.0
Category 2						100.0
Category 3]						100.0
Female						100.0
<i>Age (years)</i>						
15-24						100.0
25-44						100.0
45-64						100.0
65+						100.0
<i>Residence</i>						
Urban						100.0
Rural						100.0
<i>Education Level²</i>						
[Category 1						100.0
Category 2						100.0

¹ Among daily cigarette smokers. Cigarettes include manufactured, hand-rolled, and kreteks.

² Education level is reported only among respondents 25+ years old.

This table describes the distribution of cigarette smoking consumption among daily cigarette smokers. The categories presented here should add to 100%. Eligible respondents without information on the frequency of cigarette consumption should be excluded from estimates. Countries with significant use of other products may want to report smoking consumption for these as well (e.g., bidis in India or Bangladesh).

Table 4.7: Percentage distribution of age at smoking initiation among ever daily smokers 20-34 years old, by selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Age at Smoking Initiation (years) ¹				Total
	<15	15-16	17-19	20+	
	<i>Percentage (95% CI)</i>				
Overall					100.0
<i>Gender</i>					
Male					100.0
Female					100.0
<i>Residence</i>					
Urban					100.0
Rural					100.0

¹Among respondents 20-34 years of age who are ever daily smokers

This table describes the distribution of age at which ever daily smokers first began smoking daily. Age of initiation should be calculated among young adult ever daily smokers (ages 20-34) to reflect more recent patterns of initiation. Age of initiation among older populations reflects historical patterns of initiation. An analysis of birth cohort patterns in age of initiation (by subgrouping on current age) can provide additional information on trends. As specified in the table, the percentages should add to 100% within each row.

Table 4.8: Percentage of all adults and ever daily smokers ≥15 years old who are former daily smokers, by selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Former Daily Smokers ¹ (Among All Adults)	Former Daily Smokers ¹ (Among Ever Daily Smokers) ²
	<i>Percentage (95% CI)</i>	
Overall		
<i>Gender</i>		
Male		
Female		
<i>Age (years)</i>		
15-24		
25-44		
45-64		
65+		
<i>Residence</i>		
Urban		
Rural		
<i>Education Level³</i>		
[Category 1		
Category 2		
Category 3]		

¹ Current non-smokers.

² Also known as the quit ratio for daily smoking.

³ Education level is reported only among respondents 25+ years old.

The quit ratio (former daily smokers as a percentage of ever daily smokers) is a key indicator of the success of efforts to encourage cessation among established smokers. This is similar to the indicator “former daily smokers (among all adults)”, except that the denominator is ever daily smokers, rather than all respondents. Therefore, the estimate for the quit ratio should be greater than the estimate for the prevalence of former daily smokers.

Table 4.9: Percentage distribution of time since quitting among former daily smokers ≥15 years old, by selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Time since quitting smoking (years) ¹				Total
	<1	1 to <5	5 to <10	≥10	
	<i>Percentage (95% CI)</i>				
Overall					100.0
<i>Gender</i>					
Male					100.0
Female					100.0
<i>Age (years)</i>					
15-24					100.0
25-44					100.0
45-64					100.0
65+					100.0
<i>Residence</i>					
Urban					100.0
Rural					100.0
<i>Education Level²</i>					
[Category 1					100.0
Category 2					100.0
Category 3]					100.0

¹Among former daily smokers (current non-smokers).

²Education level is reported only among respondents 25+ years old.

Reporting on time since quitting can provide information on the impact of recent programs and policies, by showing the percentage of recent quitters compared with longer-term quitters. Smokers who have quit for a longer period of time are more likely to remain former smokers. The estimates in this table reflect the percent distribution among former daily smokers, so they should add to 100%.

Smokeless Tobacco Use: Analogous tables to the ones presented above for smoked tobacco should be presented here for smokeless tobacco use and other smoked tobacco (bidis, kreteks, etc.) if relevant.

Table 4.10: Percentage of adults who are current tobacco users and the percentage distribution of tobacco use patterns among current tobacco users ≥15 years old by selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Current Tobacco Users ¹	Type of Current Tobacco Use			Total
		Smoked only	Both smoked and smokeless	Smokeless only	
<i>Percentage (95% CI)</i>					
Overall					100.0
<i>Gender</i>					
Male					100.0
Female					100.0
<i>Age (years)</i>					
15-24					100.0
25-44					100.0
45-64					100.0
65+					100.0
<i>Residence</i>					
Urban					100.0
Rural					100.0
<i>Education Level²</i>					
[Category 1					100.0
Category 2					100.0
Category 3]					100.0

¹ Includes daily and occasional (less than daily) smokers or smokeless users.

² Education level is reported only among respondents 25+ years old.

This table describes the prevalence of current tobacco use and the percentage distribution of the patterns of current tobacco use. This table should only be reported if questions on smokeless tobacco use are included in the questionnaire.

The prevalence of current tobacco use is calculated among all respondents. The types of tobacco use are calculated among current tobacco users and should add to 100%. “Smoked only” reflects the percentage of respondents who currently smoke tobacco only (daily or less than daily). “Smokeless only” reflects the percentage of respondents who currently use smokeless tobacco only (daily or less than daily). “Both smoked and smokeless” reflects the percentage of respondents who currently smoke tobacco and use smokeless tobacco products on either a daily or less than daily basis.

Table 4.11: Percentage distribution of time to first tobacco use upon waking among daily smokers and/or smokeless tobacco users ≥15 years old, by selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Time to first smoke or smokeless tobacco use				Total
	≤5 minutes	6-30 minutes	31-60 minutes	>60 minutes	
	<i>Percentage (95% CI)</i>				
Overall					100.0
<i>Gender</i>					
Male					100.0
Female					100.0
<i>Age (years)</i>					
15-24					100.0
25-44					100.0
45-64					100.0
65+					100.0
<i>Residence</i>					
Urban					100.0
Rural					100.0
<i>Education Level¹</i>					
[Category 1					100.0
Category 2					100.0
Category 3]					100.0

¹ Education level is reported only among respondents 25+ years old.

This table provides information on the level of addiction of tobacco users by reporting the time to first nicotine administration. Among daily users of both smoked and smokeless tobacco products, the type of product used first should be utilized for reporting time to first use. The estimates in this table reflect the percent distribution, so they should add to 100%. Those with no information on time to first tobacco use should be excluded from the calculation.

5. Cessation

[Recommended page limit: 10 pages]

Table 5.1: Percentage of smokers ≥15 years old who made a quit attempt and received health care provider assistance in the past 12 months, by selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Smoking cessation and health care seeking behavior			
	Made quit attempt ¹	Visited a HCP ^{1,2}	Asked by HCP if a smoker ³	Advised to quit by HCP ³
	<i>Percentage (95% CI)</i>			
Overall				
<i>Gender</i>				
Male				
Female				
<i>Age (years)</i>				
15-24				
25-44				
45-64				
65+				
<i>Residence</i>				
Urban				
Rural				
<i>Education Level⁴</i>				
[Category 1				
Category 2				
Category 3]				

Note: Estimates in this table are based on current smokers and former smokers who have been abstinent for less than 12 months.

¹ Among current smokers and former smokers who have been abstinent for less than 12 months.

² HCP = health care provider.

³ Among current smokers and former smokers who have been abstinent for less than 12 months, and who visited a HCP during the past 12 months.

⁴ Education level is reported only among respondents 25+ years old.

This table describes smoking cessation behavior, health care seeking behavior, and health care provider assistance. Note the different denominators for some of the indicators.

Table 5.2: Percentage of smokers ≥ 15 years old who made a quit attempt in past 12 months and used various cessation methods for their last quit attempt, by selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Use of Cessation Method ¹		
	Pharmacotherapy ²	Counseling/Advice ³	Other ⁴
<i>Percentage (95% CI)</i>			
Overall			
<i>Gender</i>			
Male			
Female			
<i>Age (years)</i>			
15-24			
25-44			
45-64			
65+			
<i>Residence</i>			
Urban			
Rural			
<i>Education Level⁵</i>			
[Category 1			
Category 2			
Category 3]			

Note: Estimates in this table are based on current smokers and former smokers who have been abstinent for less than 12 months.

¹ Among current smokers who made a quit attempt in the past 12 months and former smokers who have been abstinent for less than 12 months.

² Pharmacotherapy includes nicotine replacement therapy and prescription medications.

³ Includes counseling at a cessation clinic and a telephone quitline/helpline.

⁴ Other includes traditional medicines and other products.

⁵ Education level is reported only among respondents 25+ years old.

This table describes the type of cessation method used during the last quit attempt. This includes both successful (recent abstainers) and unsuccessful (current smokers) quit attempts. The categories presented here represent one suggestion for reporting. The choice of category depends on the questionnaire items and relevant cessation methods in country. These estimates should not add to 100% because a respondent may have used multiple methods.

Table 5.3: Percentage distribution of current smokers ≥ 15 years old by interest in quitting smoking and selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Interest in Quitting Smoking ¹					Total
	Planning to Quit Within Next Month	Thinking About Quitting Within Next 12 Months	Will Quit Someday, But Not in the Next 12 Months	Not Interested in Quitting	Don't Know	
	<i>Percentage (95% CI)</i>					
Overall						100.0
<i>Gender</i>						
Male						100.0
Female						100.0
<i>Age (years)</i>						
15-24						100.0
25-44						100.0
45-64						100.0
65+						100.0
<i>Residence</i>						
Urban						100.0
Rural						100.0
<i>Education Level²</i>						
[Category 1						100.0
Category 2						100.0
Category 3]						100.0

¹Among current daily or less than daily smokers

²Education level is reported only among respondents 25+ years old.

This table reports the level of current smokers' interest in quitting smoking. The estimates in this table reflect the percent distribution among current smokers, so they should add to 100%

Smokeless Tobacco Cessation: Analogous tables to the ones presented above for smoked tobacco should be presented smokeless tobacco use and other smoked tobacco (bidis, kreteks, etc.) if relevant.

6. Secondhand Smoke

[Recommended page limit: 8 pages]

Table 6.1: Percentage and number of adults ≥15 years old who work indoors and are exposed to tobacco smoke at work, by smoking status and selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Adults Exposed to Tobacco Smoke at Work ¹	
	Percentage (95% CI)	Number
Overall		
<i>Gender</i>		
Male		
Female		
<i>Age (years)</i>		
15-24		
25-44		
45-64		
65+		
<i>Residence</i>		
Urban		
Rural		
<i>Education Level²</i>		
[Category 1		
Category 2		
Category 3]		
Non-smokers		
<i>Gender</i>		
Male		
Female		
<i>Age (years)</i>		
15-24		
25-44		
45-64		
65+		
<i>Residence</i>		
Urban		
Rural		
<i>Education Level²</i>		
[Category 1		
Category 2		
Category 3]		

¹ In the past 30 days. Among those respondents who work outside of the home who usually work indoors or both indoors and outdoors.

² Education level is reported only among respondents 25+ years old.

This table describes the percentage and number of adults and non-smokers who work indoors or both indoors and outdoors, exposed to tobacco smoke at work during the past 30 days. See “Global Adult Tobacco Survey (GATS) Indicator Guidelines: Definition and Syntax” document for more information.

Table 6.2: Percentage of adults ≥15 years old who were exposed to tobacco smoke in public places in the past 30 days, by smoking status and selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Adults Exposed to Tobacco Smoke ¹ In...			
	Government Buildings	Health Care Facilities	Restaurants	Public Transportation
<i>Percentage (95% CI)</i>				
Overall				
<i>Gender</i>				
Male				
Female				
<i>Age (years)</i>				
15-24				
25-44				
45-64				
65+				
<i>Residence</i>				
Urban				
Rural				
<i>Education Level²</i>				
[Category 1				
Category 2				
Category 3]				
Non-smokers				
<i>Gender</i>				
Male				
Female				
<i>Age (years)</i>				
15-24				
25-44				
45-64				
65+				
<i>Residence</i>				
Urban				
Rural				
<i>Education Level²</i>				
[Category 1				
Category 2				
Category 3]				

¹ In the past 30 days.

² Education level is reported only among respondents 25+ years old.

This table describes the percentage of adults and non-smokers exposed to tobacco smoke in different types of places. The categories should be modified to reflect the country-specific questionnaire.

7. Economics

[Recommended page limit: 10 pages]

[Note: The economic indicators calculated for the fact sheet should also be described in the country report: (1) average price paid for a pack of cigarettes; (2) price of 100 packs of cigarettes as a percentage of Gross Domestic Product (GDP) per capita.]

Table 7.1: Percentage of current manufactured cigarette smokers ≥ 15 years old, by last brand purchased and selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Last brand purchased				
	[Brand #1 overall]	[Brand #2 overall]	[Brand #3 overall]	[Brand #4 overall]	[Brand #5 overall]
	Percentage (95% CI)				
Overall					
<i>Gender</i>					
Male					
Female					
<i>Age (years)</i>					
15-24					
25-44					
45-64					
65+					
<i>Residence</i>					
Urban					
Rural					
<i>Education Level¹</i>					
[Category 1					
Category 2					
Category 3]					

Note: Current manufactured cigarette smokers includes daily and occasional (less than daily) use. The top five reported brands last purchased among all manufactured cigarette smokers are shown here.

¹ Education level is reported only among respondents 25+ years old.

This table describes the top manufactured cigarette brand preferences. The top five brands overall should be reported and the percentage of respondents that purchased them. The totals will not add to 100% because those who purchased other brands are not included. In some cases, the top five brands for a subgroup may differ from the top five brands overall. If other brands are in the top three brands for any selected demographic subgroup, these should be reported in a footnote.

Table 7.2: Percentage distribution of the source of last purchase of cigarettes among manufactured cigarette smokers ≥15 years old, by selected demographic characteristics – GATS [Country], [Year].

Source	Overall	Gender		Age (years)		Residence	
		Male	Female	15-24	≥ 25	Urban	Rural
<i>Percentage (95% CI)</i>							
Vending machine							
Store							
Street vendor							
Military store							
Duty-free shop							
Outside the country							
Kiosks							
Internet							
From another person							
Other							
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

This table describes the source of the last purchase of manufactured cigarettes. The specific source should be adjusted to reflect the items listed in the country-specific questionnaire. The results in this table may be able to provide some information on the potential for tax avoidance or smuggling. The total down the column should add to 100%, if all options asked in the questionnaire are shown in the table. Those responding “don’t remember” should be excluded from the calculation.

Table 7.3: Average cigarette expenditure per month among manufactured cigarette smokers ≥15 years old, by selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Cigarette expenditure per month ([currency])
	<i>Average (95% CI)</i>
Overall	
<i>Gender</i>	
Male	
Female	
<i>Age (years)</i>	
15-24	
25-44	
45-64	
65+	
<i>Residence</i>	
Urban	
Rural	
<i>Education Level¹</i>	
[Category 1	
Category 2	
Category 3]	

¹ Education level is reported only among respondents 25+ years old.

See “Global Adult Tobacco Survey (GATS) Indicator Guidelines: Definition and Syntax” for steps in calculating the average cigarette expenditures per month among manufactured cigarette smokers.

8. Media

[Recommended page limit: 15 pages]

Table 8.1: Percentage of adults ≥15 years old who noticed anti-cigarette smoking information during the last 30 days in various places, by smoking status, and selected demographic characteristics – GATS [Country], [Year].

Places	Overall	Gender		Age (years)		Residence	
		Male	Female	15-24	≥ 25	Urban	Rural
<i>Percentage (95% CI)</i>							
Overall							
In newspapers or in magazines							
On television or the radio							
On television							
On the radio							
On billboards							
Somewhere else							
Any Location							
Current smokers¹							
In newspapers or in magazines							
On television or the radio							
On television							
On the radio							
On billboards							
Somewhere else							
Any Location							
Non-smokers²							
In newspapers or in magazines							
On television or the radio							
On television							
On the radio							
On billboards							
Somewhere else							
Any Location							

¹ Includes daily and occasional (less than daily) smokers.

² Includes former and never smokers.

This table describes the extent to which respondents have noticed anti-cigarette smoking information in various places, by smoking status and suggested demographic characteristics. The places should be adapted to reflect the country-specific questionnaire. All locations in the questionnaire do not need to be presented here.

Table 8.2: Percentage of current smokers ≥15 years old who noticed health warnings on cigarette packages and considered quitting because of the warning label on cigarette packages during the last 30 days, by selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Current smokers ¹ who...	
	Noticed health warnings on cigarette package ²	Thought about quitting because of warning label ²
	<i>Percentage (95% CI)</i>	
Overall		
<i>Gender</i>		
Male		
Female		
<i>Age (years)</i>		
15-24		
25-44		
45-64		
65+		
<i>Residence</i>		
Urban		
Rural		
<i>Education Level³</i>		
[Category 1		
Category 2		
Category 3]		

¹ Includes daily and occasional (less than daily) smokers.

² During the last 30 days.

³ Education level is reported only among respondents 25+ years old.

This table describes the percentage of current smokers who noticed health warnings on the cigarette package or thought about quitting because of the warning label. Labeling of tobacco products with health warnings is a key provision of the FCTC. They provide a cue to help smokers quit and to counteract the marketing of tobacco products. Both of these indicators should be calculated among current smokers.

Table 8.3: Percentage of adults ≥15 years old who noticed cigarette marketing during the last 30 days in various places, by selected demographic characteristics – GATS [Country], [Year].

Places	Overall	Gender		Age (years)		Residence	
		Male	Female	15-24	≥ 25	Urban	Rural
<i>Percentage (95% CI)</i>							
<i>Noticed advertisements</i>							
In stores							
On television							
On the radio							
On billboards							
On posters							
In newspapers or magazines							
In cinemas							
On the internet							
On public transportation							
On public walls							
Somewhere else							
Noticed sports sponsorship							
<i>Noticed cigarette promotions</i>							
Free samples							
Sale prices							
Coupons							
Free gifts/discounts on other products							
Clothing/item with brand name or logo							
Mail promoting cigarettes							
Noticed any advertisement, sponsorship, or promotion							

This table describes the extent to which respondents have noticed cigarette marketing in various places, by suggested demographic characteristics. Tables 8.4 and 8.5 report these responses by smoking status. Response categories will vary based on country-specific questionnaires.

Table 8.4: Percentage of current smokers ≥15 years old who noticed cigarette marketing during the last 30 days in various places, by selected demographic characteristics – GATS [Country], [Year].

Places	Overall	Gender		Age (years)		Residence	
		Male	Female	15-24	≥ 25	Urban	Rural
<i>Percentage (95% CI)</i>							
<i>Noticed advertisements</i>							
In stores							
On television							
On the radio							
On billboards							
On posters							
In newspapers or magazines							
In cinemas							
On the internet							
On public transportation							
On public walls							
Somewhere else							
Noticed sports sponsorship							
<i>Noticed cigarette promotions</i>							
Free samples							
Sale prices							
Coupons							
Free gifts/discounts on other products							
Clothing/item with brand name or logo							
Mail promoting cigarettes							
Noticed any advertisement, sponsorship, or promotion							

Note: Current smokers includes both daily and occasional (less than daily) smokers.

Table 8.5: Percentage of non-smokers ≥15 years old who noticed cigarette marketing during the last 30 days in various places, by selected demographic characteristics – GATS [Country], [Year].

Places	Overall	Gender		Age (years)		Residence	
		Male	Female	15-24	≥ 25	Urban	Rural
<i>Percentage (95% CI)</i>							
<i>Noticed advertisements</i>							
In stores							
On television							
On the radio							
On billboards							
On posters							
In newspapers or magazines							
In cinemas							
On the internet							
On public transportation							
On public walls							
Somewhere else							
Noticed sports sponsorship							
<i>Noticed cigarette promotions</i>							
Free samples							
Sale prices							
Coupons							
Free gifts/discounts on other products							
Clothing/item with brand name or logo							
Mail promoting cigarettes							
Noticed any advertisement, sponsorship, or promotion							

Note: Non-smokers includes both former and never smokers.

Smokeless Tobacco Media: Analogous tables to the ones presented for smoked tobacco should be presented for smokeless tobacco use and other smoked tobacco (bidis, kreteks, etc.) if relevant.

9. Knowledge, Attitudes and Perceptions

[Recommended page limit: 6 pages]

Table 9.1: Percentage of adults ≥15 years old who believe that smoking causes serious illness, stroke, heart attack, or lung cancer, by smoking status and selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Adults who believe that smoking causes...			
	Serious illness	Stroke	Heart attack	Lung cancer
	<i>Percentage (95% CI)</i>			
Overall				
<i>Gender</i>				
Male				
Female				
<i>Age (years)</i>				
15-24				
25-44				
45-64				
65+				
<i>Residence</i>				
Urban				
Rural				
<i>Education Level¹</i>				
[Category 1				
Category 2				
Category 3]				
Current smokers²				
<i>Gender</i>				
Male				
Female				
<i>Age (years)</i>				
15-24				
25-44				
45-64				
65+				
<i>Residence</i>				
Urban				
Rural				
<i>Education Level¹</i>				
[Category 1				
Category 2				

Category 3]

Non-smokers³

Gender

Male

Female

Age (years)

15-24

25-44

45-64

65+

Residence

Urban

Rural

Education Level¹

[Category 1

Category 2

Category 3]

¹ Education level is reported only among respondents 25+ years old.

² Includes daily and occasional (less than daily) smokers.

³ Includes former and never smokers.

This table describes beliefs about the dangers of smoking. Estimates are provided both overall and by current smoking status, since this is an important predictor of beliefs. Countries should add in any other diseases that are included in country-specific questionnaires.

Table 9.2: Percentage of adults ≥ 15 years old who believe that breathing other people's smoke causes serious illness in non-smokers, by smoking status and selected demographic characteristics – GATS [Country], [Year].

Demographic Characteristics	Believe that breathing other people's smoke causes serious illness in non-smokers		
	Overall	Current smokers ¹	Non-smokers ²
<i>Percentage (95% CI)</i>			
Overall			
<i>Gender</i>			
Male			
Female			
<i>Age (years)</i>			
15-24			
25-44			
45-64			
65+			
<i>Residence</i>			
Urban			
Rural			
<i>Education Level³</i>			
[Category 1			
Category 2			
Category 3]			

¹ Includes daily and occasional (less than daily) smokers

² Includes former and never smokers.

³ Education level is reported only among respondents 25+ years old.

This table describes beliefs about the harms of secondhand smoke exposure. The beliefs are likely to vary substantially by the smoking status of the respondent, so subgroup estimates should be presented here. If the optional questions about specific harms are asked of participants, these should be reported here as well.

Smokeless Tobacco Knowledge, Attitudes, and Perceptions: Analogous tables to the ones presented for smoked tobacco should be presented for smokeless tobacco use and other smoked tobacco (bidis, kreteks, etc.) if relevant.

References

[Recommended page limit: 10 pages]

Appendix A: Questionnaire

[In this section, provide country-specific GATS questionnaire]

Appendix B: Sample Design

[Recommended page limit: 8 pages]

Appendix C: Estimates of Sampling Errors

[Recommended page limit: 10 pages]

Appendix D: Technical and Survey Staff

[Recommended page limit: 4 pages]

Appendix E: Glossary of Terms

[In this section include the definitions adapted from the indicator documents for each reported variable. Follow the example provided below. Recommended page limit: 6 pages]

- 1. Percentage of adults who currently smoke tobacco:** Number of current daily and less than daily tobacco smokers divided by total number of respondents.
- 2. Percentage of adults who currently smoke tobacco daily:** Number of current daily tobacco smokers divided by the total number of respondents.



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