



Frequently Asked Questions

What is GATS?

The Global Adult Tobacco Survey (GATS) is a standardized global survey used to systematically monitor adult tobacco use and track key tobacco control indicators. GATS is a nationally representative household survey of adults aged 15 years and older, using a consistent and standard protocol which enables unprecedented cross-country and change-over-time comparisons for countries that repeat the survey. GATS is a component of the Global Tobacco Surveillance System (GTSS) which also includes: the Global Youth Tobacco Survey (GYTS); the Global School Personnel Survey (GSPS); and the Global Health Professions Student Survey (GHPSS).

Who are the national partners and international partners in GATS?

National partners include the ministry of health as the lead coordinating agency for GATS and either the national statistical organization or a renowned survey institute as the implementing agency. International partners include the World Health Organization (WHO), U.S. Centers for Disease Control and Prevention (CDC), Johns Hopkins Bloomberg School of Public Health, RTI International, and the CDC Foundation.

Why monitor tobacco use among adults?

Tobacco is the leading preventable cause of premature disease and death worldwide. Tobacco control requires an effective surveillance mechanism to monitor trends in prevalence and other key indicators such as smoke-free environments, advertising bans, and cessation. Surveillance and monitoring is an important public health tobacco use tool. It will provide critical information to strengthen program and policies and to evaluate their effectiveness. "If you can't measure it, you can't manage it."

How many countries have completed GATS?

Fourteen countries (Bangladesh, Brazil, China, Egypt, India, Mexico, Philippines, Poland, Russian Federation, Thailand, Turkey, Ukraine, Uruguay and Viet Nam) completed GATS during 2008-2010. Eight countries (Argentina, Indonesia, Malaysia, Nigeria, Pakistan, Panama, Romania and South Africa) are planning to implement GATS in 2011. Thailand is repeating the survey in 2011.

What topics are covered in GATS?

GATS includes information on respondents' background characteristics, tobacco use (smoking and smokeless tobacco), cessation, second-hand smoke exposure, economic situation, mass media exposure, and knowledge, attitudes and perceptions towards tobacco use.

What can be accomplished with GATS at the country level?

Countries will have nationally representative data on tobacco use among their adults and on key measures of tobacco control. In addition, the data collected can be compared across countries that implemented GATS. Thus, the survey results can be used to better understand comparative patterns of tobacco use between countries. These can be used to create more effective control programs and monitor the impact of these programs. Over time, GATS will provide detailed information on a range of tobacco-control topics, including cessation, secondhand smoke, economics, media, and knowledge, attitudes, and perceptions. Countries will also have an opportunity to be a part of the GTSS network.

How does GATS relate to the World Health Organization's Framework Convention on Tobacco Control (FCTC) and the WHO MPOWER package?

GATS data will assist countries in monitoring and tracking selected articles of the WHO FCTC and will enable them to develop, implement, and evaluate comprehensive national programs, policies, and action plans in tobacco control. Article 20 of the WHO FCTC calls on countries to monitor tobacco use through surveillance, monitoring, and the exchange of information. Countries that are parties to the WHO FCTC can also use the data for reporting purposes.

GATS data will serve as a tool to monitor the WHO MPOWER, a package of selected measures for reducing demand for tobacco that are contained in the WHO FCTC:

- 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
- R**aise taxes on tobacco

When will GATS data become publicly available?

GATS data will be released after the country's report is finalized and released by its national government (ministry of health) no later than one year following the completion of data collection and approval of the data by the Data Coordinating Center at the CDC in Atlanta, Georgia, USA.

When will GATS be repeated?

Countries are encouraged to repeat the survey every 4-5 years.

What is the role of the Data Coordinating Center (DCC)?

CDC serves as the Data Coordinating Center and depository of GTSS data. The DCC provides data management, quality assurance, standardization, and data repository functions along with provisioning data sharing, release and dissemination. The DCC ensures the following:

- Individual countries can be assured their data will receive high quality support;
- As countries begin to repeat surveys, they will be assured that their analysis of trends will be grounded in strong and consistent statistical procedures and practices; and
- A coordinated process will enable standardized analysis which will be important to the direction and development of global tobacco control programs and policies.

How is GATS different from other surveys?

GATS is a stand-alone, in-depth tobacco survey using a standard and consistent protocol (questionnaire, sample design, training, data collection and management, quality assurance, and data analysis and reporting). Data were collected face-to-face using handheld computers. Using a standard set of GATS questions will improve the comparability of survey estimates over time and harmonize these estimates with the results of international tobacco surveillance and monitoring activities.

What are the requirements for countries to be a part of GATS and the Global Tobacco Surveillance System?

To be a part of GATS and GTSS, countries must adhere to the scientific and technical requirements of the GATS comprehensive standard protocol. This means that the country must have its proposed questionnaire on tobacco use approved by a GATS expert review committee. In addition to reviewing the questionnaire, the committee will examine the sample design, sample weights, quality assurance measures, and plan for analysis of the data obtained. If a country wishes to incorporate questions on tobacco use into its existing surveys, that country can be considered a part of GTSS provided it follows all the technical and scientific requirements of the GATS comprehensive standard protocol. This is to ensure standardization and enable cross-country comparisons.

How does a country get involved in GATS?

If a country is interested in implementing GATS it should contact the WHO or the CDC.

What is the mechanism for countries that partially or fully fund GATS and wish to be a part of GTSS?

Countries may decide to fully or partially fund the implementation of GATS. However, to be part of the GTSS, countries must adhere to the technical and scientific requirements of the GATS comprehensive standard protocol. Technical assistance and review of the protocol and its approval by experts is available from WHO and CDC for all countries.

What mechanisms other than the stand-alone GATS are available to countries to monitor tobacco use?

To promote systematic monitoring of tobacco use, countries around the world can use a standard subset of 22 questions selected from the GATS Core Questionnaire entitled "*Tobacco Questions for Surveys: A Subset of Key Questions from the Global Adult Tobacco Survey (GATS)*." Using these questions will help countries improve the comparability of their national survey estimates over time and harmonize them with findings from international tobacco surveillance and monitoring activities. Within their existing national surveys, countries can add their own tobacco module and/or incorporate the standard subset of 22 GATS questions. Data collected using TQS, however, may not generate comparable global estimates with GATS due to methodological differences.