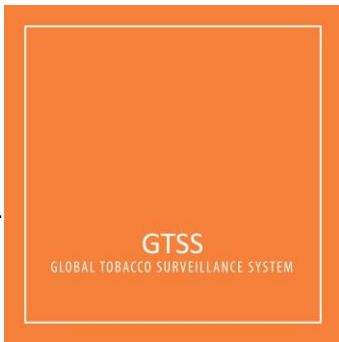




Fourth Session of OIC Statistical Commission

21-23 April 2014, Ankara–Turkey












Opportunities to Monitor Tobacco Control in OIC Countries

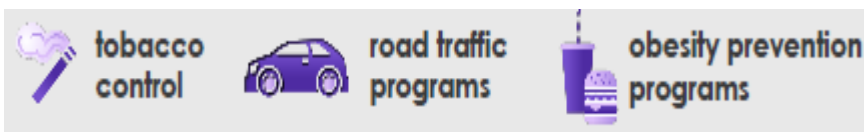
Samira Asma & Jeremy Morton
Centers for Disease Control and Prevention

- Tobacco: Leading Cause of Death
- Monitor to Manage
- Role of STATCOM in OIC Countries
- Efficient Integration by NSOs
 - Tobacco Questions for Surveys (TQS)

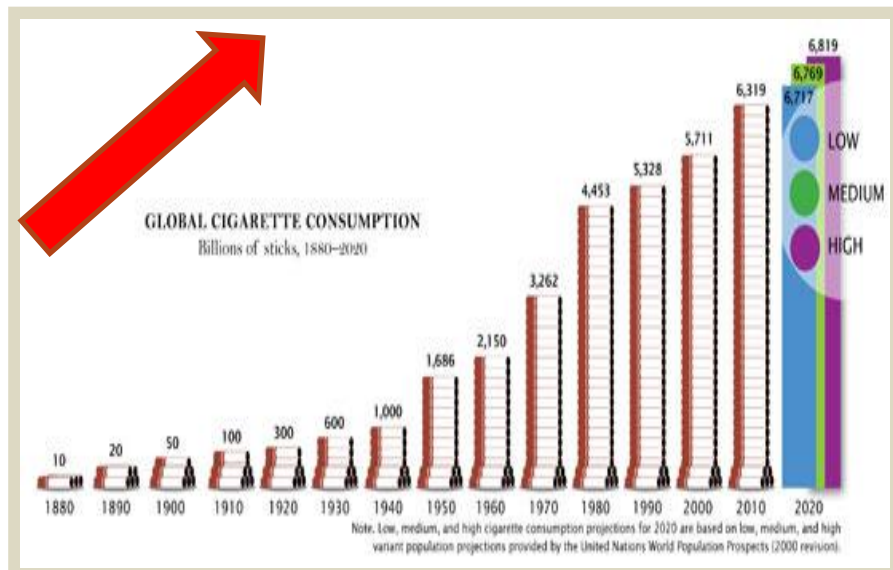
Leading Causes of Deaths

	Global
1	 Ischemic heart disease
2	 Stroke
3	Lower respiratory infections (including influenza and pneumonia)
4	 Chronic lower respiratory diseases
5	Diarrheal diseases
6	HIV/AIDS
7	 Lung cancers
8	 Tuberculosis
9	 Road traffic crashes
10	 Hypertensive heart disease

Tobacco is responsible for 6 of the 10 leading causes of deaths

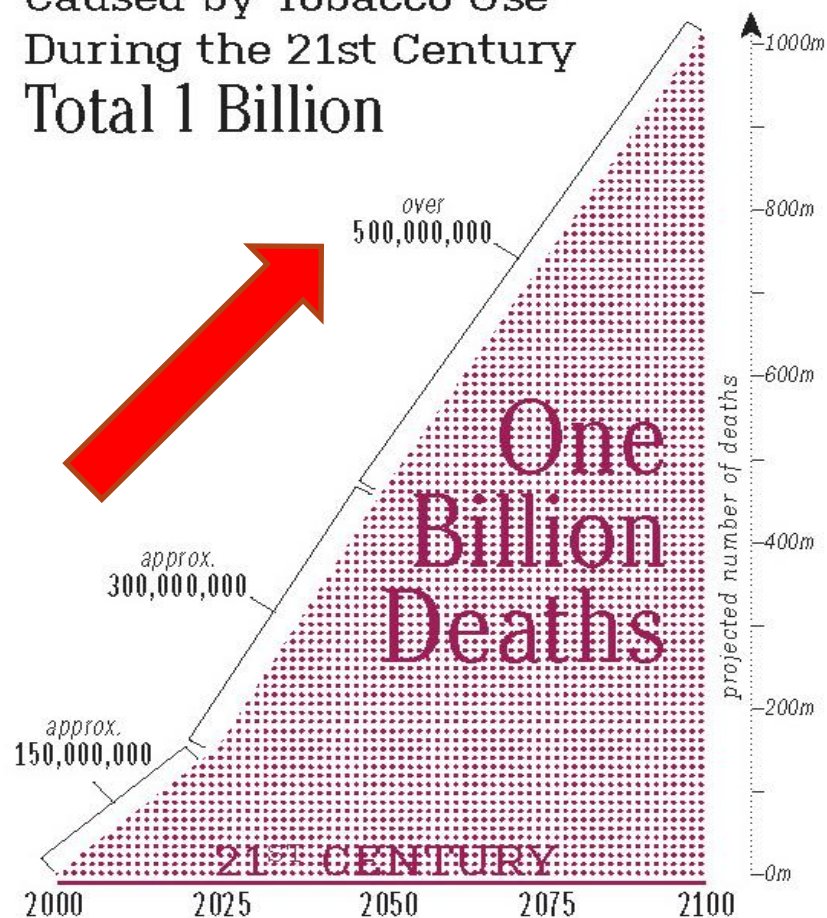


Tobacco Epidemic

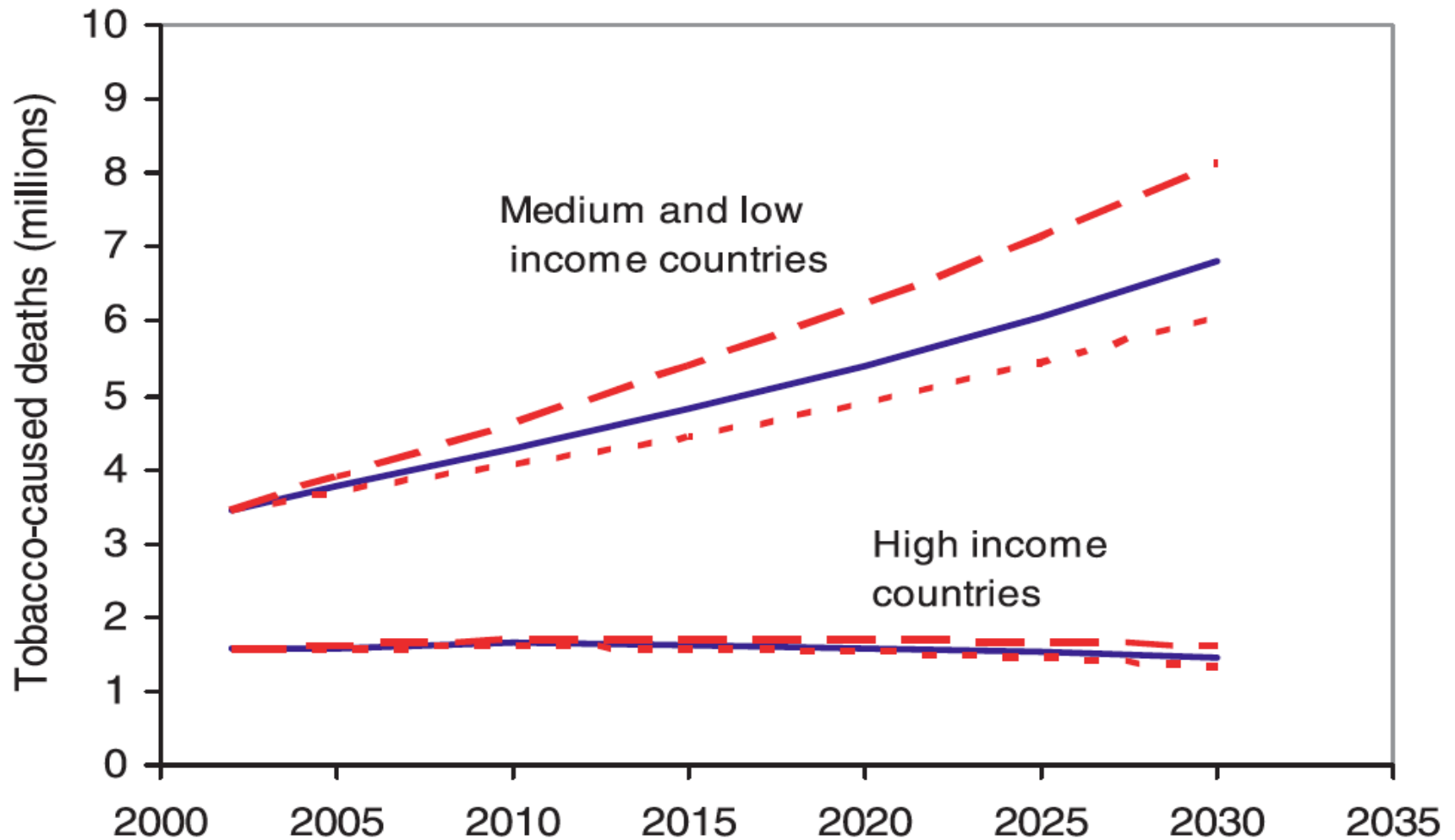


**Number
Smokers
1.4 b-> 1.6b
By 2030**

**Projected Deaths
Caused by Tobacco Use
During the 21st Century
Total 1 Billion**



Increased tobacco deaths in low/mid-income countries through 2030





WHO FRAMEWORK CONVENTION
ON TOBACCO CONTROL

“...integrate tobacco surveillance programs into national, regional, and global health surveillance programs so that data are comparable and can be analyzed at the regional and international levels, as appropriate.”

FCTC Monitoring Protocol 20.2



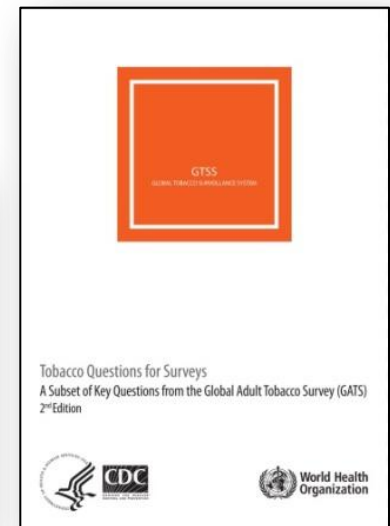
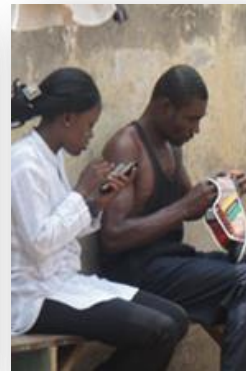
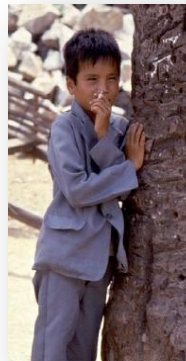
- **M**onitor tobacco use & prevention policies
- **P**rotect people from tobacco smoke
- **O**ffer help to quit tobacco use
- **W**arn about the dangers of tobacco
- **E**nforce bans on tobacco advertising, promotion & sponsorship
- **R**aise taxes on tobacco

Global Tobacco Surveillance System (GTSS)

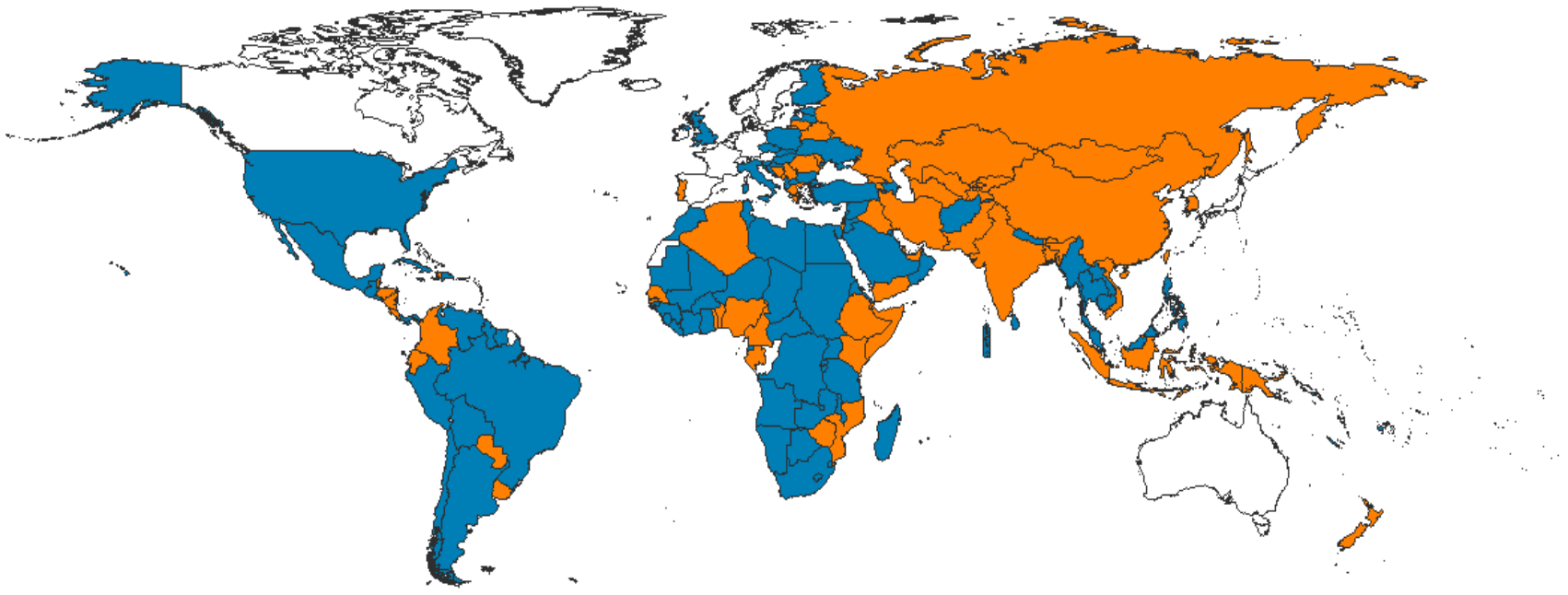
GYTS | GLOBAL YOUTH TOBACCO SURVEY

GATS | GLOBAL ADULT TOBACCO SURVEY

TQS | TOBACCO QUESTIONS FOR SURVEYS

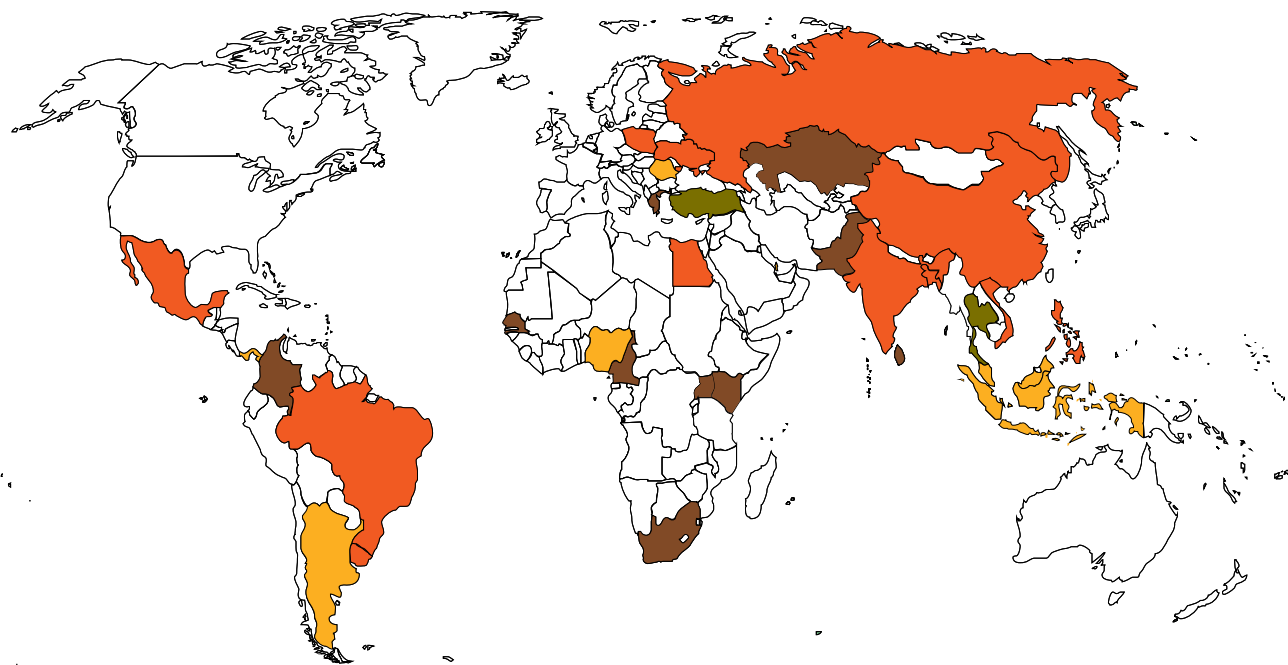


GYTS | 1999-2014: Active in 180 countries



- School-based surveys of students aged 13-15 years
- Self administered using global standard protocol
- 76 countries implementing using revised standard protocol in 2012-2014

GATS | 2008-2014: Active in 31 Countries



Phase 1

Bangladesh, Brazil, China, Egypt, India, Mexico, Philippines, Poland, Russian Federation, Thailand, Turkey, Ukraine, Uruguay, Viet Nam

Phase 2

Argentina, Indonesia, Malaysia, Nigeria, Panama, Qatar, Romania

Phase 3

Cameroon, Colombia, Greece, Kazakhstan, Kenya, Pakistan, Senegal, South Africa, Sri Lanka, Uganda

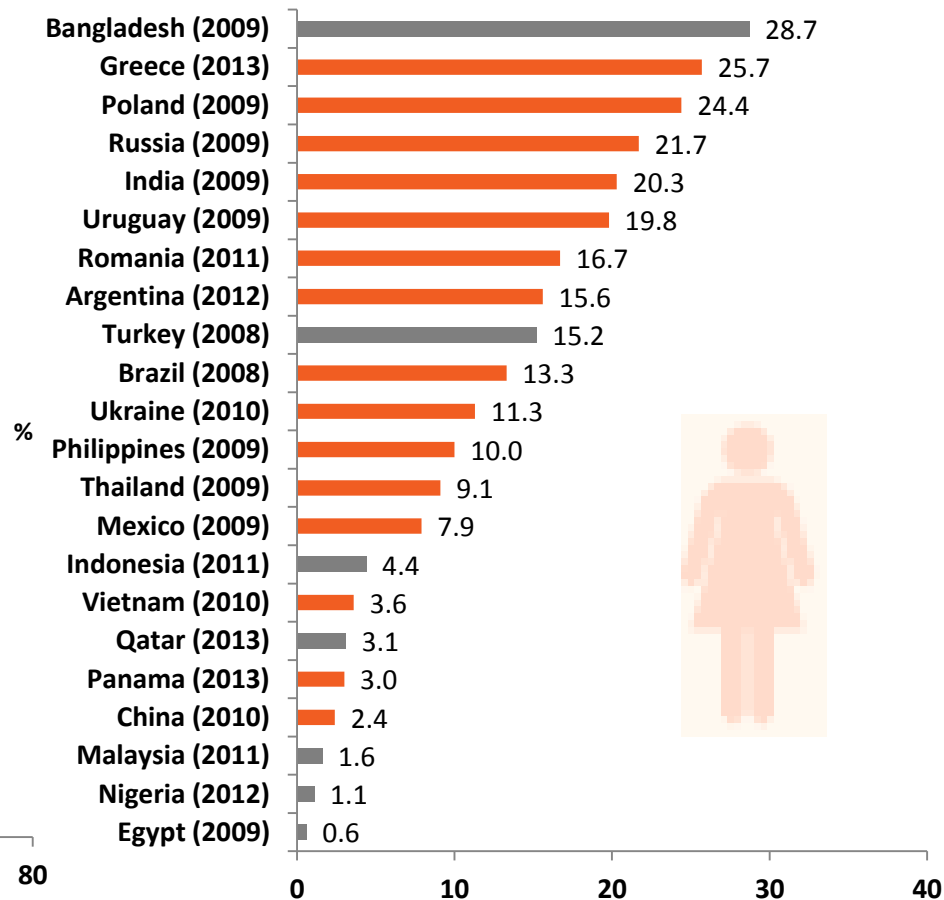
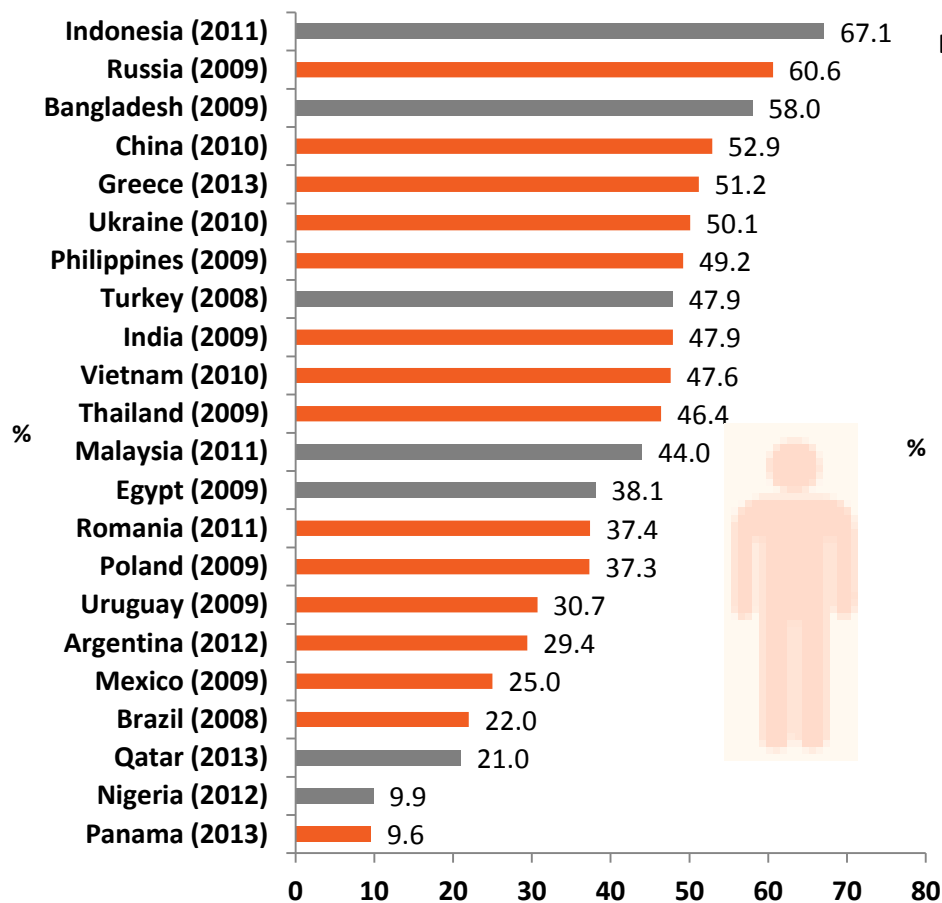
Repeats

Thailand, Turkey

- Nationally representative household surveys of adults aged 15+
- Face-to-face surveys using standard protocol



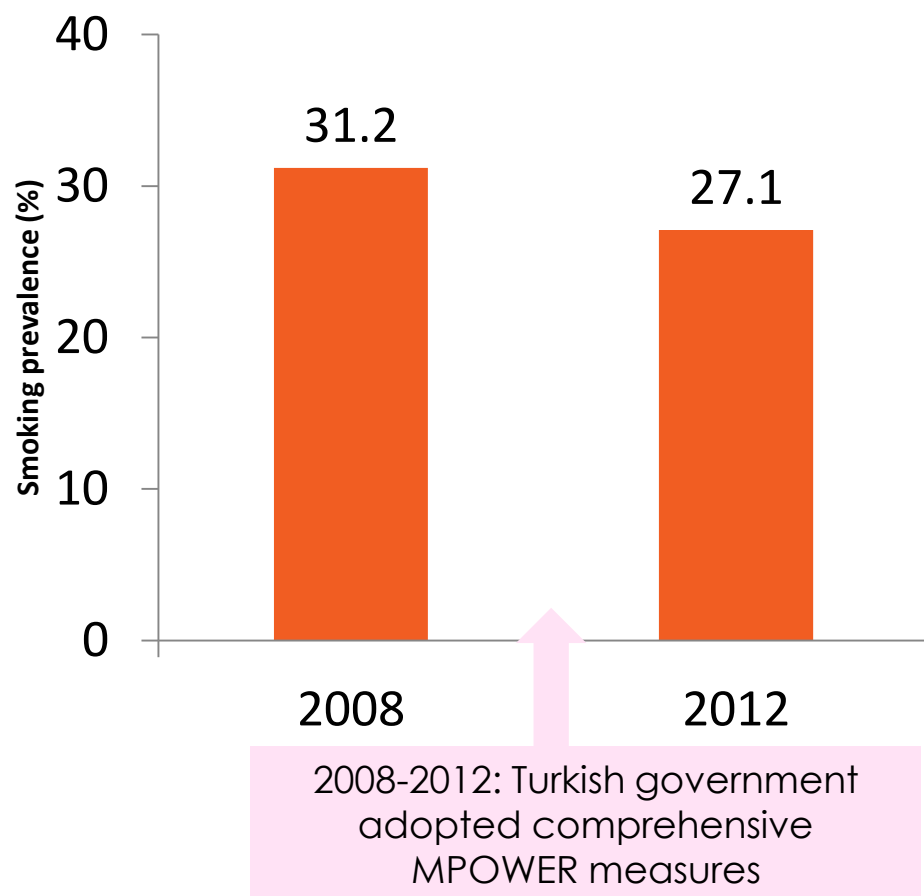
Current Adult Tobacco Use



Source: Global Adult Tobacco Survey, 2008-2013

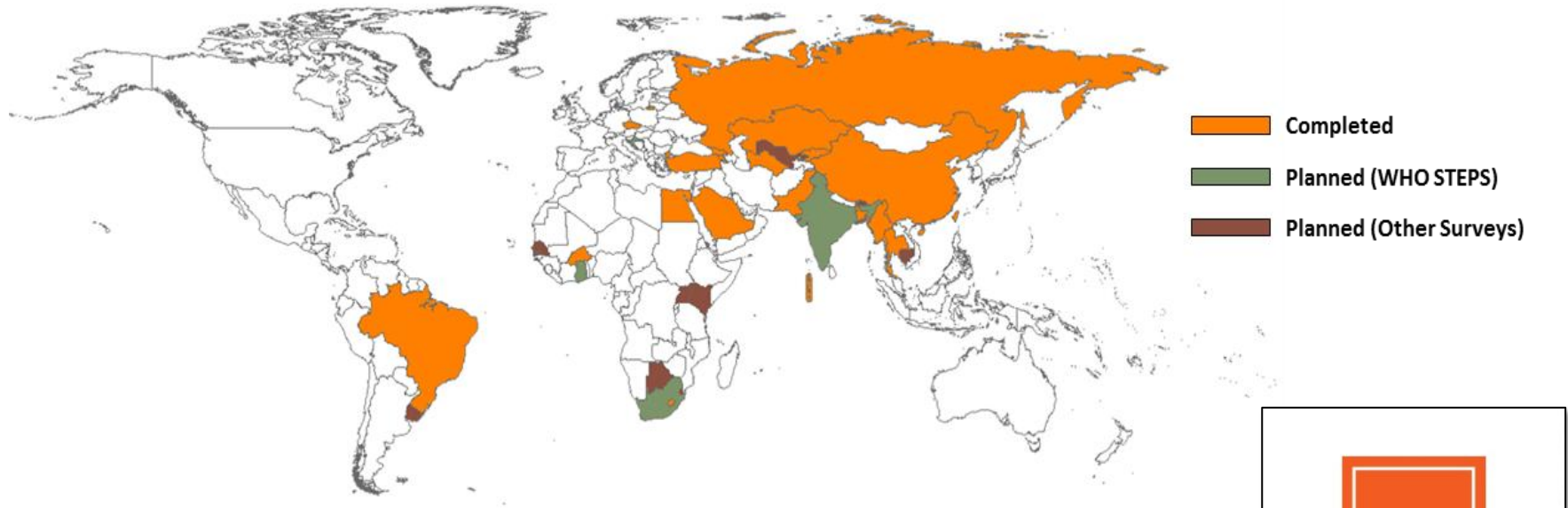
Data to action: turkey

2 million fewer smokers following MPOWER



- Highlight Turkey as an example for the world
- Support efforts to ensure implementation
- Explore strategic approaches to new tobacco control measures

TQS | 2010-2014: Active in 32 Countries

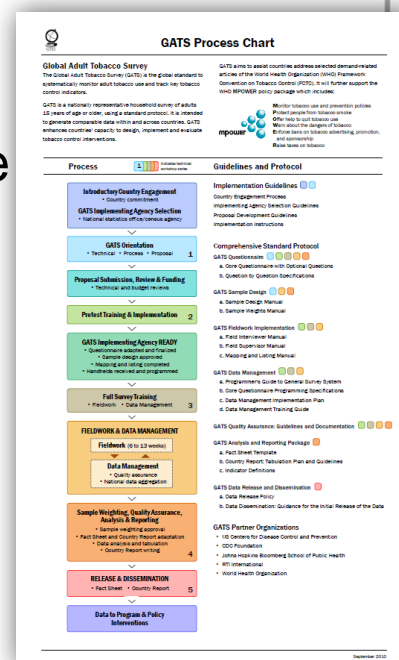


- Set of standard questions (3-22) from GATS for integration into surveys
- Promotes standardization, comparability & sustainability
- Cost efficient



GTSS Features

- Globally standardized protocols
- Durable for country adaptations
- Consistent and comparable
- Efficiency
 - Electronic data collection
 - Streamlined technical exchange
 - Sustainable
- Policy driven indicators
- Open data



Global Adult Tobacco Survey (GATS) Comprehensive Standard Protocol

GATS Questionnaire
Core Questionnaire with Optional Questions
Question by Question Specifications

GATS Sample Design
Sample Design Manual
Sample Weights Manual

GATS Fieldwork Implementation
Field Interviewer Manual
Field Supervisor Manual
Mapping and Listing Manual

GATS Data Management
Programmer's Guide to General Survey System
Core Questionnaire Programming Specifications
Data Management Implementation Plan
Data Management Training Guide

GATS Quality Assurance: Guidelines and Documentation

GATS Analysis and Reporting Package
Fact Sheet Template
Country Report, Tabulation Plan and Guidelines
Indicator Definitions

GATS Data Release and Dissemination
Data Release Policy
Data Dissemination: Guidance for the Initial Release of the Data
Tobacco Questions for Surveys: A Subset of Key Questions from the Global Adult Tobacco Survey (GATS)

45th Session of the UN Statistical Commission: UNODC on Drug Statistics

United Nations
E/CN.3/2014/...
Economic and Social Council
Distr.: General
... November 2013
Original: English

Statistical Commission
Forty-fifth session
4 - 7 March 2014
Item 4 (d) of the provisional agenda*
Agenda title (Items for information)

Report of the UNODC on Drug Statistics: Improving Quality and Availability

Note by the Secretary-General

In accordance with a request of the Statistical Commission at its forty-fourth session (see E/2013/24, chap. I), the Secretary-General has the honour to transmit the report of UNODC on Drug Statistics, (which is presented to the Commission for information). The report is jointly put together by the UNODC, WHO, WCO, CICAD, EMCDDA and the CDC/WHO. GTSS. The report outlines the current status and challenges faced by countries and international and regional organisations in the collection and reporting of data on supply and use of drugs. It also proposes a set of actions to improve the availability and quality of drug statistics at national, regional and international levels for consideration by the Commission including: a) endorse the way forward action plan with priority areas to improve data on drug use and supply; b) recommend the establishment of working groups to develop standards and guidelines for the priority indicators; c) invite national statistical offices to take a leading role ensuring the availability and quality of drug statistics; d) review mechanisms for coordination and roles and responsibilities of different global and regional organisations and institutions for data collection, analysis and reporting; and e) review the mechanism for interaction between monitoring systems on illicit drugs, alcohol, tobacco, prescription drugs and other psychoactive substances not controlled at the international level.

E/CN.3/2014/L...

WHO/CDC Global Tobacco Surveillance System

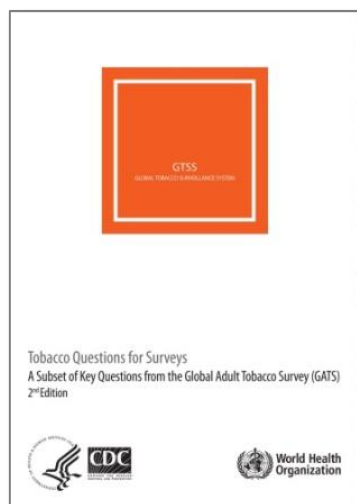
22. The Global Tobacco Surveillance System (GTSS) initiated by WHO and the Centres for Disease Control and Prevention (CDC) in 1999, systematically tracks tobacco use and key tobacco control policy measures using globally standardized protocols. The GTSS comprises three survey tools: the Global Youth Tobacco Survey (GYTS); the Global Adult Tobacco Survey (GATS); and the Tobacco Questions for Surveys (TQS). GTSS enhances countries' capacity to design, implement and evaluate tobacco control interventions. GTSS assist countries to address selected demand-related articles of the WHO FCTC. The system also provides data for systematic monitoring and tracking of the progress of the WHO MPOWER¹¹ policy package. Surveys are repeated every 4-5 years.

23. GYTS is a nationally representative school-based survey of students in grades associated with ages 13 to 15 years and is designed to produce cross-sectional estimates for each country. GATS is a nationally representative household survey of adults 15 years of age or older. Both GYTS and GATS use a standard core questionnaire, sample design, data collection and management protocols¹². The TQS questions are a subset of the core

¹¹ MPOWER stands for Monitor Tobacco use and prevention policies; Protect people from tobacco smoke; Offer help to quit tobacco use; Warn about the dangers of tobacco; Enforce bans on tobacco advertising, promotion and sponsorship; Raise taxes on tobacco

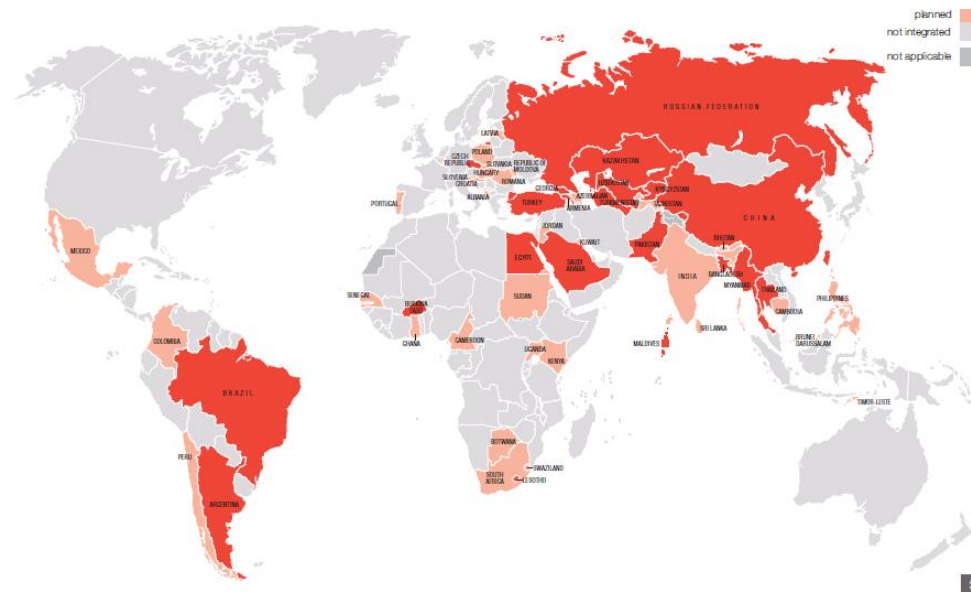
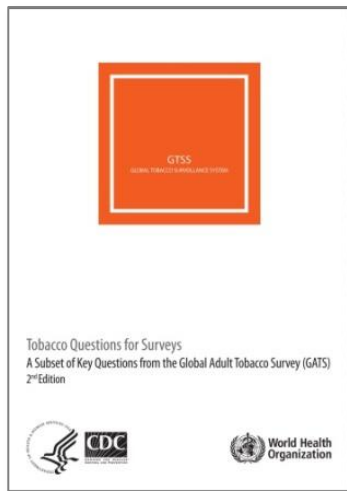
¹² Centers for Disease Control and Prevention (CDC). Global Tobacco Surveillance System Data (GTSSData): Documentation and Resources. <http://ncdd.cdc.gov/gtssdata/Ancillary/Documentation.aspx?SUID=1&DOCT=1>

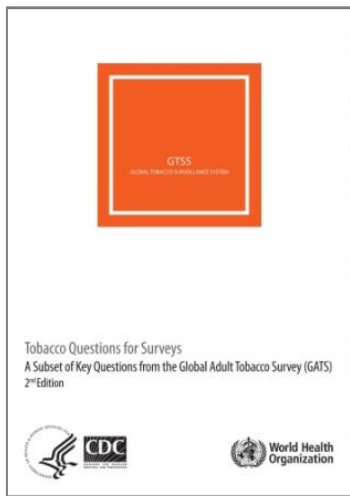
TQS GLOBAL ALLIANCE AIMS TO PROMOTE THE INTEGRATION OF TQS INTO SURVEYS



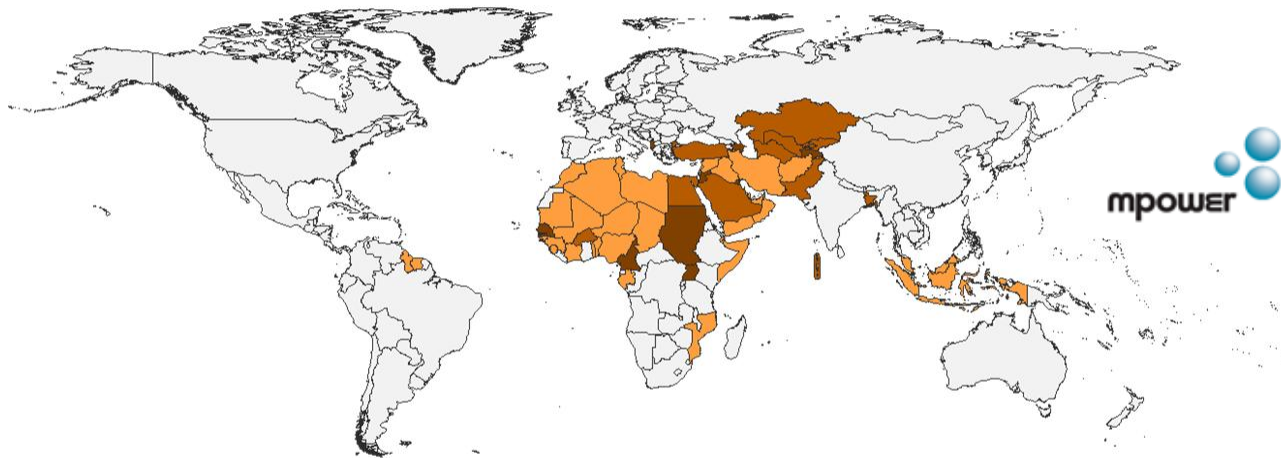
TQS Global Alliance

➤ **THE TARGET IS TO INTEGRATE TQS IN 70 COUNTRIES BY 2016**





**TURKEY IS THE FIRST COUNTRY TO INTEGRATE TQS
INTO THE NATIONAL HEALTH SURVEYS-
TURKSTAT COMPLETED 4 ROUNDS, 2008-2014**



- 3-22 MPOWER focused questions
- 10 OIC countries integrating TQS

TQS Content

Smoking prevalence = *Key questions*

Smokeless prevalence

Exposure to secondhand smoke (home, work)

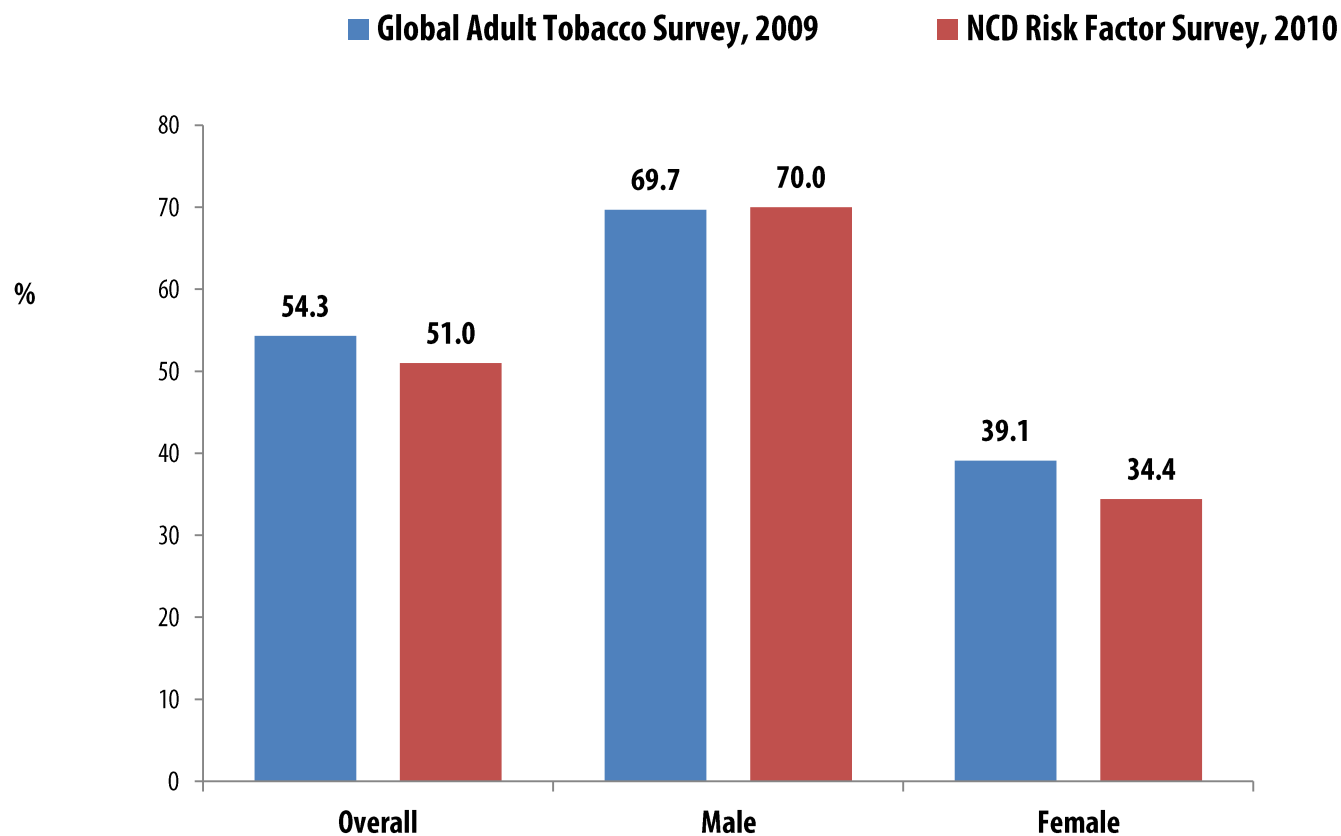
Cessation (quit attempts, healthcare provider advice)

Health warnings (in media, on packs)

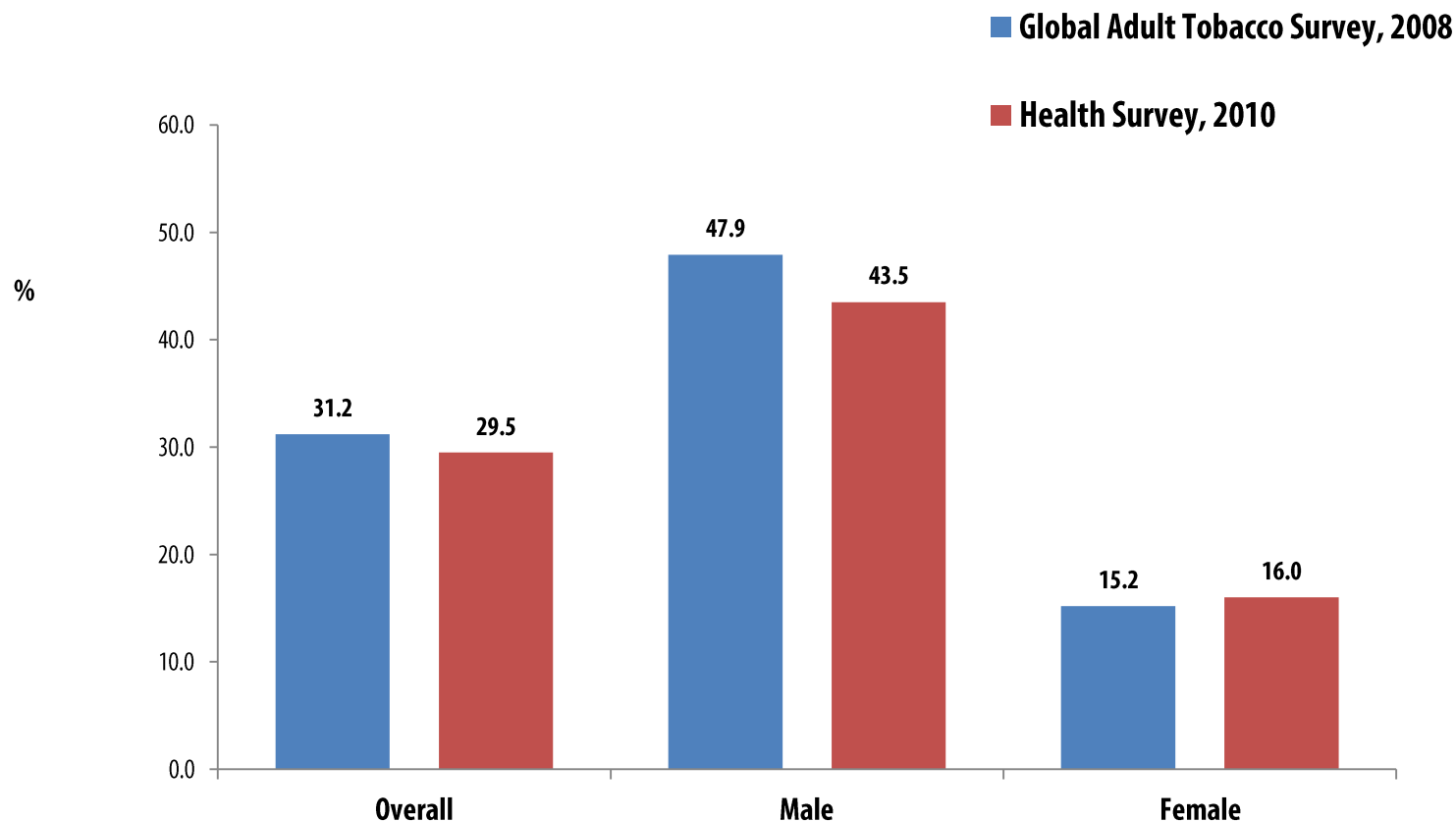
Exposure to advertisements and promotions

Cigarette cost (measure affordability)

Current tobacco users among adults aged 25 years and above by gender in Bangladesh



Current tobacco smoking among adults aged 15 years and above by gender in Turkey



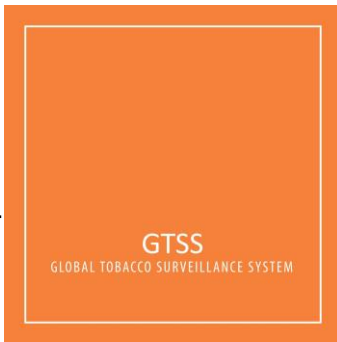
TQS Technical Package

- Expert consultations
 - Protocol
 - Analysis and reporting
- Technical assistance and capacity building

UN Statistical Commission

- Add TQS on the agenda for 2015





Opportunities to Monitor Tobacco Control in OIC Countries

Samira Asma & Jeremy Morton
Centers for Disease Control and Prevention (CDC)
Atlanta, USA