



GLOBAL YOUTH TOBACCO SURVEY FOR NIGERIA

REPORT

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INTRODUCTION

According to the World Health Organization (WHO), tobacco use is one of the chief preventable causes of death. It attributes 5 million deaths to tobacco annually and by 2020, the figure is expected to exceed 10 million with approximately 70% of these deaths occurring in developing countries. ² In 1999, the Global Youth Tobacco Survey (GYTS) was initiated by WHO, Centers for Disease Control and Prevention (CDC), and the Canadian Public Health Association (CPHA) to monitor tobacco use, attitudes about tobacco use, and exposure to second-hand smoke (SHS) among students aged 13--15 years. Since 1999, the survey has been conducted in 140 countries and 11 territories and across all six WHO regions.³ A key goal of GYTS is for countries to repeat the survey every 4 years. This report summarizes results from GYTS conducted in five centres in Nigeria. With a population size of about 140 million persons, it was difficult to carryout a national survey due to cost constrains, hence representative samples were collected from centres covering three geographical regions in the north, west and east (south -south). These comprise of four urban cities viz: Abuja, Ibadan Lagos, and Kano selected proportionate to their size as well as a state, Cross River state in 2008. A previous study was conducted in 2001 in Cross River State (CRS). 4. The data from this survey, will provide baseline in monitoring the trend of tobacco use in the state and plan for future tobacco control programmes in the country even though limited in area of coverage.

Future declines in tobacco use in Nigeria will be enhanced through development and implementation of new tobacco-control measures and strengthening of existing measures that encourage smokers to quit, eliminate exposure to SHS, and encourage persons not to initiate tobacco use. As part of its national tobacco control strategies, Nigeria became signatory to the WHO Framework Convention on Tobacco Control (FCTC) ⁵ in June 2004 and ratified it in October 2005. In June 2006, the Honourable Minister of Health inaugurated a multisectoral/interministerial committee on tobacco control in Nigeria. At the State levels, the Cross River State had in 2001, passed a law prohibiting advertisement of tobacco products in the media ⁶ while The Federal Capital Territory Abuja has placed a ban on public smoking since May 31, 2008. Recently in 2008, a number of non governmental organizations (NGO)including the Nigerian Heart Foundation(NHF), Environmental Rights Action (ERA), Nigerian Cancer Society(NCS) among others, have come together to form an Anti Tobacco Control Alliance(ATCA). In so doing, a strong advocacy group is now in place to partner with Government in its tobacco control efforts. Most of these organizations already carryout activities during the World No Tobacco Day (WNTD) on May 31 each year to raise public awareness on the serious health, environmental and economic hazards posed by tobacco.

METHODS

GYTS Objectives

GYTS is a school-based anonymous questionnaire survey that collects data on students aged 13--15 years using a standardized methodology for constructing the sample frame, selecting schools and classes, and processing data.

The objective of this is two fold:

- 1. To document and monitor the prevalence of tobacco use including: cigarette smoking and current use of smokeless tobacco, cigars or pipes.
- 2. To understand, assess students' attitudes, knowledge and behaviours related to tobacco use and its health impact, including cessation, environmental tobacco smoke, media and advertising, minors' access and school curriculum.

The GYTS will attempt to address the following issues:

- Determine the level of tobacco use
- Estimate the age of initiation of cigarette use
- Estimate levels of susceptibility to become cigarette smokers
- Exposure to tobacco advertising
- Identify key intervening variables, such as attitudes and beliefs on behavioural norms with regard to tobacco use among young people which can be used in prevention programmes
- Assess the extent to which major prevention programmes are reaching school –based populations and establish the subjective opinions of those populations regarding such interventions

The Nigeria GYTS uses a two-stage cluster sample design that produces representative samples of students in classes comprising Junior secondary(JS) 2, Junior secondary(JS) 3 or Senior secondary (SS)1, whose ages are 13--15 years ⁽³⁾. At the first sampling stage, school selection was proportional to the number of students enrolled in the selected classes. At the second stage, classes within the selected schools were randomly selected. All students attending school in the selected classes on the day the survey was administered were eligible to participate. A weighting factor was applied to each student record to adjust for nonresponse (by school, class, and student) and probability of selection at the school and class levels ³. A final adjustment sums the weights by grade and sex to the population of school children in the selected grades in each sample site ³.

DATA COLLECTION AND SURVEY ADMINISTRATION

School surveys have been found to be useful tools in gathering data as they are relatively inexpensive and easy to administer, provide reliable results and refusals are significantly lower than in household surveys.

The respective states Ministry of Education(MOE) and the Education Authority of the Federal Capital territory(FCT), Abuja provided assistance in terms of schools enrolment records for the sample selection. The Research Coordinator (RC) wrote letters to the selected school principals for their consent to participate in the GYTS. Each school had a survey assistant and organized the necessary contacts to the randomly selected schools. The Federal Ministry of Health (MOH) was duly informed of the GYTS for Nigeria.

GYTS QUESTIONNAIRE

The GYTS questionnaire was adapted from the standard 54 questions core document previously developed for the WHO international tobacco surveillance by a team of tobacco control experts from the WHO/TFI (Tobacco Free Initiative) and UNICEF. Additional country specific questions were added for Nigeria making a total of 58 questions.

PRE-SURVEY TRAINING WORKSHOP

A two day pre-survey training of trainer's workshop was organized for the five zonal facilitators in Abuja, from 2 to 3 April, 2008. The facilitators consisted of three Consultant Pathologists, a Consultant Community Physician and a Sociologist who had taken part in the first Cross River State GYTS in 2001. For the 2008 GYTS in Nigeria, 100 schools were selected, representing 20 per survey site.

Each facilitator paid pre-survey visits to the schools and scheduled dates for the fieldwork .The schools each had GYTS survey assistants who were trained before the questionnaires administration by the GYTS zonal facilitators. In some centres, the questionnaires were translated into vernacular language for clarity to the students and school survey assistants and field administrators. Dates for the actual field work were scheduled by each facilitator. In all the sites, the survey was carried out in the month of June; 2008. Each lasted for about 5 days. The duration of questionnaire administration was about 30 – 40 minutes in each class. All answer sheets were collected and sent to the RC for proper validation and thereafter sent to the CDC/OSH in Atlanta, GA, USA.

DATA ANALYSIS

Data from all 5 centres in Nigeria were statistically analysed using the Epi Info 3.3 version at the CDC /OSH, Atlanta, USA;

A weight was associated with each questionnaire to reflect the likelihood of sampling each student within a two-stage sampling frame and to reduce bias by compensating for differing patterns of non-response. The weight used for estimation is given by the equation: W = W1 * W2 * f1 * f2 *f3* f4 where W1 is the inverse of the probability of selecting the school, W2 is the inverse of the probability of selecting the classroom within the school, f1 is a school-level non-response adjustment factor calculated by school size category (small, medium, large), f2 is a class adjustment factor calculated by school, f3 is a student-level non-response adjustment factor calculated by class, and f4 is a post-stratification adjustment factor calculated by gender and grade. The weighted results can be used to make valid inferences concerning tobacco use and other findings of students in classes junior secondary 2, 3 and Senior secondary 1. Analyses were made using the Epi info 3.3 version. 95% confidence intervals were calculated for all weighted estimates of frequency. Differences between categories of sex, age and current smoking status that reached a P value of <0.05 have been highlighted.

For each of the five centres, there were 20 participating schools. The response rate for participating students was as follows: Abuja 1399 of 1568(89.2%), Cross River State 1018 of 1060(96%), Ibadan 637 of 910(70%), Kano 944 of 1049(90%) and Lagos1461 of 1557(93.8%)

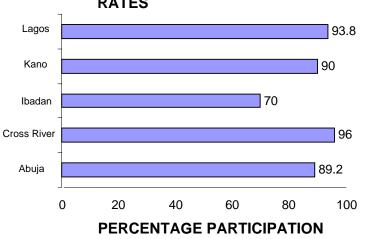


Figure 1.0: NIGERIA GYTS 2008 STUDENT'S RESPONSE RATES

RESULTS

PREVALENCE

Table 1: Percent of students who had ever smoked cigarettes and percent of students who had never smoked that were susceptible to start smoking in the next year, NIGERIA - GYTS, 2008.

	Ever smoked	Percent never smokers
	cigarettes, even one	likely to initiate
State	or two puffs	smoking within a year
Abuja	12.0 (7.9 - 17.8)	13.4 (9.1 - 19.3)
Boy	15.1 (9.8 - 22.6)	17.1 (10.8 - 25.9)
Girl	8.0 (4.6 - 13.5)	10.5 (5.7 - 18.4)
Cross River State	13.4 (8.4 - 20.7)	10.4 (6.1 - 17.3)
Boy	13.9 (7.8 - 23.6)	12.9 (6.6 - 23.7)
Girl	9.9 (5.6 - 16.9)	8.7 (3.7 - 18.9)
Ibadan	4.7 (1.9 - 11.1)	3.6 (1.3 - 9.7)
Boy	3.0 (1.6 - 5.6)	4.3 (1.3 - 13.2)
Girl	6.4 (1.8 - 20.6)	2.9 (0.8 - 10.7)
Kano	16.1 (7.9 - 30.3)	9.8 (5.7 - 16.3)
Boy	29.2 (20.7 - 39.4)	5.9 (2.4 - 13.6)
Girl	3.7 (0.9 - 14.6)	12.4 (8.8 - 17.3)
Lagos	7.7 (4.9 - 11.9)	16.2 (12.0 - 21.4)
Boy	9.1 (5.3 - 15.4)	13.5 (8.2 - 21.4)
Girl	5.5 (2.9 - 10.0)	17.8 (11.9 - 25.9)

^{*}cell size <35

From this survey, the smoking experimentation rate among 13-15 year old youths in Nigeria ranged from 4.7% in Ibadan to 16.1% in Kano where the boys are more likely (29.2%) to do so than the girls (3.7%). The likelihood of initiating cigarette smoking within a year was also low, (3.6%) in Ibadan compared to other centres with Lagos having the highest rate (16.2%).

Table 2: Percent of students who were current cigarette smokers, current users of tobacco products other than cigarettes, and percent of current smokers who were dependent on tobacco products, NIGERIA - GYTS, 2008.

	T	T
	Current cigarette	Currently use other
State	smoker	tobacco products
Abuja	3.5 (1.9 - 6.2)	13.9 (9.3 - 20.2)
Boy	5.6 (2.9 - 10.7)	16.9 (11.7 - 23.7)
Girl	1.3 (0.3 - 5.8)	10.7 (6.8 - 16.3)
Cross River State	4.1 (1.4 - 11.1)	23.3 (16.6 - 31.6)
Boy	6.8 (2.4 - 17.7)	23.9 (16.2 - 33.9)
Girl	1.2 (0.2 - 6.4)	17.5 (9.9 - 29.0)
Ibadan	3.5 (0.9 - 13.0)	16.1 (10.0 - 25.0)
Boy	1.4 (0.3 - 6.9)	13.7 (5.5 - 30.5)
Girl	5.5 (1.2 - 22.2)	18.0 (12.5 - 25.4)
Kano	6.2 (2.5 - 14.5)	19.7 (16.1 - 23.9)
Boy	11.4 (5.5 - 22.2)	24.0 (17.8 - 31.6)
Girl	0.3 (0.0 - 3.9)	14.3 (9.2 - 21.5)
Lagos	2.6 (1.5 - 4.5)	13.1 (9.7 - 17.6)
Boy	2.8 (1.4 - 5.7)	13.2 (8.9 - 19.2)
Girl	1.8 (1.1 - 3.0)	12.9 (8.3 - 19.5)

^{*} Cell size is less than 35

The findings show that during 2008, the percentage of students aged 13--15 years who are currently cigarette smokers ranged, from 2.6% in Lagos to 6.2% in Kano. The likelihood of smoking is more among males than females in Kano, but there are no significant gender differences in current smoking rates in any other centre. During this period, the percentage of smokers currently smoking other tobacco products in this age group range from 13.9% in Abuja to 23.3% in Cross River State. There were no significant differences in using tobacco products other than cigarettes between boys and girls in any centre. It is important to note the high use of tobacco products other than cigarettes compared to manufactured cigarettes.

EXPOSURE TO SECONDHAND TOBACCO SMOKE (SHS)

Table 3: Percent of students exposed to smoke at home, exposed to smoke in public, and supported banning smoking in public places, NIGERIA - GYTS, 2008.

			Percent who think
	Percent exposed to	Percent exposed to	smoking should be
	smoke from others at	smoke from others in	banned in public
State	home	public places	places
Abuja	21.7 (18.7 - 25.0)	39.7 (31.3 - 48.9)	57.0 (46.5 - 66.9)
Boy	29.2 (24.5 - 34.4)	43.6 (34.3 - 53.5)	55.5 (41.1 - 69.1)
Girl	12.8 (10.1 - 16.1)	36.0 (26.8 - 46.5)	59.0 (46.2 - 70.7)
Cross River State	31.3 (23.4 - 40.4)	46.9 (39.3 - 54.7)	70.8 (60.5 - 79.3)
Boy	38.4 (29.5 - 48.1)	50.6 (37.8 - 63.4)	70.7 (60.7 - 79.0)
Girl	25.6 (16.9 - 36.9)	43.7 (31.0 - 57.3)	73.7 (56.9 - 85.6)
Ibadan	14.5 (9.0 - 22.5)	35.0 (26.7 - 44.3)	69.3 (61.8 - 75.9)
Boy	9.2 (5.6 - 14.8)	30.7 (18.7 - 46.1)	64.0 (54.8 - 72.3)
Girl	19.6 (12.3 - 29.8)	39.2 (29.9 - 49.2)	74.6 (63.9 - 83.0)
Kano	18.7 (8.7 - 35.6)	55.8 (36.9 - 73.2)	70.9 (38.9 - 90.3)
Boy	17.0 (12.0 - 23.7)	65.5 (54.3 - 75.3)	55.1 (21.8 - 84.4)
Girl	19.1 (5.7 - 48.1)	49.0 (26.3 - 72.1)	83.4 (48.6 - 96.4)
Lagos	25.9 (21.8 - 30.3)	43.1 (36.4 - 50.1)	52.9 (46.2 - 59.6)
Boy	30.1 (23.9 - 37.1)	48.9 (41.4 - 56.6)	54.9 (47.9 - 61.7)
Girl	20.4 (16.7 - 24.7)	37.4 (29.8 - 45.6)	50.8 (40.8 - 60.7)

In all centres, exposure to second-hand tobacco smoke is a problem. The rate of exposure ranging from 14.5% in Ibadan to 31.3% in Cross State at home and 35.% in Ibadan to 55.8% in Kano in public areas. Majority or 7 in 10 of the students in Kano, Cross River and Ibadan favour the ban on smoking in public places. However, fewer students in Lagos (about 1 in 2) and (over 1 in 2) Abuja favour the ban. On the whole, over 50% of the youths favour the ban on smoking.

SCHOOL CURRICULUM

Table 4: Percent of students who were taught dangers of smoking, discussed reasons why people their age use tobacco, taught effects of using tobacco, GYTS NIGERIA, 2008.

		Percent discussed	
	Percent taught	reasons why people	Percent taught about
	dangers of smoking	their age smoke	the effects of smoking
State	tobacco	tobacco	tobacco
Abuja	53.9 (49.4 - 58.4)	30.0 (25.6 - 34.8)	58.6 (50.5 - 66.2)
Boy	54.6 (47.1 - 61.9)	29.7 (23.4 - 37.0)	60.4 (50.5 - 69.5)
Girl	54.4 (48.0 - 60.6)	30.0 (24.5 - 36.0)	59.2 (48.6 - 69.0)
Cross River State	52.1 (40.9 - 63.1)	28.9 (21.6 - 37.4)	53.6 (43.2 - 63.8)
Boy	45.0 (29.0 - 62.1)	31.9 (23.0 - 42.3)	52.9 (41.7 - 63.9)
Girl	58.1 (46.3 - 69.0)	26.8 (20.1 - 34.8)	55.2 (43.8 - 66.1)
Ibadan	50.4 (38.3 - 62.5)	29.1 (17.9 - 43.5)	54.2 (43.5 - 64.5)
Boy	53.8 (41.0 - 66.1)	30.6 (12.8 - 57.1)	59.1 (43.6 - 73.0)
Girl	47.1 (33.6 - 61.0)	27.8 (19.3 - 38.1)	49.6 (38.2 - 61.0)
Kano	48.3 (30.7 - 66.3)	30.1 (20.4 - 41.9)	42.2 (32.6 - 52.5)
Boy	50.9 (26.0 - 75.4)	33.6 (13.6 - 61.8)	48.6 (28.6 - 68.9)
Girl	47.4 (28.4 - 67.3)	28.1 (17.4 - 42.0)	38.1 (25.1 - 53.0)
Lagos	44.0 (38.5 - 49.5)	24.0 (18.9 - 30.0)	52.3 (46.9 - 57.6)
Boy	43.5 (36.3 - 51.0)	21.5 (16.4 - 27.6)	51.4 (44.5 - 58.2)
Girl	44.8 (38.6 - 51.1)	26.1 (19.1 - 34.5)	52.9 (46.6 - 59.0)

In all centres, there was considerable knowledge of the dangers of tobacco use and in two centres, Abuja and Cross Rivers State, more than half of students were taught about the dangers of smoking tobacco. The lowest was in Lagos (44.0%). Regarding the discussion on reason for smoking at their age, only about 1 in 5 (Lagos) and 3 in 10 in other centres responded in the affirmative.

MEDIA AND ADVERTISING

Table 5: Percent of students who saw ads on billboards, saw ads in newspapers, and had an object with a tobacco company logo on it, NIGERIA - GYTS, 2008.

		Percent who saw		Percent who have
	Percent who saw ads	ads for cigarettes in		been offered "free"
	for cigarettes on	newspapers or	Percent who have an	cigarettes by a tobacco
	billboards in the past	magazines in the	object with a cigarette	company
State	month	past month	or tobacco logo on it	representative
Abuja	43.1 (37.6 - 48.8)	46.4 (40.3 – 52.5)	16.1 (11.9 - 21.3)	11.3 (8.3 - 15.1)
Boy	44.3 (38.5 - 50.2)	49.0 (42.6 – 55.5)	18.1 (13.6 - 23.6)	13.3 (9.1 - 18.9)
Girl	42.5 (34.1 - 51.4)	44.1 (35.5 – 53.0)	13.8 (9.8 - 18.9)	8.4 (5.4 - 12.7)
Cross River	47.6 (36.1 - 59.4)	53.7 (41.8 – 65.2)	15.4 (9.6 - 23.8)	14.2 (7.7 - 24.6)
State	47.0 (30.1 - 37.4)	33.7 (41.0 – 03.2)	13.4 (7.0 - 23.0)	14.2 (7.7 - 24.0)
Boy	48.8 (35.4 - 62.4)	59.1 (42.7 – 73.8)	15.6 (9.0 - 25.6)	18.5 (10.0 - 31.5)
Girl	47.0 (34.4 - 60.0)	48.3 (39.5 – 57.2)	15.3 (10.1 - 22.5)	7.4 (2.7 - 18.4)
Ibadan	38.4 (27.7 - 50.4)	39.7 (30.5 – 49.7)	15.7 (10.3 - 23.2)	5.4 (2.8 - 10.1)
Boy	34.0 (25.1 - 44.3)	42.4 (32.4 – 53.0)	18.4 (11.9 - 27.3)	6.6 (2.8 - 15.1)
Girl	42.3 (27.5 - 58.7)	37.4 (26.2 – 50.2)	12.8 (7.6 - 20.8)	4.2 (1.3 - 12.9)
Kano	52.7 (42.9 - 62.4)	52.6 (39.4 – 65.5)	26.8 (14.8 - 43.7)	9.5 (5.7 - 15.3)
Boy	62.5 (46.7 - 76.0)	62.1 (46.3 – 75.7)	41.3 (27.1 - 57.3)	11.4 (6.9 - 18.1)
Girl	45.8 (38.1 - 53.8)	45.1 (38.8 – 51.6)	14.2 (7.0 - 26.5)	5.7 (2.2 - 14.1)
Lagos	42.9 (38.9 - 47.0)	52.4 (45.4 – 59.4)	14.2 (12.1 - 16.5)	7.1 (5.1 - 9.8)
Boy	42.2 (37.0 - 47.6)	48.8 (40.9 – 56.8)	15.7 (11.9 - 20.4)	6.8 (3.9 - 11.6)
Girl	43.1 (35.7 - 50.8)	55.3 (46.6 – 63.7)	11.7 (8.8 - 15.5)	6.4 (4.0 - 10.0)

Over all, tobacco advertisement is quite rampant in Nigeria as no less than nearly 4 in 10 students saw billboards bearing tobacco advertisements but in Kano, more than half of the students did so. The same was the case with magazine and newspaper tobacco advertisements though over 1 in 2 students in Cross River State, Kano, and Lagos saw such adverts. Possession of objects with cigarette logo was commonest in Kano (26.8%) with statistical gender significance, males being more likely (41.3%) than girls (14.2%) to have the objects.

The number of students offered free cigarettes by a tobacco company was highest in Cross River State (14.2%) and followed by Abuja (11.3%); Kano (9.5%) and Lagos (7.1%) respectively .lbadan students had the least free cigarette offers (5.4%)

CESSATION

Few observations (<35) were made on cessation of cigarette smoking in all locations hence the data could not be analysed.

ACCESS /AVAILABIITY OF TOBACCO

Few observations (<35) were made on access and availability of tobacco products to youths in all locations hence the data could not be analysed.

DISCUSSION

In Nigeria, the GYTS was first conducted in Cross River State among 13 -15 year old students in 2001 ⁴. Results from that study were consistent with the adult pattern which shows a significantly low rate of cigarette smoking especially among females. Among adults, the current smoking rate in Nigeria is 9.0% for males and 0.2% in females ⁷ while in CRS, current smoking rate in 2001 was 7.0%.(Boys 7.7%, Girls 3.3%)

However, from the GYTS in 2008 conducted in four major urban centres viz: Abuja, Ibadan, Kano, Lagos and Cross River State, the level of cigarette smoking for 13 to 15 year-old girls was already higher (Abuja 1.3%, Cross River 1.2%, Ibadan 5.5%, Kano 0.3%, Lagos 1.8%) than for adult females in Nigeria. Reducing tobacco use by females, especially young girls, should be a priority in Nigeria.

The main goal of a comprehensive tobacco control programme is to improve the health of the population by encouraging smokers to quit, eliminating exposure to second-hand smoke, and encouraging people not to initiate tobacco use. The MPOWER ⁷ report focuses on the following:

- M Monitor tobacco use
- P Protect people from tobacco smoke
- O Offer help to quit tobacco use
- W Warn about the dangers of tobacco
- E Enforce bans on tobacco advertising and promotion
- R Raise taxes on tobacco products.

MPOWER requires "that proven tobacco policies and interventions be implemented, that they be informed by data from systematic surveys designed to target and refine implementation, and that rigorous monitoring is done to evaluate their impact." The WHO FCTC includes specific articles related to each of the interventions mentioned in MPOWER. The purpose of this section is to review the tobacco control programme efforts in Nigeria relative to the findings from the GYTS.

Second Hand Smoke

Article 8 of the WHO FCTC addresses the issue of "Protection from exposure to tobacco smoke." 5 The Article states

Parties recognize that scientific evidence has unequivocally established that exposure to tobacco smoke causes death, disease and disability. Each Party shall adopt and implement...measures, providing for protection from exposure to tobacco smoke in indoor workplaces, public transport, indoor public places and, as appropriate, other public places.⁵

The MPOWER Report summarizes this coverage regarding eight specific public places (i.e. health care facilities, education facilities, university facilities, government facilities, indoor offices, restaurants, pubs and bars, and other indoor workplaces). Nigeria has laws banning smoking in health care facilities, education facilities and Government facilities indoor offices; however, enforcement is very weak and none exists for restaurants and pubs or bars.

GYTS data on exposure to SHS in Nigeria shows in Abuja 39.7%, Cross-River 46.9%, Ibadan 35%, Kano 55.8%, and Lagos 43.1.0% of the students report being exposed in public during the past week while between 14.5% and 31.3% live in homes where others smoke, and between 2.1% and 11.1% of their parents smoke.

Tobacco Advertising, Promotion and Sponsorship

Article 13 of the WHO FCTC addresses the issue of "Tobacco advertising, promotion and sponsorship." The Article states

Parties recognize that a comprehensive ban on advertising, promotion and sponsorship would reduce the consumption of tobacco products. Each Party shall....undertake a comprehensive ban of all tobacco advertising, promotion and sponsorship. This shall include...a comprehensive ban on cross-border advertising, promotion and sponsorship originating from its territory.⁵

Tobacco Advertising Bans

The MPOWER Report summarizes advertising bans including whether the countries have national and international bans on TV, radio, newspaper, billboard, and point of sale advertising. In Nigeria, laws banning advertising are not in place for national TV and radio, local and international magazines and newspapers, and billboards and outdoor advertising except in Cross- River State where such a law came into force in 2002 ⁴. However, enforcement of the laws is very weak. Data from the GYTS showed exposure to pro-tobacco advertising on billboards and in magazines was high in Nigeria (ranging from 38.4% in Ibadan to 52.7% in Kano for billboards and from 39.7% in Ibadan to 53.7% in Cross- River State for newspapers and magazines).

Promotion

The MPOWER Report includes information on whether the countries have laws banning promotion of free distribution of tobacco products and promotion of non-tobacco products. The GYTS includes an indicator on whether the students have an item with a tobacco company logo on it (e.g., a shirt, cap, back-pack, etc). In Nigeria, promotional bans are not in place for the appearance of tobacco products in TV or movies, and sponsored events hence enforcement is absent. Since Nigeria has no promotional ban on tobacco, some of the students ranging from 14.2% in Lagos to 26.8% in Kano reported having a promotional item and similarly some students ranging from 5.4% in Ibadan to 14.2% in Cross- River State had been offered free cigarettes by a tobacco company representative.

Cessation

Article 14 of the WHO FCTC addresses the issue of "Demand reduction measures concerning tobacco dependence and cessation." The Article states

Each Party shall endeavour to design and implement effective programmes aimed at promoting the cessation of tobacco use, in such locations as educational institutions, health care facilities, workplaces and sporting environments.⁵

The MPOWER Report states, "Countries must establish programmes providing low-cost, effective treatment for tobacco users who want to escape their addiction." Nigeria does have Nicotine Replacement Therapy (NRT) and Bupropion available in pharmacies. The GYTS asks students who currently smoke cigarettes if they would like to stop smoking now. Results from the present GYTS is unable to comment on the current smokers who desire to stop smoking as the number of respondents were few (< 35) for all the five locations. The problem facing Nigeria, as with other countries, is summarized in the report, *Youth Tobacco Cessation: A Guide for Making Informed Decisions,* "...a

literature review of 66 published studies on youth tobacco-use cessation and reduction...concluded that most of the studies lacked the quality and consistency of findings to allow conclusive recommendations about effective practices..."⁸ More research is needed to evaluate and identify effective youth tobacco cessation programmes.

School

Article 12 of the WHO FCTC addresses the issue of "Education, communication, training and public awareness." The Article states

Each Party shall promote and strengthen public awareness of tobacco control issues, using all available communication tools, as appropriate....each Party shall....promote broad access to effective and comprehensive educational and public awareness programmes on the health risks including the addictive characteristics of tobacco consumption and exposure to tobacco smoke.⁵

Results from the GYTS show between 44% and 59% of the students reported that they had been taught in classes the past school year about the dangers of tobacco. Studies of the effectiveness of school-based smoking prevention programmes have been mixed. Studies have found some programmes result in short-term decreases; but other studies have looked at long-term programme results and found no effective programme. WHO recognizes school and community tobacco control programme efforts are important but they are most likely to be successful after a favourable policy environment has been created, including tax and price policies, 100% smoke-free public places and indoor workplaces, and a comprehensive ban on all tobacco advertising, promotion, and sponsorship. 10

Conclusion

Although Nigeria ratified the WHO FCTC on 20th October 2005, the findings in this report suggest that the tobacco control programme effort needs to focus on implementation and enforcement of policies already in place as well as expansion into additional programme efforts. The tobacco control effort needs to be comprehensive, broad-based, focused on boys and girls, and tobacco products other than cigarettes. If Nigeria does not address these issues soon, future morbidity and mortality attributed to tobacco will increase. The WHO FCTC provides useful frameworks for implementing such a comprehensive approach. The synergy between countries passing tobacco control laws, regulations or decrees and ratifying the WHO FCTC and in conducting initial and repeat GYTS offers countries a unique opportunity to develop, implement and evaluate comprehensive tobacco control policies that can be most helpful to each country.

HIGHLIGHTS GYTS NIGERIA

FACT SHEET Highlights: Abuja, Cross River, Ibadan, Kano and Lagos

Global Youth Tobacco Use Prevalence

- About 700 million children, almost half of the world's children- breathe air polluted by tobacco smoke, particularly at home. (WHO, 1999)
- On 4, February 2008, World Cancer Day message directed to parents stated: "Second Hand Smoke is a health hazard for you and your family. There is no safe level of exposure to secondhand smoke. Give your child a smoke free childhood." (UICC.2008)
- Overall low proportion of students currently smoked cigarettes in Nigeria. The rate was highest in Kano (6.2%) and lowest in Lagos (2.6%). The likelihood of smoking is more among males than females in Kano and not in other centres.
- Current use of any tobacco products was surprisingly high. Cross River had the highest rate (26.1%) and Lagos the lowest rate (14.6%). There was no significant difference between boys and girls in any centre.
- Among students who had never smoked cigarettes, 16.2% in Lagos and only 3.6% in Ibadan
 indicated they were susceptible to initiate smoking during the next year. No difference in
 susceptibility was reported between boys and girls in all the sites.

Determinants of Tobacco Use

Second hand Smoke Exposure

- Exposure to second-hand smoke is a problem in all centres. Rate of exposure at home ranges from 14.5% in Ibadan to 31.3% in Cross River State. While exposure in public places is highest in Kano (55.5%) and lowest in Ibadan (35%).
- Majority of the students in Kano, Cross River, and Ibadan about (7 in 10) favour the ban on smoking
 in public places. Fewer students in Lagos about 1 in 2 and Abuja, over 1 in 2 favour the ban. On the
 whole, 50% of the Nigerian youth favour the ban on smoking in public places.

In all centres there was considerable knowledge of the dangers of tobacco use. The highest rate of

knowledge that smoking from others is harmful was in Ibadan (67.8%) and lowest was in Cross

River (38.2%).

Indirect Pro-Tobacco Advertising

Over all, tobacco advertisement is quite rampant in Nigeria including indirect methods. 26.8% of

students in Kano owned objects with a cigarette brand logo on it. The males were more likely

(41.3%) than the females (14.2%) to have the objects. About 14.2% of students in Cross River

State had been offered free cigarette by a tobacco company representative compared to 5.4%

in Ibadan which had the least cigarette offers.

Youth Anti-Tobacco Awareness

More than half of the students in Ibadan, Abuja and Cross River reported having been taught in

the school about the dangers of tobacco during the preceding school year.

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UICC World Cancer Campaign 2008 -2009, World Cancer Day , 4 February 2008

Campaign Statement

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NIGERIA.

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November 10, 2008

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Recommendations

- 1. Nigeria ratified the FCTC since 2005 hence there is an urgent need to domesticate it by 2010.
- Tobacco control strategies should be developed to address the use of tobacco products other than cigarettes (e.g. hand-rolled, snuff, other local products)
- Implementation of a comprehensive law by 2012 ensuring complete smoke-free environments for all citizens, including, bans on smoking in – all health care facilities, educational facilities, government facilities, restaurants, pubs and bars, and other indoor workplaces.
- 4. Include strong enforcement measures for the comprehensive smoke-free law.
- Implement a comprehensive law by 2010 banning all pro-tobacco advertising and promotion
- Include strong enforcement measures for the comprehensive law banning pro-tobacco advertising and promotion.
- 7. Develop an effective youth smoking cessation programme
- 8. Work with the Federal and State Ministry of Education to include the most effective school anti-tobacco programmes available.

ACKNOWLEDGEMENT

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Thank you all and God bless.

Professor Ima-Obong A. Ekanem

Research Coordinator, GYTS-Nigeria

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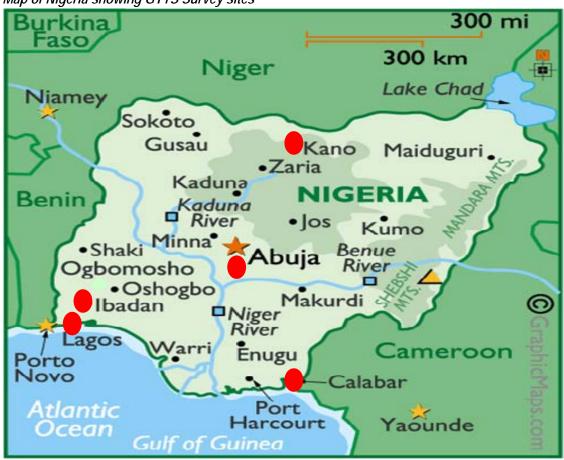
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APPENDICES

Appendix 1.0

Map of Nigeria showing GYTS Survey sites



KEY

Selected Centres for GYTS Nigeria, 2008

Appendix 2.0

LIST OF GYTS SURVEY ADMINISTRATORS

S/N	NAME	ADDRESS	E-mail ADDRESS
	RESEARCH COORDINATOR		
1.	Prof. Ima-Obong A. Ekanem	Dept. of Pathology, College of	ekanemi01@yahoo.com
		Medical Sciences University	
		of Calabar, CRS	
	ZONAL GYTS FACILITATORS		
1	Dr. Paul G. Jibrin (Abuja)	Department of Pathology,	pg_jibrin@yahoo.com
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2.	Mr. Stanley Ebem (Cross River State)	C/O Calabar Cancer Registry,	stanebemic@yahoo.com
		Dept. Of Pathology UCTH, Calabar	
3.	Dr. O. O. Sekoni (Rep) Prof. M. C.	Department of Community Medicine	t1toyin@yahoo.com
	Asuzu (Ibadan)	UCH – Ibadan, Oyo State	

4.	Dr. S. A. Malami (Kano)	Department of Pathology	malamisa@yahoo.co.uk
		Aminu Kano Teaching Hospital, Kano	
5.	Dr. C. C. Anunobi (Lagos)	Dept. of Morbid Anatomy Lagos	dozieanunobi@yahoo.com
		University Teaching Hospital, Idi-	
		Araba, Lagos	

Appendix 3.0: Photograph of GYTS survey Adminstrators with Resource persons and the Chief Host, Dr A. Z. Ajuwon Chief Medical Director of the National Hospital at the Training of Trainers' Workshop in Abuja, April, 2008.

Sitting Left to Right: Dr. A.Z. Ajuwon, OON, Chief Medical Director National Hospital, Abuja, Prof. Ima-Obong Ekanem, GYTS Research Coordinator, Prof G.C. Onyemelukwe, Past Chairman Non-Communicable Diseases National Expert Committee, Dr. Patience Ameh, Chairman



Medical Advisory Committee, National Hospital, Abuja.

Standing from Left to Right: Dr. Henry Ewunonu, Resource Person, Dr. Paul Jibrin, Abuja Zonal GYTS facilitator, Dr. Toyin Sekoni, Representative of Ibadan Zonal Facilitator, Rabiah M.B. Labaran, National Hospital information officer, Dr. Charles Anunobi, Lagos Zonal GYTS Facilitator, Mr. Stanley Ebem, Cross River State Zonal GYTS facilitator and Dr. Sani Malami, Kano Zonal GYTS Facilitator.

Appendix 4.0: ACRONYMS

ATCAAnti Tobacco Control Alliance

CDCCenters for Disease Control and

Prevention

CRS......Cross River State

ERA.....Environmental Rights Action

FCT.....Federal Capital Territory

FCTC.....Framework Convention on Tobacco

Control

GA.....Georgia

GYTS......Global Youth Tobacco Survey

JSS.....Junior Secondary School

MOH.....Ministry of Health

MPOWER

- Monitor tobacco use
- Protect people from tobacco smoke
- Offer help to quit tobacco use
- Warn about the dangers of tobacco
- Enforce bans on tobacco advertising and promotion
- Raise taxes on tobacco products

NGO	Non Governmental Organization
NRT	Nicotine Replacement Therapy
OSH	Office of Smoking and Health
RC	Research Coordinator
SHS	Second Hand Tobacco Smoke
SSS	Senior Secondary school

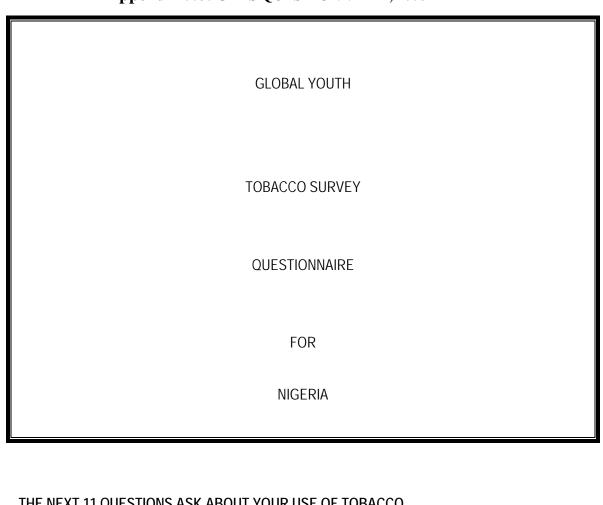
TFI.....Tobacco Free Initiative

UNICEFUnited Nations Children's Fund

WHO.....World Health Organization

WNTDWorld No Tobacco Day

Appendix 5.0: GYTS QUESTIONNAIRE, 2008



THE NEXT 11 QUESTIONS ASK ABOUT YOUR USE OF TOBACCO

- Have you ever tried or experimented with cigarettes smoking, even one or two puffs? 1.
 - A. Yes
 - В. No
- How old were you when you first tried a cigarette? 2.
 - I have never smoked cigarettes. A.
 - В. 7 years old or younger.
 - C. 8 or 9 years old.
 - D. 10 or 11 years old.
 - E. 12 or 13 years old.
 - F. 14 or 15 years old.
 - G. 16 years old.

- 3. During the past 30 days (one month), on how many days did you smoke cigarettes? A. 0 days B. 1 or 2 days. C. 3 to 5 days. D. 6 to 9 days. E. 10 to 19 days. F. 20 to 29 days. G. All 30 days. 4. During the past 30 days (one month), on the days you smoked how many cigarettes did you usually smoke? A. I did not smoke cigarettes per day. В. Less than 1 cigarette per day. C. 1 cigarette per day. D. 2 to 5 cigarettes per day. E. 6 to 10 cigarettes per day. F. 11 to 20 cigarettes per day. G. More than 20 cigarettes per day. 5. During the past 30 days (one month), how did you usually get your cigarettes? (SELECT ONLY ONE RESPONSE) Α. I did not smoke cigarettes during the past 30 days (one month) B. I bought them in a store, shop or from a street vendor. C. I bought them from a vending machine. D. I gave someone else money to buy them for me. E. I borrowed them from someone else. F. I stole them. G. An older person gave them to me. Н. I got them some other way. 6. During the past 30 days (one month), what brand of cigarette did you smoke? (SELECT ONLY
 - A. I did not smoke cigarettes during the past 30 days.
 - B. No usual brand.

ONE RESPONSE)

	C.	Three Rings.
	D.	Sweet Menthol.
	E.	Gold Leaf.
	F.	High Society.
	G.	Link.
	H.	Other.
7.	During	the past 30 days (one month), did anyone ever refuse to sell you cigarettes because of
	your a	ge?
	A.	I did not try to buy cigarettes during the past 30 days (one month).
	B.	Yes, someone refused to sell me cigarettes because of my age.
	C.	No, my age did not keep me from buying cigarettes.
8.	Durina	the past 30 days (one month), have you used any form of tobacco products other than
0.	_	ttes (e.g. cigars, water pipe, pipe, little cigars, and cigarillos)?
	A.	Yes.
	В.	No.
9.	Durina	the past 30 days (one month), did you use any form of smokeless tobacco products e.g.
,,	_	ng tobacco, smitts dig)?
	A.	Yes
	В.	No
10	\\/h o ro	do you you ally amaka (CELECT ONLY ONE DECDONCE)
10.		do you usually smoke (SELECT ONLY ONE RESPONSE)
	A.	I have never smoked cigarettes.
	B.	At nome.
	C.	At school.
	D.	At work.
	E.	At friend's houses.
	F.	At social events.
	G.	In public places (e.g. parks, shopping centres, street corners)
	H.	Others.

Do you ever have a cigarette or feel like having a cigarette first thing in the morning?
A. I have never smoked cigarettes.
B. I no longer smoke cigarettes.
C. No, I don't have or feel like having a cigarette first thing in the morning.
D. Yes, I sometimes have or feel like having a cigarette first thing in the morning.
E. Yes, I always have or feel like have a cigarette first thing in the morning.

THE NEXT 17 QUESTIONS ASK ABOUT YOUR KNOWLEDGE AND ATTITUDES TOWARD TOBACCO

12.	Do yo	Do your parents smoke?				
	A.	None.				
	B.	Both.				
	C.	Father only.				
	D.	Mother only.				
	E.	I don't know.				
13.	If one	e of your best friends offered you a cigarette, would you smoke it?				
	A.	Definitely not				
	B.	Probably not.				
	C.	Probably yes.				
	D.	Certainly yes.				
14.	Has a	anyone in your family discussed the harmful effects of smoking with you?				
	A.	Yes.				
	B.	No.				
15.	At an	y time during the next 12 months do you think you will smoke cigarettes?				
	A.	Definitely not.				
	B.	Probably not.				
	C.	Probably yes.				
	D.	Definitely yes.				

16.	Do y	ou think you will be smoking cigarettes 5 years from now?
	A.	Definitely not.
	B.	Probably not.
	C.	Probably yes.
	D.	Definitely yes.
17.	Once	e someone has started smoking, do you think it is difficult to quit?
	A.	Definitely not.
	B.	Probably not.
	C.	Probably yes.
	D.	Definitely yes.
18.	Do y	ou think boys who smoke cigarettes have more or less friends?
	A.	More friends.
	B.	Fewer friends.
	C.	No difference from non-smokers.
19.	Do y	ou think girls who smoke cigarettes have more or less friends?
	A.	More friends.
	B.	Fewer friends.
	C.	No difference from non-smokers.
20.	Does	s smoking cigarettes help people feel more or less comfortable at celebrations, parties, or in
	other	social gatherings?
	A.	More comfortable.
	B.	Less comfortable.
	C.	No difference from non-smokers.
21.	Do y	ou think smoking cigarettes makes boys look more or less attractive?
	A.	More attractive.
	B.	Less attractive.
	C.	No difference from non-smokers.

	A.	More attractive.			
	B.	Less attractive.			
	C.	No difference from non-smokers.			
23.	Do y	ou think that smoking cigarettes makes you gain or lose weight?			
	A.	Gain weight.			
	B.	Loose weight.			
	C.	No difference from non-smokers.			
24.	Do y	Do you think cigarette smoking is harmful to your health?			
	A.	Definitely not.			
	B.	Probably not.			
	C.	Probably yes.			
	D.	Definitely yes.			
25.	Do a	Do any of your closest friends smoke cigarettes?			
	A.	None of them.			
	B.	Some of them.			
	C.	Most of them.			
	D.	All of them.			
26.	Whe	When you see a man smoking what do you think of him? (SELECT ONLY ONE RESPONSE)			
	A.	Lacks confidence.			
	B.	Stupid.			
	C.	Loser.			
	D.	Successful.			
	E.	Intelligent.			
	F.	Macho/Tough guy.			
27.	When you see a woman smoking what do you think of her? (SELECT ONE RESPONSE)				
	A.	Lacks confidence.			
	B.	Stupid.			
	C.	Loser.			

Do you think smoking makes girls look more or less attractive?

22.

	D.	Successful.			
	E.	Intelligent			
	F.	Sophisticated			
28.	Do yo	ou think it is safe to smoke for only a year or two as long as you quit after that?			
	A.	Definitely not.			
	B.	Probably not			
	C.	Probably yes			
	D.	Definitely yes			
TI	HE NEX	T 5 QUESTIONS ASK ABOUT YOUR EXPOSURE TO OTHER PEOPLE'S SMOKING			
29.	Do yo	ou think that the smoke from other people's cigarettes is harmful to you?			
	A.	Definitely not.			
	B.	Probably not.			
	C.	Probably yes.			
	D.	Definitely yes.			
30.	During the last 7 days, how many days have people smoked in your home, in your presence?				
	A.	0			
	B.	1 to 2			
	C.	3 to 4			
	D.	5 to 6			
	E.	7			
31.	During the past 7 days, on how many days have people smoked in your presence, in place				
	other than in your home?				
		0			
	A.	U			
	А. В.	1 to 2			
	B.	1 to 2			

	trains and airplanes, in schools, hospitals, on play grounds, airport waiting halls, sports sta				
	and in clubs).				
	A.	Yes			
	B.	No			
33.	If someone asks permission to smoke around you, do you let them?				
	A.	Yes			
	B.	No			
TH	IE NEXT	6 QUESTIONS ASK ABOUT YOUR ATTITUDES TOWARD STOPPING SMOKING			
34.	Do you want to stop smoking now?				
	A.	I have never smoked cigarettes.			
	B.	I do not smoke now.			
	C.	Yes			
	D.	No			
35.	During	the past year, have you ever tried to stop smoking cigarettes?			
	A.	I have never smoked cigarettes.			
	B.	I have not smoked during the past year.			
	C.	Yes.			
	D.	No.			
36.	How long ago did you stop smoking?				
	A.	I have never smoked cigarettes.			
	B.	I have not stopped smoking.			
	C.	1-3 months.			
	D.	4 –11 months.			
	E.	One year.			
	F.	2 years.			
	G.	3 years or longer.			

Are you in favour of banning smoking in public places (such as in restaurants, in buses, taxis,

32.

- What was the main reason you decided to stop smoking? (SELECT ONE RESPONSE ONLY)
 A. I have never smoked cigarettes.
 B. I have not stopped smoking.
 C. To improve my health.
 - D. To save money.
 - E. Because my family does not like it.
 - F. Because my friends don't like it.
 - G. Other.
- 38. Do you think you would be able to stop smoking if you wanted to?
 - A. I have never smoked cigarettes.
 - B. I have already stopped smoking.
 - C. Yes.
 - D. No.
- 39. Have you ever received help or advice to help you stop smoking? (SELECT ONLY ONE RESPONSE)
 - A. I have never smoked cigarettes.
 - B. Yes, from a programme or professional.
 - C. Yes, from a friend.
 - D. Yes, from a family member.
 - E. Yes, from either programme or professionals and from friends or family members.
 - F. No.

THE NEXT 9 QUESTIONS ASK ABOUT YOUR KNOWLEDGE OR MEDIA MESSAGES ABOUT SMOKING

- 40. During the past 30 days (one month), how many anti-smoking media messages (e.g. television, radio, billboards, posters, newspapers, magazines, movies) have you seen or heard?
 - A. A lot.
 - B. A few.
 - C. None.

41.	When you go to sports events, fairs, concerts, community events, or social gatherings, how often do you see anti-smoking messages?				
	Α.	I never go to sports events, fairs, concerts, community events, or social gatherings.			
	B.	A lot.			
	C.	Sometimes.			
	D.	Never.			
42.	When you watch TV, videos, or movies how often do you see actors smoking?				
	A.	I never watch TV, videos or movies.			
	B.	A lot.			
	C.	Sometimes.			
	D.	Never			
43.	Do you have something (T-shirt, hats, pen, backpack, carrier or shopping bag etc) with a				
	cigaret	te brand logo on it)?			
	A.	Yes.			
	B.	No.			
44.	During	the past 30 days (one month), when you watched sports events or other programmes on			
	TV how often did you see cigarette brand names?				
	A.	I never watch TV.			
	B.	A lot.			
	C.	Sometimes.			
	D.	Never.			
45.	During the past 30 days (one month), how many advertisements for cigarettes have you seen on billboards?				
	A.	A lot			
	B.	A few.			
	C.	None.			
46.	During	the past 30 days (one month), how many advertisements or programmes for cigarettes			
	have you seen in newspapers or magazines?				
	A.	A lot			

	B.	A few			
	C.	None			
47.	When	you go to sports events, musical concerts, beauty pageants, community events			
	cultura	Il festivals, how often do you see advertisement for cigarettes?			
	A.	I never attend sports, events, musical concerts, beauty pageants, community events			
		cultural festival.			
	B.	A lot.			
	C.	Sometimes.			
	D.	Never.			
48.	Has a cigarette sales agent ever offered you a free cigarette?				
	A.	Yes.			
	B.	No.			
THI	E NEX	T 4 QUESTIONS ASK ABOUT WHAT YOU WERE TAUGHT ABOUT SMOKING IN			
THI	E NEX	T 4 QUESTIONS ASK ABOUT WHAT YOU WERE TAUGHT ABOUT SMOKING IN SCHOOL			
49.		SCHOOL			
49.	During	SCHOOL this school year, were you taught in any of your classes the dangers or smoking?			
49.	During A.	SCHOOL this school year, were you taught in any of your classes the dangers or smoking? Yes.			
49. 50.	During A. B. C. During	SCHOOL this school year, were you taught in any of your classes the dangers or smoking? Yes. No. Not sure. this school year, did you discuss in any of your classes the reason why people your a			
49. 50.	During A. B. C. During smoke	SCHOOL this school year, were you taught in any of your classes the dangers or smoking? Yes. No. Not sure. this school year, did you discuss in any of your classes the reason why people your and the school year.			
49.50.	During A. B. C. During smoke A.	SCHOOL this school year, were you taught in any of your classes the dangers or smoking? Yes. No. Not sure. this school year, did you discuss in any of your classes the reason why people your actions? Yes.			
49.50.	During A. B. C. During smoke	SCHOOL this school year, were you taught in any of your classes the dangers or smoking? Yes. No. Not sure. this school year, did you discuss in any of your classes the reason why people your and the school year.			
49. 50.	During A. B. C. During smoke A. B.	this school year, were you taught in any of your classes the dangers or smoking? Yes. No. Not sure. this school year, did you discuss in any of your classes the reason why people your and the school year. Yes. Yes. No. Not sure.			
49.50.51.	During A. B. C. During smoke A. B. C.	this school year, were you taught in any of your classes the dangers or smoking? Yes. No. Not sure. this school year, did you discuss in any of your classes the reason why people your and the school year. Yes. No. Not sure. Ithis school year, were you taught in any of your classes about the effects of smoking the school year, were you taught in any of your classes about the effects of smoking the school year.			
49.50.51.	During A. B. C. During smoke A. B. C.	SCHOOL this school year, were you taught in any of your classes the dangers or smoking? Yes. No. Not sure. this school year, did you discuss in any of your classes the reason why people your active. Yes. Yes. No.			

C.

Not sure.

F-0					
52.	How long ago did you last discuss smoking and health as part of a lesson?				
	A.	Never.			
	B.	This term.			
	C.	Last tem			
	D.	2 terms ago			
	E.	3 terms ago			
	F.	More than a year ago.			
THE I	NEXT 3	QUESTIONS ASK ABOUT WHAT YOU LEARNT FROM YOUR COMMUNITY ABOUT			
		SMOKING			
53.	During	the nast year, have you heard from youth groups, discouraging young people your age			
55.	During the past year, have you heard from youth groups, discouraging young people your age from smoking?				
	Α.	Yes.			
	В.	No.			
	Б.	IVO.			
54.	During	the past year, did any health professional explain to you why smoking is dangerous to			
	your health?				
	A.	Yes.			
	B.	No.			
55.	During the past year, did any religious organization discourage young people your age from				
	smoking?				
	Α.	Yes.			
	В.	No.			
	D.	NO.			

THE LAST 3 QUESTIONS ASK FOR SOME BACKGROUND INFORMATION ABOUT YOURSELF

- 56. How old are you?
 - A. 11 years old or younger.
 - B. 13 years old.
 - C. 13 years old.
 - D. 14 years old.
 - E. 15 years old.
 - F. 16 years old.
 - G. 17 years old or older.
- 57. What is your sex?
 - A. Male
 - B. Female
- 58. In what form are you? (SELECT ONLY ONE RESPONSE)
 - A. Junior Secondary 2
 - B. Junior Secondary 3.
 - C. Senior Secondary 1

THANK YOU FOR PARTICIPATING IN THIS SURVEY



THE SMOKER'S BODY

Chronic diseases

- **✓** Stroke
- ✓ Coronary heart disease
- **✓** Aortic aneurysm
- ✓ Atherosclerotic peripheral vascular disease
- ✓ Chronic obstructive pulmonary disease (COPD)



Cancers

- **√**Oral
- **✓** Pharynx
- **✓** Larynx
- **✓** Esophagus
- **√**Lung
- **✓** Kidney and

Ureter

✓ Bladder

BE WARNED

TOBACCO KILLS!!!