

ASSESSING COMPLIANCE TO SMOKE - FREE LEGISLATION IN PUBLIC PLACES OF UDUPI DISTRICT, KARNATAKA: A CROSS SECTIONAL STUDY

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ABSTRACT

Introduction

Tobacco is the major cause of preventable premature deaths in world. To prevent these deaths India has enacted a comprehensive tobacco control law known as cigarettes and other tobacco products act (COTPA) in 2003. But still its Enforcement and compliance is a matter of concern. Survey to study the Compliance to the act is an effective tool to measure the status of implementation of the law at various public places.

Aims

The aim of this study is to assess compliance to smoke free legislation in public places of udupi district, Karnataka.

Methodology

A cross sectional study was conducted in the month of January 2014 in udupi gram panchayat region of udupi district. The public places including hotels/restaurants/bars/shopping malls, healthcare facilities, government offices, transit stations and educational institutions were surveyed. The tool used for the study was adapted from the guide on 'Assessing compliance with smoke-free law' which was developed jointly by the Campaign for Tobacco Free Kids, Johns Hopkins Bloomberg School of Public Health and International Union against Tuberculosis and Lung Disease.

Results

No active smoking was observed in 81.5% of the public places. But display of 'No Smoking' signage as per COTPA in public places was observed only in 7.5% of the public places. Health care facilities and educational institutions has maximum compliance with the smoke-free law while transit sites and point of sale places showed the least compliance.

Conclusions

These findings suggest high level of compliance regarding no active smoking in public places but still a high level of non-compliance to the provisions of signage under COTPA was seen, which calls for a sensitization workshop and advocacy for all the stakeholders.

KEYWORDS: Compliance, COPTA, Tobacco, Smoking, Signage

I. INTRODUCTION

Tobacco use in every form continues to be the leading global cause of preventable death. The mortality due to tobacco use is nearly 6 million and each year it also causes hundreds of billions of dollars of economic damage worldwide.

If trend continue like this, by 2030 tobacco mortality rate would increase up to 8 million people worldwide each year, with 80% of these premature deaths among people living in low- and middle-income countries. 28.2% people in Karnataka are tobacco users with 39.8% males and 16.3% females consuming tobacco in one form or another according to the Global Adult Tobacco Survey (GATS) for Karnataka (2009-10). In the report it was estimated that Karnataka has over 1.5 crore tobacco users, which makes it highest tobacco consuming state in the country. The report also states that nearly one in every three adults and one in every two male adults in Karnataka either smokes or chews tobacco. The report further suggests that at least 44.3% and 37.2% are exposed to second hand smoke at private and public places respectively. While the survey suggests 92% of tobacco users know about the ill-effects of consumption only 41% have ever considered quitting.

In 2008, the central government's Ministry of Health and Family Welfare proposed the Prohibition of Smoking in Public Places Rules to strengthen the existing COTPA legislation. The Rules expand the smoking ban in COTPA's Section 4 to include public spaces that were excluded in the original legislation; and the Rules define terms such as smoking and non-smoking areas. The Rules also provides instructions related to the enforcement of the legislation, which includes details regarding the display of signage in the public places and also the identification of focal points for implementing the law, such as airport managers, school principals, and others.

The Cigarettes and Other Tobacco Products Act (COTPA), 2003 includes three main tobacco control provisions, that includes:

- A prohibition on smoking in indoor public places.
- A prohibition on advertisement of tobacco products at all venues, with limited exceptions on the tobacco product itself and at the entrance or inside of shops where such products are sold (i.e., points-of-sale).
- A prohibition on tobacco sales within 100 yards of schools to stop children below 18 years of age from accessing tobacco products.

The present study was planned to assess the status of compliance with anti-smoking provisions under section-4 of COTPA in public places of udupi gram panchayat region of Karnataka.

II. METHODOLOGY

A cross-sectional study was conducted in the public places of udupi gram panchayat wards of udupi district, Karnataka during the month of January 2014. All wards of udupi were line listed ($N = 34$). Out of these 34 wards, 10 wards were randomly selected for the study. In this study, "public place" was defined according to COTPA 2003 as "places which have public access, whether as of right or not and includes railway waiting rooms, hospital buildings, restaurants, court buildings, public offices, cinema halls, amusement centres, workplaces, shopping malls, libraries, educational institutions and public conveyances." [1] public places which are surveyed in this study includes hotels/restaurants/bars, healthcare facilities, government offices, transit stations, point of sale and educational institutions.

An observational checklist was made which was based on a guide developed jointly by John Hopkins School of Public Health, Tobacco Free Kids and International Union Against Tuberculosis and Lung diseases. [2] The variables which were used to assess compliance in this study includes active smoking in the public place, display of signages, evidence of recent smoking like butts or bidi ends and the presence of smoking aids.

The office buildings were visited during the office hours, hospital buildings were visited during the busiest hours (10-12 noon) whereas in the evening hours the other public places were visited. 20 min to 30 min were spent on an average at each location depending on the area. Information regarding the location was recorded in the observation sheet. The data collected was entered into SPSS and analyzed.

III. RESULTS

Despite showing low coverage of signage in gram panchayats of Udupi, these areas offered high levels of protection. No active smoking was observed in 81.5% of the public places. But display of 'No Smoking' signage as per COTPA in public places was observed only in 7.5% of the public places. Among all categories, educational institutions and point of sale had the least signage display, while health care facilities had the highest, but both of these had least active smoking [Table 2]. Due to these results, relationship between absence of active smoking and display of signage cannot be established. Public places like eateries and accommodation facilities having low signage display but still they show very low incidence of active smoking.

IV. DISCUSSIONS

The smoke-free law requires compliance with the provisions under section-4 of COTPA and the presence/absence of these were used as criteria for determining the level of compliance. Five parameters were studied similar to the present survey, which included presence of active smoking, evidence of recent smoking like odour from cigarette or bidi, display of signages, presence of smoking aids like lighters, match box etc and presence of cigarette butts and bidi ends. Overall, at the Udupi level, there was more than 80.5% compliance on at least three of the five indicators.

In a compliance survey done in SAS Nagar Mohali, of Punjab state, the overall compliance rate was found to be as high as 92.3% [6]. In another compliance survey in Himachal Pradesh, overall compliance was reported as 80%. Reddy *et al.* however, found poor compliance (36%) in terms of active smoking similar to the present survey. [7] Display of 'No Smoking' signage as per COTPA in public places was observed only in 7.5% of the public places while in a study it was found to be 20% while in the study done in Himachal Pradesh it was 42.8%. When comparing overall compliance, our results are similar to those reported in an earlier compliance study from Mohali district and Himachal Pradesh in India.

V. CONCLUSIONS

The results of this study suggest that instead of less display of signages, compliance to smoke-free legislation is high. This can be due to socio-cultural factors and effective implementation of the law. The study also identified the major areas that require attention from enforcement agencies and policy makers for the better implementation of the act. Awareness campaigns should be conducted in the communities, which should be followed by enforcement drives. Periodical compliance surveys using simple methods should be carried out for the effective monitoring of anti-smoking laws. These surveys can also help in revising strategies for the purpose of further strengthening of implementation of smoke-free legislation in Udupi as well as perhaps in other parts of India.

Table 1: Various Parameters Showing Compliance in Various Gram Panchayat Regions

Parameters (No. and Percentage)	Ambalpadi (n = 20)	Ajarkadi (n = 20)	Malpe Central (n = 20)	Sarlabettu (n = 20)	Parkala (n = 20)	Ishwar Nagar (n = 20)	Manipal (n = 20)	Indrali (n = 20)	Kunjibettu (n = 20)	Bannaje (n = 20)
Public Places displaying signage	2 (10)	2 (10)	5 (25)	1 (5)	19 (95)	19 (95)	1 (5)	1 (5)	0	1 (5)

Table 1: Contd.,

Public places observing no-active smoking	19 (95)	15 (75)	16 (80)	16 (80)	18 (90)	17(85)	15 (75)	16 (80)	17 (85)	17 (85)
Public places with no-smoking aids	16 (80)	13 (65)	18 (90)	12 (60)	15 (75)	16(80)	17 (85)	14 (70)	15 (75)	16 (80)
Public places with absence of odour from cigarette or bidi	19 (95)	16 (80)	14 (70)	15 (75)	17 (85)	17(85)	15 (75)	15 (75)	17 (85)	17 (85)
Public places with no cigarettes or bidi butts found	2 (10)	8 (40)	4 (20)	1 (5)	2 (10)	4 (20)	4 (20)	4 (20)	3 (15)	8 (40)

Table 2: Various Parameters Showing Compliance in Different Public Places

Parameters (No. and Percentage)	Educational Institute (n = 22)	Accommodation Facilities (n = 13)	Eatrics (n=37)	Offices (n=25)	Health Care Facilities (n=16)	Public Transport (n=34)	Other Most Frequently Visited Place (n=12)	Point of Sale (n=41)
Public Places displaying signage	0	2 (15.4)	2 (5.4)	4 (16)	3 (18.8)	4 (11.8)	0	0
Public places observing no-active smoking	19 (86.4)	13	31 (83.8)	24 (96)	14 (87.5)	19 (55.9)	10 (83.3)	33 (80.5)
Public places with no-smoking aids	22	11 (84.6)	31 (83.8)	0	16	34	12	41
Public places with absence of odour from cigarette or bidi	21 (95.5)	1 (7.7)	26 (70.3)	0	14 (87.5)	20 (58.8)	10 (83.3)	33 (80.5)
Public places with no cigarettes or bidi butts found	8 (36.4)	4 (30.8)	11 (29.7)	2 (8)	6 (37.5)	0	2 (16.7)	0

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