



Global Adult Tobacco Survey (GATS): Mauritania, 2021 Executive Summary

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This report presents the main results of the first Global Adult Tobacco Survey (GATS) in Mauritania. GATS was conducted in Mauritania from February to March 2021 by the National Agency for Statistics and Demographic and Economic Analysis (ANSADE), under the supervision of the Ministry of Health. Technical assistance for GATS were provided by the World Health Organization (WHO) and the United States Centers for Disease Control and Prevention (CDC), and financial support was provided by the CDC Foundation.

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EXECUTIVE SUMMARY

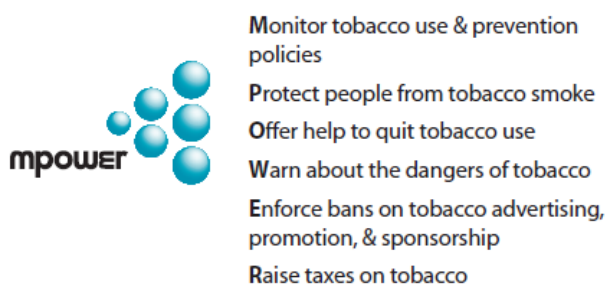
Introduction

The Global Adult Tobacco Survey (GATS) is the global standard surveillance system for systematically monitoring adult tobacco use (smoking and smokeless) and tracking key tobacco control indicators. GATS Mauritania 2021 is a household survey of persons ages 15 years or older residing in Mauritania. GATS is designed to produce nationally representative estimates for tobacco use and other key tobacco control indicators. The survey allows for comparability within and across countries and comparisons over time for countries that repeat it.

GATS Mauritania was conducted by the National Agency for Statistics and Demographic and Economic Analysis (ANSADE) under the coordination of the Ministry of Health. Financial support was provided by the CDC Foundation with a grant from the Bill & Melinda Gates Foundation. Technical assistance was provided by the United States (U.S.) Centers for Disease Control and Prevention (CDC), World Health Organization (WHO), and RTI International. Program support was provided by the CDC Foundation.

GATS results strengthen the capacity of countries to design, implement, and monitor effective tobacco control programs and policies. They will also enable Mauritania to fulfill its obligations under the WHO Framework Convention on Tobacco Control (WHO FCTC), ratified in October 2005, aimed at generating comparable data within the country and across countries. In 2008, the WHO identified six evidence-based tobacco control measures that are most effective in reducing tobacco use and exposure to secondhand smoke (SHS). Known by the acronym MPOWER, they correspond to one or more demand reduction measures contained in the WHO FCTC:

MPOWER Package



Source : MPOWER: A POLICY PACKAGE TO REVERSE THE TOBACCO EPIDEMIC. https://www.afro.who.int/sites/default/files/2017-06/mpower_english.pdf

Methods

GATS Mauritania 2021 used the standard GATS protocol for the questionnaire, sampling, data collection, analysis, and dissemination of the results. GATS Mauritania is the first household-based tobacco survey conducted in Mauritania, and data collection took place from February 25, 2021, to March 24, 2021. The survey data were collected using a hand-held device.

The survey used a multi-stage, geographically clustered sample design to produce nationally representative data. A total of 8,049 households were sampled from 420 primary sampling units, equally allocated from urban and rural areas; one individual was randomly selected from each participating household to complete the survey. There were 7,569 individual interviews completed (3,702 in urban and 3,867 in rural areas), with an overall response rate of 97.0% (household response rate, 98.9%; person-level response rate, 98.1%).

GATS provides information on respondents' background characteristics; tobacco use (smoking and smokeless); tobacco cessation; SHS exposure; economics; media; and knowledge, attitudes and perceptions

towards tobacco use. GATS enhances the capacity for a country to design, implement and evaluate tobacco control programs. It will also help countries fulfill their obligations under the WHO FCTC to generate comparable data within and across countries.

Key Findings

Tobacco Use

In 2021, 10.2% (0.3 million adults) of adults 15 years or older in Mauritania reported current tobacco use (self-reported current use of tobacco products on a daily or less than daily basis) in any form (18.0% of men, and 2.9% of women). Among adults in Mauritania, 8.8% currently smoked tobacco (17.1% among men, and 1.1% among women). Overall, 5.7 of adults smoked manufactured cigarettes (11.2% among men and 0.6% among women). Among adults who smoked manufactured cigarettes daily, the average number of cigarettes smoked per day was 13.6. Among adults aged 20-34 years who ever smoked tobacco daily, smoking was initiated on average at 17.4 years of age (Average age of initiation among men was 17.2 and 19.6 among women).

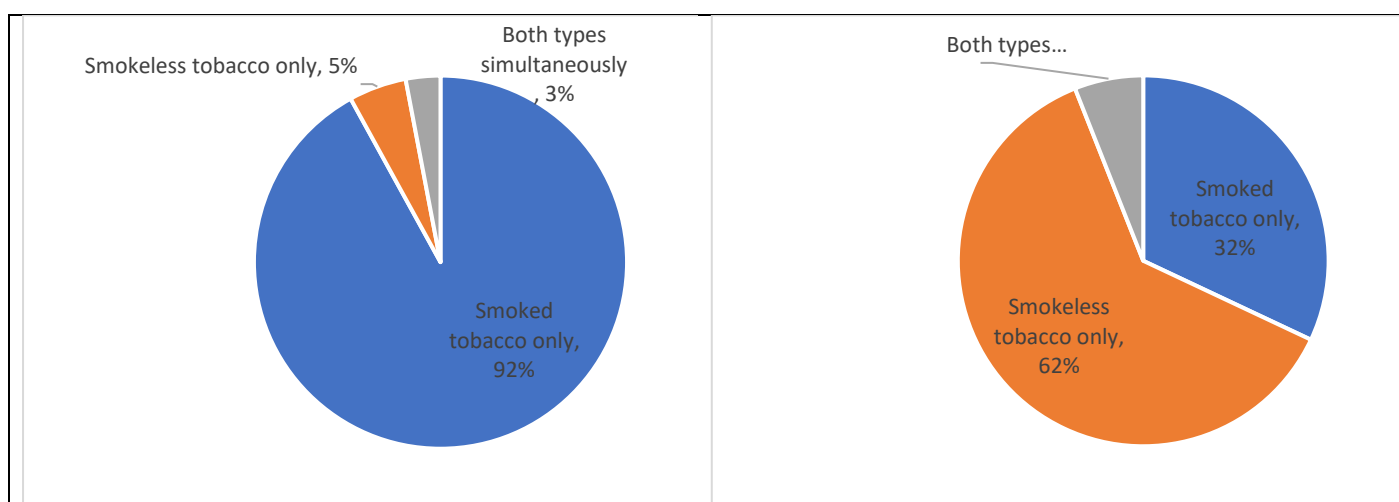


Figure 1 : Tobacco Use by Gender, GATS Mauritania

Cessation

About half (49.1%) of adults who smoked tobacco (adults who currently smoked and those who quit in the past 12 months) had attempted to quit smoking in the last 12 months. By gender, 60.2% of women and 48.4% of men had made a quit attempt in the past 12 months. Over half (51.6%) of those living in urban areas and slightly over one in four (44.3%) of those living in rural areas made a quit attempt in the past 12 months.

Among adults who smoked tobacco and had made a quit attempt in the past 12 months, 62.9% did so on their own without any therapy or assistance, 12.1% attempted to quit using counseling or advice, and 4.0% used pharmacotherapy. Over all 39.7% of adults who smoked tobacco and had visited a health care provider (HCP) in the past 12 months, were advised by a HCP to quit smoking.

Secondhand Smoke

Among adults who worked indoors, 34.7% were exposed to SHS in their workplace in the past 30 days. Overall, 26.1% of adults were exposed to SHS at home.

Overall, 44.7% of adults who visited restaurants in the past 30 days reported being exposed to SHS during the visit. The percentage of adults exposed to SHS was 36.7% in government buildings, 29.0% on public transport, and 16.5% in health care facilities.

Economics

Overall, the average monthly expenditure on cigarettes among adults who smoked tobacco was 3,028 Mauritanian ouguiya (MRU) (7,977 MRU among women and 2,744 MRU among men). The average monthly expenditure on cigarettes among adults who currently smoked was 3,205 MRU in urban areas and 2,450 in rural areas.

The average cost of a pack of manufactured cigarettes was 154 MRU (402 MRU among women and 140 MRU among men). The average cost per pack was 159 MRU in urban areas and 137 MRU in rural areas.

Media

Among all adults, 31.4% noticed anti-tobacco information during the last 30 days in various locations.

Among adults who currently smoked tobacco, and noticed health warnings on cigarette packages during the past 30 days, 13.5% thought about quitting because of the warning labels.

Overall, 18.1% of adults noticed cigarette advertising, sponsorship, or promotion of any tobacco products (smoked and/or smokeless) in the past 12 months.

Knowledge, Attitudes, and Perceptions

Overall, 92.2% of adults believed that smoking can cause serious illness (92.0% among men and 92.4% among women; 89.9% in urban areas and 95.2% in rural areas).

Overall, 60.4% of adults believed using tobacco can lead to a stroke, a heart attack, and lung cancer. There were no significant differences by gender or by place of residence.

Conclusion

The GATS Mauritania 2021 results provide new information on tobacco use (smoked and smokeless) and key indicators related to six MPOWER policies; these indicators will help monitor and evaluate tobacco control policies and programs. The following recommendations stem from the results of the survey:

Monitor tobacco consumption and prevention policies to reduce the prevalence of tobacco use by

- ♣ Seeking and strengthening collaboration among all governmental and non-governmental structures and organizations in addressing the dangers of tobacco
- ♣ Systematically developing a process for monitoring violations of applicable tobacco control laws

Protect the public from exposure to SHS in public places and workplaces by

- ♣ Adopting and implementing 100% smoke-free policies in public places, including all categories of public places and workplaces, to fully protect those who don't smoke from exposure to SHS
- ♣ Strengthening education, training, and communication programs to raise public awareness of the dangers of exposure to SHS

Offer help to those who want to quit smoking and increase the number of adults who have quit smoking by

- ♣ Integrating smoking cessation support and counseling services into front-line health care settings, and regularly strengthening the capacity of caregivers through training
- ♣ Increasing the frequency of media campaigns among adults who smoke tobacco, particularly among young people, to highlight the value of a smoke-free lifestyle

Warn about the dangers of tobacco by

- ♣ Enhancing efforts to warn people about the risks of tobacco use through the implementation of evidence-based methods recommended by FCTC, which include adopting and rotating pictorial warnings that cover more than 50% of the main display areas on cigarette packages
- ♣ Introducing plain packaging or pictorial health warnings to maximize the impact on reducing tobacco use
- ♣ Launching campaigns to continuously raise awareness of the dangers of smoking, through social media and community networks

Enforce the ban on tobacco advertising, promotion, and sponsorship by

- ♣ Applying the law which entirely prohibits all direct and indirect forms of advertising, promotion and sponsorship, including effective and rigorous monitoring of the tobacco industry

Raise tobacco taxes and decrease accessibility to tobacco products by

- ♣ Raising taxes to increase the price of tobacco products, to make them less affordable
- ♣ Strengthening fiscal and tax enforcement agencies to curb the illicit trade of tobacco products
- ♣ Formulating effective strategies to prohibit the sale of cigarettes to minors.

Appendix Table F.1: MPOWER Summary Indicators – Global Adult Tobacco Survey, Mauritania, 2021.

Indicator	Gender			Residence	
	Overall	Male	Female	Urban	Rural
M: Monitor tobacco use and prevention policies					
Current tobacco use	10.2	18.0	2.9	11.8	8.0
Current tobacco smoking	8.8	17.1	1.1	10.3	6.9
Current manufactured cigarette smoking	5.7	11.2	0.6	7.8	3.1
Current smokeless tobacco use	1.7	1.3	2.0	2.0	1.3
Average number of cigarettes smoked per day ¹	13.6	13.6	13.2	14.2	11.8
Average age at daily smoking initiation ²	17.4	17.2	19.6	17.2	17.8
Former ever daily tobacco use	37.2	37.3	34.5	34.9	41.1
P: Protect people from tobacco smoke					
Exposure to secondhand smoke at home at least monthly	26.1	28.0	24.3	23.7	29.5
Exposure to secondhand smoke at work ^{3,5}	34.7	40.4	20.0	38.4	23.4
Exposure to secondhand smoke in public places: ^{4,5}					
Government building/offices	36.7	36.5	36.9	34.6	43.0
Health care facilities	16.5	19.1	14.6	19.2	12.9
Restaurants	44.7	43.4	47.1	40.2	57.3
Public transportation	29.0	31.9	25.9	29.7	27.3
O: Offer help to quit tobacco use					
Made a quit attempt in the past 12 months ⁵	49.1	48.4	60.2	51.6	44.3
Advised to quit smoking by a health care provider ^{5,6}	39.7	38.5	-	42.1	33.6
Attempted to quit smoking using a specific cessation method: ⁵					
Pharmacotherapy	4.0	4.0	4.0	3.9	4.3
Counseling/advice	12.1	11.2	23.0	13.0	10.0
Interest in quitting smoking ⁷	61.4	61.4	60.6	61.8	60.5
W: Warn about the dangers of tobacco					
Belief that tobacco smoking causes serious illness	92.2	92.0	92.4	89.9	95.2
Belief that smoking causes stroke, heart attack, <u>and</u> lung cancer	60.4	59.8	61.0	58.8	62.6
Belief that breathing other peoples' smoke causes serious illness	86.1	86.6	85.7	86.0	86.3
Noticed anti-cigarette smoking information at any location ⁸	31.4	34.0	29.0	35.4	26.2
Thinking of quitting because of health warnings on cigarette packages ^{7,8}	13.5	13.4	15.6	18.8	2.9
E: Enforce bans on tobacco advertising, promotion and sponsorship					
Noticed any tobacco product advertisement, sponsorship or promotion ⁸	18.1	20.0	16.3	21.1	14.1
R: Raise taxes on tobacco					
Average cigarette expenditure per month (<i>Mauritania ouguiya</i>) ⁷	3028.0	2743.5	7976.7	3204.8	2450.0
Average cost of a pack of cigarettes (<i>Mauritania ouguiya</i>) ⁷	154.3	139.9	402.1	159.0	137.0
Last cigarette purchase was from a store ⁷	55.1	55.1	55.1	61.4	34.7

Notes:

¹ Among adults who currently smoked cigarettes daily. Cigarettes include manufactured cigarettes.

² Among respondents 20–34 years of age who reported ever smoking tobacco daily.

³ Among those respondents who work outside of the home who usually work indoors or both indoors and outdoors

⁴ Among adults who visited the place in the last 30 days.

⁵ Among adults who smoked tobacco in the past year (includes adults who currently smoked and those who quit in the past 12 months).

⁶ Among adults who visited a health care provider in past 12 months.

⁷ Among adults who currently smoked tobacco.

⁸ Among adults who currently smoked manufactured cigarettes.

⁹ In the last 30 days.

- Indicates estimate is suppressed due to unweighted sample size less than 25.