



Global Adult Tobacco Survey (GATS)

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), Tobacco Questions for Surveys (TQS), and Tobacco Questions for Surveys of Youth (TQS-Youth).

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 are important public health tobacco use tools. They provide critical information to strengthen programs and policies, and to evaluate their effectiveness. “If you can’t measure it, you can’t manage it.”

What topics are covered in GATS?

The GATS core questionnaire collects information on respondents’ background characteristics, tobacco use (smoking and smokeless tobacco), use of electronic cigarettes, cessation, secondhand smoke exposure, economic situation, mass media exposure, and knowledge, attitudes and perceptions towards tobacco use. There are also additional optional questions covering other topics including the use of heated tobacco products.

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 within countries having multiple rounds of data and across countries that implemented GATS. Thus, the survey results can be used to better understand comparative patterns of tobacco use within and 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 GTSS.

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

GATS assists countries in fulfilling their obligations under the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) to generate comparable data within and across countries. WHO developed MPOWER, a technical package of selected demand reduction measures 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 made available to the public on the GTSS data website 1 year after the initial results have been released by the national government. Data approval by the Data Coordinating Center (DCC) is necessary before release of the public use data set (PUDS).

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 are 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?

To be a part of GATS, 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, the sample review committee will examine the sample design, sample weights, quality assurance measures, and plan for analysis of the data obtained.

How does a country get involved in GATS?

If a country is interested in implementing GATS it should contact the WHO Regional Office 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 are 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. (Note that comparing estimates from TQS to GATS must be done carefully due to methodological differences between the surveys.)