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GLOBAL ADULT TOBACCO SURVEY (GATS)

MAIN REPORT, 2023

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(GATS - GLOBAL ADULT TOBACCO SURVEY)

MAIN REPORT

Senegal, 2023

This report presents the key findings of the second Global Adult Tobacco Survey (GATS) in Senegal. GATS was carried out in Senegal from 01 to 30 December 2023 by the National Agency for Statistics and Demography (ANSD), with the collaboration of the Ministry of Health and Social Action (MSAS), through the National Tobacco Control Program (PNLT). GATS has received technical assistance from the World Health Organization (WHO), the United States Centers for Disease Control and Prevention (CDC) and RTI International, as well as financial support from the CDC Foundation with a grant from the Gates Foundation.

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PREFACE

Smoking is a major global epidemic, causing one death every six seconds. If current trends continue, half of today's smokers will succumb to a tobacco-related disease. Nearly 80% of the more than one billion smokers worldwide live in low- and middle-income countries, where the burden of tobacco-related morbidity and mortality is particularly high.

Tobacco use is the leading preventable cause of noncommunicable diseases such as cancer, cardiovascular disease, and respiratory disease. It is one of the most serious threats to global public health, causing nearly 6 million deaths each year, including more than 600,000 among non-smokers exposed to secondhand smoke.

Tobacco is also a major cause of premature death and preventable disability, primarily affecting the economically active population in both urban and rural areas. Premature deaths related to tobacco deprive families of income, increase health care costs, and hinder economic development, particularly in countries such as Senegal.

As part of the global fight against tobacco use, Senegal ratified the WHO Framework Convention on Tobacco Control in 2005. This commitment was formalized with the adoption of Law No. 2014-14 of March 28, 2014, regulating tobacco manufacturing, packaging, labeling, sale, and use. This legislation is an important step forward and reflects the country's political will to effectively combat the scourge of tobacco use.

In order to strengthen its tobacco control policy, the Ministry of Health and Social Action (MSAS) sought the expertise of the National Agency for Statistics and Demography (ANSD) to conduct the Global Adult Tobacco Survey (GATS) in Senegal. It was funded by the CDC Foundation and received technical support from the World Health Organization (WHO), the Centers for Disease Control and Prevention (CDC), and RTI International.

On behalf of the government, we would like to express our sincere congratulations to all stakeholders for the quality of the work accomplished. We hope that the collaborative momentum generated by the GATS will continue beyond the data collection phase and that all stakeholders will be fully committed to implementing effective tobacco control policies and programs in Senegal.

This report is a valuable resource for stakeholders, particularly civil society organizations involved in tobacco control. It will serve as a reference for the planning, implementation, monitoring, and evaluation of tobacco control policies, thereby helping to save lives.

We invite all users to take full advantage of the results of this survey to strengthen tobacco control efforts in Senegal.

The Minister of Health and Social Action

Dr. Ibrahima SY

ACKNOWLEDGMENTS

The second edition of the Global Adult Tobacco Survey (GATS-II), conducted in 2023, is a major step forward in strengthening epidemiological surveillance of tobacco use in Senegal. Conducted by the National Agency for Statistics and Demography (ANSD), in collaboration with the Ministry of Health and Social Action (MSAS), this national survey provides up-to-date, reliable, and internationally comparable data on tobacco use, quitting smoking, secondhand smoking, the tobacco economy, media, knowledge, attitudes, and perceptions regarding tobacco.

Conducted in accordance with the standardized methodological protocol, GATS-II mobilized significant human, technical, and logistical resources. It is an indispensable tool for monitoring progress in tobacco control and guiding the implementation of evidence-based public policies.

As part of a strong partnership with the Government of Senegal, GATS-II has benefited from the decisive support of several international partners. Technical assistance was provided by the US Centers for Disease Control and Prevention (CDC), the World Health Organization (WHO), and RTI International, an independent, nonprofit research institute dedicated to improving human health. This report is based on work funded by the CDC Foundation with a grant from the Gates Foundation.

I would like to express my deep gratitude to the Ministry of Health and Social Action (MSAS) for the trust placed in ANSD in implementing this strategic operation. I would also like to thank all MSAS officials who provided support at all levels, as well as all technical and financial partners, whose exemplary collaboration was an essential lever for success.

Finally, I would like to congratulate the entire national technical team. Their professionalism, dedication, and sense of public service made it possible to overcome the technical and logistical challenges of this survey and produce a high-quality report that meets international standards.

It is thanks to this collective dynamic, this shared commitment, and this spirit of collaboration that we have been able to make GATS-II a national success.

Finally, I would like to thank in particular the Senegalese population, who actively participated in the data collection, thus strengthening the reliability of the data.

The GATS is a national reference and a strategic lever to strengthen tobacco control policies in Senegal. We invite all stakeholders from the government, civil society, research community, and development partners to take ownership of the results of this survey so that we can work together to build a society that is better informed and protected against the harmful effects of tobacco.

Director-General of the National Agency for Statistics and Demography

Dr. Abdou DIOUF

ACRONYMS AND ABBREVIATIONS

ANSD:	National Agency for Statistics and Demography of Senegal
CVA:	Cerebrovascular accident
FCTC:	WHO Framework Convention on Tobacco Control
CDC:	Centers for Disease Control and Prevention
CRES:	Consortium for Economic and Social Research
DR :	Census District
GATS:	Global Adult Tobacco Survey
GSS:	General Survey System
GYTS:	Global Youth Tobacco Survey
MPOWER:	Monitor, Protect, Offer, Warn, Enforce, Raise
MSAS:	Ministry of Health and Social Action
WHO:	World Health Organization
GDP:	Gross Domestic Product
RGPHAE:	General Census of Population and Housing, Agriculture and Livestock

TABLE OF CONTENTS

PREFACE.....	3
ACRONYMS AND ABBREVIATIONS.....	5
TABLE OF CONTENTS.....	6
TABLES.....	8
FIGURES AND GRAPHS.....	11
EXECUTIVE SUMMARY.....	12
CHAPTER I: INTRODUCTION.....	17
1.1. THE BURDEN OF TOBACCO USE WORLDWIDE.....	18
1.2. SURVEY OBJECTIVES.....	19
CHAPTER II: METHODOLOGY.....	20
2.1. POPULATION STUDIED.....	20
2.2. SURVEY PLAN.....	20
2.3. QUESTIONNAIRE AND SURVEY MANUALS.....	21
2.4. QUESTIONNAIRE SCHEDULING AND PREPARATION FOR ELECTRONIC DATA COLLECTION.....	23
2.5. IMPLEMENTATION, PRE-TESTING, MAPPING, MAIN TRAINING, AND FIELD DATA COLLECTION.....	23
2.5.1. Implementing Agency.....	23
2.5.2. Pre-test.....	23
2.5.3. Updating the List of Households for the Main Survey (Mapping).....	25
2.5.4. Survey Officer Training.....	25
2.5.5. Field Data Collection.....	26
2.5.6. Field Follow-up.....	28
2.5.7. Post-Survey Quality Control.....	28
2.6. DATA PROCESSING AND MERGING.....	28
2.7. STATISTICAL ANALYSIS.....	28
CHAPTER III: SAMPLE AND CHARACTERISTICS OF THE POPULATION.....	30
3.1. SAMPLE SCOPE.....	30
3.2. CHARACTERISTICS OF RESPONDENTS.....	31
CHAPTER IV: TOBACCO USE.....	33
4.1. PREVALENCE OF TOBACCO USE.....	34
4.1.1. Prevalence of Tobacco Smokers.....	34
4.2. NUMBER OF TOBACCO USERS.....	36
4.2.1. Number of smokers.....	36
4.2.2. Number of Smokeless Tobacco Users.....	37
4.3. PREVALENCE OF CURRENT SMOKERS BY TYPE OF SMOKING TOBACCO PRODUCT	38
4.4. NUMBER OF CURRENT SMOKERS BY TYPE OF SMOKING TOBACCO PRODUCT.....	39
4.5. FREQUENCY OF TOBACCO USE.....	41
4.6. AVERAGE NUMBER OF CIGARETTES SMOKED AND DISTRIBUTION OF CIGARETTES SMOKED ON AVERAGE PER DAY.....	41
4.7. AGE OF TOBACCO USE INITIATION.....	43
4.9. TIME SINCE QUITTING SMOKING.....	45
4.10. TYPES OF TOBACCO CURRENTLY CONSUMED.....	46
4.11. TIME BETWEEN WAKING UP AND SMOKING THE FIRST CIGARETTE OF THE DAY	48
4.12. AWARENESS AND USE OF E-CIGARETTES.....	49
4.13. AWARENESS AND USE OF HEATED TOBACCO.....	51
CHAPTER V: QUITTING SMOKING.....	53
5.1. SMOKING CESSATION AND HEALTHCARE SEEKING BEHAVIOR.....	53

5.1.1. Current Smokers and Former Smokers Who Tried to Quit Smoking	53
5.1.2. Current Smokers and Former Smokers Who Have Consulted a Healthcare Professional.....	53
5.2. QUITTING METHOD	54
5.3. INTENTION TO QUIT SMOKING	55
CHAPTER VI: SECONDHAND SMOKING	58
6.1.1. Prevalence of Secondhand Smoking in Enclosed Workplaces.....	59
6.1.2. Number of Workers Exposed to Tobacco Smoke in Enclosed Workplaces.....	60
6.2. EXPOSURE TO TOBACCO SMOKE AT HOME	61
6.2.1. Prevalence of Exposure to Tobacco Smoke at Home	61
6.2.2. Number of Adults Exposed to Tobacco Smoke at Home.....	61
6.3. EXPOSURE TO TOBACCO SMOKE IN PUBLIC PLACES.....	63
6.3.1. Prevalence of Exposure to Tobacco Smoke in Government Buildings	63
6.3.2. Prevalence of Exposure to Tobacco Smoke in Healthcare Facilities	64
6.3.3. Prevalence of Exposure to Tobacco Smoke in Restaurants	64
6.3.4. Prevalence of Exposure to Tobacco Smoke in Bars and Nightclubs	64
6.3.5. Prevalence of Exposure in Public Transportation	65
6.3.7. Prevalence of Exposure to Tobacco Smoke in Schools	65
CHAPTER VII: ECONOMIC ASPECTS.....	68
7.1. LAST CIGARETTE BRAND PURCHASED	68
7.2. PLACE WHERE CIGARETTES WERE LAST PURCHASED.....	69
7.3. CIGARETTE EXPENDITURE	70
7.4. SUPPORT FOR INCREASING TAXES ON TOBACCO PRODUCTS	73
CHAPTER VIII: MEDIA.....	75
8.1. ADULTS AGED 15 AND OVER WHO HAVE NOTICED ANTI-SMOKING INFORMATION IN THE LAST 30 DAYS ON VARIOUS MEDIA OUTLETS.....	76
8.2. HEALTH WARNINGS ON CIGARETTE PACKS THAT LED TO CONSIDERING QUITTING SMOKING.....	51
8.3. MARKETING (ADVERTISING, PROMOTION, AND SPONSORSHIP)	53
CHAPTER IX: Knowledge, Attitudes, and Perceptions.....	57
9.1. PERCEPTIONS OF THE HARMFUL EFFECTS OF SMOKING TOBACCO USE.....	57
9.2. PERCEPTIONS OF THE HARMFUL EFFECTS OF SECONDHAND SMOKING	61
9.3. PERCEPTIONS OF THE HARMFUL EFFECTS OF SMOKELESS TOBACCO	63
CHAPTER 10: CONCLUSION.....	65
BIBLIOGRAPHY.....	66
APPENDICES.....	68
Appendix A: Survey Error Estimation.....	68
Appendix B: Definitions.....	76
Appendix C: Survey Staff	80
Appendix D: Questionnaires	85
Appendix E: Summary of MPOWER Indicators	138

TABLES

Table 3.1: Number and percentage of households and respondents, and response rates, by residence (unweighted)	30
Table 3.2: Distribution of adults aged 15 and over according to certain sociodemographic characteristics	31
Table 4.1A: Percentage of adults aged 15 and over according to smoking status and sex	34
Table 4.1B: Number of adults aged 15 and over according to smoking status and sex	37
Table 4.2B: Number of adults aged 15 and over according to smokeless tobacco use and sex	37
Table 4.3: Percentage of adults aged 15 and older who are current smokers of various tobacco products, by selected sociodemographic characteristics	38
Table 4.4: Number of adults aged 15 and older who are current smokers of various tobacco products, by selected sociodemographic characteristics	40
Table 4.5: Distribution (in %) of adults aged 15 and over according to the frequency of tobacco use, by sociodemographic characteristics	41
Table 4.6: Average number and distribution (in %) of cigarettes smoked per day among daily cigarette smokers aged 15 and older, according to certain sociodemographic characteristics	42
Table 4.7: Average age and distribution (%) of tobacco smokers aged 20 to 34 by age of initiation, sex, and place of residence	43
Table 4.8: Percentage of former daily smokers among all adults aged 15 years and older and among those who have ever smoked daily, by certain sociodemographic characteristics	44
Table 4.9: Distribution (in %) of former daily smokers aged 15 and over, according to time since quitting smoking and certain sociodemographic characteristics	45
Table 4.10: Distribution (in %) of current tobacco users aged 15 and older, by type of tobacco consumed and selected sociodemographic characteristics	47
Table 4.11: Distribution (in %) of daily smokers aged 15 and over, according to time first cigarette of the day is smoked and certain sociodemographic characteristics	49
Table 4.12: Awareness and use of e-cigarettes among adults aged 15 years and older, according to certain sociodemographic characteristics	51
Table 4.13: Awareness and use of heated tobacco among adults aged 15 years and older, according to certain sociodemographic characteristics	52
Table 5.1: Percentage of smokers aged 15 years and older who tried to quit smoking and who received assistance from a healthcare professional in the past 12 months, by certain sociodemographic characteristics	54
Table 5.2: Percentage of smokers aged 15 years and older who have tried to quit smoking in the last 12 months, by cessation methods used and certain sociodemographic characteristics	55
Table 5.3: Distribution (in %) of current smokers aged 15 and over, according to intention to quit smoking and certain sociodemographic characteristics	56
Table 5.4: Percentage of smokers aged 15 years and older who tried to quit smoking and who received advice from a healthcare professional in the past 12 months, by certain sociodemographic characteristics	57

Table 6.1: Percentage and number of adults aged 15 and older who work in an enclosed environment and are exposed to tobacco smoke at work, by smoking status and certain sociodemographic characteristics	59
Table 6.2: Percentage and number of adults aged 15 and older who are exposed to tobacco smoke at home, by smoking status and certain sociodemographic characteristics	62
Table 6.3: Percentage of adults aged 15 and older who have been exposed to tobacco smoke in various public places in the past 30 days, by smoking status and certain sociodemographic characteristics	66
Table 6.4: Percentage of adults aged 15 years and older who have visited various public places in the past 30 days and have been exposed to tobacco smoke, by smoking status and certain sociodemographic characteristics.....	67
Table 7.1: Distribution (in %) of current smokers of manufactured cigarettes aged 15 and over, according to last brand purchased and certain sociodemographic characteristics	69
Table 7.2: Distribution (in %) of current smokers of manufactured cigarettes aged 15 and over, according to the source of their last cigarette purchase and certain sociodemographic characteristics.....	69
Table 7.3: Average amount spent on 20 manufactured cigarettes and average monthly cigarette expenditure among current smokers aged 15 and over, according to certain sociodemographic characteristics	70
Table 7.4: Average amount spent per 20 manufactured cigarettes among current smokers over the age of 15, based on certain sociodemographic characteristics	71
Table 7.5: Average monthly cigarette expenditure among current smokers of manufactured cigarettes aged 15 and over, by certain sociodemographic characteristics	72
Table 7.6: Percentage of adults aged 15 and over in favor of increasing taxes on tobacco products, by smoking status and certain sociodemographic characteristics	73
Table 7.7: Percentage of adults aged 15 and over in favor of increasing taxes on tobacco products, by smoking status and certain sociodemographic characteristics	74
Table 8.1: Percentage of adults aged 15 and over who have noticed anti-smoking messages in the last 30 days in various media, by smoking status and certain sociodemographic characteristics.....	50
Table 8.2: Percentage of current smokers aged 15 and over who noticed the health warnings on cigarette packs and considered quitting smoking because of these warnings in the last 30 days, according to certain sociodemographic characteristics	52
Table 8.3: Percentage of adults aged 15 and older who noticed cigarette advertising in the past 30 days across various media, by certain sociodemographic characteristics	53
Table 8.4: Percentage of current smokers aged 15 and older who noticed cigarette advertising in the past 30 days across various media, by certain sociodemographic characteristics	55
Table 8.5: Percentage of current non-smokers aged 15 and older who noticed cigarette advertising in the past 30 days across various media, by certain sociodemographic characteristics.....	56
Table 9.2: Percentage of adults aged 15 and older who believe that smoking and exposure to secondhand smoke cause serious diseases and conditions, by smoking status and selected sociodemographic characteristics.....	61
Table 9.3: Percentage of adults aged 15 and over who believe that secondhand smoke causes serious illness in non-smokers, by smoking status and certain sociodemographic characteristics.....	62

Table 9.4: Percentage of adults aged 15 and older who believe that exposure to secondhand smoke causes serious diseases and conditions, by smoking status and selected sociodemographic characteristics	62
Table A1: List of sampling error indicators – GATS Senegal, 2023	68
Table A2: Sampling errors – Global – GATS Senegal, 2023.....	69
Table A3: Sampling errors – Male – GATS Senegal, 2023	70
Table A4: Sampling errors – Female – GATS Senegal, 2023	72
Table A5: Sampling errors – Urban – GATS Senegal, 2023	73
Table A6: Sampling errors – Rural – GATS Senegal, 2023	74
Table F.1: MPOWER Summary indicators – GATS Senegal, 2023	138
Table F.2: Summary of trends in MPOWER indicators - GATS Senegal, 2015 and 2023	139

FIGURES AND GRAPHS

Figure 2.1: Data Management Model (Model B).....	27
Graph 4.2: Proportion of adults aged 15 and over according to current tobacco smoking	35
Table 4.2A: Percentage of adults aged 15 and over according to smokeless tobacco use and sex.....	36
Graph 4.3: Proportion of adults aged 15 and older who are current smokers of various tobacco products	40
Graph 4.4: Average number of cigarettes smoked per day among daily cigarette smokers	43
Graph 4.5: Proportion of former daily smokers among all adults aged 15 years and older and among those who have ever smoked daily	45
Graph 4.6: Distribution (in %) of current tobacco users aged 15 and older, by type of tobacco consumed and place of residence – 2023 Senegal GATS	47
Graph 5.1: Proportion of current smokers aged 15 and over who have tried to quit smoking in the last 12 months, by place of residence	56
Graph 6.1: Proportion of non-smokers exposed to secondhand smoking in their workplaces by certain sociodemographic characteristics.....	60
Graph 6.2: Proportion of non-smokers exposed to tobacco smoke at home by certain sociodemographic characteristics.....	63

EXECUTIVE SUMMARY

The Global Adult Tobacco Survey (GATS) is the global standard for systematic monitoring of tobacco and nicotine product use (smoked, smokeless, and heated tobacco products) among adults and for tracking key tobacco control indicators. The 2023 Senegal GATS is a household survey conducted among men and women aged 15 and over living in ordinary households. The sampling¹ was designed to ensure that indicators are representative at national level and to provide internationally comparable data for the country as a whole, broken down by sex, age group, level of education, and place of residence (urban/rural).

The 2023 Senegal GATS was carried out by the National Agency for Statistics and Demography (ANSD), with the collaboration of the Ministry of Health and Social Action (MSAS), through the National Tobacco Control Program (PNLT). Technical assistance was provided by the US Centers for Disease Control and Prevention (CDC), the World Health Organization (WHO), and RTI International, an independent, nonprofit research institute dedicated to improving human health. This report is based on work funded by the CDC Foundation with a grant from the Gates Foundation.

GATS helps strengthen countries' capacity to design, implement, and develop tobacco control programs and policies. It will also enable Senegal to fulfill its obligations under the WHO Framework Convention on Tobacco Control (WHO FCTC), which the country ratified in 2005. In addition, the survey aims to generate comparable data within Senegal and between countries.

In 2008, the WHO introduced the MPOWER package, a set of six evidence-based reduction measures to prevent and reduce the use of tobacco and nicotine products (WHO, 2008). Each MPOWER letter corresponds to one or more demand reduction measures outlined in the WHO FCTC (WHO, 2008).

The Senegal GATS was conducted as a representative national survey of adults aged 15 and older, following a standardized global protocol for systematic tobacco use monitoring. This protocol includes core and optional questionnaires, sample design, data collection, management, processing, analysis, and dissemination. The 2023 Senegal GATS is the second household survey focused exclusively on tobacco use and key tobacco control measures in the country, following the first round conducted in 2015. Data collection for GATS 2023 took place over a one-month period, from November 30 to December 29, and data were collected using tablets.

A total of 4,148 households were selected, and in each household, one individual was randomly chosen to respond to the survey (participant). A total of 3,878 individuals were successfully interviewed. The overall response rate was 97.3%, with a household

¹ A multi-stage stratified random sampling plan was used to obtain nationally representative data.

response rate of 98.6% (98.3% in urban areas and 98.9% in rural areas), and an individual response rate of 98.8% (99.0% in urban areas and 98.5% in rural areas).

The 2023 Senegal GATS collected information on respondent characteristics, tobacco use (smoked, smokeless, or heated tobacco products), e-cigarette use, quitting smoking, secondhand smoke exposure, the tobacco economy, media exposure, and knowledge, attitudes, and perceptions about smoking.

Tobacco Use

In Senegal, in 2023, approximately half a million adults² (4.4%) used tobacco products, 8.2% of which were men and 0.8% women. Among adults who use tobacco, 86.9% use only smoked tobacco, 3.3% use smokeless tobacco, 3.7% use only heated tobacco products, 4.9% use both smoked and smokeless tobacco, 0.7% use smoked and heated tobacco products, and 0.6% use both smokeless and heated tobacco products.

The prevalence of smoking tobacco use is 4.1% (0.4 million) overall, 7.8% of men and 0.4% of women. In 2023, this amounted to 4.6% in urban areas and 3.6% in rural areas. By age, the prevalence of smoking tobacco use is 1.6% among 15–24-year-olds, 6.2% among 25–44-year-olds, 6.3% among 45–64-year-olds, and 3.0% among those aged 65 and over. Overall, 3.4% of adults (6.5% of men and 0.4% of women) smoke tobacco daily and 0.7% smoke occasionally.

On the whole, 2.9% of adults (0.3 million) smoke manufactured cigarettes in 2023. On average, adults who smoke manufactured cigarettes daily consume 8.3 cigarettes per day, with about half (49.6%) of daily users consuming 5 to 9 cigarettes per day.

The overall prevalence of smokeless tobacco use in 2023 was 0.4% among adults in Senegal; 0.5% of women and 0.3% of men.

Use of Electronic Cigarettes

Overall, 36.6% of adults are aware of e-cigarettes and 1.5% have already used them (2.0% of men and 0.9% of women). The proportion of adults using e-cigarettes in 2023 was 0.4% (0.6% of men and 0.3% of women). The prevalence of e-cigarette use is 0.6% in urban areas and 0.2% in rural areas.

Smoking Cessation

Just over six in ten adults (62.5%) who smoke tobacco in 2023 intend to quit smoking or are considering doing so. Overall, 52.4% of adult tobacco smokers reported having made at least one attempt to quit in the 12 months prior to the survey, with prevalence of 50.6% in rural areas and 53.8% in urban areas. Overall, three-quarters (74.4%) of adults who currently smoke tobacco and have made an attempt to quit did so without any help.

² Adults are defined as persons aged 15 and older.

Secondhand Smoke

Just over one in five adults (21.1%) who work in an enclosed room reported being exposed to secondhand smoke in their workplace in the 30 days prior to the survey. In addition, 18.1% of adults who do not smoke tobacco believe they are exposed to secondhand smoke in their workplace. The number of adults exposed to secondhand smoke at home is estimated at 1.6 million (15.0%), including 1.3 million non-smoking adults (13.0%).

Among adults who visited various public places in the last 30 days, 24.8% were exposed to tobacco smoke in restaurants, 74.8% in bars or nightclubs, 15.4% in government buildings, 11.7% in public transport, 25.4% in universities and 6.0% in healthcare facilities.

Since 2014, anti-smoking legislation in Senegal has prohibited smoking in public places such as healthcare facilities, schools, professional and academic establishments (within a 200-meter radius), administrative buildings, enclosed workplaces, and public transportation.

Economic Aspects

In 2023, the average monthly expenditure on cigarettes was 8,778 FCFA. By age group, the average monthly expenditure on cigarettes varies from 8,524 FCFA among 25-44-year-olds to 11,192 FCFA among 45-64-year-olds.

It should be noted that since December 2018, the excise tax on tobacco has been 65.0%. The results of the 2023 survey indicate that 93.4% of adults are in favor of increasing taxes on tobacco and tobacco products.

Media

In the 30 days prior to the December 2023 survey, 49.7% of adults (48.3% of adults who currently smoke tobacco and 49.8% of those who do not smoke) reported having seen information about tobacco harm through various media channels. Overall, 37.4% (28.5% of adults who currently smoke tobacco and 37.8% of those who do not) saw this information on radio or television. The proportion of adults who noticed information about the dangers of tobacco, regardless of the channel, is 39.0% in urban areas and 36.0% in rural areas.

It should be noted that in Senegal, Law 2014-14 on tobacco control of March 28, 2014, requires health warnings on cigarette packs, including illustrated health warnings covering 70.0% of the main surface of packs, in addition to warning messages in text placed on the side surfaces of packs. This measure has been in force since 2017.

Overall, in 2023, among adults who smoke and noticed anti-smoking warnings on cigarette packages, 37.5% considered quitting smoking. In 2023, this amounted to 39.4% in urban areas and 35.4% in rural areas.

Knowledge, Attitudes, and Perceptions

In 2023, overall, 87.2% of adults (86.1% of adults who currently smoke tobacco and 87.2% of adults who do not smoke) believe that smoking causes serious diseases. About 85.7% of adults (86.9% of adults who currently smoke tobacco and 85.7% of adults who do not smoke) believe that breathing in other people's smoke causes serious diseases in people who do not smoke. These beliefs exist in urban areas (90.5%) and rural areas (81.6%).

Regarding smokeless tobacco, 69.2% of adults (71.5% in urban areas and 67.2% in rural areas) believe that it causes serious diseases.

The survey reveals that 90.3% of adults believe that tobacco causes lung cancer, 64.7% that it can cause heart attacks, 71.8% that it causes stomach cancer, 67.7% that it causes strokes, 58% that it causes premature births, 57.3% that it can cause bladder cancer, and 67.2% that it causes bone loss.

Comparison Between 2015 and 2023

- ❖ Smoking prevalence among adults decreased from 6.0% in 2015 to 4.4% in 2023. This represents a decrease of 1.6 percentage points over the period. In relative variation this corresponds to a decrease in prevalence of 26.7% (25.5% for men and 33.3% for women).
- ❖ Exposure to secondhand smoke in public places decreased between 2015 and 2023, with the smallest relative reductions in exposure to secondhand smoke observed in bars/nightclubs (-5.7%), restaurants (-13.9%), and public transportation (-18.2%). In contrast, the decline was more pronounced in universities (-55.4%), healthcare facilities (-41.2%), schools (-38.6%), government buildings (-36.4%), workplaces (-30.6%), and homes (-30.6%).
- ❖ The proportion of adults who smoke tobacco in 2023 and who have tried to quit in the 12 months prior to the survey has decreased from 59.6% in 2015 to 52.4% in 2023. Similarly, the percentage of adults who currently smoke tobacco and want to quit decreased from 79.8% in 2015 to 62.5% in 2023.
- ❖ The proportion of adults who noticed the health warnings on cigarette packs increased from 48.8% in 2015 to 60.9% in 2023. In addition, among adults who currently smoke tobacco, a higher percentage (from 31.5% in 2015 to 37.5% in 2023) are considering quitting smoking because of the health warnings on cigarette packs.
- ❖ The prevalence of exposure to tobacco advertising, promotion, and sponsorship decreased from 20.6% in 2015 to 10.7% in 2023.
- ❖ The average inflation-adjusted amount paid for 20 cigarettes rose from 701 FCFA in 2015 to 849 FCFA in 2023, a relative increase of 21.2%.

- ❖ A slight decrease in the proportion of adults in favor of increasing taxes on tobacco products is observed between 2015 and 2023, varying from 95.5% to 93.4%.
- ❖ The perception of adults regarding the risks associated with tobacco has decreased: from 93.9%, the proportion of those who believe that smoking causes serious diseases has fallen to 87.2%. During the same period, awareness of the dangers of secondhand smoke also declined, with 91.9% of adults believing that it could cause serious illness in non-smokers in 2015, compared to 85.7% in 2023.

CHAPTER I: INTRODUCTION

Senegal is a Sudano-Sahelian country, located in the west of the African continent. It is bordered to the north by the Islamic Republic of Mauritania, to the east by Mali, to the south by Guinea Bissau and Guinea, and to the west by the Atlantic Ocean. A notable geographical feature is the presence of Gambia, a landlocked country that crosses Senegal between the regions of Fatick, Kaolack, Kaffrine, Tambacounda, Kolda, Sédhiou and Ziguinchor, on the lower course of the river with the same name.

At the administrative level, the country is divided into 14 regions. These are subdivided into 46 departments, 129 districts and 553 communes.

The resident population in Senegal, recorded in 2023, is 18,126,390 inhabitants³ (50.6% male and 49.4% female). Its population was 13,508,715⁴ in 2013, representing an average annual intercensal growth rate of 2.9%. With a population of 4,958,085 in 1976, and 6,881,919 in 1988, intercensal growth rates were 2.7% and 2.5% respectively for 1976-1988 and 1988-2002. Senegal is characterized by its young population, half of whom are under the age of 19 (18.3 for males and 19.7 for females). Children under the age of 15 make up 39.1% of the total population. This category is larger among boys (40.6%) than among girls (37.6%). In addition, 3.8% of the population is aged 65 and over.

In August 2006, the World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC)⁵ convened a meeting of experts to discuss adult tobacco use surveillance. Funding difficulties and methodological complexity in conducting systematic surveys on adult smoking were pointed out, as well as the lack of comparability of ongoing national surveys. Recommendations for the development of a standard survey protocol were issued. The Bloomberg Reducing Tobacco Use initiative offers resources aimed at addressing the lack of data to measure adult tobacco use globally and to optimize the scope and results of the current Global Tobacco Surveillance System (GTSS), which consists of:

- ❖ Global Youth Tobacco Survey (GYTS) – Senegal 2023.
- ❖ Global Adult Tobacco Survey (GATS) – Senegal 2023.
- ❖ Tobacco Questions for Surveys (TQS).

In 2008, the Bill & Melinda Gates Foundation joined the Bloomberg Initiative effort. To this end, Senegal received funding for the implementation of the first GATS in 2015.

³ Provisional Report of the General Census of Population and Housing (RGPH-5.2023, ANSD).

⁴ Final report of the General Census of Population and Housing, Agriculture and Livestock (RGPHAE 2013, ANSD).

⁵ Centers for Disease Control and Prevention.

Following this, several documents were drafted, including the 2018-2023 National Tobacco Control Strategic Plan.

The results obtained during GATS-II 2023 provide the country with a set of indicators that are essential for decision-makers and development partners, helping them to formulate, monitor, and implement effective tobacco control interventions, and to compare their performance with that of other countries.

1.1. THE BURDEN OF TOBACCO USE WORLDWIDE

Tobacco use is one of the leading preventable causes of death worldwide, particularly among adolescents and young adults, who are the primary targets of the tobacco industry. According to the latest WHO report on smoking trends, published in January 2024⁶, 1.25 billion adults worldwide use tobacco, causing 8 million deaths per year.

Data from 2022 showed that smoking rates continue to decline globally. About one in five adults worldwide uses tobacco, compared to one in three in 2000⁷. Tobacco kills more people than HIV/AIDS, tuberculosis, and malaria combined⁸. It is one of the legal products that can cause disease, disability, and death. Added to this are deaths indirectly linked to exposure to secondhand tobacco smoke.

The negative impact of tobacco on human health is well established. According to the CDC, smoking increases the risk of coronary heart disease, stroke, lung cancer, chronic obstructive pulmonary disease, peripheral vascular disease, abdominal aortic aneurysms, infertility, etc. Similarly, tobacco consumption seriously affects the health of both mother and child because it increases the risk of miscarriages and low birth weights in children born to mothers who smoke.

In addition to its health impact, smoking has an impact on development, particularly in terms of achieving the Sustainable Development Goals (SDGs). Indeed, mortality due to smoking most often affects breadwinners. Furthermore, spending on tobacco places a significant burden on household income. Added to this are the costs of treating noncommunicable diseases (NCDs) caused by tobacco use.

⁶ Trends in tobacco use worldwide: WHO Report 2024.

⁷ WHO Global Report on Tobacco Use.

⁸ <http://www.who.int/features/factfiles/tobacco/en/>.

In terms of the environmental, excessive tobacco cultivation leads to increasing deforestation. Similarly, the excessive use of agrochemicals affects other agricultural crops, rivers, and watersheds⁹.

The scale of the effects of smoking on human development requires a consistent and comprehensive response from countries. Unfortunately, the current situation is that the implementation of measures to reduce tobacco cultivation and use worldwide is inadequate.

1.2. SURVEY OBJECTIVES

GATS-II 2023 is an asset for the country, providing a set of data that can be used to monitor changes in the following indicators:

- ❖ The prevalence of smoking among adults in the country;
- ❖ The nature, magnitude and distribution of smoking in the country;
- ❖ Knowledge, attitudes, and perceptions of the population;
- ❖ The context/environment that influences consumption.

CRES Report: Study on The Health Costs of Smoking in Senegal, 2017.

<https://www.who.int/publications/i/item/9789240051287>.

CHAPTER II: METHODOLOGY

2.1. POPULATION STUDIED

The scope of the GATS-II 2023 survey is the national territory of Senegal. The target population includes all men and women, not living in a specialized institution, aged 15 or over, who consider Senegal as their usual place of residence. All members of the target population are sampled from the ordinary household that is their usual place of residence. An ordinary household is defined as a person or group of persons, related or unrelated, living under the same roof and generally eating their meals together, pooling all or part of their income to meet their needs, and recognizing the authority of one person among them as the head of the household. Consequently, collective households such as “daara,” prisons, barracks, boarding schools, hotels, etc. are excluded.

Residence is defined in relation to the household at the time of the interviewer's visit. Being a resident in a household means:

- ❖ *usually living with the household for at least 6 months ; or*
- ❖ *having moved there in less than 6 months ago (length of time in the household below the standard) but with the intention of living there.*

These conditions apply to citizens as well as non-citizens (foreigners) of Senegal. Therefore, individuals are considered residents of Senegal if they are:

- ❖ *citizens of Senegal and reside there, or*
- ❖ *non-citizens living in the country, considering the country as their country of principal residence (i.e., they lived in Senegal for at least half the time of the 12 months preceding the household interview questionnaire).*

In addition, individuals aged 15 years or older, who are explicitly excluded from the survey, are those who at the time of the survey are:

- ❖ *non-citizens visiting the country for a few weeks (e.g., tourists, visiting friends/relatives, etc.);*
- ❖ *citizens in the military who indicate that their usual place of residence is a military base;*
- ❖ *citizens who live in specialized institutions, including people residing in hospitals, prisons, retirement homes, and other similar institutions, who will not be sampled in the GATS-II.*

2.2. SURVEY PLAN

The GATS-II survey sample is a random, stratified sample drawn at three stages. The primary sampling unit for the GATS-II is the Census District (DR) as defined in the fifth General Census of Population and Housing (RGPH-5) of 2023, i.e., the smallest geographical unit created for the needs of field operations and containing an average 100

households. At the first stage, 244 DRs were drawn. The sample is stratified by place of residence (urban and rural), with 122 DRs drawn in each environment with a probability proportional to size (PPS), the size being the number of households residing in the DR at the time of the 2023 census.

After the primary units were drawn and before the survey, a household count and map update were carried out in each selected DR. This operation provided a complete list of households in each drawn DR, which was used to select households at the second stage. At the second stage, in each of the DRs selected at the first stage, a fixed number of households were selected using a systematic equal probability draw from the lists established at the time of the enumeration. The number of households selected per DR is 17. After contacting the household, the interviewer compiles a list of all household residents aged 15 or older, with the assistance of the head of the household or an individual in the household aged 18 or older who is able to provide the correct information.

At the third stage, for each household selected, a list of women and men aged 15 or over is drawn up. One person is randomly chosen by the application to answer the individual questionnaire. All eligible women and men have the same chance of being drawn.

A total of 244 DRs were selected, including 122 for each setting (urban and rural). A total of 4,148 households were selected (2,074 in each setting).

2.3. QUESTIONNAIRE AND SURVEY MANUALS

The Senegal GATS-II collected information on a variety of indicators that will help monitor the prevalence of tobacco use. A questionnaire based on the models developed for GATS-II, to which optional questions were added, was used in this survey.

These questionnaires were adapted and modified to ensure the relevance of the questions and their applicability to the situation in Senegal. This adaptation was carried out during meetings attended by experts representing the government, the National Agency for Statistics and Demography, the WHO national and regional office, and the CDC. The adaptation of the questionnaire started in 2020 with the standard version. The final version was submitted to the CDC Questionnaire Review Committee (QRC) for approval.

The questionnaire was drafted in English and later translated into French. It was then translated back into English to check the quality of the translation before being used for data collection. The questionnaire was pre-tested and then revised based on the lessons learned.

The questionnaire records all household members and some of their characteristics: Sex, age, and tobacco use (cigarettes, cigars, pipes, and hand-rolled cigarettes). Its purpose is to determine whether the selected household meets the GATS-II eligibility requirements, and to make a list, or table, of all eligible household members. Once the list of eligible household residents has been drawn up, one individual is chosen at random to respond to the individual modules.

The individual modules of the questionnaire are used to record information about people aged 15 and over. It includes the following sections:

- ❖ Socio-demographic characteristics: Identifies the respondent's sex, literacy, nationality, ethnicity, religion, marital status, age, and level of education; determines the respondent's employment status over the past 12 months and the assets owned by the respondent's household.
- ❖ Smoking tobacco: Includes questions on current and past smoking habits (daily smoking, occasional smoking), age of initiation of daily smoking, consumption and frequency of consumption of different tobacco products, frequency of consulting a health professional, and use of quitting methods.
- ❖ Water pipe (shisha/hookah): Consumption patterns in the past (daily, less than once a day or not at all).
- ❖ E-cigarettes: Knowledge, consumption patterns (daily, less than once a day or not at all).
- ❖ Smokeless tobacco: Includes questions about current and past smokeless tobacco use (daily and occasional consumption of smokeless tobacco).
- ❖ Quitting smoking: Includes questions about attempts to quit smoking, advice from a healthcare professional encouraging quitting smoking, and the method used to try to quit smoking.
- ❖ Quitting smokeless tobacco use: It includes questions about attempts to quit smokeless tobacco, advice from a healthcare professional encouraging quitting, and the method used to try to quit smoking.
- ❖ Secondhand smoking: It includes questions about exposure to passive smoking at home, in the workplace and in public spaces, the level of awareness of serious diseases caused by passive smoking among non-smokers, and support for laws prohibiting smoking in public places.
- ❖ Economic aspects - manufactured cigarettes: This includes questions about the quantity, brand, cost, and source of the last cigarette purchase.
- ❖ Media: Includes questions about exposure to tobacco advertising on television, radio, billboards, newspapers/magazines, movies, the Internet, public transportation, public walls, and other media; sponsorship at sporting events; exposure to tobacco promotion activities; reaction to health warning labels on cigarette packs; and exposure to anti-smoking advertising.
- ❖ Tobacco Knowledge, attitudes and perceptions: Includes questions about awareness of the health effects of smoking tobacco use.

In order to maintain uniform investigation procedures and follow established standard protocols, three manuals have been created:

- ❖ the interviewer manual includes interview techniques, field data collection procedures, methods for asking questions and, most importantly, the use of tablets for data collection;

- ❖ the supervisor manual provides a detailed description of the supervisor's role and responsibilities. It also includes instructions on data transfer; and
- ❖ the specifications manual provides question-by-question instructions to interviewers on how to apply household and individual questionnaires using tablets. It also includes information about the range of possible values, answer options, purpose, and instructions for each question.

2.4. QUESTIONNAIRE SCHEDULING AND PREPARATION FOR ELECTRONIC DATA COLLECTION

GATS 2023 is the second national survey conducted in Senegal on tobacco use. It used electronic means to collect data from households and individuals. For this purpose, the GSS (General Survey System) developed by RTI International was used. It includes a suite of software tools developed to facilitate the administration, collection, and management of survey data on laptops, especially on a Microsoft Windows Mobile 5.0 or Mobile 6.0 platform often referred to as handheld PC (tablet) systems.

This software is developed to help interviewers collect data in the field, via tablets. Handhelds (tablets): Samsung Galaxy Tab A7 Lite – Model: SM-T220 Wi-Fi devices were used to test the programs developed and to collect data. Electronic data collection is useful in that it facilitates the integration of complex jumps contained in questionnaires and allows for valid checks to be carried out when asking questions in the field.

The questionnaire was programmed using GSS by experts from the CDC and the GATS-II team in Senegal. A repetitive quality control mechanism was used to check the questionnaire programming. The main steps in this control were: checking the questionnaire version, checking the date and time, checking the jumps, searching for bugs/errors, and validating the controls. The entire process, namely the questionnaire, electronic data collection using tablets, and data aggregation was pre-tested.

2.5. IMPLEMENTATION, PRE-TESTING, MAPPING, MAIN TRAINING, AND FIELD DATA COLLECTION

2.5.1. Implementing Agency

The National Agency for Statistics and Demography (ANSD), designated as the implementing agency for GATS-II in Senegal, carried out the survey in collaboration with the Ministry of Health and Social Action (MSAS) through the National Tobacco Control Program (PNLT).

It received technical assistance from the WHO regional and national offices for the implementation of the survey, as well as from the CDC and RTI. GATS-II was conducted in Senegal with financial support from the CDC Foundation.

2.5.2. Pre-test

Pre-test Procedures

The pre-test of the questionnaire was carried out by the National Agency of Statistics and Demography, in close collaboration with CDC and RTI, and took place over a period of ten (10) days, from September 21 to October 03, 2023. This operation involved testing the data collection system in order to detect any errors that interviewers might make during the main survey, identify any constraints and shortcomings, and make the necessary corrections.

The pre-test was therefore the best way to assess the population's response to and perception of the questionnaire, as well as the relevance and wording of the questions. The main objectives of the pre-test are as follows:

- ❖ to strengthen the capacity of the ANSD IT team;
- ❖ to configure the tablets in advance of the questionnaire test in order to address issues such as question skip errors, translation errors, inappropriate wording, inappropriate response categories, and potential logistical problems with the survey;
- ❖ to train key survey staff and test all survey materials before full implementation;
- ❖ to test the planned operational model, including data collection and management for the full implementation of the survey;
- ❖ to ensure the security of the data collected via the hosting server designed for this purpose;
- ❖ to gain experience in field operations related to the full implementation of GATS-II.

NB: Data transfer and aggregation are monitored in accordance with standard protocol.

Pre-test Sample Size

Validation of the process required a sample of three (3) DRs to be drawn, for which 100 interviews at the "household level" and "individual level" were to be conducted.

The sample selection was guided by the specific objectives of the pre-test (to assess the relevance of the survey tool, the duration of the interviews, the difficulties specific to each area [urban, semi-urban, and rural], and the order and translation of the questions).

Selection and Training of Field Staff

Officers were selected by the ANSD Recruitment Commission on the basis of defined criteria, following a call for applications.

The training took place over a period of seven (7) days: Two (2) days were spent on leveling the IT team's skills and five (5) days were spent on training the field staff (team leaders and interviewers) who were to collect the data for the pre-test. The method adopted for the latter consisted of dividing the modules into two sessions:

- ❖ a theoretical session consisting of taking turns reading the manuals and questionnaires; verification of understanding and mastery of the questionnaire through a series of

questions and discussions on the transcription of key concepts and various questions into the most widely spoken national language (Wolof) and role-playing; and

- ❖ a practical session with simulated interview exercises and filling out questionnaires in the data collection application built into the tablets.

It should also be noted that the adapted version of the GATS-II questionnaire was used for this exercise.

Fieldwork Implementation

Data collection for the pre-test was carried out from September 30 to October 2, 2023, in urban, semi-urban, and rural areas of the Dakar region. A total of ten (10) officers, divided into three (3) teams of two (2) to three (3) interviewers and one supervisor, conducted the pre-test in the field. During the three (3) days of work, each interviewer conducted approximately four (4) interviews per day, for a total of about 10 cases (households). At the end of the process, a debriefing session was held on October 3 to report on all the problems encountered by the teams in the field and the solutions provided, thereby smoothing out any rough edges and harmonizing understandings and approaches in preparation for the main operation.

Data Analysis and Report Writing

Following the pre-test activities, a detailed report covering all stages of the process, from training to data collection and management, was prepared and shared with all stakeholders for better understanding. The recommendations resulting from the evaluation of this operation enabled the finalization of the GATS-II questionnaire and manuals.

2.5.3. Updating the List of Households for the Main Survey (Mapping)

The mapping phase of the operation capitalized the RGPH-5 mapping. The 244 DRs concerned by GATS-II were extracted from the mapping database and made available to the operation's coordination team.

2.5.4. Survey Officer Training

A three-day follow-up training course was conducted on October 27, 28, and 30, 2023, prior to the main training course, for members of the pre-test field team, who were selected as future supervisors of GATS-II data collection. At the same time, candidates were selected by the ANSD Recruitment Commission on the basis of defined criteria, following a call for applications.

The main training took place at the Senegal's International Center for Foreign Trade (CICES) from November 20 to 24, 2023. It focused on theoretical and practical aspects, including the General Survey System (GTSS), the Framework Convention on Tobacco Control (FCTC), and smoking cessation methods; technical documents and tools (manuals and questionnaires); the collection application and use of portable devices (tablets); and a series of simulations and role-playing exercises.

At the end of the training, candidate interviewers were given an assessment test, based on quizzes and a case study, in order to select the best profiles before forming the teams to be deployed in the field. When putting together the teams and defining the areas of assignment, criteria such as region of origin (native language spoken), seniority in ANSD surveys, and knowledge of the field were taken into account.

For the purposes of data collection, thirteen (13) teams were formed, each consisting of a supervisor and three (3) interviewers; a total of 52 officers. In addition, each team was assigned a vehicle and a driver to ensure transportation throughout the data collection process.

2.5.5. Field Data Collection

The one-month GATS-II data collection started on 30 November 30, 2023 and extended to December 29. The workload was distributed evenly among the teams to cover the 244 DRs sampled across the country. Each team was responsible for covering all of the assigned DRs and was placed under the responsibility of an experienced supervisor.

Team supervisors were responsible for the equipment and logistics, and the quality of the data collected in their respective areas. They were given the task to conduct spot checks (resumption of interviews) and to make sure that the interviewers transferred data on a daily basis, from their tablets to the central server. Supervisors were responsible for reporting daily to dedicated experts at the central level, who in turn forwarded any issues to the survey coordinator.

However, it should be noted that electronic data collection in households was assigned to interviewers who, prior to the deployment of teams in the field, had received all assignments from the GATS-II data manager.

Furthermore, the data management model will be based on the partially web-based B model (**Figure 2.1**).

Figure 2.1: Data Management Model (Model B)



2.5.6. Field Follow-up

This was planned at the end of the ten-day data collection period, from January 10 to 21, 2024. Its objective was to organize field visits to: Households on the move, those where refusals had been noted, and households for which appointments had been made (especially in the capital, Dakar) in order to improve response rates (at the household and individual levels).

2.5.7. Post-Survey Quality Control

As part of the quality assurance process, a post-collection operation took place by telephone from March 16 to April 7, 2024. The aim of this process is to ensure the reliability of the data collected, with particular emphasis on households where the interview time is exceptionally short, which may indicate shortcomings in the quality of the data collected. It required the selection of a representative sample of all households surveyed as part of GATS-II.

To construct this sample, a simple random sampling (SRS) method was used, consisting of a random selection of households from the exhaustive list of all households interviewed in the main survey. Thus, 490 households were selected from the complete list of all households interviewed. These households were then asked a series of eleven (11) questions designed to analyze in detail the quality of the interview and the associated data.

2.6. DATA PROCESSING AND MERGING

Data management was provided by a database manager at ANSD headquarters who acted as the national IT specialist. Data from each interviewer was exported from their tablet every day by the supervisor. This data was then collected from the server and aggregated for weekly reporting purposes. The report was then emailed to the survey coordinator, the CDC, and the RTI IT team to verify the progress of the data collection. This data transmission process was based on a standard GATS-II data collection mechanism. All delays and anomalies identified were communicated to field supervisors through experts from the central technical team.

At the end of the data collection process, the national IT specialist aggregated all the data reported by the supervisors to obtain a single file in DB3 format. The resulting file was transformed into an analysis file in xlsx, SPS, CSV, SAS format, using the GSS AGGREGATE module. The final file was then ready for weighting.

2.7. STATISTICAL ANALYSIS

The complex survey data analysis method was used to obtain estimates for the population and their 95% confidence intervals. Sampling weights were developed for each respondent following the standard procedures established in the GATS-II sampling and weighting manuals. Details on the sample weighting process are described in

Appendix B of this report. The final weights were used in all analyses to produce estimates and their confidence intervals.

CHAPTER III: SAMPLE AND CHARACTERISTICS OF THE POPULATION

This chapter analyzes the results relating to sample coverage and certain characteristics of the population.

3.1. SAMPLE SCOPE

Table 3.1 shows the unweighted population, the proportion of households and respondents, and response rates by place of residence.

Of the 4,148 households selected for the survey, 3,930 (94.7%) were successfully surveyed, and 3,878 (98.7%) eligible individuals selected from these households successfully completed the individual interview. The overall response rate, which stands at 97.3%, is almost identical between urban and rural areas.

The household response rate is 98.6%, with a slight variation between rural (98.9%) and urban (98.3%). Similarly, the overall individual response rate is high (98.8%), with comparable proportions between rural (98.5%) and urban (99.0%).

Table 3.1: Number and percentage of households and respondents, and response rates, by residence (unweighted)

	Place of residence				Total	
	Urban		Rural		Number	Percentage
	Number	Percentage	Number	Percentage		
<i>Household selected</i>						
Completed (HC)	1926	92.9	2004	96.6	3930	94.7
Completed – eligible person (HCNE)	3	0.1	3	0.1	6	0.1
Incomplete (HINC)	0	0.0	0	0.0	0	0.0
No screening respondent (HNS)	0	0.0	0	0.0	0	0.0
Nobody at home (HNH)	12	0.6	2	0.1	14	0.3
Refused (HR)	21	1.0	18	0.9	39	0.9
Unoccupied (HUO)	58	2.8	37	1.8	95	2.3
Non-residential address (MAIN)	53	2.6	7	0.3	60	1.4
Other ¹ (HO)	1	0.0	3	0.1	4	0.1
Total number of households selected	2074	100	2074	100	4148	100
Household Response Rate (HRR) (%)²	98.3		98.9		98.6	
<i>Person selected</i>						
Completed (PC)	1906	99.0	1972	98.4	3878	98.7
Incomplete (PINC)	0	0.0	1	0.1	1	0.0
Non-eligible (PNE)	1	0.1	2	0.1	3	0.1
Not home (PNH)	5	0.3	2	0.1	7	0.2
Refused (PR)	3	0.2	1	0.1	4	0.1
Incapable (IP)	11	0.6	26	1.3	37	0.9
Other ¹ (PO)	0	0.0	0	0.0	0	0.0
Total number of people sampled	1926	100	2004	100	3930	100
Person Response Rate (PRR) (%)³	99.0		98.5		98.8	
Total Response Rate (TRR) (%)⁴	97.3		97.4		97.3	

Socio-demographic Characteristics	Weighted		Number of adults (thousands)	Unweighted number of adults
	Percentage (95% CI ¹)			
45-64	18.0 (16.7, 19.3)		1,973.4	890
65+	8.3 (7.1, 9.6)		908.6	316
<i>Place of residence</i>				
Urban	46.6 (44.9, 48.4)		5,116.7	1,906
Rural	53.4 (51.6, 55.1)		5,855.2	1,972
<i>Level of education²</i>				
No formal education	46.4 (43.5, 49.2)		5,086.0	1,934
Primary school	19.6 (17.9, 21.3)		2,147.3	745
Middle school	16.2 (14.7, 17.9)		1,779.2	547
High school	8.7 (7.5, 10.0)		950.8	307
Baccalaureate or higher	9.2 (7.7, 10.8)		1,007.3	344
Note : The following observations were missing: 0 for age, 0 for sex, 0 for residence and 1 for education.				
¹ 95% confidence interval.				
² No formal education includes "no formal schooling;" primary school includes "has not completed primary school" and "has completed primary school;" middle school education includes "has not completed middle school" and "has completed middle school;" high school education includes "has not completed high school" and "has completed high school;" baccalaureate or higher includes "baccalaureate;" "undergraduate degree" and "graduate degree."				

Source: ANSD, GATS 2023

CHAPTER IV: TOBACCO USE

Key Findings

- In Senegal, approximately half a million adults, or 4.1% of the population aged 15 and over, are current smokers. However, this proportion is higher among men (7.8%) than among women (0.4%), showing that men are about 20 times more likely to be current smokers than women.
- The most commonly consumed type of tobacco among adults is manufactured cigarettes, used by 2.9% of adults (0.316 million).
- On average, daily smokers consume 8.3 cigarettes per day, with nearly half purchasing between 5 and 9 cigarettes per day (49.6%).
- More than half of smokers started smoking before the age of 20 (58.2%): 21.7% between the ages of 17 and 19, 29.3% between the ages of 15 and 16, and 7.2% before the age of 15.
- Compared to smoking tobacco, smokeless tobacco is used by few Senegalese (0.4%). However, its consumption is slightly higher in women (0.5%) compared to men (0.3%).

Measuring the prevalence of tobacco use among adults is a fundamental part of monitoring smoking-related behaviors in Senegal. These data play a crucial role in strengthening the implementation of tobacco control policies. They also help identify the most vulnerable groups and guide targeted prevention interventions. In addition, they help meet the requirements for monitoring international commitments, particularly those related to the WHO Framework Convention on Tobacco Control (FCTC).

This chapter presents the main trends observed in tobacco use, highlighting the two most common forms in Senegal: Smoking tobacco (including manufactured cigarettes, hand-rolled cigarettes, pipes, cigars, etc.) and smokeless tobacco. It is structured in 13 sections covering (1) the prevalence of tobacco use; (2) the number of tobacco users; (3) the prevalence of current smokers by smoking tobacco product; (4) the number of current smokers by smoking tobacco product; (5) the frequency of tobacco use; (6) the average number of cigarettes smoked and the distribution of cigarettes smoked per day; (7) age of initiation of smoking tobacco; (8) prevalence among former daily smokers; (9) time since quitting smoking; (10) types of tobacco currently consumed; and (11) time between waking up and the first cigarette of the day; (12)

knowledge and use of e-cigarettes; and (13) knowledge and use of heated tobacco products.

4.1. PREVALENCE OF TOBACCO USE

4.1.1. Prevalence of Tobacco Smokers

Table 4.1A shows the prevalence of smoking among adults aged 15 years and older, distinguishing respondents according to their smoking status: Current smokers (including daily and occasional smokers) and non-smokers (including former daily smokers and those who have never smoked daily).

Nationally, approximately half a million adults, or 4.1% of the population aged 15 and over, are current smokers. However, this prevalence is higher among men (7.8%) than among women (0.4%), meaning that men are about 20 times more likely to be current smokers than women.

Daily tobacco use affects 3.4% of all adults, while 0.7% are occasional smokers. Here again, there is a significant disparity between the sexes: 6.5% of men are daily smokers compared to 0.4% of women. Occasional tobacco use affects mostly men (1.3% compared to 0.1% of women).

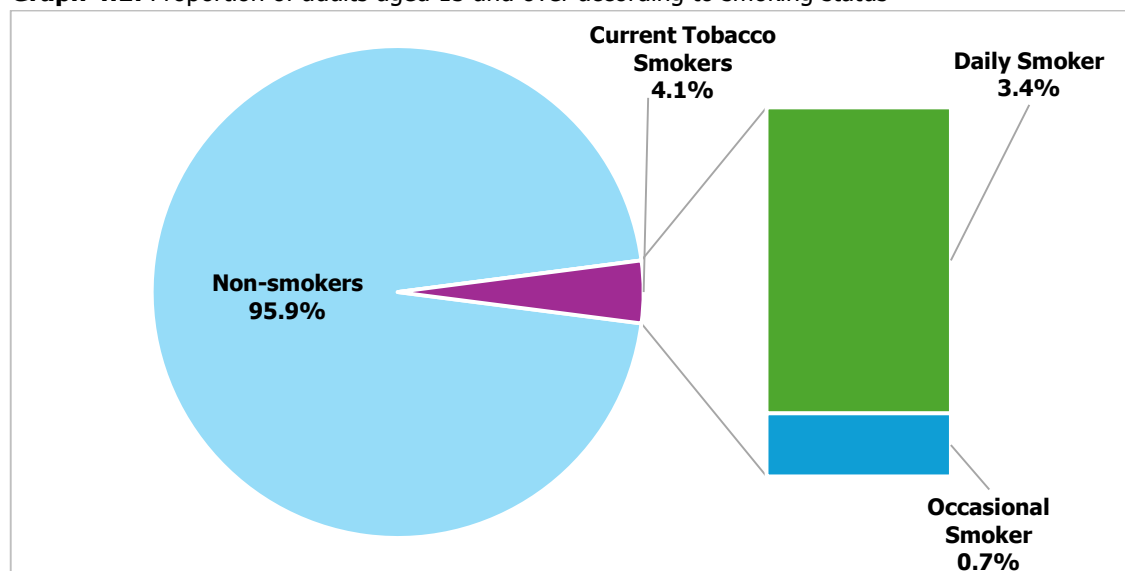
Non-smokers account for 95.9% of adults aged 15 and over. Of these, 3.6% are former daily smokers while most have never been daily smokers (92.3%). Looking at this breakdown by sex, it appears that 99.5% of women have never smoked daily, compared to 85.0% of men.

Table 4.1A: Percentage of adults aged 15 and over according to smoking status and sex

Smoking status	Overall			Male		Female	
	<i>Percentage (95% CI)</i>						
Current tobacco smoker	4.1	(3.3, 5.0)	7.8	(6.4, 9.5)	0.4	(0.2, 1.1)	
Daily smoker	3.4	(2.7, 4.3)	6.5	(5.3, 8.1)	0.4	(0.1, 1.1)	
Occasional smoker	0.7	(0.4, 1.1)	1.3	(0.7, 2.1)	0.1	(0.0, 0.5)	
Occasional smoker, formerly daily	0.3	(0.2, 0.6)	0.6	(0.3, 1.1)	0.1	(0.0, 0.5)	
Occasional smoker, never daily	0.3	(0.2, 0.8)	0.7	(0.3, 1.6)	0.0	N/A	
Non-smoker	95.9	(95.0, 96.7)	92.2	(90.5, 93.6)	99.6	(98.9, 99.8)	
Former daily smoker	3.6	(2.9, 4.5)	7.2	(5.8, 9.0)	0.1	(0.0, 0.4)	
Never daily smoker	92.3	(91.1, 93.4)	85.0	(82.7, 87.0)	99.5	(98.9, 99.8)	
Former occasional smoker	0.9	(0.6, 1.5)	1.8	(1.2, 2.8)	0.1	(0.0, 0.5)	
Never smoker	91.4	(90.1, 92.5)	83.2	(80.8, 85.3)	99.4	(98.8, 99.7)	
Note: Current smoking includes daily and occasional smoking (less than once a day).							
N/A - The estimate is "0.0."							

Source: ANSD, GATS 2023

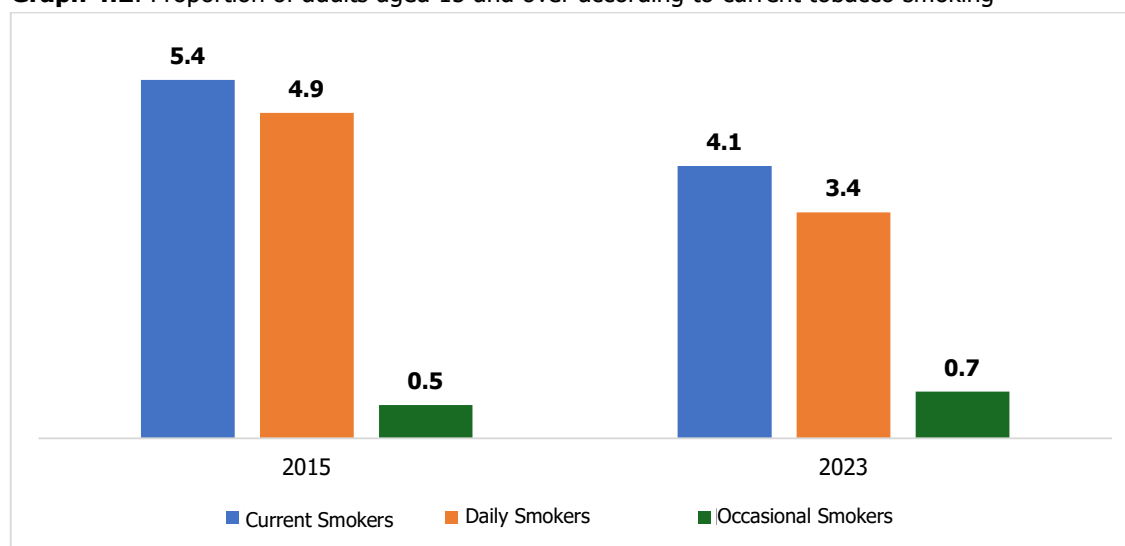
Graph 4.1: Proportion of adults aged 15 and over according to smoking status



Source: ANSD, GATS 2023

Trends: The proportion of adults aged 15 and over who use tobacco decreased between 2015 and 2023, with the prevalence of current smokers falling from 5.4% to 4.1%. This decline is particularly marked among daily smokers, whose proportion rose from 4.9% to 3.4% over the same period. In contrast, a slight increase is observed among occasional smokers (0.5% in 2015 compared to 0.7% in 2023).

Graph 4.2: Proportion of adults aged 15 and over according to current tobacco smoking



Source: ANSD, GATS 2015 and 2023

4.1.2. Prevalence of Smokeless Tobacco Users

Table 4.2A shows the distribution of adults according to smokeless tobacco use status. Overall, the prevalence of smokeless tobacco use is 0.4%. However, it is slightly higher in women (0.5%) compared to men (0.3%).

Prevalence levels of daily and occasional use of smokeless tobacco are similar, each at 0.2%. Women (0.2%) use smokeless tobacco slightly more than men (0.1%) on a daily basis.

Overall, almost all adults do not consume smokeless tobacco (99.6%). Among them, 0.2% are former daily users and 0.2% are former occasional users. Moreover, 99.4% of adults have never used smokeless tobacco on a daily basis, with almost identical proportions among women (99.5%) and men (99.3%).

Table 4.2A: Percentage of adults aged 15 and over according to smokeless tobacco use and sex

Status of smokeless tobacco use	Overall	Male	Female
	<i>Percentage (95% CI)</i>		
Current smokeless tobacco user	0.4 (0.2, 0.7)	0.3 (0.1, 0.7)	0.5 (0.2, 1.1)
Daily user	0.2 (0.1, 0.4)	0.1 (0.0, 0.4)	0.2 (0.1, 0.7)
Occasional user	0.2 (0.1, 0.5)	0.2 (0.1, 0.5)	0.3 (0.1, 0.9)
Occasional user, formerly daily	0.0 N/A	0.0 N/A	0.0 N/A
Occasional user, never daily	0.2 (0.1, 0.5)	0.2 (0.1, 0.5)	0.3 (0.1, 0.9)
Non-user of smokeless tobacco	99.6 (99.3, 99.8)	99.7 (99.3, 99.9)	99.5 (98.9, 99.8)
Former daily user	0.2 (0.1, 0.6)	0.4 (0.1, 1.3)	0.0 N/A
Never daily user	99.4 (99.0, 99.7)	99.3 (98.5, 99.7)	99.5 (98.9, 99.8)
Former occasional user	0.2 (0.1, 0.5)	0.3 (0.1, 0.7)	0.1 (0.0, 0.6)
Never use	99.2 (98.7, 99.5)	99 (98.2, 99.5)	99.4 (98.7, 99.8)

Note: Current smokeless tobacco use includes both daily and occasional use (less than once a day).
N/A - The estimate is "0.0."

Source: ANSD, GATS 2023

4.2. NUMBER OF TOBACCO USERS

4.2.1. Number of smokers

Table 4.1B presents the number (in thousands) of adults aged 15 and older by smoking status and sex. The total number of current smoking tobacco users is estimated at 0.45 million adults (423,200 men and 24,000 women). Of these, the majority are daily smokers with 0.38 million (355,000 men and 20,500 women); the proportion of occasional smokers is relatively low, representing 0.07 million (68,200 men and 3,500 women).

The number of current non-smokers of smoking tobacco stands at 10.52 million adults, divided between 5.00 million men and 5.52 million women. In addition, 10.13 million adults have never used smoking tobacco, including 4.61 million men and 5.52 million women.

Table 4.1B: Number of adults aged 15 and over according to smoking status and sex

Smoking status	Overall	Male	Female
	<i>Number in thousands</i>		
Current tobacco smoker	447.2	423.2	24.0
Daily smoker	375.5	355	20.5
Occasional smoker	71.8	68.2	3.5
Occasional smoker, formerly daily	33.8	30.3	3.5
Occasional smoker, never daily	38.0	38.0	0.0
Non-smoker	10524.7	5001.6	5523.1
Former daily smoker	394.9	392.1	2.9
Never daily smoker	10129.7	4609.5	5520.2
Former occasional smoker	102.3	98.4	3.9
Never smoker	10027.5	4511.1	5516.3
Note: Current smoking includes daily and occasional smoking (less than once a day).			
N/A - The estimate is "0.0."			

Source: ANSD, GATS 2023

4.2.2. Number of Smokeless Tobacco Users

Table 4.2B presents the number (in thousands) of adults by smokeless tobacco use status and by sex. The estimated number of current smokeless tobacco users is 0.04 million adults (41,500), including 18,200 daily and 23,300 occasional users. This consumption is slightly higher among women (26,400) than among men (15,100).

The number of “current non-users” of smokeless tobacco stands at 10.82 million adults, divided between 5.35 million men and 5.47 million women. In addition, 10.78 million adults have never used smokeless tobacco, including 5.31 million men and 5.47 million women.

Table 4.2B: Number of adults aged 15 and over according to smokeless tobacco use and sex

Status of smokeless tobacco use	Overall	Male	Female
	<i>Number in thousands</i>		
Current smokeless tobacco user	41.5	15.1	26.4
Daily user	18.2	5.8	12.4
Occasional user	23.3	9.3	14
Occasional user, formerly daily	0	0	0
Occasional user, never daily	23.3	9.3	14
Non-user of smokeless tobacco	10818.8	5348.3	5470.5
Former daily user	21.7	21.7	0
Never daily user	10797.1	5326.6	5470.5
Former occasional user	20.3	15.9	4.4
Never use	10776.8	5310.7	5466.1
Note: Current smokeless tobacco use includes both daily and occasional use (less than once a day).			
N/A - The estimate is "0.0."			

Source: ANSD, GATS 2023

4.3. PREVALENCE OF CURRENT SMOKERS BY TYPE OF SMOKING TOBACCO PRODUCT

Table 4.3 presents the results on the consumption of different smoking tobacco products. In Senegal, these products include two categories of cigarettes, manufactured cigarettes and hand-rolled cigarettes, and other smoking tobacco products, such as water pipes (shisha).

The results show that 4.1% of adults aged 15 and over are current smoking tobacco product users. Of these, 2.9% consume manufactured cigarettes, 1.4% hand-rolled cigarettes and 0.8% other types of smoking tobacco products.

Smoking tobacco use varies according to socio-demographic characteristics. Indeed, it is more common among people aged 45-64 (6.2%) and 25-44 (5.8%) than among younger people aged 15-24 years (1.3%). This trend is maintained for hand-rolled cigarettes but not for manufactured cigarettes, where the lowest proportion is observed among those aged 65 and over (0.7%) compared to 4.4% and 4.0% respectively among those aged 45-64 and 25-44 years.

Similarly, smoking tobacco use is higher in urban areas (4.6%) than in rural areas (3.6%). The same situation is observed for all smoking tobacco products, except for hand-rolled cigarettes.

In terms of educational levels, adults with primary school education have the highest proportion for all smoking tobacco products (5.8%) and for any type of tobacco. Also, when specifically considering manufactured cigarettes use, the prevalence is higher among adults with a primary school education (4.6%) compared to those with no formal education (2.0%).

Table 4.3: Percentage of adults aged 15 and older who are current smokers of various tobacco products, by selected sociodemographic characteristics

Socio-demographic characteristics	Any smoked tobacco product		Any cigarette ¹		Type of cigarette			Water pipe		Other smoked tobacco ²		
					Manufactured	Hand rolled						
	<i>Percentage (95% CI)</i>											
Overall	4.1	(3.3, 5.0)	3.6	(3.0, 4.5)	2.9	(2.3, 3.6)	1.4	(1.0, 1.9)	0.1	(0.0, 0.3)	0.8	(0.5, 1.4)
<i>Sex</i>												
Male	7.8	(6.4, 9.5)	7.1	(5.8, 8.7)	5.8	(4.6, 7.2)	2.6	(1.9, 3.6)	0.2	(0.1, 0.6)	1.4	(0.8, 2.6)
Female	0.4	(0.2, 1.1)	0.2	(0.1, 0.6)	0.0	(0.0, 0.2)	0.2	(0.1, 0.6)	0.0	(0.0, 0.2)	0.2	(0.0, 0.6)
<i>Age (years)</i>												
15-24	1.3	(0.7, 2.5)	1.3	(0.7, 2.5)	1.2	(0.6, 2.5)	0.4	(0.1, 1.2)	0.1	(0.0, 0.7)	0.3	(0.1, 1.2)
25-44	5.8	(4.4, 7.6)	5.0	(3.8, 6.5)	4.0	(3.0, 5.3)	1.8	(1.2, 2.8)	0.2	(0.1, 0.6)	1.4	(0.7, 2.8)
45-64	6.2	(4.5, 8.4)	5.8	(4.2, 7.9)	4.4	(3.1, 6.3)	2.4	(1.5, 3.9)	0.1	(0.0, 0.4)	0.4	(0.2, 0.9)
65+	2.3	(1.0, 5.2)	1.8	(0.7, 4.4)	0.7	(0.2, 2.1)	1.2	(0.4, 3.7)	0.0	N/A	0.5	(0.1, 3.4)
<i>Place of residence</i>												
Urban	4.6	(3.5, 6.1)	4.1	(3.1, 5.4)	3.7	(2.8, 4.9)	1.1	(0.7, 1.8)	0.2	(0.1, 0.6)	0.9	(0.4, 2.2)
Rural	3.6	(2.7, 4.9)	3.2	(2.4, 4.3)	2.2	(1.5, 3.1)	1.7	(1.1, 2.5)	0.0	N/A	0.7	(0.4, 1.2)
<i>Level of education</i>												
No formal education	3.3	(2.5, 4.5)	3.0	(2.1, 4.1)	2.0	(1.4, 3.1)	1.7	(1.1, 2.5)	0.1	(0.0, 0.2)	0.8	(0.5, 1.5)
Primary school	5.8	(4.2, 8.1)	5.3	(3.8, 7.4)	4.6	(3.2, 6.7)	1.6	(0.9, 2.8)	0.4	(0.1, 1.4)	0.7	(0.3, 1.8)
Middle school	4.6	(2.6, 8.1)	3.6	(2.2, 5.9)	3.1	(1.8, 5.3)	0.6	(0.2, 1.7)	0.1	(0.0, 0.7)	1.5	(0.4, 6.0)
High school	3.4	(1.6, 7.1)	3.4	(1.6, 7.1)	2.2	(0.9, 5.4)	1.7	(0.5, 5.1)	0.0	N/A	0.1	(0.0, 0.6)
Baccalaureate or higher	3.8	(1.9, 7.4)	3.8	(1.9, 7.4)	3.6	(1.8, 7.3)	0.6	(0.2, 1.8)	0.0	N/A	0.2	(0.0, 1.3)

Socio-demographic characteristics	Any smoked tobacco product	Any cigarette ¹	Type of cigarette			Other smoked tobacco ²
			Manufactured	Hand rolled	Water pipe	
Note: Current smoking includes daily and occasional smoking (less than once a day).						
¹ Includes manufactured and hand-rolled cigarettes.						
² Includes beedis, tobacco pipes, cigars or cigarillos and any other declared smoking tobacco product.						

Source: ANSD, GATS 2023

4.4. NUMBER OF CURRENT SMOKERS BY TYPE OF SMOKING TOBACCO PRODUCT

According to **Table 4.4** (based on Table 4.3), the total number of current smokers of various tobacco products is 0.45 million (447,200). Among these smokers, 0.32 million (316,400) consume manufactured cigarettes, while 0.25 million smoke hand-rolled cigarettes (152,600) or other forms of smoking tobacco (12,200 for water pipes and 86,500 for other smoked tobacco).

Marked sex disparities are observed. The number of men who smoke is estimated at 0.42 million (423,200); of which 0.31 million (313,700) consume manufactured cigarettes, compared to 0.14 million (142,200) for hand-rolled cigarettes. About 0.08 million (77,500) men use other types of smoking tobacco. In contrast, the number of current female smokers is much lower (0.02 million; 24,000), which is about 17.6 times less than the number of male smokers (0.42 million). Among them, 0.003 million (2,700) consume manufactured cigarettes, compared to 0.01 million (10,400) for hand-rolled cigarettes. In addition, 0.01 million (9,100) women use other types of smoking tobacco.

The 25-44 age group has the highest number of smokers for all smoking tobacco products (0.26 million, 256,700), with 0.18 million (177,700) consumers of manufactured cigarettes and 0.08 million (80,500) consumers of hand-rolled cigarettes. In terms of place of residence, the smoking population is higher in urban areas (0.24 million; 236,400) than in rural areas (0.21 million; 210,800). This trend is also reflected in the types of products consumed, although there is a slightly higher number in rural areas for hand-rolled cigarettes (0.10 million; 96,900), compared to 0.06 million (55,700) in urban areas.

In terms of education level, it appears that most smokers have no formal education (0.17 million; 169,300) or have completed primary school (0.13 million; 125,500) or middle school (0.08 million; 82,100). This trend prevails regardless of the type of cigarette consumed.

Table 4.4: Number of adults aged 15 and older who are current smokers of various tobacco products, by selected sociodemographic characteristics

Socio-demographic characteristics	Any smoked tobacco product	Type of cigarette			Water pipe	Other smoked tobacco ²
		Any cigarette ¹	Manufactured	Hand rolled		
<i>Number in thousands</i>						
Overall	447.2	399.3	316.4	152.6	12.2	86.5
<i>Sex</i>						
Male	423.2	386.2	313.7	142.2	10.4	77.5
Female	24.0	13.1	2.7	10.4	1.8	9.1
<i>Age (years)</i>						
15-24	24.0	13.1	2.7	10.4	1.8	9.1
25-44	48.1	48.1	45.2	13.3	3.4	11.1
45-64	256.7	220.6	177.7	80.5	7.7	63.5
65+	121.4	114.0	87.0	47.7	1.1	7.5
<i>Place of residence</i>						
Urban	21.0	16.6	6.5	11.2	0.0	4.4
Rural	236.4	209.0	189.3	55.7	12.2	45.8
<i>Level of education</i>						
No formal education	210.8	190.3	127.0	96.9	0.0	40.7
Primary school	169.3	151.9	104.0	85.8	2.8	42.9
Middle school	125.5	113.3	99.6	34.4	7.6	14.5
High school	82.1	63.7	55.4	10.7	1.8	26.4
Baccalaureate or higher	32.2	32.2	20.8	15.8	0.0	0.9
	38.2	38.2	36.6	6.0	0.0	1.8

Note: Current smoking includes daily and occasional smoking (less than once a day).

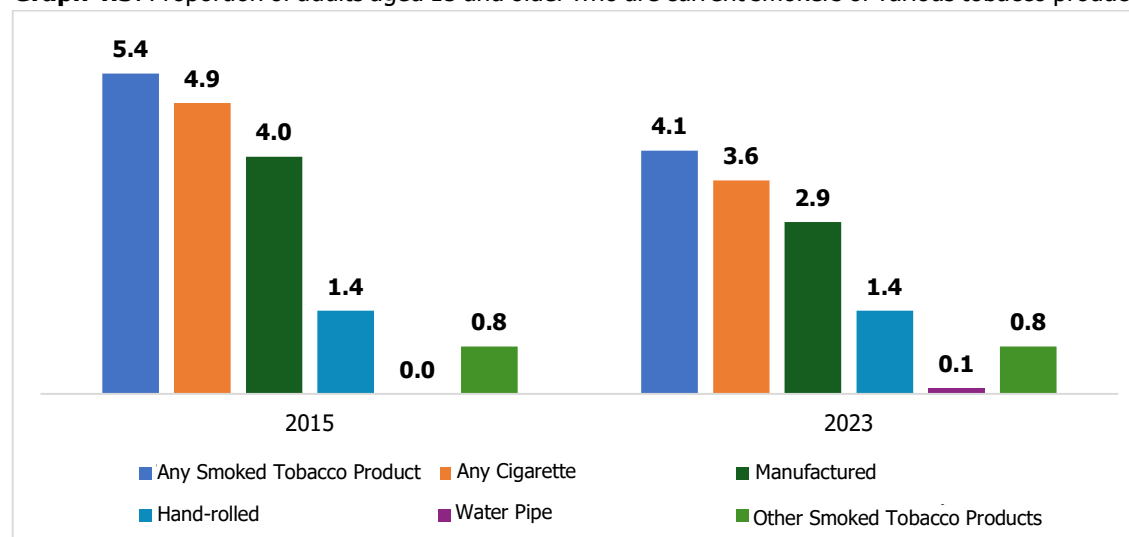
¹ Includes manufactured and hand-rolled cigarettes.

² Includes beedis, tobacco pipes, cigars or cigarillos and any other declared smoking tobacco product.

Source: ANSD, GATS 2023

Trends: Between 2015 and 2023, a decline in current smoking tobacco consumption was observed among adults aged 15 and older. The proportion of smoking tobacco product users increased from 5.4% in 2015 to 4.1% in 2023. Similarly, consumption of all forms of cigarettes declined from 4.3% to 3.6%. Consumption of manufactured cigarettes saw a more marked decline, from 4.0% to 2.9%.

Graph 4.3: Proportion of adults aged 15 and older who are current smokers of various tobacco products



Source: ANSD, GATS 2015 and 2023

4.5. FREQUENCY OF TOBACCO USE

Table 4.5 shows the distribution of adults aged 15 and over by frequency of smoking tobacco use (daily, occasional, non-smoker).

As a reminder, 3.4% of adults are daily smokers and 0.7% are occasional smokers, while 95.9% are non-smokers. The proportion of men who smoke daily (6.5%) is 16.3 times higher than that observed among women (0.4%). As for occasional smoking, 1.3% of men smoke on a non-daily basis, compared to 0.1% of women.

Daily smoking is more prevalent in the 45-64 age group (5.7%) and the 25-44 age group (4.8%) than in the 15-24 age group (0.9%) and the 65 and over age group (1.9%). Depending on the place of residence, daily smoking seems slightly more prevalent in urban areas (3.7%) than in rural areas (3.2%). Moreover, the proportion of daily smokers is higher among adults with a primary education (5.4%), while occasional smoking is more frequent among adults with a higher education level (1.6%), compared to other categories.

Table 4.5: Distribution (in %) of adults aged 15 and over according to the frequency of tobacco use, by sociodemographic characteristics

Socio-demographic characteristics	Frequency of smoking			Total
	Daily	Occasional ¹	Non-smoker	
	<i>Percentage (95% CI)</i>			
Overall	3.4 (2.7, 4.3)	0.7 (0.4, 1.1)	95.9 (95.0, 96.7)	100
<i>Sex</i>				
Male	6.5 (5.3, 8.1)	1.3 (0.7, 2.1)	92.2 (90.5, 93.6)	100
Female	0.4 (0.1, 1.1)	0.1 (0.0, 0.5)	99.6 (98.9, 99.8)	100
<i>Age (years)</i>				
15-24	0.9 (0.4, 1.9)	0.4 (0.1, 1.6)	98.7 (97.5, 99.3)	100
25-44	4.8 (3.6, 6.5)	1.0 (0.5, 1.9)	94.2 (92.4, 95.6)	100
45-64	5.7 (4.1, 7.9)	0.5 (0.2, 1.3)	93.8 (91.6, 95.5)	100
65+	1.9 (0.9, 4.3)	0.4 (0.1, 2.8)	97.7 (94.8, 99.0)	100
<i>Place of residence</i>				
Urban	3.7 (2.7, 5.1)	0.9 (0.4, 1.8)	95.4 (93.9, 96.5)	100
Rural	3.2 (2.3, 4.4)	0.4 (0.2, 0.8)	96.4 (95.1, 97.3)	100
<i>Level of education</i>				
No formal education	2.7 (1.9, 3.7)	0.7 (0.3, 1.4)	96.7 (95.5, 97.5)	100
Primary school	5.4 (3.8, 7.7)	0.4 (0.1, 1.2)	94.2 (91.9, 95.8)	100
Middle school	3.8 (2.0, 7.4)	0.8 (0.3, 2.2)	95.4 (91.9, 97.4)	100
High school	3.4 (1.6, 7.1)	0.0	96.6 (92.9, 98.4)	100
Baccalaureate or higher	2.2 (1.2, 4.0)	1.6 (0.4, 6.5)	96.2 (92.6, 98.1)	100

¹ The term "occasional" refers to smoking less than daily.

Source: ANSD, GATS 2023

4.6. AVERAGE NUMBER OF CIGARETTES SMOKED AND DISTRIBUTION OF CIGARETTES SMOKED ON AVERAGE PER DAY

Table 4.6 shows the average number and distribution (in percentage) of all types of cigarettes smoked per day by smokers aged 15 and older.

On average, a daily smoker consumes 8.3 cigarettes a day. Among them, nearly half

use between 5-9 cigarettes per day (49.6%) and 2.5% consume 25 or more cigarettes per day.

Among men, the overall average number of cigarettes smoked is slightly higher with 8.4 cigarettes per day. Among male daily smokers, the majority smoke 5 to 9 cigarettes per day (50.6%).

The average number of cigarettes smoked per day decreases with age: It is 9.1 cigarettes among daily smokers aged 25-45, while those aged 45-64 years consume 7.7 cigarettes.

Variations are also observed depending on the place of residence and the level of education. In urban areas, smokers consume an average of 9.8 cigarettes per day, compared to 6.7 in rural areas. In addition, most daily smokers living in urban areas (50.6%) smoke between 5 and 9 cigarettes per day. In rural areas, 48.7% of daily smokers consume between 5 and 9 cigarettes. Furthermore, the average daily cigarette consumption among smokers with no formal education is 8.6, and more than a third (38.7%) smoke between 5 and 9 cigarettes per day. Adults with a primary school education smoke an average of 8.4 cigarettes per day, and nearly half (49.0%) of them consume between 5 and 9 cigarettes per day.

Table 4.6: Average number and distribution (in %) of cigarettes smoked per day among daily cigarette smokers aged 15 and older, according to certain sociodemographic characteristics

Socio-demographic characteristics	Average number of cigarettes smoked per day ¹	Distribution of the average number of cigarettes smoked per day ¹					Total
		<5	5-9	10-14	15-24	≥25	
Overall	8.3 (7.2, 9.4)	21.6 (14.7, 30.6)	49.6 (38.9, 60.5)	13.7 (8.0, 22.3)	12.6 (7.3, 20.7)	2.5 (0.9, 6.5)	100
<i>Sex</i>							
Male	8.4 (7.2, 9.6)	21.0 (13.8, 30.6)	50.6 (40.0, 61.2)	12.9 (7.2, 21.9)	12.9 (7.5, 21.4)	2.6 (1.0, 6.6)	100
Female	* *	* *	* *	* *	* *	* *	100
<i>Age (years)</i>							
15-24	* *	* *	* *	* *	* *	* *	100
25-44	9.1 (7.4, 10.8)	17.2 (8.4, 32.0)	49.4 (34.4, 64.5)	14.5 (7.2, 26.9)	16.7 (8.6, 29.9)	2.2 (0.5, 8.5)	100
45-64	7.7 (6.1, 9.4)	19.6 (10.4, 33.6)	57.0 (40.7, 71.8)	12.0 (4.2, 29.7)	7.6 (2.3, 22.2)	3.9 (1.0, 14.0)	100
65+	* *	* *	* *	* *	* *	* *	100
<i>Place of residence</i>							
Urban	9.8 (8.1, 11.6)	14.3 (7.6, 25.1)	50.6 (36.0, 65.1)	10.8 (4.1, 25.3)	20.9 (11.8, 34.3)	3.4 (1.1, 9.8)	100
Rural	6.7 (5.5, 8.0)	28.9 (17.9, 43.0)	48.7 (33.4, 64.3)	16.5 (8.8, 28.8)	4.3 (1.1, 16.2)	1.6 (0.2, 10.7)	100
<i>Level of education</i>							
No formal education	8.6 (6.4, 10.9)	27.9 (15.1, 45.7)	38.7 (22.9, 57.3)	14.6 (5.6, 32.8)	15.1 (6.2, 32.2)	3.7 (1.0, 13.4)	100
Primary school	8.4 (6.4, 10.5)	19.9 (9.7, 36.6)	49.0 (31.3, 67.1)	13.9 (5.3, 31.9)	16.4 (7.1, 33.6)	0.7 (0.1, 4.8)	100
Middle school	* *	* *	* *	* *	* *	* *	100
High school	* *	* *	* *	* *	* *	* *	100
Baccalaureate or higher	* *	* *	* *	* *	* *	* *	100

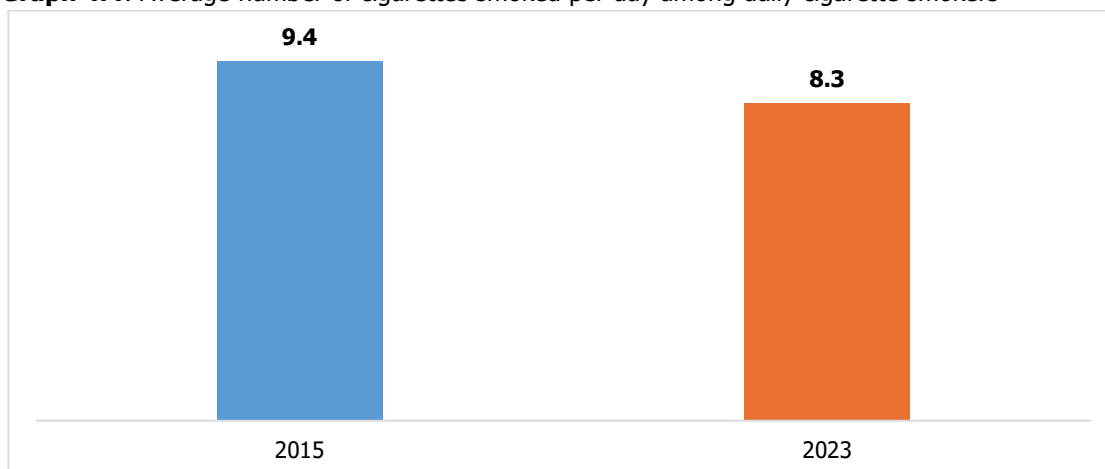
¹Among daily cigarette smokers, cigarettes are manufactured and hand rolled.

* Indicates the removal of estimates based on unweighted numbers below 25.

Source: ANSD, GATS 2023

Trends: The average number of cigarettes smoked per day by daily cigarette smokers aged 15 and older has fallen slightly, from 9.4 cigarettes in 2015 to 8.3 cigarettes in 2023.

Graph 4.4: Average number of cigarettes smoked per day among daily cigarette smokers



Source: ANSD, GATS 2023

4.7. AGE OF TOBACCO USE INITIATION

Table 4.7 shows the distribution of adults aged 20-34 who have ever smoked (current and former daily smokers) by age at which they started smoking, sex, and place of residence.

Overall, the average age of initiation of smoking among smokers aged 20-34 is 19.3 years. The onset of smoking among adults aged 20-34 who have already smoked is earlier in urban areas (18.6 years) than in rural areas (20.4 years).

Approximately 58.2% of smokers started smoking before the age of 20, including 21.7% between the ages of 17 and 19, 29.3% between the ages of 15 and 16, and 7.2% before the age of 15.

Table 4.7: Average age and distribution (%) of tobacco smokers aged 20 to 34 by age of initiation, sex, and place of residence

Socio-demographic characteristics	Average age of tobacco use initiation (years) ¹	Age at onset of smoking (years) ¹				Total
		<15	15-16	17-19	20+	
	<i>Mean (95% CI)</i>	<i>Percentage (95% CI)</i>				
Overall	19.3 (17.7, 20.8)	7.2 (3.4, 14.8)	29.3 (16.5, 46.6)	21.7 (12.9, 34.2)	41.7 (27.6, 57.4)	100
<i>Sex</i>						
Male	19.3 (17.7, 20.8)	7.4 (3.4, 15.1)	29.9 (16.8, 47.3)	20.9 (12.2, 33.6)	41.8 (27.4, 57.7)	100
Female	* *	* *	* *	* *	* *	100
<i>Place of residence</i>						
Urban	18.6 (16.3, 20.9)	7.8 (3.3, 17.3)	40.4 (21.2, 63.0)	21.2 (10.4, 38.4)	30.6 (14.5, 53.4)	100
Rural	20.4 (18.8, 22.1)	6.3 (1.3, 25.3)	10.7 (3.8, 26.7)	22.5 (10.3, 42.2)	60.6 (39.2, 78.5)	100

¹ Among respondents aged 20 to 34 who have ever smoked tobacco.

* Indicates the removal of estimates based on unweighted numbers below 25.

Source: ANSD, GATS 2023

4.8. PREVALENCE OF FORMER DAILY SMOKERS AND QUIT RATES

The quit rate or ratio is defined as the number of former daily smokers divided by the number of people who have ever smoked daily (current smokers and former daily smokers).

Table 4.8 shows the prevalence and quit rate of former daily smokers among adults aged 15 and over.

Overall, 3.6% of adults are former daily smokers and the quit rate is 49.1%. There are disparities between the sexes, with more men (7.2%) than women (0.1%) being former daily smokers. The proportion of former daily smokers increases with age: From 0.3% among 15–24-year-olds to 10.1% among 65 years and older. In addition, the quit rate is also higher in older age groups, at 81.3% among those aged 65 and over. Furthermore, there are few differences between places of residence: The quit rate in urban areas is 49.9% and 48.3% in rural areas. In terms of level of education, the differences are not very marked, with quit rates varying between 47.6% and 49.8%, regardless of education level.

Table 4.8: Percentage of former daily smokers among all adults aged 15 years and older and among those who have ever smoked daily, by certain sociodemographic characteristics

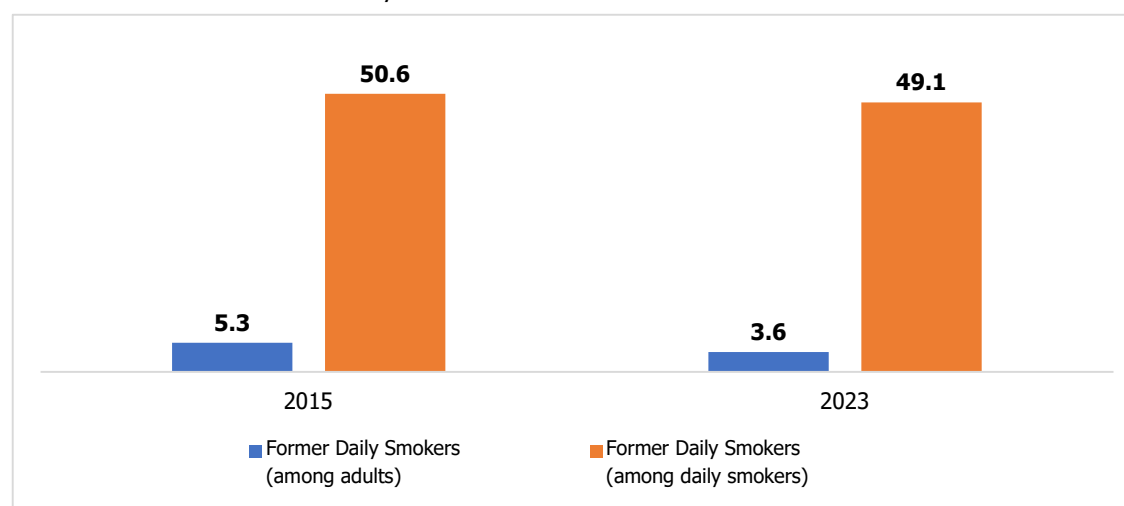
Socio-demographic characteristics	Former daily smokers ¹ (among all adults)	Quit rate ²
<i>Percentage (95% CI)</i>		
Overall	3.6 (2.9, 4.5)	49.1 (41.2, 57.1)
<i>Sex</i>		
Male	7.2 (5.8, 9.0)	50.4 (42.6, 58.3)
Female	0.1 (0.0, 0.4)	* *
<i>Age (years)</i>		
15-24	0.3 (0.1, 0.7)	* *
25-44	3.0 (2.0, 4.5)	36.2 (25.2, 48.9)
45-64	8.2 (6.2, 10.8)	58.3 (47.1, 68.7)
65+	10.1 (6.1, 16.2)	81.3 (62.2, 92.0)
<i>Place of residence</i>		
Urban	4.0 (3.0, 5.4)	49.9 (39.1, 60.6)
Rural	3.2 (2.3, 4.5)	48.3 (36.9, 59.9)
<i>Level of education</i>		
No formal education	2.9 (2.1, 4.1)	48.5 (37.2, 60.0)
Primary school	5.2 (3.3, 8.2)	47.8 (33.3, 62.6)
Middle school	3.9 (2.3, 6.6)	49.8 (29.5, 70.2)
High school	4.2 (2.5, 7.1)	* *
Baccalaureate or higher	2.4 (1.1, 5.1)	47.6 (26.7, 69.4)
¹ Current non-smokers.		
² Also known as the daily quitting smoking ratio.		
* Indicates the removal of estimates based on unweighted numbers below 25.		

Source: ANSD, GATS 2023

Trends: Between 2015 and 2023, the proportion of former daily smokers among all adults decreased from 5.3% to 3.6%. A decline was also observed among people aged 15 and older who had previously smoked daily, with the quitting rate falling from

50.6% to 49.1%.

Graph 4.5: Proportion of former daily smokers among all adults aged 15 years and older and among those who have ever smoked daily



Source: ANSD, GATS 2015 and 2023

4.9. TIME SINCE QUITTING SMOKING

Table 4.9 shows the distribution of former daily smokers aged 15 and over, by time since quitting smoking. Four time periods are distinguished: Less than one year, between 1 and less than 5 years, between 5 and less than 10 years, and 10 years or more.

Overall, nearly seven out of ten former smokers (68.9%) quit smoking 10 years ago or more. Some 7.1% quit smoking between 5 and less than 10 years ago, 14.9% between 1 and less than 5 years ago, and 9.0% less than one year ago.

The length of time since quitting varies greatly depending on age. Among 25–44-year-olds, 34.9% have quit smoking for 10 years or more, while this proportion reaches 89.1% among 45–64-year-olds and 89.7% among those aged 65 and over.

Depending on the place of residence, more former smokers in rural areas have quit smoking for more than 10 years (79.7%) compared to 59.2% in urban areas.

Table 4.9: Distribution (in %) of former daily smokers aged 15 and over, according to time since quitting smoking and certain sociodemographic characteristics

Socio-demographic characteristics	Time since quitting smoking (years) ¹				Total
	<1	1 to <5	5 to <10	≥10	
	<i>Percentage (95% CI)</i>				
Overall	9.0 (3.9, 19.6)	14.9 (9.6, 22.4)	7.1 (3.8, 13.1)	68.9 (57.8, 78.3)	100
<i>Sex</i>					
Male	9.1 (3.9, 19.7)	15.0 (9.7, 22.5)	6.5 (3.3, 12.4)	69.4 (58.2, 78.8)	100
Female	* *	* *	* *	* *	100
<i>Age (years)</i>					
15-24	* *	* *	* *	* *	100
25-44	23.3 (9.8, 45.8)	29.8 (17.4, 46.2)	11.9 (5.0, 25.6)	34.9 (18.5, 55.9)	100
45-64	0.6 (0.1, 4.4)	7.9 (3.2, 18.3)	2.3 (0.8, 6.9)	89.1 (78.9, 94.7)	100
65+	0.7 (0.1, 4.9)	0.0 N/A	9.5 (2.6, 29.6)	89.7 (70.7, 96.9)	100

Socio-demographic characteristics	Time since quitting smoking (years) ¹								Total
	<1		1 to <5		5 to <10		≥10		
<i>Place of residence</i>									
Urban	15.6	(6.6, 32.6)	19.0	(11.3, 30.1)	6.2	(2.6, 14.0)	59.2	(42.9, 73.7)	100
Rural	1.7	(0.2, 11.4)	10.4	(4.7, 21.5)	8.2	(3.2, 19.2)	79.7	(67.3, 88.3)	100
<i>Level of education</i>									
No formal education	0.0	N/A	13.0	(6.1, 25.5)	4.2	(0.8, 18.7)	82.8	(68.6, 91.4)	100
Primary school	13.0	(4.3, 33.2)	12.9	(5.4, 28.0)	8.0	(3.0, 19.8)	66.1	(46.9, 81.1)	100
Middle school	*	*	*	*	*	*	*	*	100
High school	*	*	*	*	*	*	*	*	100
Baccalaureate or higher	*	*	*	*	*	*	*	*	100

¹Among former daily smokers (current non-smokers).

Source: ANSD, GATS 2023

4.10. TYPES OF TOBACCO CURRENTLY CONSUMED

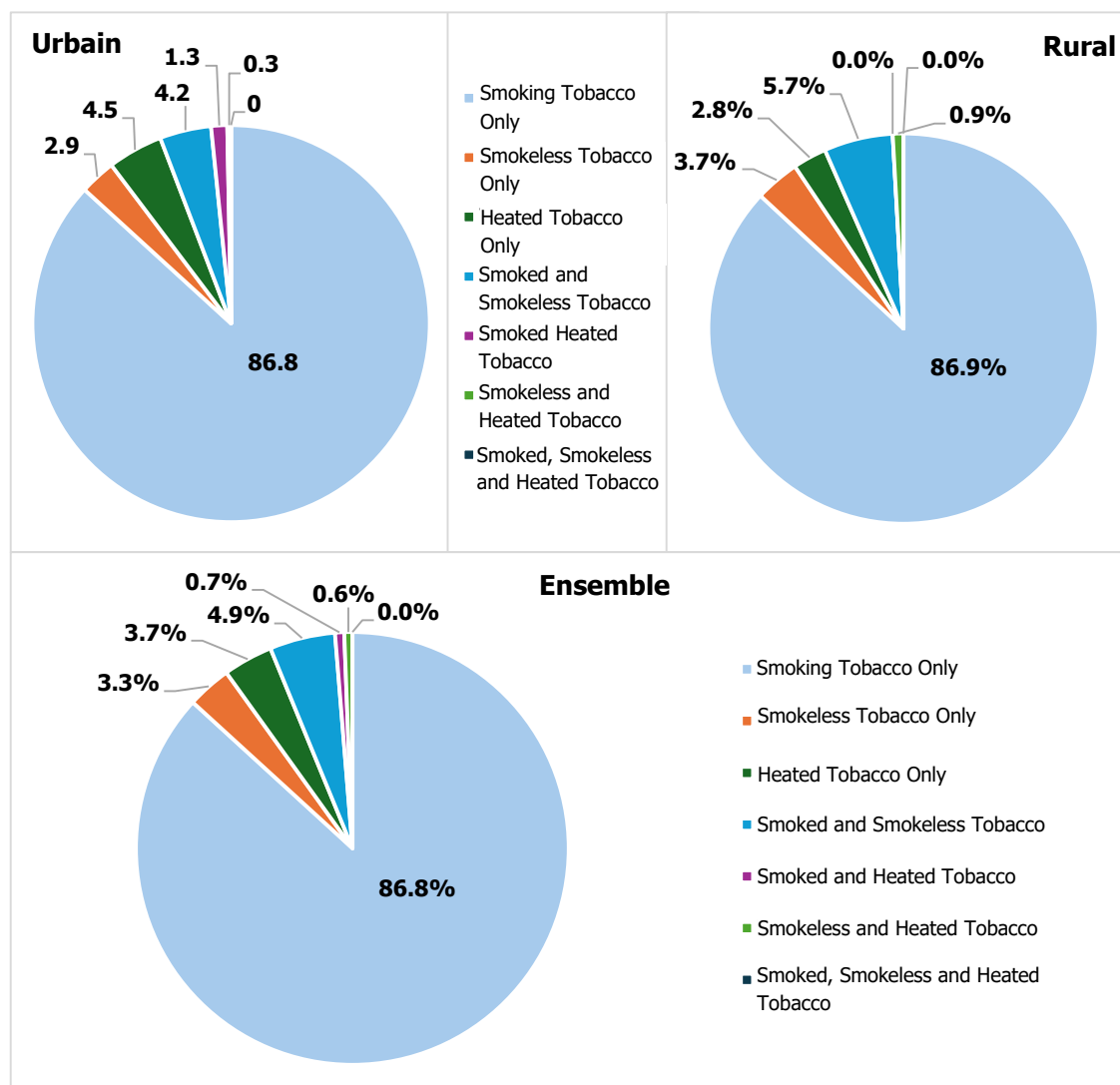
Table 4.10 shows the distribution of current tobacco users aged 15 years and older (both daily and occasional), by type of tobacco used and certain sociodemographic characteristics. The forms of consumption are grouped into three categories: Smoking tobacco only, smokeless tobacco only, and a combination of the two.

Overall, 4.4% of adults aged 15 and over currently use tobacco. Of these, 86.9% use only smoking tobacco, 3.3% use only smokeless tobacco, and 4.9% use both smoking and smokeless tobacco. Exclusive consumption of heated tobacco is 3.7%. Combinations including this type are rare (less than 1%). The prevalence of tobacco use is significantly higher among men (8.2%) than among women (0.8%). Among men, 93.1% use smoking tobacco exclusively; other forms are marginal.

The proportion of current tobacco users is lower among 15–24-year-olds (1.6%) than among older age groups; it is 6.2% among 25–44-year-olds and 6.3% among 45–64-year-olds. Smoking-only tobacco is used by the majority of adults aged 25 to 44 (89.1%) and 45 to 64 (92.0%).

Current tobacco use is higher in urban areas (5.0%) than in rural areas (3.9%). The distribution by type of product consumed is similar in both areas: Approximately 86.8% to 86.9% use only smoking tobacco. Smokeless tobacco is used by 2.9% of urban and 3.7% of rural consumers, respectively.

Graph 4.6: Distribution (in %) of current tobacco users aged 15 and older, by type of tobacco consumed and place of residence – 2023 Senegal GATS



Source: ANSD, GATS 2023

Adults with no formal education have a current tobacco consumption rate of 3.6%, those with primary school education 6.1%, and 4.6% and 4.8% respectively for those with middle and high school education. Among consumers, the majority use only smoking tobacco, with a share of 93.2% among those with primary-school education, 86.5% among those with middle-school education, and 85.8% among those with no formal education.

Table 4.10: Distribution (in %) of current tobacco users aged 15 and older, by type of tobacco consumed and selected sociodemographic characteristics

Socio-demographic characteristics	Current tobacco users ¹	Type of tobacco currently used ²							Total
		Smoking tobacco only	Smokeless tobacco only	Heated tobacco only	Smoking and smokeless tobacco	Smoked and heated tobacco	Smokeless and heated tobacco	Smoked, smokeless, and heated tobacco	
Overall	4.4 (3.6, 5.4)	86.9 (79.7, 91.7)	3.3 (1.0, 10.2)	3.7 (1.4, 9.3)	4.9 (2.3, 10.1)	0.7 (0.2, 2.8)	0.6 (0.1, 2.7)	0.0 N/A	100
<i>Sex</i>									
Male	8.2 (6.8, 9.9)	93.1 (87.5, 96.3)	1.0 (0.2, 4.3)	3.0 (1.1, 8.1)	2.4 (0.8, 6.9)	0.3 (0.0, 2.3)	0.2 (0.0, 1.3)	0.0 N/A	100
Female	0.8 (0.4, 1.5)	* *	* *	* *	* *	* *	* *	* *	100
<i>Age (years)</i>									
15-24	1.6 (0.9, 2.9)	* *	* *	* *	* *	* *	* *	* *	100
25-44	6.2 (4.8, 8.0)	89.1 (78.6, 94.8)	3.6 (0.6, 18.0)	1.7 (0.4, 6.5)	3.4 (1.0, 10.8)	1.2 (0.3, 4.8)	1.0 (0.2, 4.7)	0.0 N/A	100
45-64	6.3 (4.6, 8.6)	92.0 (80.9, 96.9)	0.0 N/A	1.7 (0.2, 11.3)	6.3 (2.1, 17.1)	0.0 N/A	0.0 N/A	0.0 N/A	100
65+	3.0 (1.5, 5.9)	* *	* *	* *	* *	* *	* *	* *	100
<i>Place of residence</i>									
Urban	5.0 (3.8, 6.5)	86.8 (77.7, 92.6)	2.9 (0.9, 9.1)	4.5 (1.6, 11.8)	4.2 (1.4, 11.9)	1.3 (0.3, 5.3)	0.3 (0.0, 2.3)	0.0 N/A	100
Rural	3.9 (2.9, 5.3)	86.9 (74.3, 93.8)	3.7 (0.5, 21.5)	2.8 (0.4, 17.6)	5.7 (2.1, 14.8)	0.0 N/A	0.9 (0.1, 6.2)	0.0 N/A	100
<i>Level of education</i>									
No formal education	3.6 (2.7, 4.9)	85.8 (71.5, 93.6)	6.2 (1.3, 24.8)	0.0 N/A	7.2 (3.0, 16.5)	0.8 (0.1, 5.5)	0.0 N/A	0.0 N/A	100
Primary school	6.1 (4.4, 8.4)	93.2 (81.4, 97.7)	0.0 N/A	1.6 (0.2, 10.9)	3.0 (0.4, 18.3)	0.0 N/A	2.2 (0.5, 9.7)	0.0 N/A	100
Middle school	4.8 (2.7, 8.2)	86.5 (64.6, 95.8)	0.0 N/A	2.8 (0.4, 18.9)	8.3 (1.8, 31.1)	2.3 (0.3, 15.7)	0.0 N/A	0.0 N/A	100
High school	4.4 (2.3, 8.1)	* *	* *	* *	* *	* *	* *	* *	100
Baccalaureate or higher	4.6 (2.5, 8.2)	* *	* *	* *	* *	* *	* *	* *	100

¹ Among all adults. Includes daily and occasional smokers (less than once a day), users of smokeless products or heated tobacco products.

² Among current tobacco users.

N/A - The estimate is "0.0."

* Indicates the removal of estimates based on unweighted numbers below 25.

Source: ANSD, GATS 2023

4.11. TIME BETWEEN WAKING UP AND SMOKING THE FIRST CIGARETTE OF THE DAY

The time between waking up and smoking the first cigarette is a key indicator of nicotine dependence. The shorter the delay, the higher the dependence is generally. As part of the Global Adult Tobacco Survey (GATS) conducted in Senegal in 2023, this question was asked to daily smokers aged 15 and over in order to assess their level of dependence and guide tobacco control efforts. To this end, **Table 4.11** shows the distribution of daily smokers according to the time of consumption of the first cigarette and certain sociodemographic characteristics.

Nationally, nearly one in four daily smokers consume their first cigarette within 5 minutes of waking up (24.3%), 31.7% within 6-30 minutes, and 11.4% within 31-60 minutes. A relatively large proportion (32.6%) wait more than an hour after waking up to smoke.

Analysis by age group reveals that the 25-44 and 45-64 age groups have different profiles. Among 25-44-year-olds, 23.4% smoke within five minutes of waking up, while 35.1% wait more than an hour. Among 45-64-year-olds, a higher proportion (37.7%) smokes between six and thirty minutes after waking up, while 31.0% wait more than an hour.

With regard to place of residence, there are notable differences in the time of consumption of the first cigarette after waking up. In urban areas, the highest proportion of smokers (38.2%) smoke their first cigarette between six and thirty minutes after waking up, while in rural areas, the highest proportion (33.9%) wait more than 60 minutes. However, in the first five minutes, the proportion of smokers is higher in rural areas (25.5%) than in urban areas (23.2%).

Moreover, the level of education seems to have an influence on the degree of dependence. Among smokers without formal education, 33.9% smoke within five minutes of waking up, the highest proportion observed in available subgroups. This rate is lower (25.3%) among people with primary school education. In addition, the proportion of those who wait more than an hour is also relatively high in both groups (29.7% among those with no schooling and 27.3% among those with primary school education).

Table 4.11: Distribution (in %) of daily smokers aged 15 and over, according to time first cigarette of the day is smoked and certain sociodemographic characteristics

Socio-demographic characteristics	Time first cigarette of the day is smoked				Total
	≤5 minutes	6 to 30 minutes	31-60 minutes	>60 minutes	
Overall	24.3	31.7	11.4	32.6	100
	<i>Percentage (95% CI)</i>				
<i>Sex</i>					
Male	23.3 (15.7, 33.3)	31.4 (22.5, 42.0)	11.0 (6.2, 18.9)	34.2 (23.8, 46.4)	100
Female	* *	* *	* *	* *	100
<i>Age (years)</i>					
15-24	* *	* *	* *	* *	100
25-44	23.4 (13.8, 36.7)	31.1 (20.0, 44.9)	10.4 (3.8, 25.5)	35.1 (20.2, 53.6)	100
45-64	16.4 (8.0, 30.7)	37.7 (24.2, 53.3)	15.0 (7.0, 29.3)	31.0 (18.6, 46.9)	100
65+	* *	* *	* *	* *	100
<i>Place of residence</i>					
Urban	23.2 (12.8, 38.2)	38.2 (24.4, 54.3)	7.3 (2.5, 19.5)	31.3 (16.7, 50.8)	100
Rural	25.5 (14.8, 40.2)	24.8 (15.1, 38.1)	15.7 (7.9, 28.9)	33.9 (21.1, 49.7)	100
<i>Level of education</i>					
No formal education	33.9 (19.6, 51.9)	26.6 (15.9, 41.1)	9.8 (4.4, 20.3)	29.7 (16.9, 46.8)	100
Primary school	25.3 (13.4, 42.4)	34.1 (19.3, 52.7)	13.4 (5.9, 27.4)	27.3 (14.6, 45.2)	100
Middle school	* *	* *	* *	* *	100
High school	* *	* *	* *	* *	100
Baccalaureate or higher	* *	* *	* *	* *	100
N/A - The estimate is "0.0."					
* Indicates the removal of estimates based on unweighted numbers below 25.					

Source: ANSD, GATS 2023

4.12. AWARENESS AND USE OF E-CIGARETTES

Table 4.12 shows the proportion of adults who have heard of e-cigarettes, those who have used them, and the proportion of current users.

The results show that just over one-third of adults reported having heard of e-cigarettes (36.6%). However, use remains very marginal: 1.5% of adults have used them, 0.4% are current users, and barely 0.3% use them daily.

There are notable differences according to sex : More men are familiar with e-cigarettes (41.4%) than women (31.8%). Men are also more likely to have used them (2.0% compared to 0.9% for women) and to be current users (0.6% compared to 0.3%).

Analysis by age group reveals a generational trend: Awareness of e-cigarettes reaches 37.4% among 15-24-year-olds, 40.6% among 25-44-year-olds, 32.4% among 45-64-year-olds, and only 22.1% among those aged 65 and over. Use, whether occasional or daily, is also more widespread among young people aged 15-24, with 2.2% of whom 0.8% are current users.

Knowledge of this new form of nicotine consumption varies according to the place of residence. In urban areas, more than half of adults (56.1%) have heard of e-cigarettes, compared to only 19.5% in rural areas. Similarly, use is slightly more common in urban areas (2.3% have already used them and 0.6% are current users) than in rural areas (0.7% and 0.3% respectively).

Furthermore, the level of education also seems to have some influence. Indeed, awareness of e-cigarettes increases significantly with the level of education: it rises from 19.2% among people with no formal education to 69.9% among those who have attained higher education. Use follows a similar trend. For example, 5.3% of higher education graduates have already used them, compared to 0.4% of people with no formal education.

Among adults who have heard of e-cigarettes, use is more common among those aged 15-24 (2.2%).

Table 4.12: Awareness and use of e-cigarettes among adults aged 15 years and older, according to certain sociodemographic characteristics

Socio-demographic characteristics	Have you ever heard of e-cigarettes? ¹	Users ¹	Daily users ¹	Current users ^{1,2}	Current daily users ¹	Current occasional users ¹	Current users among those who were aware ³
<i>Percentage (95% CI)</i>							
Overall	36.6 (33.8, 39.4)	1.5 (1.0, 2.1)	0.3 (0.1, 0.6)	0.4 (0.2, 0.8)	0.1 (0.0, 0.3)	0.4 (0.2, 0.7)	1.2 (0.7, 2.1)
<i>Sex</i>							
Male	41.4 (37.8, 45.2)	2.0 (1.3, 3.1)	0.4 (0.2, 1.0)	0.6 (0.3, 1.2)	0.1 (0.0, 0.6)	0.5 (0.2, 1.1)	1.5 (0.7, 3.0)
Female	31.8 (28.8, 35.0)	0.9 (0.5, 1.6)	0.2 (0.0, 0.5)	0.3 (0.1, 0.6)	0.0 (0.0, 0.2)	0.2 (0.1, 0.5)	0.8 (0.4, 1.8)
<i>Age (years)</i>							
15-24	37.4 (33.3, 41.7)	2.2 (1.4, 3.7)	0.5 (0.2, 1.4)	0.8 (0.4, 1.7)	0.1 (0.0, 0.8)	0.7 (0.3, 1.5)	2.2 (1.1, 4.4)
25-44	40.6 (37.1, 44.3)	1.5 (0.9, 2.5)	0.3 (0.1, 0.7)	0.3 (0.1, 0.8)	0.0 (0.0, 0.3)	0.2 (0.1, 0.8)	0.6 (0.2, 2.0)
45-64	32.4 (28.4, 36.7)	0.7 (0.2, 2.4)	0.0 N/A	0.3 (0.1, 1.4)	0.0 N/A	0.3 (0.1, 1.4)	0.9 (0.2, 4.2)
65+	22.1 (16.8, 28.5)	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A
<i>Place of residence</i>							
Urban	56.1 (51.7, 60.4)	2.3 (1.5, 3.6)	0.4 (0.2, 0.9)	0.6 (0.3, 1.3)	0.0 (0.0, 0.2)	0.6 (0.3, 1.2)	1.1 (0.6, 2.2)
Rural	19.5 (16.4, 23.0)	0.7 (0.4, 1.3)	0.2 (0.0, 0.7)	0.3 (0.1, 0.7)	0.1 (0.0, 0.5)	0.2 (0.1, 0.6)	1.4 (0.5, 3.7)
<i>Level of education</i>							
No formal education	19.2 (16.9, 21.8)	0.4 (0.2, 1.3)	0.0 (0.0, 0.3)	0.2 (0.1, 0.8)	0.0 N/A	0.2 (0.1, 0.8)	1.1 (0.3, 3.8)
Primary school	40.5 (35.6, 45.6)	0.5 (0.1, 1.7)	0.0 N/A	0.5 (0.1, 1.7)	0.0 N/A	0.5 (0.1, 1.7)	1.2 (0.3, 4.2)
Middle school	47.2 (41.6, 52.8)	2.4 (1.3, 4.4)	0.7 (0.2, 2.0)	0.7 (0.2, 2.3)	0.1 (0.0, 0.7)	0.6 (0.1, 2.3)	1.4 (0.4, 4.8)
High school	65.1 (58.3, 71.4)	3.3 (1.6, 6.7)	0.6 (0.1, 2.9)	1.1 (0.4, 3.1)	0.5 (0.1, 3.2)	0.6 (0.2, 1.9)	1.6 (0.6, 4.6)
Baccalaureate or higher	69.9 (63.7, 75.6)	5.3 (2.7, 9.9)	1.1 (0.4, 3.5)	0.4 (0.1, 3.0)	0.0 N/A	0.4 (0.1, 3.0)	0.6 (0.1, 4.2)
¹ Among all adults.							
² Current use includes daily or less daily use.							
³ Among those who had already heard of e-cigarettes.							
N/A - The estimate is "0.0."							

Source: ANSD, GATS 2023

4.13. AWARENESS AND USE OF HEATED TOBACCO

Table 4.13 shows the proportion of adults who have heard of heated tobacco products and those who have used them.

Overall, 19.3% of adults have heard of heated tobacco products with a slightly smaller proportion of women (16.1%) than men (22.5%). Among the different age groups, awareness of this product is distributed as follows: 18.8% among 15-24-year-olds, 21.8% among 25-44-year-olds, 19.0% among 45-64-year-olds, and 9.4% among those aged 65 and over. Awareness of heated tobacco products increases with level of education. It rises from 10.5% among adults with no formal education to 40.0% among those with baccalaureate level or higher. There is a notable difference between urban areas (29.4%) and rural areas (10.4%). Of those who have already heard of this product, 1.1% are current users (daily or occasional). The prevalence of current consumption is 0.2%. It is three times higher among men (0.3%) than among women (0.1%).

Table 4.13: Awareness and use of heated tobacco among adults aged 15 years and older, according to certain sociodemographic characteristics

Socio-demographic characteristics	Have you ever heard of heated tobacco products? ¹	Has already used heated tobacco products ¹	Daily users ¹	Current users ^{1,2}	Current daily users ¹	Current occasional users ¹	Current users among those who were aware ³
	<i>Percentage (95% CI)</i>						
Overall	19.3 (17.4, 21.3)	0.9 (0.6, 1.4)	0.2 (0.1, 0.5)	0.2 (0.1, 0.5)	0.1 (0.0, 0.3)	0.2 (0.1, 0.3)	1.1 (0.5, 2.4)
<i>Sex</i>							
Male	22.5 (19.9, 25.5)	1.4 (0.9, 2.4)	0.4 (0.2, 0.9)	0.3 (0.1, 0.7)	0.1 (0.0, 0.6)	0.2 (0.1, 0.5)	1.2 (0.5, 3.0)
Female	16.1 (13.9, 18.6)	0.4 (0.2, 0.9)	0.1 (0.0, 0.3)	0.1 (0.1, 0.4)	0.0 (0.0, 0.2)	0.1 (0.0, 0.4)	0.9 (0.3, 2.4)
<i>Age (years)</i>							
15-24	18.8 (16.0, 21.9)	1.4 (0.7, 2.5)	0.4 (0.1, 1.2)	0.3 (0.1, 1.0)	0.1 (0.0, 0.8)	0.2 (0.0, 0.8)	1.6 (0.5, 5.0)
25-44	21.8 (19.1, 24.8)	1.1 (0.6, 2.0)	0.2 (0.1, 0.6)	0.2 (0.1, 0.6)	0.0 (0.0, 0.3)	0.2 (0.1, 0.5)	1.1 (0.4, 2.6)
45-64	19.0 (15.7, 22.8)	0.2 (0.0, 0.7)	0.1 (0.0, 0.5)	0.1 (0.0, 0.7)	0.0	N/A	0.5 (0.1, 3.8)
65+	9.4 (6.1, 14.4)	0.0	N/A	0.0	N/A	0.0	N/A
<i>Place of residence</i>							
Urban	29.4 (26.0, 33.1)	1.4 (0.8, 2.2)	0.3 (0.1, 0.9)	0.3 (0.1, 0.7)	0.0 (0.0, 0.2)	0.3 (0.1, 0.6)	1.0 (0.4, 2.3)
Rural	10.4 (8.5, 12.6)	0.6 (0.2, 1.2)	0.1 (0.0, 0.4)	0.1 (0.0, 0.7)	0.1 (0.0, 0.5)	0.1 (0.0, 0.3)	1.4 (0.3, 6.4)
<i>Level of education</i>							
No formal education	10.3 (8.6, 12.3)	0.1 (0.0, 0.4)	0.0 (0.0, 0.3)	0.0 (0.0, 0.2)	0.0	N/A	0.3 (0.0, 1.9)
Primary school	21.5 (18.1, 25.4)	1.1 (0.4, 3.0)	0.2 (0.0, 1.2)	0.2 (0.1, 0.8)	0.0	N/A	1.0 (0.3, 3.5)
Middle school	23.6 (19.1, 28.7)	0.6 (0.2, 2.0)	0.1 (0.0, 0.7)	0.2 (0.1, 0.9)	0.1 (0.0, 0.7)	0.1 (0.0, 0.9)	1.0 (0.2, 3.8)
High school	32.1 (26.4, 38.3)	3.1 (1.4, 6.7)	0.6 (0.1, 2.8)	0.7 (0.2, 2.9)	0.5 (0.1, 3.2)	0.2 (0.0, 1.7)	2.1 (0.5, 8.8)
Baccalaureate and higher	40.0 (33.0, 47.4)	3.1 (1.6, 6.0)	1.0 (0.2, 3.9)	0.6 (0.1, 2.7)	0.0	N/A	1.6 (0.4, 6.6)
¹ Among all adults.							
² Current use includes daily or less daily use.							
³ Among those who had already heard of heated tobacco products.							
N/A - The estimate is "0.0."							

Source: ANSD, GATS 2023

CHAPTER V: QUITTING SMOKING

Key Findings

- Just over half of current smokers (52.4%) reported having tried to quit smoking.
- The most commonly used method of cessation remains quitting without assistance, chosen by 74.4% of smokers who have tried.
- 27.0% of smokers indicated they intend to quit smoking before the following month.

Counseling (psychosocial support), medical care (pharmacotherapy), and other methods, including traditional medicine, are the smoking cessation methods found in Senegal.

However, there are no referral centers in Senegal to quit smoking. Significant efforts are being made at the Grand Yoff and Fann hospitals to treat cases that arise. Advice is also provided via the National Health and Social Education and Information Service (SNEISS) toll-free number to support or guide callers who want to quit smoking.

This chapter presents the results obtained with regard to smoking cessation, the methods used to quit, and the intention to quit smoking.

5.1. SMOKING CESSATION AND HEALTHCARE SEEKING BEHAVIOR

An attempt to quit smoking is defined as abstaining from smoking for a period of up to one year by current and former smokers. **Table 5.1** shows the proportion of current and former smokers who have attempted to quit smoking, visited a healthcare professional, been asked about it, and received advice from a healthcare professional about quitting smoking.

5.1.1. Current Smokers and Former Smokers Who Tried to Quit Smoking

The results reveal that among former and current smokers aged 15 and over, just over half (52.4%) tried to quit smoking in the last 12 months. A higher proportion of adults living in urban areas have attempted to quit smoking (53.8%) than those living in rural areas (50.6%). Regarding the level of education, smokers with primary school education seem to have the highest number of quit attempts (57.3%).

5.1.2. Current Smokers and Former Smokers Who Have Consulted a Healthcare Professional

Among former and current smokers, just over one in ten (10.5%) reported consulting a healthcare professional in the last 12 months. This proportion is higher among those living in urban areas than in rural areas (13.7% versus 6.6%). Depending on the level of education, current smokers and former smokers with middle school education seem relatively more likely to have consulted a healthcare professional (12.6%).

Table 5.1: Percentage of smokers aged 15 years and older who tried to quit smoking and who received assistance from a healthcare professional in the past 12 months, by certain sociodemographic characteristics

Socio-demographic characteristics	Smoking cessation and healthcare-seeking behavior			
	I tried to quit ¹	I visited a healthcare professional ^{1,2}	Asked by a healthcare professional if a smoker ^{2,3}	Advised to quit by a healthcare professional ^{2,3}
Overall	52.4 (42.7, 62.0)	10.5 (5.9, 18.1)	* *	* *
<i>Sex</i>		<i>Percentage (95% CI)</i>		
Male	52.2 (42.1, 62.1)	10.2 (5.6, 17.9)	* *	* *
Female	* *	* *	* *	* *
<i>Age (years)</i>				
15-24	* *	* *	* *	* *
25-44	54.9 (40.9, 68.1)	10.4 (4.8, 21.2)	* *	* *
45-64	44.5 (30.8, 59.0)	12.1 (4.8, 27.2)	* *	* *
65+	- -	- -	* *	* *
<i>Residence</i>				
Urban	53.8 (39.4, 67.6)	13.7 (7.1, 24.8)	* *	* *
Rural	50.6 (38.4, 62.8)	6.6 (1.8, 21.2)	* *	* *
<i>Level of education</i>				
No formal education	51.8 (36.6, 66.5)	4.3 (1.7, 10.2)	* *	* *
Primary school	57.3 (43.3, 70.2)	10.2 (3.7, 25.5)	* *	* *
Middle school	53.0 (27.2, 77.4)	12.6 (3.9, 33.8)	* *	* *
High school	* *	* *	* *	* *
Baccalaureate or higher	* *	* *	* *	* *
¹ Among current smokers and former smokers who have been abstinent for less than 12 months.				
² HCP = Healthcare Provider.				
³ Among current smokers and former smokers who have been abstinent for less than 12 months and have consulted a healthcare professional in the past 12 months.				
* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.				

Source: ANSD, GATS 2023

5.2. QUITTING METHOD

The quitting methods used by smokers (current and former smokers who have abstained from smoking for up to 12 months) covered by GATS Senegal are: Pharmacotherapy, counseling/advice, attempting to quit without assistance, and other cessation methods, including traditional medicine and various alternative approaches.

Results indicate that quitting smoking without assistance is the most commonly used cessation method, both in the general population (74.4%) and in all sociodemographic subgroups (**Table 5.2**). In second place, the use of traditional medicine appears to be a relatively widespread practice, with a proportion of 14.5%. In contrast, the use of pharmaceuticals (1.4%) and e-cigarettes (1.5%) remains marginal.

Table 5.2: Percentage of smokers aged 15 years and older who have tried to quit smoking in the last 12 months, by cessation methods used and certain sociodemographic characteristics

Socio-demographic characteristics	Using the cessation method ¹					
	Pharmacotherapy ²	Counseling/advice ³	E-cigarettes	Heated tobacco products	Traditional medicine ⁴	Attempt to quit without help
Overall	1.4 (0.3, 6.9)	3.8 (1.5, 9.7)	1.5 (0.2, 9.5)	0.0 N/A	14.5 (8.1, 24.7)	74.4 (61.4, 84.2)
<i>Sex</i>						
Male	1.5 (0.3, 7.3)	4.1 (1.6, 10.2)	0.0 N/A	0.0 N/A	15.3 (8.6, 25.8)	74.4 (61.1, 84.4)
Female	* *	* *	* *	* *	* *	* *
<i>Age (years)</i>						
15-24	* *	* *	* *	* *	* *	* *
25-44	0.0 N/A	3.0 (0.6, 13.9)	2.4 (0.3, 14.7)	0.0 N/A	17.3 (8.5, 32.2)	70.6 (52.6, 83.9)
45-64	1.4 (0.2, 9.9)	4.9 (1.1, 18.6)	0.0 N/A	0.0 N/A	9.0 (2.1, 31.5)	79.4 (58.7, 91.3)
65+	* *	* *	* *	* *	* *	* *
<i>Residence</i>						
Urban	2.5 (0.5, 12.0)	6.2 (2.2, 16.0)	0.0 N/A	0.0 N/A	12.0 (5.2, 25.1)	71.6 (52.4, 85.2)
Rural	0.0 N/A	0.8 (0.1, 5.3)	3.4 (0.5, 19.3)	0.0 N/A	17.9 (7.7, 36.2)	78.1 (60.3, 89.3)
<i>Level of education</i>						
No formal education	0.0 N/A	3.8 (0.8, 16.1)	4.3 (0.6, 24.4)	0.0 N/A	8.0 (1.5, 32.5)	78.9 (62.1, 89.6)
Primary school	3.5 (0.5, 21.6)	4.6 (0.6, 26.6)	0.0 N/A	0.0 N/A	22.8 (9.6, 45.2)	86.1 (63.6, 95.7)
Middle school	* *	* *	* *	* *	* *	* *
High school	* *	* *	* *	* *	* *	* *
Baccalaureate or higher	* *	* *	* *	* *	* *	* *

¹ Among current smokers who have tried to quit smoking in the past 12 months and former smokers who have been abstinent for less than 12 months.

² Pharmacotherapy includes nicotine replacement therapy and prescription drugs such as bupropion and varenicline.

³ Includes counseling at a smoking cessation clinic and a smoking cessation hotline.

⁴ For example, rubbing teeth, prayers.

N/A - The estimate is "0.0."

* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.

Source: ANSD, GATS 2023

5.3. INTENTION TO QUIT SMOKING

In the GATS, "intent to quit smoking" is defined as the willingness expressed by a tobacco smoker to consider quitting or thinking about quitting. In Senegal, data were collected according to five levels of intention: (1) intention to quit smoking in the next few months, (2) thinking about quitting smoking in the next 12 months, (3) will quit one day but not in the next 12 months, (4) not interested in quitting smoking, or (5) doesn't know. **Table 5.3** shows the distribution of smokers according to the five categories of intention to quit smoking.

Among current smokers aged 15 and older, 27.0% reported intending to quit in the coming months, and 21.7% reported intending to quit smoking in the next 12 months. Just over one in ten smokers (13.8%) said they intended to quit smoking someday but not within the next 12 months; 12.0% did not intend to quit smoking, and 25.5% did not know whether they would quit smoking or not.

Variations according to certain sociodemographic characteristics show that the proportion of current smokers who reported thinking about quitting smoking in the last 12 months is higher in urban areas (23.6%) than in rural areas (19.6%). This intention also seems to be more pronounced among those with no formal education (27.6%)

(Table 5.3).

Table 5.3: Distribution (in %) of current smokers aged 15 and over, according to intention to quit smoking and certain sociodemographic characteristics

Socio-demographic characteristics	Intention to quit smoking ¹					Total
	I plan to quit in the next few months	I plan to quit smoking in the next 12 months	I will quit someday, but not within the next 12 months	Not interested in quitting	I don't know	
	<i>Percentage (95% CI)</i>					
Overall	27.0 (19.1, 36.8)	21.7 (15.0, 30.3)	13.8 (8.8, 20.9)	12.0 (5.8, 23.1)	25.5 (17.7, 35.1)	100
<i>Sex</i>						
Male	26.6 (18.4, 36.9)	22.9 (15.8, 32.1)	13.5 (8.5, 20.9)	12.7 (6.2, 24.2)	24.2 (16.2, 34.5)	100
Female	* *	* *	* *	* *	* *	100
<i>Age (years)</i>						
15-24	* *	* *	* *	* *	* *	100
25-44	32.8 (21.5, 46.6)	20.8 (12.5, 32.7)	8.2 (3.9, 16.7)	12.8 (4.2, 33.1)	25.3 (16.6, 36.5)	100
45-64	18.1 (9.8, 31.2)	19.8 (10.2, 35.1)	27.2 (15.4, 43.3)	14.0 (6.9, 26.1)	20.9 (11.0, 36.1)	100
65+	* *	* *	* *	* *	* *	100
<i>Residence</i>						
Urban	23.6 (12.7, 39.6)	23.6 (14.3, 36.4)	13.0 (6.6, 24.0)	15.4 (5.7, 35.5)	24.4 (14.0, 39.0)	100
Rural	30.9 (20.9, 43.1)	19.6 (11.1, 32.2)	14.7 (8.1, 25.3)	8.2 (3.9, 16.4)	26.6 (16.6, 39.9)	100
<i>Level of education</i>						
No formal education	23.4 (13.1, 38.2)	27.6 (15.8, 43.6)	14.0 (7.1, 25.7)	6.8 (2.9, 14.7)	28.2 (15.5, 45.8)	100
Primary school	25.7 (14.1, 41.9)	19.3 (9.6, 35.1)	14.7 (6.0, 31.7)	11.8 (4.9, 25.5)	28.6 (14.5, 48.5)	100
Middle school	24.6 (9.6, 50.1)	13.2 (4.0, 35.9)	19.0 (7.0, 42.0)	28.5 (7.1, 67.6)	14.7 (5.0, 36.1)	100
High school	* *	* *	* *	* *	* *	100
Baccalaureate or higher	* *	* *	* *	* *	* *	100

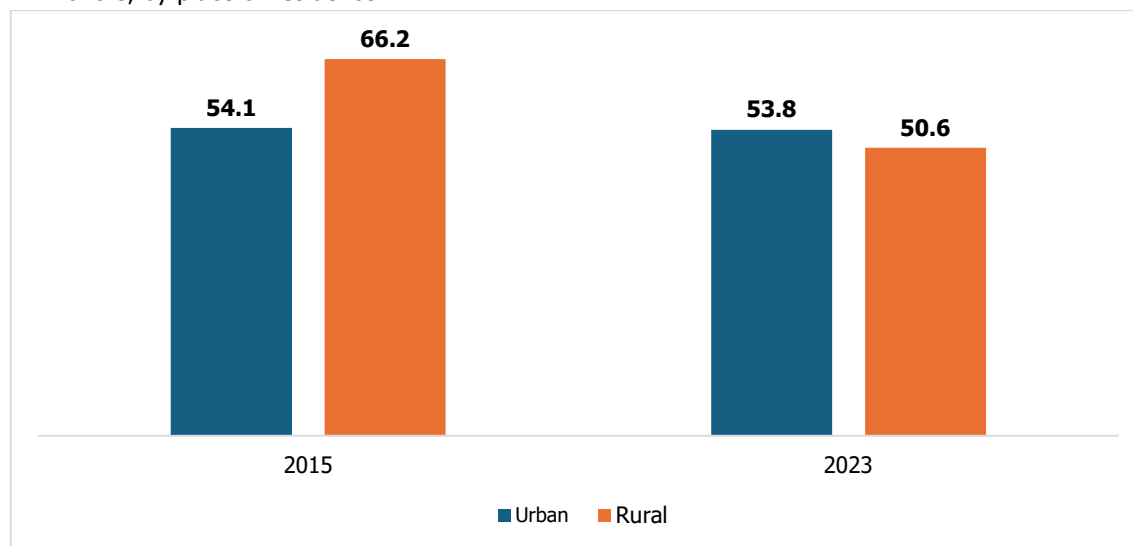
¹ Among daily and occasional smokers (less than once a day).

* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.

Source: ANSD, GATS 2023

Trends: Between 2015 and 2023, the proportion of smokers who tried to quit smoking decreased from 59.6% to 52.4%. This decline is observed regardless of place of residence (**Graph 5.1**). For more details on variations in sociodemographic characteristics, see **Table 5.4**.

Graph 5.1: Proportion of current smokers aged 15 and over who have tried to quit smoking in the last 12 months, by place of residence



Source: ANSD, GATS 2023

Table 5.4: Percentage of smokers aged 15 years and older who tried to quit smoking and who received advice from a healthcare professional in the past 12 months, by certain sociodemographic characteristics

Socio-demographic characteristics	Smoking cessation and healthcare-seeking behavior								
	I tried to quit ¹			Asked by a healthcare professional if a smoker ^{1,2}			Advised to quit by a healthcare professional ^{1,2}		
	2015	2023	Relative change	2015	2023	Relative change	2015	2023	Relative change
Overall	<i>Percentage (95% CI)</i>		<i>Percentage</i>	<i>Percentage (95% CI)</i>		<i>Percentage</i>	<i>Percentage (95% CI)</i>		<i>Percentage</i>
	59.6 (52.4, 66.5)	52.4 (42.7, 62.0)	-12.1	54.0 (37.3, 69.9)	*	*	50.9 (34.4, 67.3)	*	*
<i>Sex</i>									
Male	59.9 (52.5, 67.0)	52.2 (42.1, 62.1)	-12.9	55.3 (37.9, 71.4)	*	*	51.9 (34.6, 68.7)	*	*
Female	*	*	*	*	*	*	*	*	*
<i>Age (years)</i>									
15-24	76.8 (59.7, 88.1)	*	*	*	*	*	*	*	*
25-44	59.2 (49.8, 67.9)	54.9 (40.9, 68.1)	-7.2	44.4 (23.2, 67.8)	*	*	44.4 (23.2, 67.8)	-	-
45-64	51.3 (38.2, 64.3)	44.5 (30.8, 59.0)	-13.4	*	*	*	*	*	*
65+	*	*	*	*	*	*	*	*	*
<i>Residence</i>									
Urban	54.1 (44.7, 63.3)	53.8 (39.4, 67.6)	-0.6	61.0 (40.6, 78.1)	*	*	56.4 (36.0, 74.8)	-	-
Rural	66.2 (55.5, 75.5)	50.6 (38.4, 62.8)	-23.5**	*	*	*	*	*	*
<i>Level of education</i>									
No formal education	58.5 (47.8, 68.5)	51.8 (36.6, 66.5)	-11.6	*	*	*	*	*	*
Primary school	65.0 (52.5, 75.7)	57.3 (43.3, 70.2)	-11.8	*	*	*	*	*	*
Middle school	41.9 (23.0, 63.4)	53.0 (27.2, 77.4)	26.6	*	*	*	*	*	*
High school	*	*	*	*	*	*	*	*	*
Baccalaureate or higher	*	*	*	*	*	*	*	*	*

¹ Among current smokers and former smokers who have been abstinent for less than 12 months.
² Among current smokers and former smokers who have been abstinent for less than 12 months and have consulted a healthcare professional in the past 12 months.
** p<0.05
NOTE: Results of prevalence estimates/means and 95% CIs are rounded to the nearest decimal (0.1). Relative changes are calculated from unrounded prevalence estimates and may differ if calculated from the rounded prevalence estimates presented in this table.
* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.

Source: ANSD, GATS 2015 and 2023

CHAPTER VI: SECONDHAND SMOKING

Key Findings

- Overall, 21.1% of adults working indoors (0.42 million) were exposed to tobacco smoke at work;
- Among adults aged 15 and over, 15.0% were exposed to secondhand smoke in homes; that is, 1.58 million adults.
- During the 30 days prior to the survey, adults who frequented public places were exposed to tobacco smoke in varying proportions depending on the type of space. Exposure affected 24.8% of respondents in restaurants, 74.8% in bars or nightclubs, 11.7% on public transportation, 25.4% in universities, and 12.7% in schools.

Secondhand smoking, defined as the involuntary exposure of non-smokers to tobacco smoke, is a major public health problem. Its harmful health effects, including respiratory and cardiovascular diseases, are well documented worldwide. However, in Senegal, the extent of this phenomenon remains poorly measured due to a lack of specific surveys or studies.

Well before 2014, there were no regulations in place to effectively protect the population from exposure to tobacco smoke. The enactment of Law 2014-14 on March 28, 2014, on the manufacturing, packaging, labeling, sale, and use of tobacco, marked a turning point by introducing strict restrictions. Smoking is now prohibited in public places open to the public and for collective use, such as offices, healthcare facilities, schools, public transportation, etc. Smoking rooms may be set up in certain spaces such as hotels and restaurants, provided they comply with strict technical standards, including an independent ventilation system. The entry into force of this law's implementing decree in July 2016 strengthened these provisions, thereby guaranteeing better protection for non-smokers. Despite these advances, challenges remain in the effective implementation of these measures, in particular with regard to monitoring and enforcement of prohibitions.

This chapter aims to assess the population's exposure to secondhand smoke from tobacco and tobacco products in different environments: workplaces, homes, and certain public places such as government offices/buildings, healthcare facilities, restaurants, bars or nightclubs, public transportation, and educational and training institutions such as universities and schools.

6.1. EXPOSURE TO TOBACCO SMOKE IN ENCLOSED WORKPLACES

Table 6.1 presents the prevalence of adults exposed to secondhand smoke in enclosed workplaces during the 30 days prior to the survey. An enclosed workplace is defined as any space covered by a roof or surrounded by one or more walls or sides, regardless of the types of materials used for the roof, wall or sides, and whether it is a permanent or temporary structure.

6.1.1. Prevalence of Secondhand Smoking in Enclosed Workplaces

Adults aged 15 and older who usually work in enclosed spaces outside their homes were asked about their exposure to secondhand tobacco smoke. Overall, just over one in four (21.1%) workers are exposed to secondhand smoke in enclosed workplaces (**Table 6.1**). This figure drops to 18.1% among non-smokers.

Table 6.1: Percentage and number of adults aged 15 and older who work in an enclosed environment and are exposed to tobacco smoke at work, by smoking status and certain sociodemographic characteristics

Socio-demographic characteristics	Adults exposed to tobacco smoke at work ¹					
	Overall		Number in thousands	Non-smokers		
	Percentage (95% CI)			Percentage (95% CI)	Number in thousands	
Overall	21.1	(17.4, 25.4)	415.8	18.1	(14.4, 22.5)	336.9
Sex						
Male	23.7	(18.8, 29.3)	309.3	19.5	(14.6, 25.6)	234.2
Female	16.1	(11.3, 22.3)	106.5	15.6	(10.9, 21.8)	102.7
Age (years)						
15-24	23.3	(14.8, 34.6)	97.5	21.2	(13.0, 32.8)	86.5
25-44	21.0	(16.0, 26.9)	223.1	17.1	(12.3, 23.3)	170.5
45-64	19.2	(13.3, 26.9)	84.1	17.1	(11.5, 24.5)	69.1
65+	22.2	(8.1, 48.1)	11.1	*	*	*
Place of residence						
Urban	18.9	(15.0, 23.5)	244.2	16.4	(12.5, 21.1)	201.0
Rural	25.4	(18.2, 34.2)	171.7	21.5	(14.4, 30.8)	135.9
Level of education						
No formal education	25.7	(19.1, 33.7)	164.0	23.2	(16.7, 31.3)	141.2
Primary school	17.8	(11.6, 26.2)	84.3	14.6	(8.6, 23.6)	63.3
Middle school	21.7	(14.1, 31.9)	64.5	17.2	(10.3, 27.4)	47.8
High school	23.6	(13.8, 37.2)	52.3	21.6	(12.1, 35.6)	46.8
Baccalaureate or higher	14.9	(9.7, 22.3)	50.7	11.7	(7.0, 19.0)	37.9

¹ In the last 30 days. Among respondents working outside their home, usually indoors or both indoors and outdoors.

* Indicates the removal of estimates based on unweighted numbers below 25.

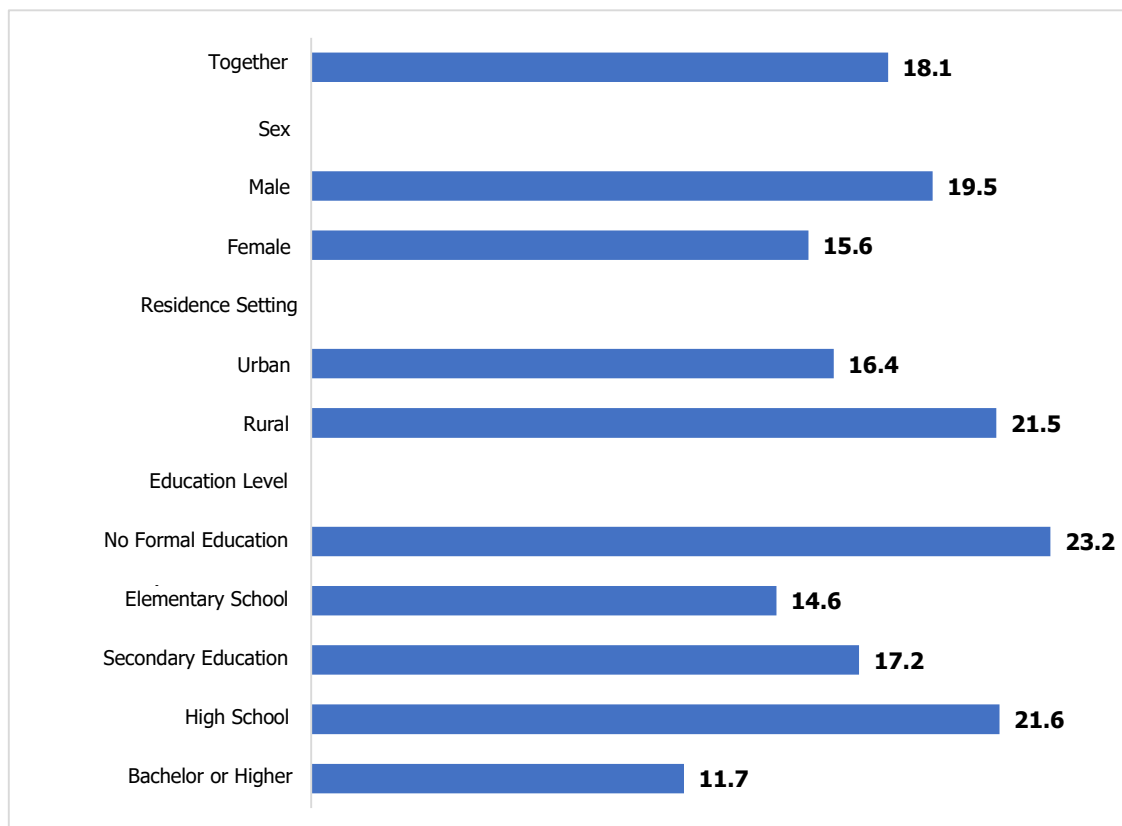
Source: ANSD, GATS 2023

Exposure to secondhand smoke in the workplace varies according to the sociodemographic characteristics of workers. Men are exposed to it more frequently than women, both in the general population and among non-smokers. Exposure to secondhand smoke in the workplace affects 18.9% of adults living in urban areas compared to 25.4% in rural areas.

It also varies according to the level of education: Adults with no formal education have the highest rates, reaching 25.7% in the general population and 23.2% among non-

smokers. Conversely, people with higher education are the least exposed to secondhand smoke in the workplace, with 14.9% in the general population and 11.7% in non-smokers.

Graph 6.1: Proportion of non-smokers exposed to secondhand smoking in their workplaces by certain sociodemographic characteristics



Source: ANSD, GATS 2023

6.1.2. Number of Workers Exposed to Tobacco Smoke in Enclosed Workplaces

According to the data in **Table 6.1**, 0.42 million workers are exposed to secondhand smoke in the indoor spaces of their workplaces. This exposure mainly affects men, with 0.31 million, which is nearly three times higher than women (0.11 million).

The analysis by age group shows that the 25–44-year-olds are the most affected with an estimated 0.22 million exposed workers. Disparities according to place of residence are noted, with 0.24 million workers exposed to secondhand smoke in urban areas compared to 0.17 million in rural areas. Furthermore, workers with no formal education are the most exposed group, with approximately 0.16 million individuals affected.

Among non-smoking workers, approximately 0.33 million are exposed to secondhand smoke in the workplace. The same variations observed in the overall population are seen across all worker characteristics. Men (0.23 million) are more affected than women (0.11 million). In addition, 25-44-year-olds remain the most affected age group, representing 0.17 million non-smoking workers exposed.

6.2. EXPOSURE TO TOBACCO SMOKE AT HOME

This section presents the prevalence and number (in thousands) of adults exposed to secondhand tobacco smoke at home in the past 30 days, by selected demographic categories (**Table 6.2**).

6.2.1. Prevalence of Exposure to Tobacco Smoke at Home

In the general population, 15.0% of adults aged 15 years and older were exposed to secondhand smoke at home. This exposure varies by sex and age group. Men are more affected (17.1%) than women (12.9%), while the 25-44 age group has the highest prevalence (16.3%). The geographical distribution shows a slight difference: Adults in urban areas are more at risk (15.6%) than adults in rural areas (14.5%). Level of education also influences exposure to secondhand smoke at home: Adults with a primary school education have the highest prevalence (21.0%), while those with no formal education have the lowest prevalence (12.7%).

Among non-smokers, the prevalence of exposure to secondhand smoke at home is 13.0%. It is slightly higher among men (13.4%) than among women (12.6%). Contrary to the trend observed in the general population, non-smokers living in rural areas are more exposed (12.5%) than those living in urban areas (13.5%). Moreover, the prevalence of non-smoking adults exposed to secondhand smoke at home is higher among those with primary school education (18.2%).

6.2.2. Number of Adults Exposed to Tobacco Smoke at Home

Overall, 1.58 million adults aged 15 and older are exposed to secondhand smoke at home (**Table 6.2**). The number of men exposed (0.89 million) is higher than that of women (0.69 million).

In addition, the highest number of people exposed to secondhand smoke at home by age group is 25-44 (0.69 million), and the lowest is 65+ (0.09 million). Exposure is higher in rural areas (0.81 million) than in urban areas (0.77 million).

Depending on the level of education, adults with no education are the most exposed group (0.62 million), while those with high school education are the least exposed (0.12 million).

Among non-smoking adults, 1.31 million are exposed to secondhand smoke at home. Contrary to the trend observed in the general population, exposed non-smoking women (0.67 million) slightly outnumber men (0.64 million). By age group, non-smokers aged 25-44 represent the most exposed group (0.54 million).

Exposure is slightly higher in rural areas (0.67 million) than in urban areas (0.64 million). Variations according to level of education reveal that non-smokers with no formal education are more affected (0.52 million) than those with high school education.

Table 6.2: Percentage and number of adults aged 15 and older who are exposed to tobacco smoke at home, by smoking status and certain sociodemographic characteristics

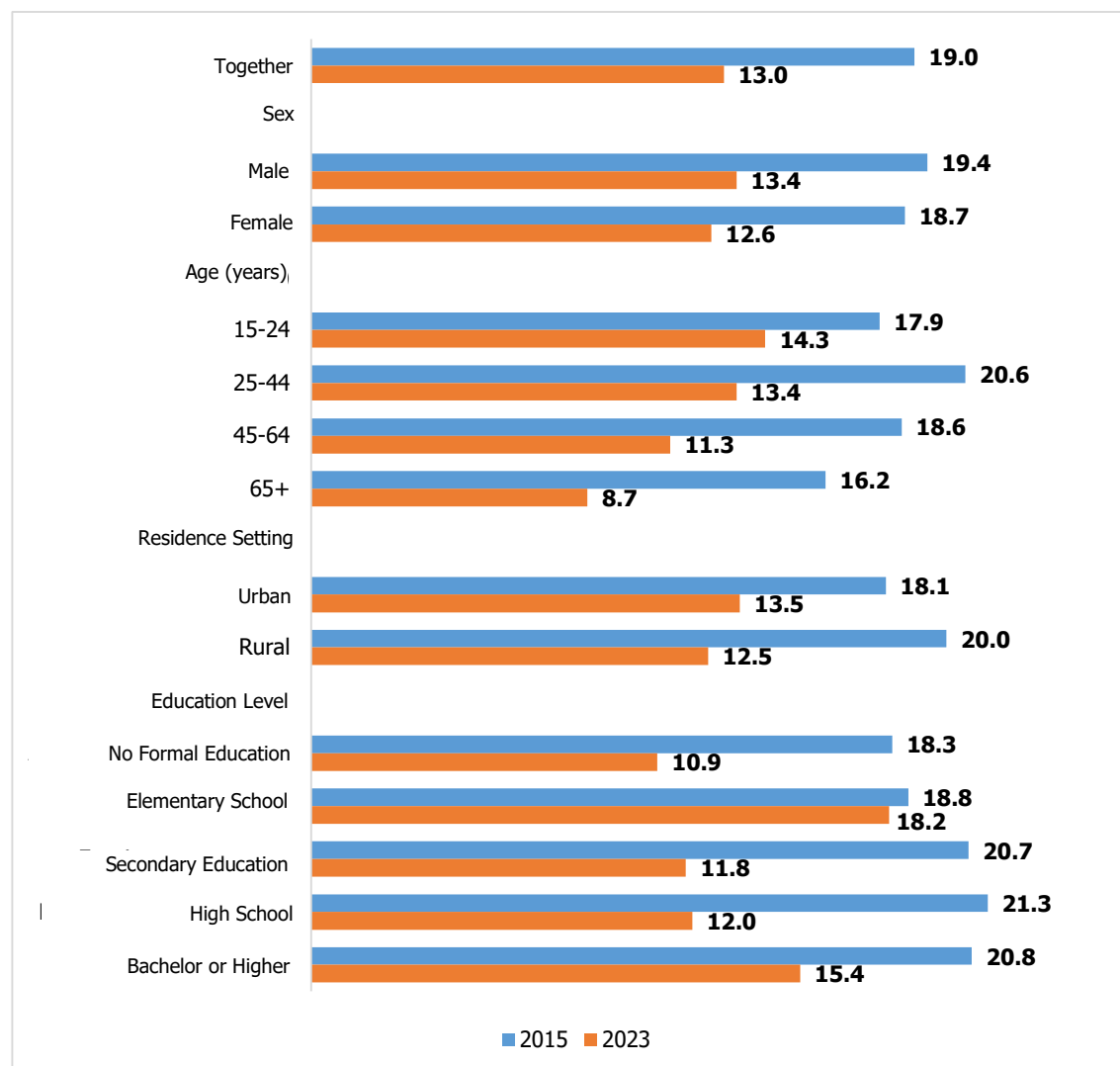
Socio-demographic characteristics	Adults exposed to tobacco smoke at home ¹					
	Overall			Non-smokers		
	Percentage (95% CI)		Number in thousands	Percentage (95% CI)		Number in thousands
Overall	15.0	(13.1, 17.1)	1,581.7	13.0	(11.2, 14.9)	1,311.8
Sex						
Male	17.1	(14.6, 19.9)	891.5	13.4	(11.1, 16.0)	642.9
Female	12.9	(10.8, 15.5)	690.2	12.6	(10.5, 15.1)	668.9
Age (years)						
15-24	14.7	(12.0, 17.9)	519.5	14.3	(11.7, 17.4)	500.3
25-44	16.3	(13.6, 19.5)	693.8	13.4	(10.8, 16.5)	536.0
45-64	14.5	(11.6, 18.0)	275.1	11.3	(8.6, 14.7)	201.4
65+	10.7	(6.7, 16.6)	93.4	8.7	(5.0, 14.8)	74.1
Place of residence						
Urban	15.6	(13.3, 18.3)	774.2	13.5	(11.3, 16.1)	639.2
Rural	14.5	(11.7, 17.8)	807.5	12.5	(10.0, 15.6)	672.7
Level of education						
No formal education	12.7	(10.6, 15.0)	618.0	10.9	(9.0, 13.3)	516.7
Primary school	21.0	(17.3, 25.2)	429.0	18.2	(14.8, 22.1)	349.1
Middle school	14.9	(10.9, 20.1)	256.9	11.8	(8.2, 16.7)	194.5
High school	13.1	(9.3, 18.1)	119.9	12.0	(8.4, 17.0)	106.7
Baccalaureate or higher	16.2	(11.6, 22.2)	157.9	15.4	(10.7, 21.7)	144.8

¹ Adults reporting smoking inside their homes daily, weekly or monthly.

Source: ANSD, GATS 2023

Trends: Regardless of the sociodemographic characteristic considered, a general downward trend in the proportion of non-smokers exposed to tobacco smoke at home is observed between 2015 and 2023. Overall, this proportion fell from 19.0% in 2015 to 13.0% in 2023, a decrease of six percentage points.

Graph 6.2: Proportion of non-smokers exposed to tobacco smoke at home by certain sociodemographic characteristics



Source: ANSD, GATS 2015 and 2023

6.3. EXPOSURE TO TOBACCO SMOKE IN PUBLIC PLACES

Public places where people are exposed to secondhand smoke include government buildings, healthcare facilities, schools, universities, bars/nightclubs, restaurants, and public transportation. The analysis will focus on the following tables:

- ❖ **Table 6.3**, which shows the prevalence of exposure to tobacco smoke among all adults aged 15 and over during the 30 days prior to the survey;
- ❖ **Table 6.4** on the prevalence of exposure to tobacco smoke among adults aged 15 and over who visited these public places in the 30 days prior to the survey.

6.3.1. Prevalence of Exposure to Tobacco Smoke in Government Buildings

Overall, 3.1% of the adult population aged 15 and older are exposed to secondhand

smoke in government buildings (**Table 6.3**). This exposure is more common among men (3.9%) than among women (2.2%).

Adults in the 25-44 and 45-64 age groups have the highest proportions (3.6% in each category). Exposure is higher in urban areas (4.0%) than in rural areas (2.2%). Moreover, it increases with the level of education, going from 1.1% among adults with no formal education to 7.2% among those with baccalaureate level and above.

Considering only adults who have attended government buildings in the past 30 days, the proportion exposed to secondhand smoke is 15.4% (**Table 6.4**).

6.3.2. Prevalence of Exposure to Tobacco Smoke in Healthcare Facilities

Table 6.3 shows that 1.9% of adults are exposed to secondhand smoke in healthcare facilities. This prevalence remains relatively stable across sex, age, and place of residence. However, based on level of education, exposure is highest among adults with baccalaureate level or higher (3.9%), while the lowest prevalence of exposure is among those with no formal education (1.4%).

Non-smokers have a similar prevalence of exposure to that of the general population. The same trends are observed both overall and according to sex, age, place of residence, and level of education.

Among non-smoking adults who visited healthcare facilities in the past 30 days, 6.1% were exposed to secondhand smoke (**Table 6.4**). It is more prevalent among men (6.8%) than among women (5.1%).

Exposure is higher in the 25-44-year-old category (7.7%). Adults living in rural areas are more affected (6.8%) than those living in urban areas (5.5%). In addition, adults with baccalaureate level or higher are the most exposed (9.2%), unlike those with primary school education (5.1%).

6.3.3. Prevalence of Exposure to Tobacco Smoke in Restaurants

Overall, the proportion of adults aged 15 and over exposed to secondhand smoke in restaurants was 3.0% (**Table 6.3**). Men are more affected (4.0%) than women (2.1%). Exposure is higher in the 45-64 age group (3.8%) and lower in the 65+ age group (0.8%).

Adults living in urban areas are also proportionally more likely (5.1%) to be exposed to secondhand smoke than those living in rural areas (1.3%). Exposure to secondhand smoke in restaurants increases with the level of education, from 1.3% among those with no formal education to 9.9% among those with a higher education. Among non-smokers, exposure to secondhand smoke in restaurants follows the same patterns.

Furthermore, among adults who visited a restaurant in the past 30 days, 24.8% were exposed to secondhand smoke (**Table 6.4**).

6.3.4. Prevalence of Exposure to Tobacco Smoke in Bars and Nightclubs

In the general population, 1.1% of adults are exposed to secondhand smoke in bars

and nightclubs (**Table 6.3**). This exposure varies according to sex; men are more exposed (1.7%) than women (0.4%). It is also more pronounced among adults aged 25-44 who have the highest prevalence (1.3%). Similarly, adults in urban areas are more exposed (1.6%) than those in rural areas (0.6%). Furthermore, the prevalence of exposure to secondhand smoke in bars and nightclubs increases with the level of education, from 0.4% among those with no formal education to 2.9% among those with baccalaureate level or higher.

Of the adults who visited bars or nightclubs in the last 30 days prior to the survey, 74.8% were exposed to tobacco smoke (**Table 6.4**).

6.3.5. Prevalence of Exposure in Public Transportation

Table 6.3 shows that 5.1% of adults are exposed to secondhand smoke in public transportation. By sex, men are proportionally more exposed to secondhand smoke in public transportation (5.9%) than women (4.4%).

Among age groups, adults aged 25-44 have the highest prevalence of exposure to secondhand smoke in public transportation (6.2%). Adults living in urban areas are more exposed (6.3%) than those living in rural areas (4.1%). In addition, the prevalence of exposure to secondhand tobacco smoke in public transportation is higher among adults with baccalaureate level or higher (9.9%) (**Table 6.3**).

Among adults who used at least one form of public transportation in the 30 days prior to the survey, the prevalence of exposure was 11.7% (**Table 6.4**). It was 12.5% for men and 10.9% for women. In addition, adults aged 25-44 and those with baccalaureate level higher are the most at risk (13.7% and 18.2%, respectively).

6.3.6. Prevalence of Exposure to Tobacco Smoke in Universities

The prevalence of exposure to secondhand smoke in universities among adults aged 15 and older is 0.7% (**Table 6.3**). Men are more exposed (1.0%) than women (0.4%). Variations by age group suggest that exposure is lower among 45-64-year-olds (0.3%) than among other categories (approximately 1% each).

It is 1.2% in urban areas, compared to 0.3% in rural areas. Prevalence increases with the level of education, going from 0.2% among adults with no formal education to 4.6% among those with a baccalaureate level or higher. (**Table 6.3**).

Among adults aged 15 and over who visited universities, 25.4% were exposed to secondhand smoke (**Table 6.4**). Exposure is particularly high among men (34.1%) than among women (14.9%).

6.3.7. Prevalence of Exposure to Tobacco Smoke in Schools

Overall, the prevalence of exposure to secondhand smoke in schools among adults aged 15 and older is 3.0% (**Table 6.3**). Men have the highest rates (3.4%), compared to 2.7% among women. The prevalence of exposure is high among those aged 15-24 (5.9%) and lower among those aged 45-64 (0.6%). Analysis by place of residence

shows higher exposure in urban areas (4.7%) than in rural areas (1.5%). In addition, adults with secondary education have the highest prevalence (11.0%).

Among non-smokers, 3.2% are exposed to secondhand smoke in schools. The trends observed by sociodemographic characteristics are the same as those observed in the general adult population aged 15 and over.

Among adults aged 15 and over who visited schools, slightly more than one in five (12.7%) are exposed to secondhand smoke (**Table 6.4**). The prevalence level for non-smokers is 12.9%.

Table 6.3: Percentage of adults aged 15 and older who have been exposed to tobacco smoke in various public places in the past 30 days, by smoking status and certain sociodemographic characteristics

Socio-demographic characteristics	Adults exposed to tobacco smoke ¹ at/in...							
	Government buildings	Healthcare facilities	Restaurants	Bars or nightclubs	Public transportation	Universities	Schools	
Overall	3.1 (2.4, 3.9)	1.9 (1.4, 2.5)	3.0 (2.3, 4.0)	1.1 (0.7, 1.5)	5.1 (4.3, 6.1)	0.7 (0.5, 1.1)	3.0 (2.4, 3.8)	
<i>Sex</i>								
Male	3.9 (2.9, 5.3)	1.3 (0.8, 2.1)	4.0 (2.9, 5.4)	1.7 (1.2, 2.5)	5.9 (4.7, 7.3)	1.0 (0.6, 1.7)	3.4 (2.4, 4.7)	
Female	2.2 (1.6, 3.2)	2.4 (1.8, 3.4)	2.1 (1.4, 3.3)	0.4 (0.2, 0.8)	4.4 (3.4, 5.6)	0.4 (0.2, 0.7)	2.7 (2.0, 3.7)	
<i>Age (years)</i>								
15-24	2.3 (1.5, 3.5)	1.7 (1.0, 2.8)	3.0 (1.9, 4.8)	1.0 (0.5, 1.8)	4.9 (3.6, 6.6)	0.9 (0.5, 1.9)	5.9 (4.4, 8.0)	
25-44	3.6 (2.5, 5.1)	2.5 (1.7, 3.6)	3.2 (2.3, 4.4)	1.3 (0.9, 2.1)	6.2 (4.9, 7.9)	0.7 (0.4, 1.3)	1.9 (1.2, 2.9)	
45-64	3.6 (2.4, 5.3)	1.2 (0.7, 2.2)	3.8 (2.3, 6.2)	0.7 (0.3, 1.6)	4.2 (2.9, 6.3)	0.3 (0.1, 1.1)	0.6 (0.2, 1.4)	
65+	2.5 (0.7, 8.1)	1.3 (0.4, 3.8)	0.8 (0.2, 3.0)	0.8 (0.2, 3.0)	2.5 (1.1, 5.9)	0.7 (0.1, 4.7)	2.5 (0.9, 6.8)	
<i>Place of residence</i>								
Urban	4.0 (3.0, 5.4)	1.9 (1.3, 2.8)	5.1 (3.7, 6.9)	1.6 (1.1, 2.4)	6.3 (5.1, 7.9)	1.2 (0.8, 1.9)	4.7 (3.6, 6.2)	
Rural	2.2 (1.4, 3.5)	1.8 (1.2, 2.8)	1.3 (0.7, 2.2)	0.6 (0.3, 1.2)	4.1 (3.1, 5.3)	0.3 (0.1, 0.8)	1.5 (1.0, 2.4)	
<i>Level of education</i>								
No formal education	1.1 (0.7, 1.9)	1.4 (0.9, 2.2)	1.3 (0.8, 2.1)	0.4 (0.2, 1.0)	4.1 (3.1, 5.4)	0.2 (0.1, 0.9)	0.3 (0.1, 0.8)	
Primary school	3.5 (2.1, 5.8)	1.6 (0.9, 3.0)	3.6 (2.3, 5.7)	1.6 (0.8, 3.0)	5.1 (3.3, 7.7)	0.4 (0.2, 1.2)	2.2 (1.2, 4.0)	
Middle school	5.0 (3.1, 7.8)	2.3 (1.3, 4.1)	2.9 (1.6, 5.4)	0.9 (0.4, 2.3)	5.9 (4.0, 8.6)	0.2 (0.0, 1.7)	5.6 (3.6, 8.4)	
High school	4.4 (2.1, 9.1)	1.9 (0.8, 4.7)	3.9 (2.1, 7.0)	1.7 (0.8, 3.5)	4.0 (2.1, 7.5)	0.6 (0.2, 2.5)	11.0 (7.6, 15.6)	
Baccalaureate or higher	7.2 (4.3, 11.6)	3.9 (1.9, 7.5)	9.9 (6.5, 14.8)	2.9 (1.5, 5.6)	9.9 (6.6, 14.5)	4.6 (2.8, 7.6)	6.4 (3.7, 11.0)	
Non-smokers	2.9 (2.2, 3.7)	2.0 (1.5, 2.6)	3.0 (2.2, 3.9)	0.7 (0.5, 1.1)	5.2 (4.4, 6.2)	0.7 (0.4, 1.1)	3.2 (2.5, 4.0)	
<i>Sex</i>								
Male	3.6 (2.6, 5.0)	1.4 (0.9, 2.2)	3.9 (2.8, 5.5)	1.1 (0.7, 1.7)	6.1 (4.9, 7.6)	1.0 (0.6, 1.8)	3.7 (2.6, 5.0)	
Female	2.3 (1.6, 3.2)	2.5 (1.8, 3.4)	2.1 (1.3, 3.3)	0.4 (0.2, 0.8)	4.4 (3.4, 5.7)	0.4 (0.2, 0.7)	2.7 (2.0, 3.7)	
<i>Age (years)</i>								
15-24	2.3 (1.5, 3.5)	1.7 (1.0, 2.8)	2.9 (1.8, 4.8)	0.8 (0.4, 1.6)	5.0 (3.7, 6.7)	1.0 (0.5, 1.9)	6.0 (4.4, 8.1)	
25-44	3.5 (2.4, 5.0)	2.6 (1.8, 3.8)	3.0 (2.1, 4.3)	0.8 (0.5, 1.3)	6.4 (5.0, 8.2)	0.7 (0.4, 1.4)	2.0 (1.3, 3.0)	
45-64	3.0 (1.9, 4.6)	1.2 (0.7, 2.3)	3.9 (2.4, 6.5)	0.5 (0.1, 1.4)	4.1 (2.7, 6.2)	0.1 (0.0, 0.8)	0.6 (0.2, 1.5)	
65+	2.6 (0.8, 8.2)	1.3 (0.4, 3.9)	0.8 (0.2, 3.1)	0.7 (0.2, 3.2)	2.6 (1.1, 6.1)	0.7 (0.1, 4.9)	2.6 (0.9, 6.9)	
<i>Place of residence</i>								
Urban	4.0 (2.9, 5.4)	2.0 (1.4, 2.9)	5.0 (3.6, 6.9)	1.1 (0.7, 1.6)	6.5 (5.2, 8.1)	1.2 (0.7, 1.9)	5.0 (3.8, 6.5)	
Rural	2.0 (1.2, 3.2)	1.9 (1.3, 2.9)	1.2 (0.7, 2.2)	0.4 (0.2, 0.9)	4.1 (3.1, 5.4)	0.3 (0.1, 0.8)	1.6 (1.0, 2.5)	
<i>Level of education</i>								
No formal education	1.1 (0.7, 1.9)	1.5 (0.9, 2.3)	1.3 (0.8, 2.1)	0.3 (0.1, 0.7)	4.1 (3.1, 5.4)	0.2 (0.1, 0.9)	0.3 (0.1, 0.8)	
Primary school	3.2 (1.8, 5.5)	1.7 (0.9, 3.1)	3.5 (2.1, 5.7)	0.6 (0.3, 1.5)	5.4 (3.5, 8.2)	0.3 (0.1, 1.0)	2.4 (1.3, 4.3)	
Middle school	5.2 (3.3, 8.1)	2.4 (1.4, 4.3)	2.8 (1.4, 5.4)	0.7 (0.2, 2.2)	5.9 (4.0, 8.7)	0.3 (0.0, 1.8)	5.8 (3.8, 8.8)	
High school	3.6 (1.8, 6.8)	2.0 (0.8, 4.9)	3.9 (2.1, 7.1)	1.7 (0.8, 3.6)	4.2 (2.2, 7.8)	0.7 (0.2, 2.6)	11.4 (7.9, 16.1)	
Baccalaureate or higher	6.7 (3.9, 11.3)	4.0 (2.0, 7.8)	9.7 (6.2, 14.9)	2.2 (1.0, 4.8)	10.3 (6.9, 15.0)	4.7 (2.8, 7.7)	6.7 (3.8, 11.4)	

¹ Among all adults in the last 30 days.

Source: ANSD, GATS 2023

Table 6.4: Percentage of adults aged 15 years and older who have visited various public places in the past 30 days and have been exposed to tobacco smoke, by smoking status and certain sociodemographic characteristics

Socio-demographic characteristics	Adults exposed to tobacco smoke ¹ at/in...						
	Government buildings	Healthcare facilities	Restaurants	Bars or nightclubs	Public transportation	Universities	Schools
Overall	15.4 (12.1, 19.2)	6.0 (4.6, 7.9)	24.8 (19.5, 30.9)	74.8 (56.8, 87.0)	11.7 (9.8, 13.8)	25.4 (17.4, 35.5)	12.7 (10.2, 15.8)
<i>Sex</i>				<i>Percentage (95% CI)</i>			
Male	15.8 (11.9, 20.8)	4.9 (3.1, 7.7)	24.1 (18.3, 31.1)	78.6 (56.5, 91.3)	12.5 (10.0, 15.5)	34.1 (22.7, 47.8)	14.1 (10.3, 19.0)
Female	14.6 (10.3, 20.3)	6.8 (4.9, 9.4)	26.2 (17.4, 37.3)	* *	10.7 (8.3, 13.7)	14.9 (7.3, 28.1)	11.4 (8.3, 15.4)
<i>Age (years)</i>							
15-24	10.3 (6.7, 15.4)	6.0 (3.6, 9.7)	22.5 (14.6, 33.0)	* *	10.8 (7.9, 14.6)	22.8 (12.9, 37.2)	16.8 (12.6, 22.2)
25-44	18.0 (12.8, 24.7)	7.4 (5.2, 10.6)	22.8 (16.7, 30.3)	78.9 (46.6, 94.1)	13.7 (10.7, 17.3)	26.3 (14.9, 42.2)	8.9 (5.9, 13.3)
45-64	19.9 (13.5, 28.4)	3.9 (2.2, 7.0)	34.5 (22.8, 48.4)	* *	9.8 (6.6, 14.4)	* *	3.6 (1.4, 8.7)
65+	16.4 (5.3, 40.7)	3.7 (1.3, 10.4)	- -	* *	7.9 (3.3, 17.7)	* *	25.3 (9.9, 51.2)
<i>Place of residence</i>							
Urban	15.9 (12.1, 20.7)	5.4 (3.7, 7.9)	28.3 (21.7, 36.0)	78.9 (58.1, 90.9)	12.2 (9.7, 15.1)	24.2 (16.1, 34.7)	15.9 (12.4, 20.2)
Rural	14.6 (9.5, 21.7)	6.7 (4.5, 9.9)	17.3 (10.2, 27.7)	* *	11.1 (8.4, 14.5)	* *	8.3 (5.3, 12.7)
<i>Level of education</i>							
No formal education	11.3 (6.7, 18.2)	5.2 (3.3, 7.9)	19.5 (12.8, 28.5)	* *	10.9 (8.3, 14.3)	* *	3.2 (1.3, 7.3)
Primary school	19.0 (11.6, 29.7)	5.1 (2.7, 9.3)	31.0 (20.6, 43.7)	* *	11.0 (7.2, 16.5)	* *	10.4 (5.8, 18.2)
Middle school	18.0 (11.7, 26.7)	7.2 (4.0, 12.5)	19.5 (10.7, 33.0)	* *	11.9 (8.2, 17.0)	* *	13.3 (8.8, 19.8)
High school	12.7 (6.0, 24.8)	5.6 (2.3, 13.2)	22.7 (13.4, 35.9)	* *	7.9 (4.1, 14.7)	* *	21.1 (14.8, 29.4)
Baccalaureate or higher	15.9 (9.7, 24.8)	9.1 (4.6, 17.2)	31.1 (21.3, 43.1)	* *	18.2 (12.3, 26.1)	21.7 (13.8, 32.2)	17.1 (10.0, 27.4)
Non-smokers	14.6 (11.4, 18.5)	6.1 (4.6, 8.1)	24.4 (18.9, 31.0)	65.8 (45.5, 81.6)	11.8 (9.9, 14.0)	25.1 (16.9, 35.6)	12.9 (10.4, 16.0)
<i>Sex</i>							
Male	14.6 (10.7, 19.6)	5.1 (3.2, 8.0)	23.7 (17.5, 31.2)	68.2 (42.5, 86.2)	12.8 (10.2, 16.0)	34.6 (22.3, 49.3)	14.4 (10.6, 19.4)
Female	14.6 (10.3, 20.3)	6.8 (4.9, 9.4)	25.9 (17.1, 37.1)	* *	10.7 (8.3, 13.7)	14.9 (7.3, 28.1)	11.4 (8.4, 15.5)
<i>Age (years)</i>							
15-24	10.3 (6.7, 15.4)	6.0 (3.6, 9.8)	21.9 (14.1, 32.6)	* *	11.0 (8.0, 14.8)	22.8 (12.9, 37.2)	16.8 (12.6, 22.2)
25-44	17.5 (12.4, 24.3)	7.7 (5.4, 11.1)	22.0 (15.7, 30.0)	* *	14.0 (10.9, 17.9)	27.9 (15.6, 44.7)	9.1 (6.0, 13.6)
45-64	17.0 (10.9, 25.5)	3.9 (2.1, 7.0)	36.0 (23.5, 50.8)	* *	9.4 (6.1, 14.1)	* *	3.7 (1.5, 9.1)
65+	16.4 (5.3, 40.7)	3.7 (1.2, 10.5)	- -	* *	7.9 (3.3, 17.7)	* *	25.3 (9.9, 51.2)
<i>Place of residence</i>							
Urban	15.4 (11.5, 20.4)	5.5 (3.7, 8.1)	28.0 (21.0, 36.2)	69.8 (45.2, 86.6)	12.4 (9.8, 15.4)	23.9 (15.6, 34.8)	16.1 (12.5, 20.5)
Rural	13.4 (8.6, 20.2)	6.8 (4.6, 10.0)	16.9 (9.6, 28.1)	* *	11.0 (8.3, 14.5)	* *	8.4 (5.4, 12.9)
<i>Level of education</i>							
No formal education	11.1 (6.5, 18.1)	5.2 (3.4, 8.0)	20.0 (13.1, 29.3)	* *	10.7 (8.1, 14.1)	* *	3.2 (1.3, 7.3)
Primary school	17.8 (10.3, 29.2)	5.1 (2.7, 9.5)	31.3 (19.8, 45.5)	* *	11.4 (7.5, 17.2)	* *	10.8 (6.0, 18.8)
Middle school	18.4 (12.0, 27.3)	7.4 (4.2, 12.9)	18.2 (9.5, 32.3)	* *	12.1 (8.2, 17.4)	* *	13.5 (8.8, 20.0)
High school	10.5 (5.4, 19.6)	5.9 (2.4, 13.9)	22.0 (12.7, 35.4)	* *	8.1 (4.2, 14.9)	* *	21.2 (14.8, 29.4)
Baccalaureate or higher	14.7 (8.6, 24.0)	9.2 (4.6, 17.6)	30.7 (20.4, 43.2)	* *	18.7 (12.6, 26.8)	21.7 (13.7, 32.4)	17.4 (10.3, 28.0)

¹ Among those people who visited the place in the last 30 days.

* Indicates the removal of estimates based on unweighted numbers below 25.

Source: ANSD, GATS 2023

CHAPTER VII: ECONOMIC ASPECTS

Key Findings

- “Excellence” is the most popular brand of manufactured cigarettes (45.7%) among smokers, followed by “Marlboro” (37.2%).
- More than three out of ten smokers (31.6%) buy their cigarettes in boutiques. Next came stores (26.6%), kiosks (21.4%), and street vendors (11.2%).
- The average amount spent on a pack of 20 manufactured cigarettes is 849 CFA francs.
- On average, an adult smoker spends 8,778 CFA francs per month on manufactured cigarettes.

7.1. LAST CIGARETTE BRAND PURCHASED

During the GATS conducted in Senegal, current smokers were asked to name the brand of the last cigarette they purchased. The results in **Table 7.1** show that the brand most purchased by current smokers is “Excellence” (45.7%), followed by “Marlboro” (37.2%) and Sir (6.1%). In contrast, the brand “Houston” is the least purchased both within the overall population (0.3%) and in the various sociodemographic subgroups.

Analysis by age and place of residence reveals differences. Smokers aged 45-64 are more likely to have bought the brand “Excellence” during their last purchase (57.9%) compared to 42.0% among 25-44-year-olds. However, for other cigarette brands, smokers aged 25-44 are the most represented, with 36.1% opting for the brand “Marlboro” and 8.1% for the brand “Sir”. Furthermore, more than half of smokers living in rural areas chose the brand “Excellence” (54.9%), while those in urban areas opted most for the brand “Marlboro” (51.8%).

Smokers with no formal education are more likely to buy the brand “Excellence” (46.8%) and, to a lesser extent, “Marlboro” (37.5%).

A similar trend is observed among smokers with primary school education where 54.0% prefer the brand “Excellence,” while 29.4% opted for “Marlboro.”

Table 7.1: Distribution (in %) of current smokers of manufactured cigarettes aged 15 and over, according to last brand purchased and certain sociodemographic characteristics

Socio-demographic characteristics	Last cigarette brand purchased					Total
	EXCELLENCE	MARLBORO	Sir	HOUSTON	OTHER	
	<i>Percentage (95% CI)</i>					
Overall	45.7 (34.9, 56.9)	37.2 (27.3, 48.4)	6.1 (2.1, 16.3)	0.3 (0.0, 2.3)	10.7 (4.7, 22.4)	100
<i>Sex</i>						
Male	45.8 (34.9, 57.1)	37.0 (27.0, 48.2)	6.1 (2.1, 16.4)	0.3 (0.0, 2.4)	10.8 (4.7, 22.6)	100
Female	* *	* *	* *	* *	* *	100
<i>Age (years)</i>						
15-24	* *	* *	* *	* *	* *	100
25-44	42.0 (28.2, 57.2)	36.1 (23.3, 51.3)	8.1 (2.7, 22.1)	0.6 (0.1, 4.1)	13.1 (4.6, 31.9)	100
45-64	57.9 (38.9, 74.9)	30.6 (16.8, 49.1)	4.5 (0.6, 26.1)	0.0 N/A	7.0 (1.5, 27.4)	100
65+	* *	* *	* *	* *	* *	100
<i>Place of residence</i>						
Urban	39.5 (26.3, 54.4)	51.8 (36.9, 66.5)	0.6 (0.1, 4.6)	0.0 N/A	8.0 (1.8, 29.2)	100
Rural	54.9 (37.4, 71.3)	15.6 (6.6, 32.3)	14.1 (4.6, 35.7)	0.8 (0.1, 5.7)	14.6 (5.9, 31.8)	100
<i>Level of education</i>						
No formal education	46.8 (27.0, 67.6)	37.5 (19.7, 59.5)	5.3 (1.3, 19.0)	1.0 (0.1, 7.2)	9.3 (3.4, 23.2)	100
Primary school	54.0 (34.9, 71.9)	29.4 (15.6, 48.6)	10.7 (2.6, 34.9)	0.0 N/A	5.9 (1.5, 20.6)	100
Middle school	* *	* *	* *	* *	* *	100
High school	* *	* *	* *	* *	* *	100
Baccalaureate or higher	* *	* *	* *	* *	* *	100

Note: Current smokers of manufactured cigarettes include daily and occasional smokers (less than once a day). The top three brands recently purchased by smokers are presented here.
N/A - The estimate is "0.0."
* Indicates the removal of estimates based on unweighted numbers below 25.
The brand "Sir" is from tobacco and tobacco product smuggling.

Source: ANSD, GATS 2023

7.2. PLACE WHERE CIGARETTES WERE LAST PURCHASED

The results of **Table 7.2** show that boutiques (31.6%) and stores (26.6%) are the places most frequently cited by smokers as the place where they last purchased manufactured cigarettes. They are followed by kiosks (21.4%) and street vendors/peddlers (11.2%).

Disparities according to place of residence are observed in the purchasing habits of manufactured cigarettes: Urban smokers buy their cigarettes more frequently in boutiques (36.7% compared to 24.1% in rural areas), while rural smokers have a marked preference for stores (38.9% compared to 18.3% in urban areas).

Table 7.2: Distribution (in %) of current smokers of manufactured cigarettes aged 15 and over, according to the source of their last cigarette purchase and certain sociodemographic characteristics

Source	Overall	Sex		Age (years)		Place of residence	
		Male	Female	15-24	25+	Urban	Rural
	<i>Percentage (95% CI)</i>						
Vending machine	6.4 (2.9, 13.6)	6.5 (2.9, 13.7)	* *	* *	7.4 (3.3, 15.7)	2.7 (0.6, 12.1)	11.7 (4.7, 26.4)
Store	26.6 (17.4, 38.5)	26.6 (17.3, 38.5)	* *	* *	27.5 (18.3, 39.1)	18.3 (9.0, 33.5)	38.9 (23.0, 57.5)
Street vendors/peddlers	11.2 (5.1, 22.8)	11.3 (5.1, 23.0)	* *	* *	11.8 (5.1, 25.0)	12.6 (4.6, 30.0)	9.2 (2.6, 27.4)
Military store	0.0 N/A	0.0 N/A	* *	* *	0.0 N/A	0.0 N/A	0.0 N/A
Duty-free shop	0.2 (0.0, 1.8)	0.3 (0.0, 1.8)	* *	* *	0.0 N/A	0.0 N/A	0.6 (0.1, 4.4)
Abroad	0.0 N/A	0.0 N/A	* *	* *	0.0 N/A	0.0 N/A	0.0 N/A
Kiosks	21.4 (13.8, 31.8)	21.6 (13.9, 32.1)	* *	* *	23.6 (15.2, 34.8)	28.4 (17.2, 43.0)	11.4 (4.7, 24.9)
Internet	0.0 N/A	0.0 N/A	* *	* *	0.0 N/A	0.0 N/A	0.0 N/A

Source	Overall	Sex		Age (years)		Place of residence	
		Male	Female	15-24	25+	Urban	Rural
From another person	1.1 (0.2, 7.5)	1.1 (0.2, 7.5)	* *	* *	1.3 (0.2, 8.5)	0.0 N/A	2.7 (0.4, 17.2)
Boutique	31.6 (21.9, 43.1)	31.2 (21.6, 42.9)	* *	* *	26.8 (17.9, 38.0)	36.7 (23.8, 51.8)	24.1 (11.5, 43.7)
Other	1.4 (0.3, 5.7)	1.5 (0.4, 5.8)	* *	* *	1.7 (0.4, 6.6)	1.4 (0.2, 9.7)	1.5 (0.2, 9.4)
Total	100	100	100	100	100	100	100

Note: Current smokers of manufactured cigarettes include daily and occasional smokers (less than once a day).
N/A - The estimate is "0.0."
* Indicates the removal of estimates based on unweighted numbers below 25.

Source: ANSD, GATS 2023

7.3. CIGARETTE EXPENDITURE

The GATS survey collected information on the expenditure of smokers aged 15 and over on their last cigarette purchase. Two estimates were made based on this data: The average cost of 20 cigarettes (i.e., one pack) and the average monthly expenditure on cigarettes, expressed as both median and average values.

On average, a smoker spends 849 CFA francs on a pack of 20 cigarettes. Analysis by place of residence reveals that the amount spent on cigarettes is higher in urban areas (868 CFA francs) than in rural areas (814 CFA francs) (**Table 7.3**). Overall, the median expenditure for a pack of 20 cigarettes is 692 CFA francs.

Furthermore, a smoker spends an average of 8,778 CFA francs per month on cigarettes. Variations are also observed depending on the place of residence: Those in urban areas spend an average of 10,364 CFA francs against 6,701 CFA francs for rural areas.

As for the median monthly expenditure, it indicates that half of smokers spend no more than 5,609 CFA per month on cigarettes. This median, which is lower than the average, shows that a large proportion of smokers buy cheap cigarettes, while a smaller proportion buy luxury cigarettes. It varies considerably according to the place of residence (6,780 CFA francs in urban areas compared to 3,741 CFA francs in rural areas).

Table 7.3: Average amount spent on 20 manufactured cigarettes and average monthly cigarette expenditure among current smokers aged 15 and over, according to certain sociodemographic characteristics

Socio-demographic characteristics	Amount spent on 20 manufactured cigarettes CFA franc		Monthly expenditure on manufactured cigarettes CFA franc	
	Mean (95% CI)	Median (95% CI)	Mean (95% CI)	Median (95% CI)
Overall	849.2 (658.7, 1039.7)	692.1 (654.6, 764.5)	8777.8 (6244.9, 11310.7)	5608.6 (4023.2, 7280.6)
<i>Sex</i>				
Male	848.8 (657.2, 1040.3)	691.6 (654.1, 764.2)	8802.4 (6245.9, 11358.9)	5599.4 (4004.1, 7256.0)
Female	* *	* *	* *	* *
<i>Age (years)</i>				
15-24	* *	* *	* *	* *
25-44	762.3 (638.8, 885.9)	746.4 (648.1, 774.6)	8523.7 (6043.9, 11003.5)	5833.0 (3799.2, 8165.0)
45-64	1053.9 (497.5, 1610.2)	671.3 (622.7, 784.8)	11192.4 (4468.2, 17916.6)	5677.1 (4180.9, 8504.1)
65+	* *	* *	* *	* *
<i>Place of residence</i>				

Socio-demographic characteristics	Amount spent on 20 manufactured cigarettes		Monthly expenditure on manufactured cigarettes	
	CFA franc		CFA franc	
Urban	867.9 (741.7, 994.1)	752.7 (677.6, 772.6)	10363.5 (7826.3, 12900.8)	6780.0 (5131.2, 8947.3)
Rural	813.7 (314.1, 1313.2)	627.9 (422.1, 772.9)	6700.8 (1956.9, 11444.7)	3740.8 (1137.3, 5887.8)
<i>Level of education</i>				
No formal education	1024.6 (512.8, 1536.3)	730.0 (649.3, 824.8)	9346.5 (2864.0, 15829.0)	4830.6 (1070.6, 6518.2)
Primary school	620.1 (503.7, 736.4)	654.6 (612.6, 699.1)	7720.1 (5137.6, 10302.6)	5172.6 (3735.1, 7613.9)
Middle school	* *	* *	* *	* *
High school	* *	* *	* *	* *
Baccalaureate or higher	* *	* *	* *	* *

Note: Current smokers of manufactured cigarettes include daily and occasional smokers (less than once a day).
* Indicates the removal of estimates based on unweighted numbers below 25.

Source: ANSD, GATS 2023

Trends: Overall, there was an increase in the average amount spent on 20 cigarettes between 2015 and 2023, from 701 CFA francs to 849 CFA francs, an increase of 21.2%. This trend is observed among smokers aged 25-44 and those aged 45-64, although the increase is greater among those aged 45-64 (56.0% compared to 9.1% among adults aged 25-44). Similarly, an increase in the average cost is noted in both urban and rural areas (**Table 7.4**).

However, analysis of the average amount spent on 20 cigarettes by level of education reveals a decrease in the amount among smokers with primary school education, from 685 CFA francs in 2015 to 620 CFA francs in 2023.

A comparison of the results with the first survey (GATS-2015) also shows an increase in median expenditure (624 CFA francs compared to 692 CFA francs, an increase of 11.0%). The variations are similar, regardless of the place of residence.

Table 7.4: Average amount spent per 20 manufactured cigarettes among current smokers over the age of 15, based on certain sociodemographic characteristics

Socio-demographic characteristics	Amount spent on 20 manufactured cigarettes (CFA franc)				Relative variation of the mean	Relative change in median
	2015 ¹		2023			
	<i>Mean (95% CI)</i>	<i>Median (95% CI)</i>	<i>Mean (95% CI)</i>	<i>Median (95% CI)</i>	<i>Percentage</i>	
Overall	700.6 (641.8, 759.4)	623.7 (615.9, 632.7)	849.2 (658.7, 1039.7)	692.1 (654.6, 764.5)	21.2	11.0**
<i>Sex</i>						
Male	699.0 (638.3, 759.7)	623.2 (615.1, 632.5)	848.8 (657.2, 1040.3)	691.6 (654.1, 764.2)	21.4	11.0**
Female	*	*	*	*	*	*
<i>Age (years)</i>						
15-24	654.1 (512.6, 795.6)	572.6 (656.2)¶	-	-	-	-
25-44	698.6 (647.0, 750.2)	627.1 (618.1, 647.6)	762.3 (638.8, 885.9)	746.4 (648.1, 774.6)	9.1	19.0**
45-64	675.7 (585.8, 765.6)	590.7 (532.1, 769.2)	1053.9 (497.5, 1610.2)	671.3 (622.7, 784.8)	56.0	13.6
65+	*	*	*	*	*	**
<i>Place of residence</i>						
Urban	724.5 (673.3, 775.8)	633.5 (623.1, 788.3)	867.9 (741.7, 994.1)	752.7 (677.6, 772.6)	19.8**	18.8**
Rural	652.2 (515.9, 788.6)	549.4 (512.1, 577.7)	813.7 (314.1, 1313.2)	627.9 (422.1, 772.9)	24.8	14.3
<i>Level of education</i>						
No formal education	698.5 (578.3, 818.7)	583.0 (535.3, 633.9)	1024.6 (512.8, 1536.3)	730.0 (649.3, 824.8)	46.7	25.2**
Primary school	685.3 (630.5, 740.0)	624.9 (614.7, 697.0)	620.1 (503.7, 736.4)	654.6 (612.6, 699.1)	-9.5	4.8
Middle school	*	*	*	*	*	*
High school	*	*	*	*	*	*
Baccalaureate or higher	*	*	*	*	*	*

¹ In constant adjusted CFA francs for 2024 using the average consumer price inflation rate from the International Monetary Fund's World Economic Outlook database.

Socio-demographic characteristics	Amount spent on 20 manufactured cigarettes (CFA franc)		Relative variation of the mean	Relative change in median
	2015 ¹	2023		
** p<0.05				
* Indicates the removal of estimates based on unweighted numbers below 25.				
NOTE: Results of prevalence estimates/means, and 95% CIs are rounded to the nearest decimal (0.1). Relative changes are calculated from unrounded prevalence estimates and may differ if calculated from the rounded prevalence estimates presented in this table.				
*SUDAAN cannot extrapolate to calculate the confidence limit for the 50th percentile, resulting in a missing value.				

Source: ANSD, GATS 2015 and 2023

Moreover, between 2015 and 2023, the average monthly expenditure on cigarettes increased slightly from 8,566 CFA francs to 8,778 CFA francs, an increase of 2.5%. Nevertheless, there was a decrease among smokers in the 45-64 age group (-2.3%), among those living in rural areas (-3.0%), and also among smokers with primary school education (-1.4%) during the same period (**Table 7.5**).

Median monthly expenditure on cigarettes decreased slightly (-0.4%), from 5,630 CFA francs in 2015 to 5,609 CFA francs in 2023. However, there was a 20.5% increase among smokers aged 25-44.

Table 7.5: Average monthly cigarette expenditure among current smokers of manufactured cigarettes aged 15 and over, by certain sociodemographic characteristics

Socio-demographic characteristics	Monthly expenditure on cigarettes (CFA franc)				Relative variation of the mean	Relative change in median
	2015 ¹		2023			
	Mean (95% CI)	Median (95% CI)	Mean (95% CI)	Median (95% CI)	Percentage	
Overall	8565.8 (7194.2, 9937.4)	5629.8 (4749.1, 7089.3)	8777.8 (6244.9, 11310.7)	5608.6 (4023.2, 7280.6)	2.5	-0.4
<i>Sex</i>						
Male	8525.7 (7146.7, 9904.6)	5661.6 (4750.1, 7098.5)	8802.4 (6245.9, 11358.9)	5599.4 (4004.1, 7256.0)	3.2	-1.1
Female	*	*	*	*	*	*
<i>Age (years)</i>						
15-24	6554.8 (3186.7, 9923.0)	3756.5 (558.6, 7015.2)	*	*	*	*
25-44	7923.0 (6560.9, 9285.2)	4839.5 (4570.1, 6770.1)	8523.7 (6043.9, 11003.5)	5833.0 (3799.2, 8165.0)	7.6	20.5
45-64	11452.5 (8781.5, 14123.5)	7563.7 (6506.5, 13259.3)	11192.4 (4468.2, 17916.6)	5677.1 (4180.9, 8504.1)	-2.3	-24.9
65+	*	*	*	*	*	*
<i>Place of residence</i>						
Urban	9593.7 (7807.4, 11380.1)	7000.8 (4819.8, 9523.0)	10363.5 (7826.3, 12900.8)	6780.0 (5131.2, 8947.3)	8.0	-3.2
Rural	6906.4 (4831.3, 8981.5)	4312.1 (2648.1, 6020.3)	6700.8 (1956.9, 11444.7)	3740.8 (1137.3, 5887.8)	-3.0	-13.2
<i>Level of education</i>						
No formal education	8348.6 (6347.9, 10349.3)	5467.1 (4672.7, 6648.7)	9346.5 (2864.0, 15829.0)	4830.6 (1070.6, 6518.2)	12.0	-11.6
Primary school	7832.8 (5444.2, 10221.3)	4730.9 (2846.5, 7080.6)	7720.1 (5137.6, 10302.6)	5172.6 (3735.1, 7613.9)	-1.4	9.3
Middle school	*	*	*	*	*	*
High school	*	*	*	*	*	*
Baccalaureate or higher	*	*	*	*	*	*

¹ In constant adjusted CFA francs for 2024 using the average consumer price inflation rate from the International Monetary Fund's World Economic Outlook database.

** p<0.05

* Indicates the removal of estimates based on unweighted numbers below 25.

NOTE: Results of prevalence estimates/means, and 95% CIs are rounded to the nearest decimal (0.1). Relative changes are calculated from unrounded prevalence estimates and may differ if calculated from the rounded prevalence estimates presented in this table.

Source: ANSD, GATS 2015 and 2023

7.4. SUPPORT FOR INCREASING TAXES ON TOBACCO PRODUCTS

Table 7.6 shows that just over nine adults out of 10 (93.4%) are in favor of increasing taxes on tobacco products. With the exception of smoking status, there is virtually no difference in the proportion of adults over the age of 15 by sex, age, place of residence and level of education, regarding support for tax increases.

The proportion of non-smokers in favor of increasing taxes on tobacco products is higher (94.2%) than that of current smokers (76.5%).

Table 7.6: Percentage of adults aged 15 and over in favor of increasing taxes on tobacco products, by smoking status and certain sociodemographic characteristics

Socio-demographic characteristics	In favor of increasing taxes on tobacco products
	<i>Percentage (95% CI)</i>
Overall	93.4 (92.3, 94.4)
<i>Smoking status</i>	
Current smokers ¹	76.5 (68.0, 83.2)
Non-smokers ²	94.2 (93.0, 95.1)
<i>Sex</i>	
Male	92.3 (90.7, 93.7)
Female	94.5 (93.1, 95.6)
<i>Age (years)</i>	
15-24	92.0 (89.7, 93.8)
25-44	93.7 (92.0, 95.1)
45-64	95.0 (93.1, 96.4)
65+	94.6 (91.4, 96.6)
<i>Residence</i>	
Urban	94.4 (92.8, 95.6)
Rural	92.6 (90.8, 94.1)
<i>Level of education</i>	
No formal education	92.8 (91.1, 94.2)
Primary school	93.4 (90.8, 95.2)
Middle school	95.2 (92.6, 96.9)
High school	93.6 (89.8, 96.0)
Baccalaureate or higher	93.5 (88.0, 96.5)
¹ Includes daily and occasional smokers (less than once a day).	
² includes former tobacco smokers and those who have never smoked tobacco.	

Source: ANSD, GATS 2023

Trends: A slight decrease in the proportion of adults in favor of increasing taxes on tobacco products is observed between 2015 and 2023. Analysis based on sociodemographic variables reveals similar trends.

Table 7.7: Percentage of adults aged 15 and over in favor of increasing taxes on tobacco products, by smoking status and certain sociodemographic characteristics

Socio-demographic characteristics	In favor of increasing taxes on tobacco products		
	2015	2023	Relative change
	<i>Percentage (95% CI)</i>		<i>Percentage</i>
Overall	95.5 (94.5, 96.3)	93.4 (92.3, 94.4)	-2.2**
<i>Smoking status</i>			
Current smokers ¹	80.4 (73.7, 85.8)	76.5 (68.0, 83.2)	-5.0
Non-smokers ²	96.3 (95.4, 97.1)	94.2 (93.0, 95.1)	-2.3**
<i>Sex</i>			
Male	95.0 (93.6, 96.0)	92.3 (90.7, 93.7)	-2.8**
Female	96.0 (94.6, 97.0)	94.5 (93.1, 95.6)	-1.6
<i>Age (years)</i>			
15-24	95.6 (93.7, 96.9)	92.0 (89.7, 93.8)	-3.7**
25-44	95.3 (93.9, 96.4)	93.7 (92.0, 95.1)	-1.7
45-64	95.3 (93.5, 96.7)	95.0 (93.1, 96.4)	-0.4
65+	96.9 (94.1, 98.4)	94.6 (91.4, 96.6)	-2.4
<i>Residence</i>			
Urban	95.7 (94.4, 96.7)	94.4 (92.8, 95.6)	-1.4
Rural	95.3 (93.6, 96.5)	92.6 (90.8, 94.1)	-2.8**
<i>Level of education</i>			
No formal education	95.3 (93.8, 96.4)	92.8 (91.1, 94.2)	-2.6**
Primary school	95.7 (93.6, 97.1)	93.4 (90.8, 95.2)	-2.4
Middle school	93.8 (90.5, 96.1)	95.2 (92.6, 96.9)	1.4
High school	98.5 (96.0, 99.5)	93.6 (89.8, 96.0)	-5.0**
Baccalaureate or higher	96.1 (90.8, 98.4)	93.5 (88.0, 96.5)	-2.7

Source: ANSD, GATS 2015 and 2023

CHAPTER VIII: MEDIA

Key Findings

- Less than half of adults have been exposed to anti-smoking information via any media outlet in the past 30 days (49.7%).
- The main broadcasting channels remain television and radio (37.4%).
- Just over three in five current smokers (60.9%) noticed health warnings on cigarette packs. Among them, 37.5% of current smokers have considered quitting smoking as a result of these messages.
- Overall, 10.7% of adults reported noticing an advertisement, sponsorship, or promotion for cigarettes.
- Nearly two in ten current smokers (18.0%) reported noticing an advertisement, sponsorship, or promotion for cigarettes in the past 30 days.
- Approximately one in ten non-smokers (10.4%) noticed cigarette-related advertising or promotions during the reference period.

The tobacco control process in Senegal ranges from community awareness initiatives aimed at preventing smoking and encouraging smoking cessation, to the implementation of policy measures such as increasing tobacco taxes, the introduction of laws guaranteeing smoke-free indoor spaces, and the strengthened enforcement of laws restricting youth access to tobacco products. This monograph focuses in particular on a major phenomenon in tobacco promotion and control: Mass communications.

The media has changed the social environment, particularly by influencing social norms surrounding smoking, and has facilitated tobacco use. However, it also plays a crucial role in tobacco control by counteracting the promotion strategies implemented by tobacco advocates.

In Senegal, the risks associated with tobacco use are well established. Faced with this reality, the government has made a firm commitment to combat smoking by implementing anti-smoking laws and policies, while conducting awareness-raising activities through the media.

8.1. ADULTS AGED 15 AND OVER WHO HAVE NOTICED ANTI-SMOKING INFORMATION IN THE LAST 30 DAYS ON VARIOUS MEDIA OUTLETS

This section analyzes adult exposure to anti-smoking messages in various media outlets. These messages, which aim to raise awareness of the dangers of smoking or encourage people to quit, are relayed through television, radio, print media, billboards, and digital platforms.

According to **Table 8.1**, approximately half of adults (49.7%) have been exposed to anti-smoking information via some form of media in the last 30 days. Television and radio are the main broadcasting channels (37.4%), followed by the Internet and social media (18.9%), the print media (17.6%), billboards (13.6%), and other media (10.2%).

Exposure to anti-smoking information varies by sex and place of residence. Men are more exposed to it (53.6%) than women (45.8%), as are adults in urban areas (55.1%) compared to those in rural areas (45.0%). On the other hand, receptivity to these messages seems relatively stable according to age with 50.3% among the 15-24 age group and 49.4% among the 25+ age group.

The gap is minimal between the general population and non-smokers who noticed anti-smoking information (49.7% and 49.8% respectively). However, a slight difference is observed across all media outlets among current smokers (48.3%). Among them, those living in urban areas (53.6%) are more likely to notice anti-smoking messages than those living in rural areas (42.4%). Among non-smokers, women and people living in urban areas are more likely to notice anti-smoking messages than men and rural residents.

Table 8.1: Percentage of adults aged 15 and over who have noticed anti-smoking messages in the last 30 days in various media, by smoking status and certain sociodemographic characteristics

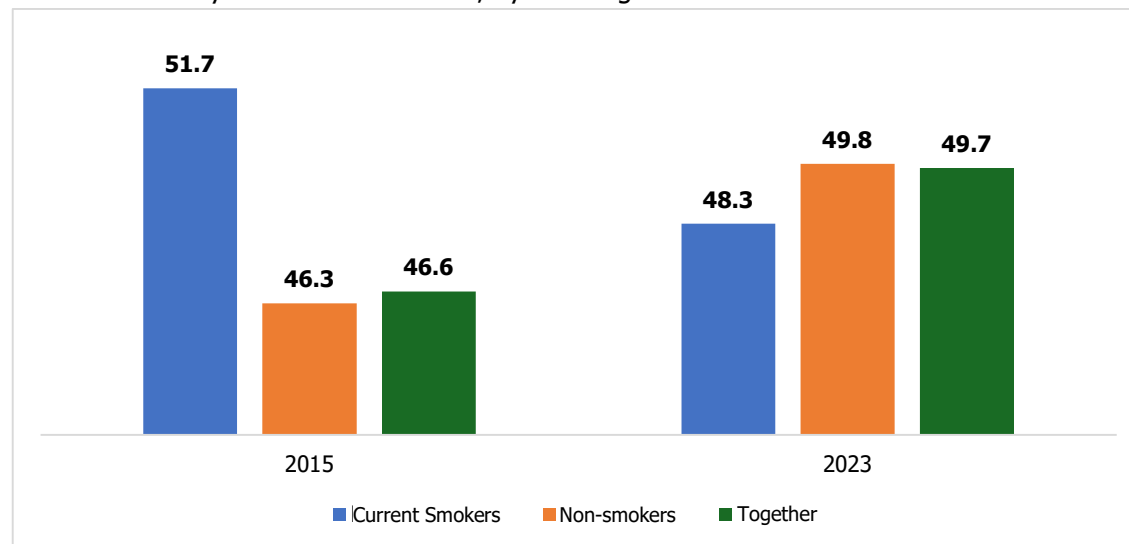
Media	Sex		Age (years)		Place of residence		
	Overall	Male	Female	15-24	25+	Urban	Rural
<i>Percentage (95% CI)</i>							
Overall							
In newspapers or magazines	17.6 (15.8, 19.4)	18.4 (16.1, 21.0)	16.7 (14.7, 18.9)	19.6 (16.8, 22.9)	16.5 (14.7, 18.5)	20.3 (17.8, 23.2)	15.1 (12.9, 17.7)
On television or radio	37.4 (34.7, 40.2)	39.8 (36.4, 43.4)	35.1 (32.0, 38.2)	36.2 (32.4, 40.2)	38.0 (35.1, 41.0)	39.0 (35.4, 42.8)	36.0 (32.2, 40.0)
On television	28.0 (25.5, 30.6)	28.5 (25.3, 31.9)	27.5 (24.6, 30.5)	26.7 (23.1, 30.7)	28.6 (25.9, 31.4)	34.4 (30.9, 38.1)	22.3 (18.9, 26.2)
On the radio	27.4 (24.8, 30.1)	30.3 (27.0, 33.8)	24.5 (21.8, 27.5)	27.9 (24.2, 31.8)	27.1 (24.3, 30.1)	24.1 (20.6, 28.0)	30.2 (26.5, 34.1)
On billboards	13.6 (12.0, 15.4)	15.2 (13.1, 17.5)	12.1 (10.2, 14.2)	15.6 (12.9, 18.8)	12.6 (10.9, 14.6)	19.0 (16.3, 22.0)	8.9 (7.1, 11.1)
Internet or social media	18.9 (17.0, 20.9)	21.5 (18.8, 24.4)	16.4 (14.4, 18.5)	21.9 (19.0, 25.1)	17.4 (15.3, 19.7)	24.9 (22.1, 28.0)	13.6 (11.3, 16.4)
Elsewhere	10.2 (8.8, 11.9)	12.4 (10.2, 15.0)	8.1 (6.7, 9.8)	10.3 (8.1, 13.1)	10.2 (8.7, 11.9)	11.6 (9.7, 13.9)	9.0 (7.0, 11.5)
Any media	49.7 (47.0, 52.4)	53.6 (50.2, 57.1)	45.8 (42.7, 49.0)	50.3 (46.5, 54.1)	49.4 (46.4, 52.3)	55.1 (51.5, 58.7)	45.0 (41.1, 48.9)
Current smokers¹							
In newspapers or magazines	11.4 (7.1, 17.9)	12.1 (7.5, 18.8)	* *	* *	10.2 (6.4, 16.1)	13.1 (7.1, 22.9)	9.6 (4.4, 19.4)
On television or radio	28.5 (20.0, 38.9)	29.3 (20.6, 39.8)	* *	* *	28.3 (19.3, 39.5)	27.4 (15.6, 43.6)	29.7 (18.9, 43.5)
On television	16.0 (9.2, 26.3)	16.1 (9.1, 26.8)	* *	* *	17.1 (9.7, 28.4)	19.1 (8.7, 37.0)	12.5 (6.5, 22.5)
On the radio	21.5 (15.0, 29.9)	22.7 (16.0, 31.3)	* *	* *	20.5 (13.9, 29.0)	16.6 (9.5, 27.6)	27.0 (16.5, 40.8)
On billboards	12.0 (5.7, 23.7)	12.7 (6.0, 24.8)	* *	* *	10.9 (4.6, 23.9)	18.9 (8.0, 38.5)	4.3 (1.5, 11.8)
Internet or social media	11.7 (5.4, 23.3)	12.3 (5.8, 24.4)	* *	* *	12.2 (5.5, 25.1)	17.1 (6.8, 36.7)	5.7 (1.9, 15.9)
Elsewhere	21.4 (14.1, 31.1)	22.6 (15.0, 32.5)	* *	* *	20.4 (13.0, 30.4)	22.8 (12.6, 37.6)	19.8 (10.8, 33.5)
Any media	48.3 (37.9, 58.8)	50.2 (39.9, 60.4)	* *	* *	47.1 (36.1, 58.4)	53.6 (39.4, 67.2)	42.4 (28.4, 57.7)
Non-smokers²							
In newspapers or magazines	17.8 (16.1, 19.7)	19.0 (16.6, 21.6)	16.8 (14.8, 19.0)	19.6 (16.8, 22.8)	16.9 (15.0, 19.0)	20.7 (18.1, 23.6)	15.3 (13.0, 18.0)
On television or radio	37.8 (35.1, 40.6)	40.7 (37.2, 44.4)	35.1 (32.1, 38.3)	36.3 (32.4, 40.3)	38.6 (35.6, 41.7)	39.6 (35.8, 43.5)	36.2 (32.4, 40.3)
On television	28.5 (25.9, 31.2)	29.5 (26.2, 33.1)	27.5 (24.7, 30.6)	27.0 (23.4, 31.0)	29.2 (26.5, 32.2)	35.2 (31.5, 39.0)	22.7 (19.2, 26.7)
On the radio	27.6 (25.0, 30.4)	30.9 (27.5, 34.5)	24.6 (21.9, 27.6)	27.8 (24.2, 31.8)	27.5 (24.6, 30.6)	24.5 (20.9, 28.5)	30.3 (26.6, 34.3)
On billboards	13.7 (12.0, 15.5)	15.4 (13.2, 17.9)	12.1 (10.2, 14.3)	15.5 (12.8, 18.7)	12.7 (10.9, 14.8)	19.0 (16.2, 22.1)	9.1 (7.3, 11.3)
Internet or social media	19.2 (17.3, 21.3)	22.2 (19.4, 25.3)	16.5 (14.5, 18.6)	22.1 (19.2, 25.3)	17.7 (15.5, 20.1)	25.3 (22.4, 28.5)	13.9 (11.5, 16.7)
Elsewhere	9.8 (8.3, 11.4)	11.5 (9.3, 14.2)	8.1 (6.7, 9.8)	10.1 (7.8, 12.9)	9.6 (8.1, 11.4)	11.1 (9.2, 13.4)	8.6 (6.6, 11.2)
Any media	49.8 (47.0, 52.5)	53.9 (50.2, 57.6)	46.0 (42.8, 49.1)	50.2 (46.4, 54.1)	49.5 (46.4, 52.6)	55.2 (51.4, 58.9)	45.1 (41.1, 49.1)
¹ Includes daily and occasional smokers (less than once a day).							
² includes former tobacco smokers and those who have never smoked tobacco.							
* Indicates the removal of estimates based on unweighted numbers below 25.							

Source: ANSD, GATS 2023

Trends: The proportion of adults exposed to anti-smoking information through any media outlet in the past 30 days increased slightly from 46.6% in 2015 to 49.7% in 2023. This evolution varies according to smoking status.

Among current smokers, the proportion fell from 51.7% to 48.3%, a decrease of 3.4 percentage points over the same period. On the other hand, among non-smokers, it increased, ranging from 46.3% to 49.8%.

Graph 8.1: Proportion of adults aged 15 and over who have noticed anti-smoking information in the last 30 days in various locations, by smoking status



Source: ANSD, GATS 2015 and 2023

8.2. HEALTH WARNINGS ON CIGARETTE PACKS THAT LED TO CONSIDERING QUITTING SMOKING

Table 8.2 presents the proportion of current smokers (including daily and occasional smokers) aged 15 years and older who noticed health warnings on cigarette packs and considered quitting in the last 30 days prior to the survey, based on selected sociodemographic characteristics.

Overall, just over three in five current smokers (60.9%) noticed health warnings on cigarette packs. However, this proportion varies according to the place of residence. Current smokers living in urban areas were more likely to have noticed health warnings on cigarette packs than their counterparts living in rural areas (67.4% versus 53.5%).

Regarding the impact of these health warnings, 37.5% of current smokers (including daily and occasional smokers) considered quitting smoking. This proportion is higher in urban areas (39.4%) than in rural areas (35.4%).

Table 8.2: Percentage of current smokers aged 15 and over who noticed the health warnings on cigarette packs and considered quitting smoking because of these warnings in the last 30 days, according to certain sociodemographic characteristics

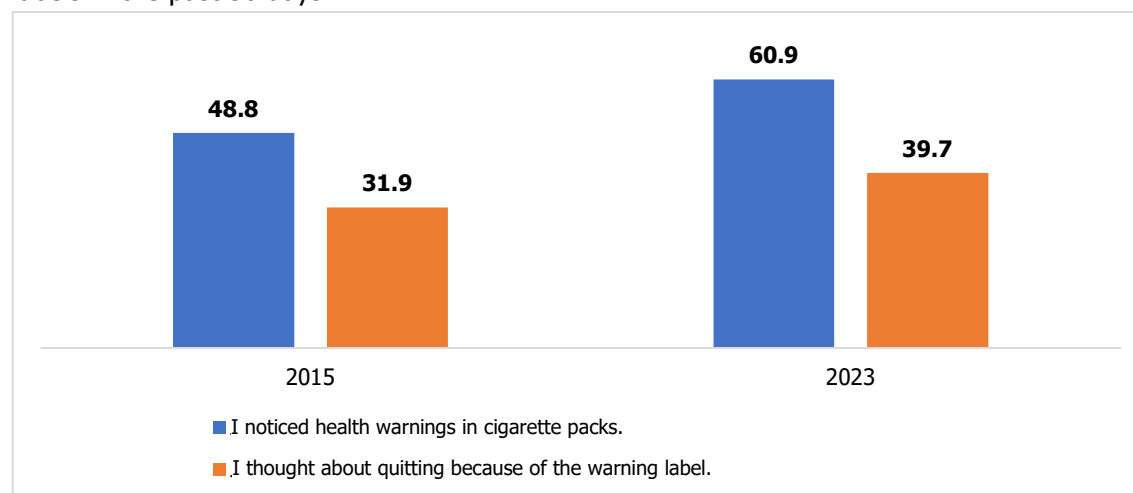
Socio-demographic characteristics	Current smokers ¹ WHO...	
	I noticed health warnings on cigarette packs ²	I thought about quitting because of the warning label ²
	<i>Percentage (95% CI)</i>	
Overall	60.9 (49.8, 70.9)	37.5 (28.4, 47.7)
<i>Sex</i>		
Male	64.1 (53.5, 73.5)	39.7 (30.3, 49.9)
Female	* *	* *
<i>Age (years)</i>		
15-24	* *	* *
25-44	63.4 (46.8, 77.3)	40.2 (27.0, 54.8)
45-64	57.7 (41.5, 72.5)	39.3 (26.3, 54.0)
65+	* *	* *
<i>Place of residence</i>		
Urban	67.4 (51.8, 79.9)	39.4 (26.8, 53.6)
Rural	53.5 (38.1, 68.3)	35.4 (23.0, 50.3)
<i>Level of education</i>		
No formal education	57.5 (42.1, 71.6)	25.7 (14.5, 41.3)
Primary school	64.1 (48.2, 77.4)	38.9 (24.5, 55.5)
Middle school	55.7 (27.6, 80.6)	49.3 (24.0, 74.9)
High school	* *	* *
Baccalaureate and higher	* *	* *

¹ Includes daily and occasional smokers (less than once a day).
² In the last 30 days.
* Indicates the removal of estimates based on unweighted numbers below 25.

Source: ANSD, GATS 2023

Trends: The proportion of current smokers aged 15 and over who have noticed the health warnings on cigarette packs and the proportion of smokers who have considered quitting smoking because of these warnings in the last 30 days are increasing between 2015 and 2023. They go from 48.8% to 60.9% and 31.9% to 39.7%, respectively.

Graph 8.2: Proportion of current smokers who considered quitting smoking due to warning labels in the past 30 days



Source: ANSD, GATS 2015 and 2023

8.3. MARKETING (ADVERTISING, PROMOTION, AND SPONSORSHIP)

Table 8.3 shows the proportion of adults aged 15 and over who noticed cigarette marketing in the 30 days prior to the survey, in a variety of forms: in public places and stores where cigarettes are sold, in the media (on television, radio, billboards, posters, in newspapers or magazines, on the Internet, at the cinema), on public transportation or at train stations, on public walls and banners, the promotion of cigarettes through free samples, sales, coupons, free gifts, and cigarette brands sponsoring events.

Overall, 10.7% of adults reported noticing advertising, sponsorship, or promotion of cigarettes. This exposure is significantly higher among men (11.1%) than women (10.4%); among adults aged 15-24 than those aged 25 and over; and in urban areas compared to rural areas.

In terms of advertising, television (2.8%) and public transportation (2.8%) are the main channels, followed by radio (2.2%) and the Internet or social media (2.2%), posters (1.8%), and public walls and billboards (1.5%). On the other hand, advertising in cinemas is the least noticed (0.4%). Regarding sports sponsorship, 0.9% of adults aged 15-24 and 0.6% of those aged 25+ were exposed to it. Moreover, the most common promotion observed is clothing or other items bearing the name or logo of a cigarette brand (1.5%).

Table 8.3: Percentage of adults aged 15 and older who noticed cigarette advertising in the past 30 days across various media, by certain sociodemographic characteristics

Media	Overall	Sex		Age (years)		Place of residence		
		Male	Female	15-24	25+	Urban	Rural	
<i>Percentage (95% CI)</i>								
<i>I noticed cigarette advertising</i>								
On television	2.8 (2.1, 3.7)	2.5 (1.7, 3.6)	3.1 (2.1, 4.4)	2.8 (1.9, 4.1)	2.8 (2.0, 3.8)	2.8 (1.8, 4.2)	2.8 (1.9, 4.0)	
On the radio	2.2 (1.6, 3.0)	2.0 (1.3, 2.9)	2.4 (1.6, 3.5)	2.1 (1.3, 3.3)	2.2 (1.5, 3.2)	1.3 (0.6, 2.6)	3.0 (2.1, 4.2)	
On billboards	1.5 (1.1, 2.3)	1.4 (0.9, 2.3)	1.7 (1.0, 2.8)	1.8 (1.0, 3.2)	1.4 (0.9, 2.2)	2.3 (1.4, 3.6)	0.9 (0.5, 1.7)	
On posters	1.8 (1.3, 2.5)	1.6 (1.1, 2.4)	2.0 (1.3, 3.1)	1.8 (1.0, 3.2)	1.8 (1.2, 2.6)	2.3 (1.5, 3.5)	1.4 (0.8, 2.3)	
In newspapers or magazines	0.8 (0.4, 1.3)	0.7 (0.4, 1.3)	0.8 (0.4, 1.6)	1.0 (0.6, 1.8)	0.6 (0.3, 1.2)	0.9 (0.4, 2.1)	0.6 (0.3, 1.1)	
At the cinema	0.4 (0.2, 0.8)	0.4 (0.2, 0.8)	0.4 (0.2, 1.1)	0.3 (0.1, 0.9)	0.4 (0.2, 1.0)	0.4 (0.1, 1.1)	0.4 (0.2, 0.9)	
On the Internet or social media	2.2 (1.6, 2.9)	2.2 (1.5, 3.2)	2.1 (1.4, 3.3)	3.0 (2.0, 4.6)	1.7 (1.2, 2.6)	2.7 (1.9, 4.0)	1.7 (1.1, 2.6)	
In public transportation	2.8 (2.1, 3.8)	2.5 (1.7, 3.8)	3.1 (2.1, 4.5)	2.4 (1.4, 4.1)	3.0 (2.2, 4.2)	2.9 (2.0, 4.3)	2.7 (1.8, 4.2)	
On public walls	1.5 (1.0, 2.2)	1.6 (1.0, 2.6)	1.4 (0.9, 2.3)	2.1 (1.2, 3.9)	1.2 (0.8, 1.9)	2.3 (1.5, 3.6)	0.8 (0.4, 1.5)	
Elsewhere	0.9 (0.6, 1.4)	1.3 (0.8, 2.2)	0.6 (0.2, 1.3)	1.1 (0.5, 2.5)	0.8 (0.5, 1.4)	1.4 (0.8, 2.3)	0.5 (0.2, 1.2)	
Sports sponsorship noticed	0.7 (0.4, 1.2)	0.9 (0.4, 1.7)	0.6 (0.3, 1.1)	0.9 (0.4, 2.2)	0.6 (0.4, 1.1)	0.7 (0.4, 1.4)	0.7 (0.3, 1.5)	
<i>I noticed cigarette promotions</i>								
Free samples	0.5 (0.2, 0.8)	0.6 (0.3, 1.2)	0.3 (0.1, 1.0)	0.4 (0.2, 1.0)	0.5 (0.2, 1.0)	0.8 (0.4, 1.6)	0.1 (0.0, 0.6)	
Selling price	0.6 (0.3, 1.0)	0.4 (0.2, 0.8)	0.7 (0.3, 1.5)	0.7 (0.4, 1.4)	0.5 (0.3, 0.9)	0.8 (0.4, 1.7)	0.4 (0.2, 0.8)	
Coupons	0.4 (0.2, 0.8)	0.3 (0.1, 0.9)	0.4 (0.1, 1.4)	0.5 (0.2, 1.5)	0.3 (0.1, 0.7)	0.6 (0.2, 1.6)	0.2 (0.0, 0.5)	
Free gifts/discounts on other products	0.7 (0.4, 1.1)	0.7 (0.3, 1.4)	0.6 (0.3, 1.2)	0.5 (0.2, 1.4)	0.7 (0.4, 1.3)	1.0 (0.5, 1.7)	0.4 (0.2, 1.0)	
Apparel/items with brand name or logo	1.5 (1.1, 2.1)	1.9 (1.3, 2.8)	1.1 (0.7, 1.9)	1.4 (0.8, 2.4)	1.6 (1.0, 2.3)	2.1 (1.4, 3.2)	1.0 (0.5, 1.8)	
Email promoting cigarettes	0.2 (0.1, 0.6)	0.2 (0.1, 0.9)	0.2 (0.1, 0.8)	0.2 (0.0, 1.6)	0.2 (0.1, 0.6)	0.5 (0.2, 1.2)	0.0 (0.0, 0.1)	

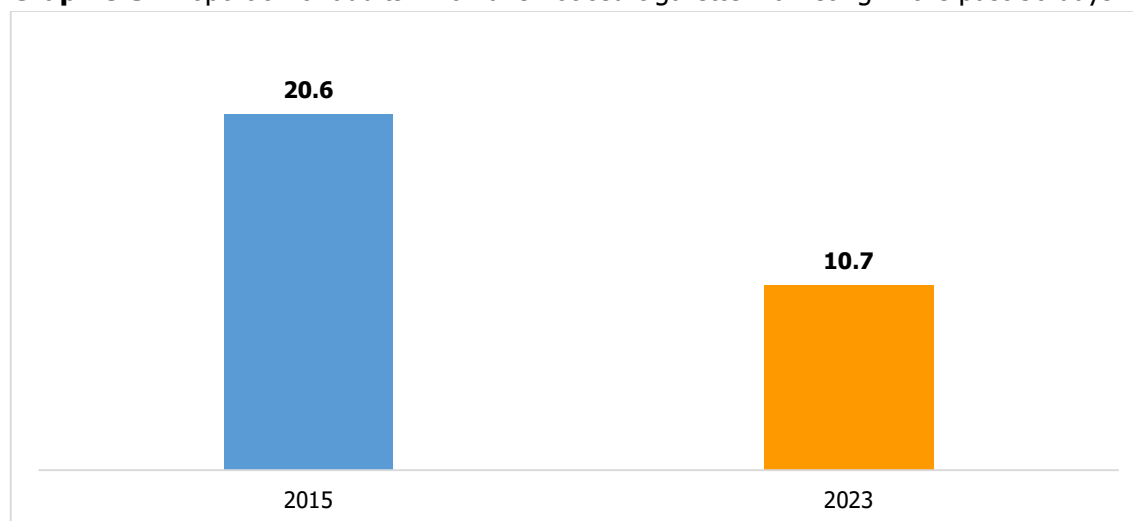
Media	Overall	Sex		Age (years)		Place of residence	
		Male	Female	15-24	25+	Urban	Rural
Promotions via social media	0.9 (0.6, 1.3)	1.0 (0.6, 1.7)	0.7 (0.4, 1.4)	1.4 (0.7, 2.6)	0.6 (0.3, 1.1)	1.1 (0.6, 1.9)	0.7 (0.3, 1.3)
Have you noticed cigarette advertising or promotions in stores? ¹	1.0 (0.7, 1.5)	1.0 (0.6, 1.7)	1.0 (0.6, 1.8)	0.9 (0.5, 1.8)	1.1 (0.7, 1.7)	1.4 (0.9, 2.4)	0.7 (0.3, 1.2)
Have you noticed advertising, sponsorships or promotions	10.7 (9.2, 12.5)	11.1 (9.2, 13.3)	10.4 (8.6, 12.5)	11.5 (9.1, 14.4)	10.3 (8.7, 12.2)	12.1 (9.8, 14.7)	9.6 (7.6, 12.0)

¹ Includes those who noticed sales prices on cigarettes or free gifts/discount offers on other products when purchasing cigarettes.

Source: ANSD, GATS 2023

Trends: The proportion of adults aged 15 and over who noticed cigarette marketing in the past 30 days decreased significantly between 2015 and 2023. It fell from 20.6% to 10.7%.

Graph 8.3: Proportion of adults who have noticed cigarette marketing in the past 30 days



Source: ANSD, GATS 2015 and 2023

Table 8.4 shows the proportion of smokers aged 15 and older who have noticed cigarette marketing in the past 30 days in public places and media, as well as cigarette sponsorship and promotion through free samples, sales, coupons, free gifts, etc.

Results show that nearly two in ten current smokers (18.0%) reported noticing an advertisement, sponsorship, or promotion for cigarettes in the past 30 days. Contrary to trends observed in the general population, current smokers in rural areas (21.4%) were more exposed to such marketing than those in urban areas (15.0%).

The proportion of current smokers who have noticed such marketing reached 18.6% among adults aged 25 and over. Radio advertising was the channel most frequently observed by smokers (5.6%), followed by public transportation (5.0%), television (3.4%), public walls (2.8%), and posters (2.6%).

Sports sponsorship is noticed by 2.5% of smokers. In addition, the most common promotions involve branded clothing/items (6.0%), followed by promotional gifts on other products (2.9%), free samples (2.1%), and price discounts (1.6%).

Table 8.4: Percentage of current smokers aged 15 and older who noticed cigarette advertising in the past 30 days across various media, by certain sociodemographic characteristics

Media	Overall	Sex		Age (years)		Place of residence		
		Male	Female	15-24	25+	Urban	Rural	
<i>Percentage (95% CI)</i>								
<i>I noticed cigarette advertising</i>								
On television	3.4 (1.2, 9.6)	3.6 (1.2, 10.0)	* *	* *	3.8 (1.3, 10.6)	0.7 (0.1, 3.0)	6.5 (2.0, 19.0)	
On the radio	5.6 (2.5, 12.0)	5.9 (2.7, 12.7)	* *	* *	5.7 (2.4, 13.0)	0.5 (0.1, 3.3)	11.4 (4.9, 24.0)	
On billboards	0.6 (0.1, 2.4)	0.6 (0.1, 2.6)	* *	* *	0.6 (0.1, 2.7)	1.0 (0.2, 4.6)	0.0 N/A	
On posters	2.6 (1.0, 6.4)	2.8 (1.1, 6.8)	* *	* *	2.9 (1.2, 7.2)	2.2 (0.7, 7.5)	3.0 (0.8, 11.0)	
In newspapers or magazines	0.9 (0.2, 4.8)	1.0 (0.2, 5.0)	* *	* *	1.0 (0.2, 5.3)	0.3 (0.0, 2.4)	1.6 (0.2, 10.9)	
At the cinema	0.4 (0.1, 2.7)	0.4 (0.1, 2.9)	* *	* *	0.4 (0.1, 3.1)	0.7 (0.1, 5.1)	0.0 N/A	
On the Internet or social media	1.5 (0.5, 4.3)	1.6 (0.5, 4.5)	* *	* *	1.7 (0.6, 4.8)	2.8 (1.0, 7.9)	0.0 N/A	
In public transportation	5.0 (2.0, 11.6)	4.8 (1.8, 12.1)	* *	* *	5.4 (2.1, 12.8)	4.4 (1.2, 15.1)	5.7 (1.7, 17.3)	
On public walls	2.8 (0.9, 9.0)	3.0 (0.9, 9.5)	* *	* *	3.2 (1.0, 10.0)	1.1 (0.1, 7.4)	4.8 (1.2, 17.9)	
Elsewhere	1.7 (0.4, 5.9)	1.7 (0.5, 6.2)	* *	* *	1.9 (0.5, 6.6)	0.8 (0.1, 5.5)	2.6 (0.5, 12.4)	
Sports sponsorship noticed	2.5 (0.7, 8.2)	2.6 (0.8, 8.6)	* *	* *	2.8 (0.8, 9.1)	4.7 (1.3, 15.0)	0.0 N/A	
<i>I noticed cigarette promotions</i>								
Free samples	2.1 (0.5, 8.9)	2.2 (0.5, 9.4)	* *	* *	1.6 (0.2, 10.8)	2.7 (0.4, 17.3)	1.4 (0.2, 9.4)	
Selling price	1.6 (0.5, 4.6)	1.7 (0.6, 4.9)	* *	* *	0.9 (0.2, 3.6)	1.8 (0.5, 5.9)	1.4 (0.2, 9.4)	
Coupons	1.2 (0.4, 4.3)	1.3 (0.4, 4.5)	* *	* *	0.7 (0.2, 3.0)	1.1 (0.3, 4.9)	1.4 (0.2, 9.4)	
Free gifts/discounts on other products	2.9 (1.0, 8.1)	3.0 (1.0, 8.6)	* *	* *	3.2 (1.1, 9.0)	3.8 (1.0, 12.9)	1.8 (0.3, 11.8)	
Apparel/items with brand name or logo	6.3 (2.9, 13.1)	6.6 (3.1, 13.8)	* *	* *	7.0 (3.3, 14.5)	7.6 (3.0, 17.6)	4.9 (1.2, 18.0)	
Email promoting cigarettes	0.3 (0.0, 2.1)	0.3 (0.0, 2.2)	* *	* *	0.3 (0.0, 2.3)	0.5 (0.1, 3.9)	0.0 N/A	
Promotions via social media	0.0 N/A	0.0 N/A	* *	* *	0.0 N/A	0.0 N/A	0.0 N/A	
Have you noticed cigarette advertising or promotions in stores? ¹	4.0 (1.7, 9.2)	4.3 (1.8, 9.6)	* *	* *	3.7 (1.4, 9.3)	4.8 (1.6, 13.2)	3.2 (0.8, 12.1)	
Have you noticed advertising, sponsorships or promotions	(12.1, 18.0 26.1)	18.6 (12.3, 27.2)	* *	* *	18.6 (12.2, 27.2)	15.0 (8.4, 25.6)	21.4 (12.3, 34.5)	
Note: Current tobacco users include daily and occasional smokers (less than once a day).								
¹ Includes those who noticed sales prices on cigarettes or free gifts/discount offers on other products when purchasing cigarettes.								
N/A - The estimate is "0.0."								
* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.								

Source: ANSD, GATS 2023

Table 8.5 analyzes exposure to cigarette marketing among non-smoking adults aged 15 years or older over the past 30 days in various locations or in the media.

Approximately one in ten non-smokers (10.4%) noticed cigarette-related advertising or promotions during the reference period. This proportion is slightly higher in urban areas (11.9%) than in rural areas (9.1%). Exposure to marketing also varies by age: 11.5% among those aged 15-24 versus 9.9% among those aged 25 and older.

Table 8.5: Percentage of current non-smokers aged 15 and older who noticed cigarette advertising in the past 30 days across various media, by certain sociodemographic characteristics

Media	Sex		Age (years)		Place of residence		
	Overall	Male	Female	15-24	25+	Urban	Rural
<i>Percentage (95% CI)</i>							
<i>I noticed cigarette advertising</i>							
On television	2.7 (2.1, 3.7)	2.4 (1.6, 3.5)	3.1 (2.1, 4.4)	2.8 (1.9, 4.2)	2.7 (1.9, 3.8)	2.9 (1.9, 4.4)	2.6 (1.8, 3.9)
On the radio	2.0 (1.5, 2.8)	1.6 (1.1, 2.4)	2.4 (1.6, 3.6)	2.0 (1.3, 3.2)	2.0 (1.4, 3.0)	1.3 (0.6, 2.7)	2.6 (1.9, 3.7)
On billboards	1.6 (1.1, 2.3)	1.5 (0.9, 2.4)	1.7 (1.0, 2.8)	1.8 (1.0, 3.2)	1.4 (0.9, 2.3)	2.3 (1.4, 3.8)	1.0 (0.5, 1.8)
On posters	1.8 (1.2, 2.5)	1.5 (0.9, 2.4)	2.0 (1.3, 3.1)	1.9 (1.1, 3.2)	1.7 (1.1, 2.6)	2.3 (1.4, 3.6)	1.3 (0.7, 2.3)
In newspapers or magazines	0.7 (0.4, 1.3)	0.7 (0.4, 1.3)	0.8 (0.4, 1.6)	1.0 (0.6, 1.8)	0.6 (0.3, 1.2)	1.0 (0.4, 2.1)	0.6 (0.3, 1.1)
At the cinema	0.4 (0.2, 0.8)	0.4 (0.2, 0.8)	0.4 (0.2, 1.1)	0.3 (0.1, 0.9)	0.4 (0.2, 1.0)	0.4 (0.1, 1.1)	0.4 (0.2, 1.0)
On the Internet or social media	2.2 (1.6, 3.0)	2.3 (1.5, 3.3)	2.1 (1.4, 3.3)	3.1 (2.0, 4.7)	1.7 (1.2, 2.6)	2.7 (1.8, 4.0)	1.8 (1.1, 2.8)
In public transportation	2.7 (2.0, 3.7)	2.4 (1.5, 3.7)	3.1 (2.1, 4.4)	2.4 (1.4, 4.1)	2.9 (2.1, 4.1)	2.8 (1.9, 4.3)	2.6 (1.7, 4.1)
On public walls	1.5 (1.0, 2.1)	1.5 (0.9, 2.5)	1.4 (0.9, 2.3)	2.2 (1.2, 3.9)	1.1 (0.7, 1.7)	2.4 (1.5, 3.8)	0.6 (0.3, 1.3)
Elsewhere	0.9 (0.6, 1.4)	1.3 (0.7, 2.2)	0.6 (0.2, 1.3)	1.1 (0.5, 2.5)	0.8 (0.4, 1.4)	1.4 (0.8, 2.4)	0.4 (0.1, 1.2)
Sports sponsorship noticed	0.7 (0.4, 1.1)	0.7 (0.3, 1.6)	0.6 (0.3, 1.1)	0.9 (0.4, 2.2)	0.5 (0.3, 1.0)	0.6 (0.3, 1.2)	0.7 (0.4, 1.5)
<i>I noticed cigarette promotions</i>							
Free samples	0.4 (0.2, 0.7)	0.5 (0.2, 1.0)	0.3 (0.1, 1.0)	0.3 (0.1, 1.0)	0.4 (0.2, 0.9)	0.7 (0.4, 1.5)	0.1 (0.0, 0.6)
Selling price	0.5 (0.3, 1.0)	0.3 (0.1, 0.7)	0.7 (0.3, 1.5)	0.6 (0.3, 1.3)	0.5 (0.2, 0.9)	0.7 (0.3, 1.7)	0.3 (0.2, 0.7)
Coupons	0.3 (0.1, 0.8)	0.2 (0.0, 0.9)	0.4 (0.1, 1.4)	0.5 (0.1, 1.4)	0.3 (0.1, 0.7)	0.6 (0.2, 1.7)	0.1 (0.0, 0.4)
Free gifts/discounts on other products	0.6 (0.3, 0.9)	0.5 (0.2, 1.2)	0.6 (0.3, 1.2)	0.5 (0.2, 1.4)	0.6 (0.3, 1.1)	0.8 (0.4, 1.6)	0.3 (0.1, 0.8)
Apparel/items with brand name or logo	1.3 (0.9, 1.9)	1.5 (1.0, 2.3)	1.1 (0.7, 1.9)	1.4 (0.8, 2.4)	1.2 (0.8, 2.0)	1.9 (1.2, 2.9)	0.8 (0.4, 1.5)
Email promoting cigarettes	0.2 (0.1, 0.6)	0.2 (0.1, 0.9)	0.2 (0.1, 0.8)	0.2 (0.0, 1.6)	0.2 (0.1, 0.7)	0.5 (0.2, 1.3)	0.0 (0.0, 0.1)
Promotions via social media	0.9 (0.6, 1.4)	1.1 (0.6, 1.9)	0.7 (0.4, 1.4)	1.4 (0.7, 2.6)	0.6 (0.4, 1.2)	1.1 (0.7, 2.0)	0.7 (0.3, 1.4)
Have you noticed cigarette advertising or promotions in stores? ¹	0.9 (0.6, 1.4)	0.8 (0.4, 1.5)	1.0 (0.6, 1.8)	0.9 (0.4, 1.7)	0.9 (0.6, 1.5)	1.3 (0.7, 2.3)	0.6 (0.3, 1.1)
Have you noticed advertising, sponsorships or promotions	10.4 (8.9, 12.1)	10.4 (8.6, 12.6)	10.4 (8.6, 12.6)	11.5 (9.1, 14.4)	9.9 (8.3, 11.7)	11.9 (9.7, 14.5)	9.1 (7.2, 11.5)
Note: Current non-smokers include former smokers and those who have never smoked.							
¹ Includes those who noticed sales prices on cigarettes or free gifts/discount offers on other products when purchasing cigarettes.							

Source: ANSD, GATS 2023

CHAPTER IX: Knowledge, Attitudes, and Perceptions

Key Findings

- The vast majority of adults recognize that smoking tobacco is associated with serious diseases: 87.2% believe that tobacco causes major health problems. Lung cancer is by far the most widely recognized risk (90.3%), followed by stomach cancer (71.8%), bone loss (67.2%) and heart attack (64.7%).
- Nearly nine in ten adults (85.7%) believe that breathing in secondhand smoke can cause serious illness in non-smokers, and 69.2% believe that using smokeless tobacco can cause serious disease.

This chapter explores the perceptions and opinions of adults aged 15 and older regarding the risks associated with smoking, addressing various aspects: perceptions of serious illnesses caused by tobacco, the use of smokeless tobacco products, and the harmful effects of exposure to secondhand smoke.

It has also been shown that knowledge of the specific harms of tobacco can increase motivation to quit smoking, underlining the key role of information in prevention efforts.

9.1. PERCEPTIONS OF THE HARMFUL EFFECTS OF SMOKING TOBACCO USE

The GATS collected information on general beliefs among the population aged 15 and over regarding the health effects of tobacco use and various tobacco-related diseases. **Table 9.1** shows the proportion of adults aged 15 and older who believe that smoking can cause serious illness, stroke, heart attack, lung cancer, bladder cancer, stomach cancer, laryngeal cancer, premature birth, bone loss, diabetes, or emphysema, according to smoking status and certain sociodemographic characteristics.

Among the adult population as a whole, the vast majority recognize that smoking tobacco is associated with serious diseases. Thus, 87.2% of respondents believe that tobacco causes major health problems. Lung cancer is the most widely recognized risk (90.3%), followed by stomach cancer (71.8%), bone loss (67.2%) and heart attack (64.7%).

However, some effects are much less known. Less than a third of adults think smoking can cause diabetes (31.7%), and less than half link it to emphysema (40.7%).

Current smokers generally have a lower perception of tobacco-related risks than non-smokers, with a few exceptions. For example, 84.9% of smokers acknowledge that tobacco causes lung cancer, compared to 90.5% of non-smokers. The difference is even more pronounced for effects such as heart attack (56.0% against 65.1%) or diabetes (26.8% against 31.9%). However, for laryngeal cancer, 57.8% of smokers identified it as a tobacco-related risk, compared to 54.9% of non-smokers.

The differences between men and women are relatively small, but there are some notable nuances. Men are slightly more likely to acknowledge certain effects of tobacco, such as lung cancer (91.3% versus 89.3%), heart attack (66.0% versus 63.4%), and stroke (59.2% versus 56.8%). On the other hand, slightly more women believe that tobacco consumption can cause premature births (58.9% versus 56.7%).

Analysis by age group shows a general increase in awareness of the risks with age, particularly for cardiovascular disease. Acknowledging the link between smoking and heart attacks rises from 61.7% among 15–24-year-olds to 68.9% among 45-64-year-olds. Similarly, awareness of the link with stroke increased slightly from 55.9% (15-24 years) to 61.4% (45-64 years). However, some effects are less well recognized by older people. Thus, people aged 65 and over are the least likely to associate tobacco with diabetes (28.6%) and emphysema (32.9%).

Depending on the place of residence, urban residents have a higher level of knowledge than rural residents for most risks. The contrast is particularly marked for: lung cancer (94.8% in urban areas versus 86.3% in rural areas); laryngeal cancer (65.5% versus 45.8%); and premature births (63.6% versus 52.7%).

Moreover, the level of education appears to be a key determinant in the perception of tobacco-related risks. For example, 85.5% of adults with no formal education recognize the link between tobacco and lung cancer, compared to 98.1% of those with baccalaureate level or higher. Similar differences are observed for diseases such as laryngeal cancer (47.2% versus 73.8%) and emphysema (35.1% versus 57.4%). People who have completed high school or higher education are also more likely to associate tobacco with lesser-known effects, such as diabetes or bone loss.

Table 9.1: Percentage of adults aged 15 and over who believe that smoking tobacco causes serious diseases and various conditions, by smoking status and certain sociodemographic characteristics

Socio-demographic characteristics	Adults who believe smoking tobacco causes...											
	Serious disease	Stroke	Heart attack	Lung cancer	Bladder cancer	Stomach cancer	Laryngeal cancer	Pharyngeal cancer	Premature births	Bone loss	Diabetes	Emphysema
	<i>Percentage (95% CI)</i>											
Overall							5 5	5 3	5 7	6 7	3 1	4 0
<i>Smoking status</i>	87.2 (85.2, 88.9)	58.0 (55.4, 60.6)	64.7 (62.3, 67.0)	90.3 (88.7, 91.6)	57.3 (54.1, 60.5)	71.8 (69.0, 74.4)	0 (51.2, 58.7)	8 (50.0, 57.5)	8 (54.9, 60.6)	2 (64.2, 70.0)	7 (29.1, 34.4)	7 (37.5, 44.0)
Current smokers ¹							5 7	5 0	5 3	6 4	2 6	4 1
Non-smokers ²	86.1 (77.9, 91.6)	53.8 (43.4, 63.8)	56.0 (45.3, 66.1)	84.9 (72.7, 92.3)	55.3 (44.9, 65.3)	69.4 (59.4, 77.9)	8 (47.0, 68.0)	8 (40.3, 61.3)	8 (43.4, 63.9)	8 (53.9, 74.3)	8 (19.9, 35.0)	1 (30.8, 52.1)
<i>Sex</i>							5 5	5 4	5 6	6 9	2 1	4 1
Male	87.2 (85.3, 89.0)	58.2 (55.5, 60.8)	65.1 (62.6, 67.4)	90.5 (89.0, 91.8)	57.4 (54.1, 60.7)	71.9 (69.1, 74.5)	9 (51.1, 58.6)	9 (50.1, 57.6)	0 (55.1, 60.8)	3 (64.3, 70.1)	9 (29.3, 34.6)	7 (37.5, 44.0)
Female							5 5	5 5	5 5	6 6	3 3	4 4
<i>Age (years)</i>							4 7	4 5	8 5	5 6	2 3	0 4
15-24	87.8 (85.2, 90.0)	59.2 (56.0, 62.3)	66.0 (63.0, 68.9)	91.3 (89.2, 93.0)	58.3 (54.6, 61.9)	73.2 (70.1, 76.0)	6 (51.3, 59.8)	7 (50.5, 58.8)	7 (53.1, 60.3)	3 (65.9, 72.5)	3 (28.2, 34.7)	4 (37.6, 45.3)
25-44							4 5	2 5	8 6	5 6	2 3	0 4
45-64	86.6 (84.3, 88.7)	56.8 (53.6, 60.1)	63.4 (60.5, 66.2)	89.3 (87.4, 91.0)	56.3 (52.6, 60.0)	70.4 (67.0, 73.7)	4 (50.3, 58.5)	9 (48.8, 57.0)	9 (55.6, 62.1)	1 (61.5, 68.5)	1 (29.1, 35.1)	0 (36.4, 43.9)
65+							5 4	5 3	5 1	6 4	2 9	4 0
<i>Residence</i>							7 5	7 5	6 6	7 6	3 2	4 3
	86.1 (83.3, 88.5)	55.9 (52.1, 59.7)	61.7 (57.9, 65.4)	90.1 (87.7, 92.1)	52.6 (48.3, 56.9)	70.4 (66.6, 73.8)	7 (49.9, 59.3)	2 (48.3, 57.9)	8 (47.8, 55.8)	4 (60.3, 68.4)	1 (25.5, 33.1)	8 (36.2, 45.5)
							4 5	3 5	0 6	7 6	3 3	0 4
	87.9 (85.1, 90.2)	57.9 (54.7, 61.0)	64.5 (61.3, 67.6)	90.7 (88.4, 92.6)	58.5 (54.7, 62.2)	73.4 (70.0, 76.5)	8 (50.5, 59.1)	0 (48.8, 57.2)	6 (57.1, 64.1)	8 (64.2, 71.2)	0 (29.5, 36.6)	6 (36.8, 44.5)
							5 7	5 7	6 1	7 0	3 5	4 4
	86.8 (83.5, 89.5)	61.4 (57.3, 65.4)	68.9 (65.0, 72.5)	90.2 (87.4, 92.3)	61.7 (57.1, 66.1)	70.5 (66.1, 74.5)	4 (52.6, 62.1)	4 (52.5, 62.2)	4 (57.1, 65.5)	6 (66.0, 74.9)	0 (31.1, 39.2)	5 (40.1, 49.0)
							2 .	2 .	0 .	7 .	8 .	2 .
	89.2 (84.4, 92.6)	59.5 (52.4, 66.3)	68.8 (62.5, 74.4)	89.2 (84.2, 92.7)	60.8 (53.2, 67.9)	72.5 (65.6, 78.5)	0 (44.3, 59.7)	2 (43.8, 60.4)	3 (52.6, 67.5)	6 (60.4, 74.0)	6 (22.5, 35.5)	9 (26.6, 39.8)

											6	6	6	7	3	5		
Urban											5	3	3	2	0	0		
	87.5	(84.3, 90.1)	56.6	(53.2, 60.0)	65.5	(62.3, 68.6)	94.8	(92.9, 96.2)	60.6	(56.6, 64.5)	76.8	(73.4, 79.9)	5 (60.6, 70.0)	7 (58.9, 68.3)	6 (59.9, 67.2)	7 (68.6, 76.3)	2 (26.6, 34.1)	8 (46.0, 55.6)
Rural											4	4	5	6	3	3		
	86.9	(84.3, 89.1)	59.2	(55.4, 63.0)	64.0	(60.5, 67.4)	86.3	(83.9, 88.5)	54.5	(49.5, 59.3)	67.4	(63.2, 71.4)	8 (40.3, 51.5)	1 (39.7, 50.6)	7 (48.4, 57.0)	4 (58.1, 66.4)	0 (29.4, 36.8)	9 (27.8, 36.2)
<i>Level of education</i>																		
No formal education											4	4	5	6	3	3		
	86.2	(83.6, 88.4)	56.7	(53.1, 60.3)	61.5	(58.2, 64.7)	85.5	(82.9, 87.7)	54.6	(50.1, 58.9)	66.4	(62.5, 70.2)	2 (42.7, 51.9)	0 (41.5, 50.6)	5 (50.8, 58.2)	7 (58.8, 66.4)	6 (29.5, 35.9)	1 (31.6, 38.9)
Primary school											5	5	5	6	3	3		
	87.1	(83.7, 89.9)	57.7	(53.5, 61.8)	65.6	(61.1, 69.8)	90.8	(88.0, 93.1)	58.3	(53.1, 63.3)	71.8	(67.1, 76.1)	4	3	7	8	0	9
Middle school											6	6	5	7	3	4		
	89.3	(85.7, 92.1)	59.2	(54.0, 64.1)	67.7	(62.5, 72.5)	95.1	(91.4, 97.2)	60.0	(54.2, 65.5)	77.5	(72.5, 81.7)	1	0	9	3	2	5
High school											6	6	6	6	3	4		
	89.8	(84.5, 93.4)	61.2	(54.3, 67.6)	71.0	(64.2, 77.1)	97.5	(95.0, 98.8)	62.5	(55.4, 69.2)	79.7	(74.0, 84.5)	6	5	2	7	0	7
Baccalaureate or higher											7	7	6	7	2	5		
	86.3	(81.0, 90.3)	60.1	(52.1, 67.6)	67.8	(61.0, 73.9)	98.1	(95.0, 99.3)	59.7	(52.0, 67.0)	81.3	(75.0, 86.4)	3 (58.6, 73.3)	0 (57.4, 71.8)	8 (56.1, 69.1)	3 (60.2, 73.7)	6 (24.8, 37.0)	3 (39.7, 55.1)
											3	1	6	5	9	7		
											8	9	2	4	2	4		
											8 (67.6, 79.2)	9 (66.0, 77.1)	2 (59.5, 72.3)	4 (69.3, 80.6)	2 (22.9, 36.5)	4 (50.3, 64.3)		

Source: ANSD, GATS 2023

Trends: Between 2015 and 2023, the level of perception of tobacco-related risks among adults decreased. The proportion of those who believe smoking causes serious disease has increased from 93.9% to 87.2% (**Table 9.2**). The decline is even more pronounced when it comes to specific effects such as stroke, heart attack, and lung cancer, with a decrease of 61.4% to 51.2% over this period.

Table 9.2: Percentage of adults aged 15 and older who believe that smoking and exposure to secondhand smoke cause serious diseases and conditions, by smoking status and selected sociodemographic characteristics

Socio-demographic characteristics	Adults who believe that smoking causes serious diseases			Adults who believe smoking causes strokes, heart attacks, and lung cancer ^{1,2}		
	2015	2023	Relative change	2015	2023	Relative change
Overall	Percentage (95% CI)		Percentage	Percentage (95% CI)		Percentage
	93.9 (92.7, 94.8)	87.2 (85.2, 88.9)	-7.1**	61.4 (58.8, 63.9)	51.2 (48.5, 54.0)	-16.5**
<i>Smoking status</i>						
Current smokers ³	92.5 (88.3, 95.3)	86.1 (77.9, 91.6)	-6.9	58.2 (50.6, 65.4)	44.6 (35.0, 54.8)	-23.3**
Non-smokers ⁴	93.9 (92.8, 94.9)	87.2 (85.3, 89.0)	-7.1**	61.5 (58.9, 64.1)	51.5 (48.7, 54.3)	-16.3**
<i>Sex</i>						
Male	94.2 (92.7, 95.3)	87.8 (85.2, 90.0)	-6.8**	62.3 (59.3, 65.3)	51.9 (48.5, 55.2)	-16.8**
Female	93.6 (92.1, 94.8)	86.6 (84.3, 88.7)	-7.4**	60.4 (57.3, 63.4)	50.6 (47.3, 53.9)	-16.3**
<i>Age (years)</i>						
15-24	93.2 (91.1, 94.8)	86.1 (83.3, 88.5)	-7.6**	60.0 (56.4, 63.5)	49.1 (45.2, 53.1)	-18.2**
25-44	95.4 (94.2, 96.3)	87.9 (85.1, 90.2)	-7.9**	61.8 (58.5, 65.1)	50.3 (47.0, 53.6)	-18.6**
45-64	92.9 (90.7, 94.6)	86.8 (83.5, 89.5)	-6.6**	63.4 (59.1, 67.5)	55.9 (51.6, 60.1)	-11.9**
65+	90.2 (85.2, 93.6)	89.2 (84.4, 92.6)	-1.1	59.3 (52.0, 66.2)	54.0 (46.9, 61.0)	-8.9
<i>Residence</i>						
Urban	96.5 (95.4, 97.3)	87.5 (84.3, 90.1)	-9.3**	62.6 (59.4, 65.6)	49.8 (46.2, 53.3)	-20.5**
Rural	91.3 (89.2, 93.0)	86.9 (84.3, 89.1)	-4.8**	60.1 (56.1, 64.1)	52.5 (48.4, 56.5)	-12.7**
<i>Level of education</i>						
No formal education	92.0 (90.3, 93.4)	86.2 (83.6, 88.4)	-6.3**	59.7 (56.2, 63.1)	50.3 (46.6, 54.0)	-15.8**
Primary school	96.3 (94.4, 97.6)	87.1 (83.7, 89.9)	-9.6**	63.3 (58.9, 67.4)	49.9 (45.6, 54.1)	-21.2**
Middle school	93.7 (90.6, 95.8)	89.3 (85.7, 92.1)	-4.7**	60.5 (55.3, 65.4)	53.7 (48.5, 58.7)	-11.2**
High school	99.0 (97.0, 99.7)	89.8 (84.5, 93.4)	-9.3**	66.6 (59.7, 72.9)	55.8 (48.5, 62.8)	-16.3**
Baccalaureate or higher	97.0 (92.9, 98.8)	86.3 (81.0, 90.3)	-11.0**	66.4 (58.2, 73.8)	50.2 (42.7, 57.7)	-24.4**

1 Among those who believe or do not know if smoking causes serious diseases.
2 Percentage of people who think smoking causes these three diseases.
3 Includes daily and occasional smokers (less than once a day).
4 Includes former tobacco smokers and non-smokers.
** p<0.05.
NOTE: Results of prevalence estimates/means, and 95% CIs are rounded to the nearest decimal (0.1). Relative changes are calculated from unrounded prevalence estimates and may differ if calculated from the rounded prevalence estimates presented in this table.

Source: ANSD, GATS 2015 and 2023

9.2. PERCEPTIONS OF THE HARMFUL EFFECTS OF SECONDHAND SMOKING

Table 9.3 shows the proportion of adults who believe that breathing in other people's tobacco smoke can cause serious illness in non-smokers, according to smoking status and certain sociodemographic characteristics.

Overall, 85.7% of people aged 15 and over believe that breathing in other people's tobacco smoke can cause serious illness in non-smokers. This perception is more pronounced among current smokers (86.9%) than among non-smokers (85.7%).

Proportionally, fewer women than men (84.4% vs. 87.1%, respectively), and fewer adults living in rural areas than in urban areas (81.6% vs. 90.5%, respectively) believe that breathing in other people's smoke can cause serious illness in non-smokers. A smaller proportion of people in the 65 and over age group (82.2%), compared to other groups, believe that breathing in other people's tobacco smoke can cause serious illness in non-smokers.

In addition, awareness of the harmful effects of secondhand smoke increases with education level, from a minimum of 80.8% among people with no formal education to 93.4% among those with high school education, and 93.3% among those with baccalaureate level or higher.

Table 9.3: Percentage of adults aged 15 and over who believe that secondhand smoke causes serious illness in non-smokers, by smoking status and certain sociodemographic characteristics

Socio-demographic characteristics	Belief that breathing in secondhand smoke causes serious illnesses in non-smokers
	<i>Percentage (95% CI)</i>
Overall	85.7 (84.1, 87.2)
<i>Smoking status</i>	
Current smokers ¹	86.9 (78.5, 92.3)
Non-smokers ²	85.7 (84.1, 87.2)
<i>Sex</i>	
Male	87.1 (85.1, 88.9)
Female	84.4 (82.3, 86.3)
<i>Age (years)</i>	
15-24	86.4 (83.7, 88.7)
25-44	86.6 (84.2, 88.6)
45-64	84.1 (80.9, 86.8)
65+	82.2 (76.8, 86.6)
<i>Residence</i>	
Urban	90.5 (88.5, 92.1)
Rural	81.6 (79.2, 83.7)
<i>Level of education</i>	
No formal education	80.8 (78.3, 83.0)
Primary school	86.6 (83.1, 89.4)
Middle school	90.5 (87.3, 92.9)
High school	93.4 (89.2, 96.0)
Baccalaureate or higher	93.3 (89.2, 95.9)

¹ Includes daily and occasional smokers (less than once a day).
² includes former tobacco smokers and those who have never smoked tobacco.

Source: ANSD, GATS 2023

Trends: Awareness of the dangers of secondhand smoke has also declined: 91.9% of adults estimated that it could cause serious illness among non-smokers in 2015, compared to 85.7% in 2023 (**Table 9.4**). The situation is the same, regardless of the sociodemographic characteristic.

Table 9.4: Percentage of adults aged 15 and older who believe that exposure to secondhand smoke causes serious diseases and conditions, by smoking status and selected sociodemographic characteristics

Socio-demographic characteristics	Adults who believe that breathing in secondhand smoke causes serious illnesses in non-smokers		
	2015	2023	Relative change
	<i>Percentage (95% CI)</i>		<i>Percentage</i>
Overall	91.9 (90.6, 93.0)	85.7 (84.1, 87.2)	-6.7**
<i>Smoking status</i>			
Current smokers ³	87.4 (82.2, 91.2)	86.9 (78.5, 92.3)	-0.6
Non-smokers ⁴	92.1 (90.8, 93.2)	85.7 (84.1, 87.2)	-7.0**
<i>Sex</i>			
Male	92.3 (90.6, 93.7)	87.1 (85.1, 88.9)	-5.6**
Female	91.5 (89.7, 92.9)	84.4 (82.3, 86.3)	-7.7**
<i>Age (years)</i>			
15-24	91.2 (88.9, 93.0)	86.4 (83.7, 88.7)	-5.2**
25-44	93.9 (92.3, 95.2)	86.6 (84.2, 88.6)	-7.8**
45-64	91.2 (88.9, 93.1)	84.1 (80.9, 86.8)	-7.8**
65+	83.9 (78.0, 88.4)	82.2 (76.8, 86.6)	-2.0
<i>Residence</i>			
Urban	94.7 (93.2, 95.9)	90.5 (88.5, 92.1)	-4.5**
Rural	89.0 (86.8, 90.9)	81.6 (79.2, 83.7)	-8.4**
<i>Level of education</i>			
No formal education	88.6 (86.7, 90.3)	80.8 (78.3, 83.0)	-8.8**
Primary school	95.0 (93.0, 96.5)	86.6 (83.1, 89.4)	-8.9**
Middle school	97.8 (96.0, 98.9)	90.5 (87.3, 92.9)	-7.5**
High school	95.4 (92.0, 97.4)	93.4 (89.2, 96.0)	-2.1
Baccalaureate or higher	94.5 (89.9, 97.0)	93.3 (89.2, 95.9)	-1.2
** p<0.05.			

Source: ANSD, GATS 2015 and 2023

9.3. PERCEPTIONS OF THE HARMFUL EFFECTS OF SMOKELESS TOBACCO

Table 9.5 shows the proportion of adults who believe that using smokeless tobacco can cause serious illness, according to smoking status (user or non-user) and certain sociodemographic characteristics.

Overall, 69.2% of adults believe that using smokeless tobacco can lead to serious illness. This perception of smokeless tobacco harm is higher among men (72.0% compared to 66.4% among women). Depending on the place of residence, it is higher in urban areas (71.5%) than in rural areas (67.2%). In addition, 68.8% of 15-24-year-olds and 65.3% of 65+ are less convinced of the dangers of smokeless tobacco, compared to 70.0% of 25-44-year-olds and 45-64-year-olds. Moreover, belief in the harmfulness of smokeless tobacco increases with education level, rising from 64.6% among adults with no formal education to 81.9% among those with baccalaureate level or higher.

Table 9.5: Percentage of adults aged 15 and over who believe that smokeless tobacco use causes serious diseases, by non-smoking status and certain sociodemographic characteristics

Socio-demographic characteristics	Adults who believe that smokeless tobacco use causes serious diseases
	<i>Percentage (95% CI)</i>
Overall	69.2 (66.6, 71.7)
<i>Smokeless status</i>	
Current smokeless product users ¹	* *
Non-smoker users ²	69.5 (66.9, 72.0)
<i>Sex</i>	
Male	72.0 (68.9, 75.0)
Female	66.4 (63.5, 69.3)
<i>Age (years)</i>	
15-24	68.8 (65.1, 72.2)
25-44	70.0 (66.8, 73.0)
45-64	70.0 (65.8, 73.9)
65+	65.3 (57.2, 72.6)
<i>Residence</i>	
Urban	71.5 (68.0, 74.8)
Rural	67.2 (63.4, 70.8)
<i>Level of education</i>	
No formal education	64.6 (61.0, 68.1)
Primary school	69.8 (65.3, 73.9)
Middle school	70.9 (65.6, 75.7)
High school	75.8 (69.8, 81.0)
Baccalaureate or higher	81.9 (75.7, 86.8)
¹ Includes daily and occasional (less than once a day) smokeless tobacco users.	
² Includes former tobacco users and those who have never smoked.	
* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.	

Source: ANSD, GATS 2023

CHAPTER 10: CONCLUSION

Results of the 2023 GATS provide recent information on tobacco use (smoking and smokeless) and key indicators related to the six (6) MPOWER measures (a public health strategy aimed at reducing tobacco use), which can be used to monitor and evaluate tobacco control policies and programs and to make decisions regarding the implementation of anti-tobacco legislation. The country's efforts to combat tobacco use have resulted in a reduction in tobacco consumption.

Senegal has seen a significant decline in adult smoking, with overall prevalence falling from 6.0% to 4.4% between 2015 and 2023. Among the different types of tobacco, smoking tobacco remains the most widespread, consumed by 4.1% of adults. Regarding emerging products, 36.6% of adults know about e- cigarettes, but its use remains marginal (0.4%).

Smoking cessation is a major issue. In 2023, 62.5% of smokers expressed their intention to quit or had thought about it, while 52.4% tried to quit at least once; the majority of these attempts (74.4%) were made without professional help. Since 2015, these intentions and attempts have declined: The proportion of smokers who have tried to quit has fallen from 59.6% in 2015 to 52.4% in 2023, and the proportion of current smokers who wish to quit has fallen from 79.8% to 62.5% during the same period.

In economic terms, the average cost of a pack of 20 cigarettes rose from 701 FCFA in 2015 to 849 FCFA in 2023, a relative increase of 21.2%. In addition, there has been a slight decrease in the proportion of adults in favor of increasing taxes on tobacco products between 2015 and 2023, varying from 95.5% to 93.4%.

Awareness campaigns and health warnings on cigarette packs are becoming more effective. Overall, media broadcasting of the harmful effects of tobacco reaches 49.7% of adults, mainly through radio and television, and nearly two out of three (60.9%) have noticed these warnings on cigarette packs. Among smokers, 37.5% considered quitting as a result of these messages.

However, despite the general downward trend in indicators, some challenges persist. Exposure to secondhand smoke remains a concern in bars/nightclubs, restaurants, and public transportation, where the reductions observed remain the smallest (-5.7%, -13.9%, and -18.2%, respectively). Furthermore, the perception of the risks associated with tobacco and secondhand smoke decreased slightly during the reference period, ranging from 93.9% to 87.2% for adults who believe that smoking causes serious diseases and from 91.9% to 85.7% for those who recognize the danger of secondhand smoke.

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APPENDICES

Appendix A: Survey Error Estimation

Table A1: List of sampling error indicators – GATS Senegal, 2023

Indicator	Estimate	Base population
Current tobacco users	Proportion	Adults ≥ 15 years old
Current tobacco smoker	Proportion	Adults ≥ 15 years old
Current manufactured cigarette smokers	Proportion	Adults ≥ 15 years old
Current smokeless tobacco user	Proportion	Adults ≥ 15 years old
Daily tobacco users	Proportion	Adults ≥ 15 years old
Daily tobacco smokers	Proportion	Adults ≥ 15 years old
Daily tobacco smokers	Proportion	Adults ≥ 15 years old
Daily smokeless tobacco user	Proportion	Adults ≥ 15 years old
Former daily smokers among all adults	Proportion	Adults ≥ 15 years old
Former tobacco smokers among daily smokers	Proportion	Daily tobacco smokers aged ≥ 15 years old
Time to smoke the first cigarette within 5 minutes of waking up	Proportion	Daily tobacco smokers ≥ 15 years
Time to smoke the first cigarette within 6 to 30 minutes of waking up	Proportion	Daily tobacco smokers ≥ 15 years
Attempt to quit smoking in the past 12 months	Proportion	Current and former smokers who have been abstinent for less than 12 months
A healthcare provider asked about smoking	Proportion	Current and former smokers who have been abstinent for less than 12 months and have consulted a healthcare professional in the past 12 months
A healthcare professional advises to quit smoking	Proportion	Current and former smokers who have been abstinent for less than 12 months and have consulted a healthcare professional in the past 12 months
Use of pharmacotherapy to quit smoking	Proportion	Current and former smokers who have been abstinent for less than 12 months
Use of counseling services or help lines to quit smoking	Proportion	Current and former smokers who have been abstinent for less than 12 months
You are considering quitting smoking, are thinking about quitting smoking, or will quit smoking one day	Proportion	Current tobacco smokers ≥ 15 years
Exposure to secondhand smoking at home	Proportion	Adults ≥ 15 years old
Exposure to secondhand smoking in the workplace	Proportion	Adults ≥ 15 years old who work indoors
Exposure to secondhand smoking in government buildings	Proportion	Adults ≥ 15 years old who have visited government buildings in the last 30 days
Exposure to secondhand smoking in healthcare facilities	Proportion	Adults ≥ 15 years old who have visited healthcare facilities in the last 30 days
Exposure to secondhand smoking in restaurants	Proportion	Adults ≥ 15 years old who have visited restaurants in the last 30 days
Exposure to secondhand smoking in public transportation	Proportion	Adults ≥ 15 years old who have used public transportation in the last 30 days
Last cigarette purchase in a store	Proportion	Current manufactured cigarette smokers ≥ 15 years old
I noticed anti-smoking information on the radio or television	Proportion	Adults ≥ 15 years old
Noticed health warning labels on cigarette packs	Proportion	Current tobacco smokers ≥ 15 years
I am thinking about quitting smoking because of the health warnings on cigarette packs	Proportion	Current tobacco smokers ≥ 15 years
Have you noticed advertising, sponsorships or promotions for cigarettes?	Proportion	Adults ≥ 15 years old
Believes smoking tobacco causes serious illness	Proportion	Adults ≥ 15 years old
Believes smoking tobacco causes strokes	Proportion	Adults ≥ 15 years old
Believes smoking tobacco causes heart attacks	Proportion	Adults ≥ 15 years old
Believes smoking tobacco causes lung cancer	Proportion	Adults ≥ 15 years old

Indicator	Estimate	Base population
Believes that secondhand smoking causes serious illnesses in non-smokers	Proportion	Adults ≥ 15 years old
Number of cigarettes smoked per day	Mean	Current daily cigarette smokers aged ≥ 15 years
Time since quitting smoking (years)	Mean	Former tobacco smokers ≥ 15 years
Monthly expenditure on manufactured cigarettes	Mean	Current cigarette smokers ≥ 15 years
Age at onset of smoking daily	Mean	Daily tobacco smokers aged ≥ 15 years old

Source: ANSD, GATS 2023

Table A2: Sampling errors – Global – GATS Senegal, 2023

Indicator	Estimate (R)	Standard Error (SE)	Sample size (n)	Weighted number (N)	Design effect (DEFF)	Relative Error (SE/R)	Margin of error (MOE)	Confidence limits	
								Lower limit (R-1.96SE)	Upper limit (R+1.96SE)
Current tobacco users	0.044	0.004	3,839	10869903.00	1.81	0.101	0.009	0.036	0.053
Current tobacco smoker	0.041	0.004	3,878	10,971,902.00	1.79	0.104	0.008	0.032	0.049
Current cigarette smokers	0.036	0.004	3,878	10,971,902.00	1.54	0.103	0.007	0.029	0.044
Current smokeless tobacco user	0.004	0.001	3,837	10,860,293.00	1.50	0.319	0.002	0.001	0.006
Daily tobacco users	0.035	0.004	3,839	10,869,903.00	1.81	0.114	0.008	0.027	0.043
Daily tobacco smokers	0.034	0.004	3,878	10,971,902.00	1.82	0.115	0.008	0.027	0.042
Daily tobacco smokers	0.029	0.003	3,878	10,971,902.00	1.48	0.113	0.006	0.023	0.036
Daily smokeless tobacco user	0.002	0.001	3,837	10,860,293.00	1.23	0.436	0.001	0.000	0.003
Former daily smokers among all adults	0.036	0.004	3,878	10,971,902.00	1.80	0.111	0.008	0.028	0.044
Former tobacco smokers among daily tobacco smokers	0.491	0.041	293	804,198.00	1.92	0.083	0.080	0.412	0.571
The time of first tobacco consumption within 5 minutes of waking up	0.243	0.046	142	373,331.00	1.63	0.190	0.090	0.153	0.334
The time of first tobacco consumption within 6 to 30 minutes of waking up	0.317	0.048	142	373331.00	1.53	0.153	0.095	0.222	0.412
Attempt to quit smoking in the past 12 months	0.524	0.050	180	488,344.00	1.77	0.095	0.097	0.427	0.621
A healthcare provider asked about smoking	*	*	*	*	*	*	*	*	*
A healthcare professional advises to quit smoking	*	*	*	*	*	*	*	*	*
Use of pharmacotherapy to quit smoking	0.014	0.012	100	255,908.00	0.96	0.818	0.023	-0.009	0.037
Use of counseling services or help lines to quit smoking	0.038	0.018	100	255,908.00	0.91	0.480	0.036	0.002	0.075
You are considering quitting smoking or will quit smoking	0.625	0.053	167	447,249.00	1.96	0.084	0.103	0.523	0.728
Exposure to secondhand smoking at home	0.150	0.010	3,726	10,540,880.00	3.06	0.068	0.020	0.130	0.170
Exposure to secondhand smoking in the workplace	0.211	0.020	732	1,971,149.00	1.81	0.096	0.040	0.171	0.251
Exposure to secondhand smoking in government buildings/offices	0.154	0.018	713	2,174,987.00	1.76	0.117	0.035	0.118	0.189
Exposure to secondhand smoking in healthcare facilities	0.060	0.008	1,178	3,418,246.00	1.49	0.140	0.017	0.044	0.077
Exposure to secondhand smoking in restaurants	0.248	0.029	456	1,340,596.00	2.04	0.117	0.057	0.191	0.305
Exposure to secondhand smoking in public transportation	0.117	0.010	1,651	4,811,629.00	1.69	0.088	0.020	0.097	0.137
Last cigarette bought in store	0.266	0.054	117	311,915.00	1.72	0.202	0.106	0.161	0.372
Last cigarette bought from a street vendor	0.112	0.043	117	311,915.00	2.16	0.385	0.084	0.028	0.196
Last cigarette bought at the kiosk	0.214	0.046	117	311,915.00	1.45	0.214	0.090	0.125	0.304
I noticed anti-smoking information on the radio or television	0.374	0.014	3,877	1,0971,009.00	3.13	0.037	0.027	0.347	0.401
Noticed health warning labels on cigarette packs	0.609	0.054	167	447,249.00	2.06	0.089	0.106	0.502	0.715

Indicator	Estimate (R)	Standard Error (SE)	Sample size (n)	Weighted number (N)	Design effect (DEFF)	Relative Error (SE/R)	Margin of error (MOE)	Confidence limits	
								Lower limit (R-1.96SE)	Upper limit (R+1.96SE)
I am thinking about quitting smoking because of the health warnings on cigarette packs	0.375	0.050	167	447,249.00	1.75	0.132	0.097	0.278	0.473
Have you noticed cigarette advertising or promotions?	0.107	0.008	3,875	10,960,934.00	2.74	0.077	0.016	0.091	0.123
Believes smoking tobacco causes serious illness	0.872	0.009	3,877	10,971,009.00	3.10	0.011	0.019	0.853	0.890
Believes smoking tobacco causes strokes	0.580	0.013	3,876	10,969,223.00	2.76	0.023	0.026	0.554	0.606
Believes smoking tobacco causes heart attacks	0.647	0.012	3,876	10,969,223.00	2.42	0.018	0.023	0.624	0.670
Believes smoking tobacco causes lung cancer	0.903	0.007	3,876	10,969,223.00	2.39	0.008	0.014	0.888	0.917
Believes that secondhand smoking causes serious illnesses in non-smokers	0.857	0.008	3,877	10,971,009.00	1.86	0.009	0.015	0.842	0.872
Number of cigarettes smoked per day (by daily smokers)	8.283	0.569	129	320,236.23	1.08	0.069	1.115	7.169	9.398
Time since quitting smoking (years)	18.648	1.807	135	394,905.07	2.07	0.097	3.542	15.107	22.190
Monthly expenditure on manufactured cigarettes	8,777.811	1,285.839	115	293,447.96	1.42	0.146	2,520.244	6,257.567	11,298.054
Age at onset of smoking daily	21.009	0.830	57	205,533.22	2.12	0.040	1.627	19.382	22.636

* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.

Source: ANSD, GATS 2023

Table A3: Sampling errors – Male – GATS Senegal, 2023

Indicator	Estimate (R)	Standard Error (SE)	Sample size (n)	Weighted number (N)	Design effect (DEFF)	Relative Error (SE/R)	Margin of error (MOE)	Confidence limits	
								Lower limit (R-1.96SE)	Upper limit (R+1.96SE)
Current tobacco users	0.082	0.008	1,772	5,375,082	1.48	0.097	0.016	0.067	0.098
Current tobacco smoker	0.078	0.008	1,790	5,424,838	1.49	0.099	0.015	0.063	0.093
Current cigarette smokers	0.071	0.007	1,790	5,424,838	1.37	0.100	0.014	0.057	0.085
Current smokeless tobacco user	0.003	0.001	1,769	5,363,422	0.94	0.434	0.002	0.000	0.005
Daily tobacco users	0.067	0.007	1,772	5,375,082	1.50	0.109	0.014	0.053	0.081
Daily tobacco smokers	0.065	0.007	1,790	5,424,838	1.51	0.110	0.014	0.051	0.080
Daily tobacco smokers	0.057	0.006	1,790	5,424,838	1.33	0.111	0.012	0.045	0.070
Daily smokeless tobacco user	0.001	0.001	1,769	5,363,422	0.81	0.648	0.001	0.000	0.002
Former daily smokers among all adults	0.072	0.008	1,790	5,424,838	1.79	0.113	0.016	0.056	0.088
Former tobacco smokers among daily tobacco smokers	0.504	0.040	283	777,342	1.82	0.080	0.079	0.426	0.583
The time of first tobacco consumption within 5 minutes of waking up	0.233	0.045	134	352,865	1.49	0.192	0.088	0.146	0.321
The time of first tobacco consumption within 6 to 30 minutes of waking up	0.314	0.050	134	352,865	1.56	0.160	0.098	0.216	0.413
Attempt to quit smoking in the past 12 months	0.522	0.051	171	464,338	1.81	0.099	0.101	0.421	0.623
A healthcare provider asked about smoking	*	*	*	*	*	*	*	*	*
A healthcare professional advises to quit smoking	*	*	*	*	*	*	*	*	*
Use of pharmacotherapy to quit smoking	0.015	0.012	96	242,377	0.98	0.818	0.024	-0.009	0.039
Use of counseling services or help lines to quit smoking	0.041	0.019	96	242,377	0.92	0.478	0.038	0.003	0.079
You are considering quitting smoking or will quit smoking	0.631	0.056	158	423,243	2.11	0.089	0.110	0.522	0.741
Exposure to secondhand smoking at home	0.171	0.013	1,712	5,205,774	2.19	0.079	0.026	0.145	0.198

Indicator	Estimate (R)	Standard Error (SE)	Sample size (n)	Weighted number (N)	Design effect (DEFF)	Relative Error (SE/R)	Margin of error (MOE)	Confidence limits	
								Lower limit (R-1.96SE)	Upper limit (R+1.96SE)
Exposure to secondhand smoking in the workplace	0.237	0.027	475	1,307,972	1.90	0.114	0.053	0.184	0.289
Exposure to secondhand smoking in government buildings/offices	0.158	0.023	418	1,329,241	1.59	0.142	0.044	0.114	0.202
Exposure to secondhand smoking in healthcare facilities	0.049	0.011	453	1,437,425	1.24	0.230	0.022	0.027	0.071
Exposure to secondhand smoking in restaurants	0.241	0.033	301	893,330	1.76	0.136	0.064	0.177	0.305
Exposure to secondhand smoking in public transportation	0.125	0.014	812	2,546,451	1.43	0.111	0.027	0.098	0.153
Last cigarette bought in store	0.266	0.054	115	309,248	1.72	0.204	0.106	0.159	0.372
Last cigarette bought from a street vendor	0.113	0.043	115	309,248	2.14	0.384	0.085	0.028	0.198
Last cigarette bought at the kiosk	0.216	0.046	115	309,248	1.44	0.214	0.091	0.126	0.307
I noticed anti-smoking information on the radio or television	0.398	0.018	1,790	5,424,838	2.34	0.044	0.035	0.364	0.433
Noticed health warning labels on cigarette packs	0.641	0.052	158	423,243	1.82	0.080	0.101	0.540	0.742
I am thinking about quitting smoking because of the health warnings on cigarette packs	0.397	0.050	158	423,243	1.66	0.127	0.099	0.298	0.495
Have you noticed cigarette advertising or promotions?	0.111	0.010	1,788	5,414,762	1.90	0.092	0.020	0.091	0.131
Believes smoking tobacco causes serious illness	0.878	0.012	1,790	5,424,838	2.44	0.014	0.024	0.854	0.901
Believes smoking tobacco causes strokes	0.592	0.016	1,790	5,424,838	1.92	0.027	0.032	0.561	0.624
Believes smoking tobacco causes heart attacks	0.660	0.015	1,790	5,424,838	1.79	0.023	0.029	0.631	0.690
Believes smoking tobacco causes lung cancer	0.913	0.010	1,790	5,424,838	2.04	0.010	0.019	0.894	0.931
Believes that secondhand smoking causes serious illnesses in non-smokers	0.871	0.010	1,790	5,424,838	1.50	0.011	0.019	0.852	0.890
Number of cigarettes smoked per day (by daily smokers)	8.370	0.607	125	310,686	1.18	0.073	1.190	7.180	9.559
Time since quitting smoking (years)	18.748	1.815	134	392,055	2.07	0.097	3.557	15.191	22.304
Monthly expenditure on manufactured cigarettes	8,802.393	1,297.800	113	290,781	1.41	0.147	2,543.688	6,258.705	11,346.080
Age at onset of smoking daily	21.025	0.848	55	200,897	2.10	0.040	1.661	19.364	22.687

* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.

Source: ANSD, GATS 2023

Indicator	Estimate (R)	Standard Error (SE)	Sample size (n)	Weighted number (N)	Design effect (DEFF)	Relative Error (SE/R)	Margin of error (MOE)	Confidence limits	
								Lower limit (R-1.96SE)	Upper limit (R+1.96SE)
Time since quitting smoking (years)	*	*	*	*	*	*	*	*	*
Monthly expenditure on manufactured cigarettes	*	*	*	*	*	*	*	*	*
Age at onset of smoking daily	*	*	*	*	*	*	*	*	*

* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.

Source: ANSD, GATS 2023

Table A5: Sampling errors – Urban – GATS Senegal, 2023

Indicator	Estimate (R)	Standard Error (SE)	Sample size (n)	Weighted number (N)	Design effect (DEFF)	Relative Error (SE/R)	Margin of error (MOE)	Confidence limits	
								Lower limit (R-1.96SE)	Upper limit (R+1.96SE)
Current tobacco users	0.050	0.007	1,897	5,095,536	1.83	0.135	0.013	0.037	0.063
Current tobacco smoker	0.046	0.007	1,906	5,116,734	1.88	0.143	0.013	0.033	0.059
Current cigarette smokers	0.041	0.006	1,906	5,116,734	1.64	0.142	0.011	0.029	0.052
Current smokeless tobacco user	0.004	0.001	1,895	5,085,927	1.05	0.395	0.003	0.001	0.006
Daily tobacco users	0.038	0.006	1,897	5,095,536	1.87	0.158	0.012	0.026	0.050
Daily tobacco smokers	0.037	0.006	1,906	5,116,734	1.86	0.159	0.012	0.026	0.049
Daily tobacco smokers	0.031	0.005	1,906	5,116,734	1.43	0.153	0.009	0.022	0.040
Daily smokeless tobacco user	0.002	0.001	1,895	5,085,927	0.96	0.543	0.002	0.000	0.004
Former daily smokers among all adults	0.040	0.006	1,906	5,116,734	1.74	0.147	0.012	0.029	0.052
Former tobacco smokers among daily tobacco smokers	0.499	0.056	160	415,493	1.96	0.111	0.109	0.390	0.607
The time of first tobacco consumption within 5 minutes of waking up	0.232	0.065	77	190,767	1.80	0.280	0.127	0.105	0.359
The time of first tobacco consumption within 6 to 30 minutes of waking up	0.382	0.078	77	190,767	1.97	0.205	0.153	0.229	0.536
Attempt to quit smoking in the past 12 months	0.538	0.074	100	270,742	2.16	0.137	0.144	0.394	0.683
A healthcare provider asked about smoking	*	*	*	*	*	*	*	*	*
A healthcare professional advises to quit smoking	*	*	*	*	*	*	*	*	*
Use of pharmacotherapy to quit smoking	0.025	0.021	59	145,740	1.02	0.823	0.041	-0.015	0.066
Use of counseling services or help lines to quit smoking	0.062	0.031	59	145,740	0.98	0.507	0.061	0.000	0.123
You are considering quitting smoking or will quit smoking	0.602	0.080	90	236,405	2.37	0.133	0.156	0.445	0.758
Exposure to secondhand smoking at home	0.156	0.013	1,841	4,955,049	2.32	0.082	0.025	0.131	0.181
Exposure to secondhand smoking in the workplace	0.189	0.022	502	1,294,549	1.54	0.115	0.042	0.146	0.231
Exposure to secondhand smoking in government buildings/offices	0.159	0.022	459	1,293,543	1.63	0.137	0.043	0.116	0.202
Exposure to secondhand smoking in healthcare facilities	0.054	0.011	656	1,820,584	1.43	0.195	0.021	0.033	0.075
Exposure to secondhand smoking in restaurants	0.283	0.037	331	913,112	2.18	0.129	0.072	0.211	0.355
Exposure to secondhand smoking in public transportation	0.122	0.014	948	2,664,374	1.68	0.113	0.027	0.095	0.149
Last cigarette bought in store	0.183	0.061	73	184,872	1.82	0.337	0.120	0.062	0.303
Last cigarette bought from a street vendor	0.126	0.061	73	184,872	2.44	0.486	0.120	0.006	0.245
Last cigarette bought at the kiosk	0.284	0.067	73	184,872	1.57	0.235	0.131	0.153	0.414
I noticed anti-smoking information on the radio or television	0.390	0.019	1,905	5,115,841	2.86	0.048	0.037	0.353	0.427
Noticed health warning labels on cigarette packs	0.674	0.073	90	236,405	2.15	0.108	0.143	0.531	0.817

Indicator	Estimate (R)	Standard Error (SE)	Sample size (n)	Weighted number (N)	Design effect (DEFF)	Relative Error (SE/R)	Margin of error (MOE)	Confidence limits	
								Lower limit (R-1.96SE)	Upper limit (R+1.96SE)
I am thinking about quitting smoking because of the health warnings on cigarette packs	0.394	0.070	90	236,405	1.81	0.177	0.136	0.258	0.531
Have you noticed cigarette advertising or promotions?	0.121	0.012	1,905	5,115,841	2.70	0.102	0.024	0.097	0.145
Believes smoking tobacco causes serious illness	0.875	0.015	1,905	5,115,841	3.73	0.017	0.029	0.846	0.904
Believes smoking tobacco causes strokes	0.566	0.017	1,904	5,114,055	2.37	0.031	0.034	0.532	0.600
Believes smoking tobacco causes heart attacks	0.655	0.016	1,904	5,114,055	2.16	0.024	0.031	0.623	0.686
Believes smoking tobacco causes lung cancer	0.948	0.008	1,904	5,114,055	2.53	0.009	0.016	0.932	0.964
Believes that secondhand smoking causes serious illnesses in non-smokers	0.905	0.009	1,905	5,115,841	1.85	0.010	0.018	0.887	0.923
Number of cigarettes smoked per day (by daily smokers)	9.849	0.899	72	158,561	1.16	0.091	1.762	8.087	11.612
Time since quitting smoking (years)	14.136	2.032	75	207,181	1.92	0.144	3.982	10.154	18.118
Monthly expenditure on manufactured cigarettes	10,363.542	1,288.044	71	166,405	1.32	0.124	2,524.566	7,838.976	12,888.108
Age at onset of smoking daily	20.471	1.296	36	124,748	2.73	0.063	2.540	17.931	23.011

* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.

Source: ANSD, GATS 2023

Table A6: Sampling errors – Rural – GATS Senegal, 2023

Indicator	Estimate (R)	Standard Error (SE)	Sample size (n)	Weighted number (N)	Design effect (DEFF)	Relative Error (SE/R)	Margin of error (MOE)	Confidence limits	
								Lower limit (R-1.96SE)	Upper limit (R+1.96SE)
Current tobacco users	0.039	0.006	1,942	5,774,367	1.81	0.151	0.012	0.028	0.051
Current tobacco smoker	0.036	0.005	1,972	5,855,168	1.71	0.152	0.011	0.025	0.047
Current cigarette smokers	0.032	0.005	1,972	5,855,168	1.46	0.149	0.009	0.023	0.042
Current smokeless tobacco user	0.004	0.002	1,942	5,774,367	1.79	0.475	0.004	0.000	0.008
Daily tobacco users	0.033	0.005	1,942	5,774,367	1.77	0.164	0.011	0.022	0.043
Daily tobacco smokers	0.032	0.005	1,972	5,855,168	1.79	0.167	0.010	0.021	0.042
Daily tobacco smokers	0.028	0.005	1,972	5,855,168	1.54	0.166	0.009	0.019	0.037
Daily smokeless tobacco user	0.002	0.001	1,942	5,774,367	1.44	0.671	0.002	-0.001	0.004
Former daily smokers among all adults	0.032	0.005	1,972	5,855,168	1.86	0.169	0.011	0.021	0.043
Former tobacco smokers among daily tobacco smokers	0.483	0.059	133	388,706	1.86	0.123	0.116	0.367	0.599
The time of first tobacco consumption within 5 minutes of waking up	0.255	0.065	65	182,563	1.43	0.256	0.128	0.127	0.383
The time of first tobacco consumption within 6 to 30 minutes of waking up	0.248	0.059	65	182,563	1.20	0.238	0.116	0.133	0.364
Attempt to quit smoking in the past 12 months	0.506	0.063	80	217,602	1.27	0.125	0.124	0.382	0.631
A healthcare provider asked about smoking	*	*	*	*	*	*	*	*	*
A healthcare professional advises to quit smoking	*	*	*	*	*	*	*	*	*
Use of pharmacotherapy to quit smoking	0.000	0.000	41	110,167	*	*	0.000	0.000	0.000
Use of counseling services or help lines to quit smoking	0.008	0.008	41	110,167	0.31	0.978	0.015	-0.007	0.023
You are considering quitting smoking or will quit smoking	0.652	0.065	77	210,844	1.43	0.100	0.128	0.524	0.780
Exposure to secondhand smoking at home	0.145	0.016	1,885	5,585,831	3.69	0.108	0.031	0.114	0.175

Indicator	Estimate (R)	Standard Error (SE)	Sample size (n)	Weighted number (N)	Design effect (DEFF)	Relative Error (SE/R)	Margin of error (MOE)	Confidence limits	
								Lower limit (R-1.96SE)	Upper limit (R+1.96SE)
Exposure to secondhand smoking in the workplace	0.254	0.041	230	676,600	2.02	0.161	0.080	0.174	0.334
Exposure to secondhand smoking in government buildings/offices	0.146	0.031	254	881,444	1.91	0.210	0.060	0.086	0.206
Exposure to secondhand smoking in healthcare facilities	0.067	0.013	522	1,597,661	1.49	0.199	0.026	0.041	0.093
Exposure to secondhand smoking in restaurants	0.173	0.044	125	427,484	1.67	0.254	0.086	0.087	0.259
Exposure to secondhand smoking in public transportation	0.111	0.015	703	2,147,255	1.70	0.139	0.030	0.080	0.141
Last cigarette bought in store	0.389	0.091	44	127,043	1.51	0.235	0.179	0.210	0.567
Last cigarette bought from a street vendor	0.092	0.056	44	127,043	1.60	0.607	0.109	-0.017	0.201
Last cigarette bought at the kiosk	0.114	0.049	44	127,043	1.01	0.427	0.095	0.018	0.209
I noticed anti-smoking information on the radio or television	0.360	0.020	1,972	5,855,168	3.37	0.055	0.039	0.321	0.399
Noticed health warning labels on cigarette packs	0.535	0.079	77	210,844	1.92	0.148	0.155	0.380	0.691
I am thinking about quitting smoking because of the health warnings on cigarette packs	0.354	0.071	77	210,844	1.67	0.200	0.139	0.216	0.493
Have you noticed cigarette advertising or promotions?	0.096	0.011	1,970	5,845,092	2.80	0.116	0.022	0.074	0.117
Believes smoking tobacco causes serious illness	0.869	0.012	1,972	5,855,168	2.60	0.014	0.024	0.845	0.893
Believes smoking tobacco causes strokes	0.592	0.019	1,972	5,855,168	3.06	0.033	0.038	0.554	0.630
Believes smoking tobacco causes heart attacks	0.640	0.017	1,972	5,855,168	2.61	0.027	0.034	0.606	0.674
Believes smoking tobacco causes lung cancer	0.863	0.012	1,972	5,855,168	2.32	0.014	0.023	0.840	0.887
Believes that secondhand smoking causes serious illnesses in non-smokers	0.816	0.012	1,972	5,855,168	1.75	0.014	0.023	0.793	0.838
Number of cigarettes smoked per day (by daily smokers)	6.747	0.631	57	161,676	1.00	0.094	1.237	5.510	7.985
Time since quitting smoking (years)	23.629	2.430	60	187,724	1.56	0.103	4.762	18.866	28.391
Monthly expenditure on manufactured cigarettes	6,700.780	2,408.258	44	127,043	1.36	0.359	4,720.186	1,980.595	11,420.966
Age at onset of smoking daily	*	*	*	*	*	*	*	*	*

* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.

Source: ANSD, GATS 2023

Appendix B: Definitions

- ❖ **Adults:** for the purposes of the survey, a person aged 15 and over.
- ❖ **Shisha or hookah:** any object, apparatus, or device in the form of a water pipe that allows tobacco to be smoked through a water evaporation system.
- ❖ **E-cigarettes:** include any product that uses batteries or other methods to produce a nicotine-containing vapor. They have several other names such as e-cigarette, vape pens, e-shisha, and e-pipe.
- ❖ **Counseling:** Counseling is a helping relationship in a specific situation. Its primary characteristic is to provide assistance, facilitation, or mediation to a group or individual in their own context.
- ❖ **Illegal trade:** any practice or conduct prohibited by law relating to the production, shipment, receipt, possession, display, distribution, sale, or purchase of tobacco products, including any practice or conduct intended to facilitate such activity.
- ❖ **Packaging:** packaging containing tobacco, tobacco products, vaping products, in a specified number, intended for consumers.
- ❖ **Derivative:** substance generated when tobacco is burned, heated or when a device containing tobacco, tobacco product, nicotine product, or a non-nicotine product is activated.
- ❖ **Tobacco derivatives:** are puffs, flavored disposable e-cigarettes, nicotine beads, nicotine pouches, and snus.
- ❖ **Distribution:** free marketing or transfer, in whole or in part, or any other form of donation, including the sampling of tobacco products.
- ❖ **Excise duties:** excise duties are indirect taxes on the sale or use of certain products such as alcohol, tobacco, and energy. This is usually an amount per quantity of product, e.g., per kg, per hl, per degree of alcohol, etc.
- ❖ **Down switching:** the process of liquidating a position in exchange for other securities with better prospects for growth, yields, or capital gains.
- ❖ **Emission:** any substance or combination of substances produced by burning tobacco or a tobacco product or generated by vaping.
- ❖ **Labeling:** all mandatory or non-mandatory information like terms, indications, trademarks, images or figurative signs relating to tobacco, tobacco products, and derivatives and appearing on any outer packaging of the product.
- ❖ **Current smoker:** anyone who currently smokes any tobacco product occasionally or daily.

- ❖ **Smoke:** smoke produced by the burning of tobacco or a tobacco product, to which is generally added the smoke exhaled by the smoker(s).
- ❖ **Smoking:** holding or using lit tobacco or a tobacco product, whether or not the smoke is actively inhaled or exhaled or inhaled and exhaled.
- ❖ **Electronic inhaler:** a device that heats a liquid solution, thereby generating an aerosol that is inhaled by the user. This is a general term that encompasses various categories of products, including electronic cigarettes, vaping devices, vape pens, electronic cigars, electronic hookahs or e-shishas, and electronic water pipes.
- ❖ **Tobacco industry:** all manufacturers, importers, or wholesale distributors of tobacco, tobacco products, vaping products, or those who design or manufacture one of these products and market it under their own name or brand.
- ❖ **Workplace:** any place used by one or more persons in the course of their work or paid or voluntary employment, including any annexes used in this context.
- ❖ **Public area:** a place where everyone is admitted without distinction and for which, because of this particular feature, the police powers of the administrative authority are more extensive than on private property.
- ❖ **Indoor public area:** any place accessible to the public or designated for collective use, regardless of the owner and regardless of the right of access, covered by a roof and delimited by one or more walls or sides, regardless of the construction material used and whether it is a permanent or temporary structure.
- ❖ **Tobacco control:** a series of strategies to reduce the supply and demand for tobacco, tobacco products, and vaping products, with the aim of eliminating or reducing their use and thus combating their effects.
- ❖ **Labeling:** all mandatory information that must appear on all tobacco and tobacco product packs and cartons, as well as all forms of external packaging for these products, in order to determine their origin.
- ❖ **MPOWER:** A program developed by the WHO that encourages policymakers and the rest of society, including civil society and healthcare providers, to imagine a world without tobacco. It also provides the tools needed to reduce tobacco consumption worldwide by creating a legal and socioeconomic environment conducive to a tobacco-free lifestyle.
- ❖ **Nicotine:** the main alkaloid in tobacco and a stimulant of the autonomic nervous system, a substance with high addictive potential.
- ❖ **New tobacco product:** a tobacco product that does not fall into any of the following categories: cigarettes, hand-rolled tobacco, pipe tobacco, water pipe tobacco, cigars, cigarillos, chewing tobacco, snuff, or tobacco for oral use, or any other product recognized by the World Health Organization.

- ❖ **Open to the public:** a building, premises, or enclosure to which persons are admitted, either freely or for a fee or other consideration, or in which meetings are held that are open to the general public or by invitation, whether paid or free of charge, and all persons admitted to the establishment for any reason whatsoever, in addition to the staff, are considered to be part of the public.
- ❖ **Sponsorship:** any form of contribution, whether paid or free, direct or indirect, to any event, activity, or person, with the purpose, effect, or likely effect of directly or indirectly promoting tobacco, a tobacco product, a vaping product, or their use.
- ❖ **Advertising and promotion:** any form of communication, recommendation, action, or commercial contribution with the purpose, effect, or likely effect of directly or indirectly encouraging the use of tobacco, a tobacco product, or a vaping product.
- ❖ **Tobacco product:** any product manufactured entirely or partially from leaf tobacco as a raw material and intended to be smoked, sucked, chewed, sniffed, or consumed in any way, such as water pipes, inhalers with or without nicotine, electronic cigarettes, or any other device of this nature that is placed in the mouth for inhalation.
- ❖ **Heated tobacco products:** a category of tobacco products that refers to aerosols containing nicotine, other chemicals, and non-tobacco additives, often flavored, when tobacco is heated or when a tobacco-containing device is activated.
- ❖ **Nicotine pouches:** pouches containing nicotine, natural fibers, and flavorings.
- ❖ **Quitting Smoking:** quitting smoking (no tobacco consumption for at least three months).
- ❖ **Vape pen:** pen-shaped electronic vaping device.
- ❖ **Tobacco:** aromatic plant of the Solanaceae family, tall with large alternate leaves, containing a toxic alkaloid, nicotine. Its leaves are dried and prepared to make products for smoking, snuffing, sucking, or chewing.
- ❖ **Smokeless tobacco:** tobacco that is not smoked, but sniffed, held in the mouth, or chewed.
- ❖ **Smoking:** Smoking is a drug addiction resulting from addiction to one or other of the products made from tobacco leaves (cigarettes, cigars, pipe tobacco, snuff and chewing tobacco, etc.).
- ❖ **Active smoking:** defined as an addiction to tobacco or any product made from tobacco leaves (cigarettes, cigars, pipe tobacco, snuff, chewing tobacco, etc.).
- ❖ **Passive smoking:** exposure to smoke exhaled by the smoker and to secondhand smoke escaping from the lit end of a cigarette or other tobacco product.

- ❖ **Passive or secondhand smoking:** the involuntary inhalation of tobacco smoke and/or any product made from tobacco released by one or more smokers.
- ❖ **Public transportation:** any means of public transportation for people, including elevators, which can be accessed free of charge or for a fee.
- ❖ **Vaping :** inhaling and exhaling an aerosol generated by a vaping product such as an electronic cigarette, vape pen, electronic hookah or e-shisha, or electronic water pipe. Vaping products are defined as electronic vaping devices, i.e., products or any component of these products, including cartridges, tanks and devices without cartridges or tanks, which can be used, by means of a mouthpiece, for the consumption of vapor containing nicotine, if applicable, and which may be disposable or refillable by means of a refill bottle and a tank or by means of single-use cartridges; refill bottles, i.e., containers containing a liquid that may contain nicotine, which can be used to refill an electronic vaping device.

Appendix C: Survey Staff

EXECUTIVE COMMITTEE

Director General

Deputy Director General

Director of Demographic and Social Statistics

**Head of the Census and Demographic
Statistics Division**

**Head of the Bureau of Census and Migration
Statistics**

Dr. Abdou DIOUF

Dr. Momath Cisse

Atoumane FALL

Ndèye Lala TRAVARE

Djiby DIOP

GATS-II COORDINATOR

Ndèye Lala TRAVARE, Head of the Census and Demographic Statistics Division

HEAD OF SAMPLING

Papa Mabèye DIOP, Head of the Mapping and sampling Division

DATA MANAGERS

Ndèye Anta GUEYE, computer engineer

HEAD OF DISSEMINATION

Dr. El Hadji Malick GUEYE, Head of the Dissemination Division

Alain François DIATTA, Head of the Publications and User Relations Office

INFOGRAPHICS

Fodé DIEDHIOU, graphic designer

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Papa Mabèye DIOP (ANSD/DSDS)	Djiby DIOP (ANSD/DSDS)	Dr. Aloyse Waly DIOUF (OMS)
Fatimatou SY (ANSD/DSDS)	Ndèye Anta GUEYE (ANSD/DSID)	Adama MBAYE (MSAS/PNLT)
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Cheikh Tidiane NDIONE (ANSD/DSDS)		Salif LAYE (ANSD/DSDS)

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Sénabou	BADJI	Fatou	NGOM
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Ndeye	SYLLA	Ababacar Sadikh	DIOP
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Mada	FALL	Mbaye	DIAW
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Appendix D: Questionnaires

**Global Adult Tobacco Survey (GATS)
Senegal questionnaire**

November 03, 2023

GATS Questionnaire Formatting Conventions

Text in **RED FONT** = Programming logic and skip instructions

Text in *BLUE ITALICS* = instructions for adapting the questionnaire to the national context and the fields to be completed.

Text in [BRACKETS] = Specific question instructions for interviewers— not to be read to the respondents

Text in underline = Words that interviewers should emphasize when reading to respondents.

Core Household Questionnaire

INTRO. [THE HOUSEHOLD SCREENING RESPONDENT SHOULD BE 18 YEARS OF AGE OR OLDER AND YOU MUST BE CONFIDENT THAT THIS PERSON CAN PROVIDE ACCURATE INFORMATION ABOUT ALL MEMBERS OF THE HOUSEHOLD. IF NEEDED, VERIFY THE AGE OF THE HOUSEHOLD SCREENING RESPONDENT TO MAKE SURE HE/SHE IS 18 YEARS OF AGE OR OLDER.

THE HOUSEHOLD SCREENING RESPONDENT CAN BE LESS THAN 18 YEARS OLD, ONLY IF NO HOUSEHOLD MEMBERS ARE 18 YEARS OF AGE OR OLDER.]

INTRO1. An important survey of adult tobacco use behavior is being conducted by the *Agence Nationale de la Statistique et de la Démographie* throughout Senegal and your household has been selected to participate. All houses selected were chosen from a scientific sample and it is very important to the success of this project that each participates in the survey. All information gathered will be kept strictly confidential. I have a few questions to find out who in your household is eligible to participate.

HH1. First, I would like to ask you a few questions about your household. In total, how many persons live in this household?

[INCLUDE ANYONE WHO CONSIDERS THIS HOUSEHOLD THEIR USUAL PLACE OF RESIDENCE]

[NO DK/REF]

--	--

HH2. How many of these household members are 15 years of age or older?

[NO DK/REF]

--	--

[IF HH2 = 00 (NO HOUSEHOLD MEMBERS ≥ 15 IN HOUSEHOLD)]

[THERE ARE NO ELIGIBLE HOUSEHOLD MEMBERS.

THANK THE RESPONDENT FOR HIS/HER TIME.

THIS WILL BE RECORDED IN THE RECORD OF CALLS AS A CODE 201.]

HH2a. [IF HH2<HH1:] How many household members are less than 5 years old?

--	--

HH4both. I now would like to collect information about only these persons that live in this household who are 15 years of age or older. Let's start listing them from oldest to youngest.

HH4a. What is the oldest person's first name? _____

HH4b. What is this person's age?

[IF RESPONDENT DOESN'T KNOW, PROBE FOR AN ESTIMATE]

[NO DK/REF]

--	--	--

[IF REPORTED AGE IS 15 THROUGH 17, BIRTH DATE IS ASKED]

HH4c. What is the month of this person's date of birth?

- 01 1
- 02 2
- 03 3
- 04 4
- 05 5
- 06 6
- 07 7
- 08 8
- 09 9
- 10 10
- 11 11
- 12 12
- DON'T KNOW -7
- REFUSED -9

HH4cYEAR. What is the year of this person's date of birth?

--	--	--	--

Response option REFUSED	DON'T KNOW
----------------------------	------------

HH4d. Is this person male or female?

MALE 1
 FEMALE..... 2

HH4e. Does this person currently smoke tobacco, including *cigarettes, cigars, meneija, waterpipe?*

YES..... 1
 NO 2
 DON'T KNOW ... -7
 REFUSED..... -9

[REPEAT HH4a-HH4e FOR EACH PERSON REPORTED IN HH2]

HH4f. What is this person's relationship to the head of household?

- 01 = Head of household*
- 02 = Spouse of head of household*
- 03 = Son or daughter of head of household*
- 04 = Brother or sister of head of household*
- 05 = Father or mother of head of household*
- 06 = Grandson or granddaughter*
- 07 = Nephew or niece*
- 08 = Uncle or aunt*
- 09 = Son-in-law or daughter-in-law*

- 10 = Other relation to head of household*
- 11 = Domestic worker*
- 00 = No relation to head of household*
- 9 = Refused*

HH5. [NAME OF THE SELECTED ELIGIBLE PERSON IS:

{FILL SELECTED HH MEMBER'S FIRST NAME}

ASK IF SELECTED RESPONDENT IS AVAILABLE AND IF SO, PROCEED TO THE INDIVIDUAL QUESTIONNAIRE.

IF SELECTED RESPONDENT IS NOT AVAILABLE. MAKE AN APPOINTMENT AND RECORD IT AS A COMMENT ON RECORD OF CALLS.]

Core Individual Questionnaire

CONSENT1. [SELECT THE APPROPRIATE AGE CATEGORY BELOW. IF NEEDED, CHECK THE AGE OF SELECTED RESPONDENT FROM THE "CASE INFO" SCREEN IN THE TOOLS MENU.]

- 15-17 1 → **GO TO CONSENT2**
18 OR OLDER..... 2 → **GO TO CONSENT5**
EMANCIPATED MINOR (15-17)..... 3 → **GO TO CONSENT5**

CONSENT2. Before starting the interview, I need to obtain consent from a parent or guardian of [NAME OF RESPONDENT] and from [NAME OF RESPONDENT]

[IF BOTH SELECTED RESPONDENT AND PARENT/GUARDIAN ARE AVAILABLE, CONTINUE WITH INTERVIEW.

IF PARENT/GUARDIAN IS NOT AVAILABLE, BREAK-OFF INTERVIEW AND SCHEDULE AN APPOINTMENT TO RETURN.

IF MINOR RESPONDENT IS NOT AVAILABLE, CONTINUE WITH OBTAINING PARENTAL CONSENT.]

CONSENT3. [READ THE FOLLOWING TO THE PARENT/GUARDIAN AND SELECTED RESPONDENT (IF AVAILABLE):]

I am working with the **Office National des Statistiques**. This institution is collecting information about tobacco use in Senegal. This information will be used for public health purposes by the Ministry of Health.

Your household and [NAME OF RESPONDENT] have been selected at random. [NAME OF RESPONDENT] responses are very important to us and the community, as these answers will represent many other persons.

The interview will last around 30 minutes. [NAME OF RESPONDENT] participation in this survey is entirely voluntary. The information that [NAME OF RESPONDENT] will provide will be kept strictly confidential and [NAME OF RESPONDENT] will not be identified by his/her responses. Personal information will not be shared with anyone else, not even other family members including you. [NAME OF RESPONDENT] can withdraw from the study at any time and may refuse to answer any question.

We will leave the necessary contact information with you. If you have any questions about this survey, you can contact the telephone numbers listed.

If you agree with [NAME OF RESPONDENT]'s participation in this survey, we will conduct a private interview with him/her.

[ASK PARENT/GUARDIAN:] Do you agree with [NAME OF RESPONDENT]'s participation?

YES 1 → **GO TO CONSENT4**

NO 2 → **END INTERVIEW**

CONSENT4. [WAS THE SELECTED MINOR RESPONDENT PRESENT?]

PRESENT 1 → **GO TO CONSENT6**

NOT PRESENT 2 → **GO TO CONSENT5**

CONSENT5. [READ TO THE SELECTED RESPONDENT:]

I am working with *the Office National des Statistiques*. This institution is collecting information about tobacco use in: *Senegal*. This information will be used for public health purposes by the Ministry of Health.

Your household and you have been selected at random. Your responses are very important to us and the community, as these answers will represent many other persons. The interview will last around 30 minutes. Your participation in this survey is entirely voluntary. The information that you will provide us will be kept strictly confidential, and you will not be identified by your responses. Personal information will not be shared with anyone else, not even other family members. You can withdraw from the study at any time and may refuse to answer any question.

We will leave the necessary contact information with you. If you have any questions about this survey, you can contact the telephone numbers listed.

{FILL IF CONSENT4=2: Your parent/guardian has given his/her permission for you to participate in this study. **}**

If you agree to participate, we will conduct a private interview with you.

CONSENT6. [ASK SELECTED RESPONDENT:] Do you agree to participate?

YES 1 → **PROCEED WITH INTERVIEW**

NO 2 → **END INTERVIEW**

INTLANG. [INTERVIEW LANGUAGE]

FRENCH 1

WOLOF 2

PULAR 3

SERERE 4

MANDINGUE 5

DIOLA 6

SONINKE 7

OTHER LANGUAGE 8

Section A. Background Characteristics

A00. I am going to first ask you a few questions about your background.

A01. [RECORD SEX FROM OBSERVATION. ASK IF NECESSARY.]

MALE..... 1

FEMALE 2

A02a. What is the month of your date of birth?

01 1

02 2

03 3

04 4

05 5

06 6

07 7

08 8

09 9

10 10

11 11

12 12

DON'T KNOW... -7

REFUSED -9

A02b. What is the year of your date of birth?

--	--	--	--

[IF MONTH=DK OR REF OR YEAR=DK OR REF, ASK A03. OTHERWISE, SKIP TO A04.]

A03. How old are you?

[IF RESPONDENT IS UNSURE, PROBE FOR AN ESTIMATE AND RECORD AN ANSWER.
IF REFUSED, BREAK-OFF AS WE CANNOT CONTINUE INTERVIEW WITHOUT AGE]

[NO DK/REF]

--	--	--

A03a. [WAS RESPONSE ESTIMATED?]

- YES 1
- NO 2
- DON'T KNOW -7

A04a. Can you read and write?

- YES 1
- NO 2
- REFUSED 9

A04b. What is the highest level of education you have completed?

[SELECT ONLY ONE CATEGORY]

- NO FORMAL EDUCATION 1
- PRIMARY INCOMPLETE 2
- PRIMARY COMPLETED 3
- LOWER SECONDARY INCOMPLETE 4
- LOWER SECONDARY COMPLETED 5
- UPPER SECONDARY INCOMPLETE 6
- UPPER SECONDARY COMPLETED 7
- BACCALAUREATE 8
- FIRST UNIVERSITY DEGREE COMPLETED 9
- SECOND OR THIRD CYCLE DEGREE(S) COMPLETED 10
- DON'T KNOW -7
- REFUSED -9

A05. Which of the following best describes your main work status over the past 12 months?
Government employee, non-government employee, self-employed, student, homemaker,
retired, unemployed-able to work, or unemployed-unable to work?

[INCLUDE SUBSISTENCE FARMING AS SELF-EMPLOYED]

- GOVERNMENT EMPLOYEE 1
- NON-GOVERNMENT EMPLOYEE 2
- SELF-EMPLOYED 3

- STUDENT..... 4
- HOMEMAKER..... 5
- RETIRED..... 6
- UNEMPLOYED, ABLE TO WORK..... 7
- UNEMPLOYED, UNABLE TO WORK..... 8
- DON'T KNOW..... -7
- REFUSED..... -9

A06. Please tell me whether this household or any person who lives in the household has the following items:

	YES ▼	NO ▼	DON'T KNOW ▼	REFUSED ▼
a. Electricity?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
b. Flush toilet?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
c. Pit latrine?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
d. Internet access via mobile phone, tablet, laptop or other computer?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
e. Computer.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
f. Home telephone?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
g. Cell telephone?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
h. Television?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
i. Radio?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
j. Refrigerator?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
k. Car, truck, or van?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
l. Moped/scooter/motorcycle?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
m. Washing machine?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
n. Improved stove (e.g., Jambar stove)?....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9
o. Air conditioner?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> -7	<input type="checkbox"/> -9

A07. Are you Senegalese?

- YES 1
- NO..... 2 → **GO TO A09**

A08. What is your ethnic group?

- WOLOF 1
- PULAR 2
- SERER 3

- MANDINGUE 4
- DIOLA 5
- SONINKE 6
- OTHER -7 → A08a. [SPECIFY]: _____
- DON'T KNOW -7
- REFUSED -9

A09. What is your religion?

- ISLAM..... 1
- CHRISTIANITY 2
- ANIMISM 3
- OTHER 4 → A09a. [SPECIFY]: _____
- NO RELIGION 5
- DON'T KNOW -7
- REFUSED -9

A10. What is your marital status?

Would you say single, married, divorced, or widowed?

- SINGLE... 1
- MARRIED 2
- COHABITING 3
- DIVORCED/SEPARATED 4
- WIDOWED 5
- REFUSED -9

Section B. Tobacco Smoking

- B01.** The following questions are about the use of several types of tobacco products. I will now ask you several sets of questions about *four* types of products: traditional smoking tobacco products, electronic cigarettes such as Puff, *POUCHES*, *heated tobacco products (IQOS)*, and smokeless tobacco (nicotine pouches).

I would now like to ask you some questions about smoking tobacco, including *cigarettes, cigars, meneija pipes, and chicha (waterpipe)*. This includes all products where you burn the tobacco as you smoke it.

Do you currently smoke tobacco daily, less than daily, or not at all?

- DAILY 1 → **SKIP TO B04**
LESS THAN DAILY, 2
NOT AT ALL 3 → **SKIP TO B03**
DON'T KNOW -7 → **SKIP TO NEXT SECTION WP**
REFUSED -9 → **SKIP TO NEXT SECTION WP**

- B02.** Have you smoked tobacco daily in the past?

- YES 1 → **SKIP TO B04**
NO 2 → **SKIP TO B04**
DON'T KNOW -7 → **SKIP TO NEXT SECTION WP**
REFUSED -9 → **SKIP TO NEXT SECTION WP**

- B03.** In the past, have you smoked tobacco daily, less than daily, or not at all?

[IF RESPONDENT HAS DONE BOTH "DAILY" AND "LESS THAN DAILY" IN THE PAST, CHECK "DAILY"]

- DAILY 1 → **SKIP TO B04**
LESS THAN DAILY 2 → **SKIP TO B04**
NOT AT ALL 3 → **SKIP TO NEXT SECTION WP**
DON'T KNOW -7 → **SKIP TO NEXT SECTION WP**
REFUSED -9 → **SKIP TO NEXT SECTION WP**

B04. How old were you when you first tried smoking tobacco, even once?

--	--

[IF B04 = DK OR REF, ASK B04a. OTHERWISE GO TO BCOMP1.]

B04a. How many years ago did you first try smoking tobacco, even once?

--	--

BCOMP1

IF B01 = 1, GO TO B05

IF B02 = 1, GO TO B05

IF B02 = 2, GO TO B08

IF B03 = 1, GO TO B05

IF B03 = 2, GO TO B09a

B05. How old were you when you first started smoking tobacco daily?

--	--

[IF B05 = DK OR REF, ASK B05a. OTHERWISE GO TO BCOMP2.]

B05a. How many years ago did you first start smoking tobacco daily?

--	--

BCOMP2

IF B01 = 1, GO TO B06

IF B02 = 1, GO TO B08

IF B03 = 1, GO TO B09a

[CURRENT DAILY SMOKERS]

B06. On average, how many of the following products do you currently smoke each day? Also, let me know if you smoke the product, but not every day.

Manufactured cigarettes

[IF RESPONDENT REPORTS SMOKING THE PRODUCT BUT NOT EVERY DAY, ENTER 888.

IF RESPONDENT REPORTS IN PACKS OR CARTONS, PROBE TO FIND OUT HOW MANY ARE IN EACH AND CALCULATE TOTAL NUMBER]

a. Manufactured cigarettes?				<i>PER DAY</i>
a1. [IF B06=888] On average, how many manufactured cigarettes do you currently smoke each week?				<i>PER WEEK</i>
b. Pipes full of meneija?				<i>PER DAY</i>
b1. [IF B06b=888] On average, how many pipes full of meneija do you currently smoke each week?				<i>PER WEEK</i>
c. Bidis?				<i>PER DAY</i>
c1. [IF B06c = 888] On average, how many bidis do you currently smoke each week?				<i>PER WEEK</i>
d. Tobacco pipes/poon?				<i>PER DAY</i>
d1. [IF B06d = 888] On average, how many tobacco pipes do you currently smoke each week?				<i>PER WEEK</i>
e. Cigars or cigarillos?				<i>PER DAY</i>
e1. [IF B06e = 888] On average, how many cigars, cheroots, or cigarillos do you currently smoke each week?				<i>PER WEEK</i>
f. Number of waterpipe sessions per day?				<i>PER DAY</i>
f1. [IF B06f = 888] On average, how many times do you currently smoke a waterpipe each week?				<i>PER WEEK</i>

Any others? (→ g1. Please specify the other type you currently smoke: _____)				<i>PER DAY</i>
g2. [IF B06g=888] On average, how many [FILL PRODUCT] do you currently smoke each week?				<i>PER WEEK</i>

B07. How soon after you wake up do you usually have your first smoke? Would you say within 5 minutes, 6 to 30 minutes, 31 to 60 minutes, or more than 60 minutes?

- WITHIN 5 MINUTES..... 1
- 6 TO 30 MINUTES..... 2
- 31 TO 60 MINUTES..... 3
- MORE THAN 60 MINUTES..... 4
- REFUSED..... -9

[SKIP TO NEXT SECTION WP.]

[CURRENT LESS THAN DAILY SMOKERS]

B08. How many of the following do you currently smoke during a usual week?

[IF RESPONDENT REPORTS DOING THE ACTIVITY WITHIN THE PAST 30 DAYS, BUT LESS THAN ONCE PER WEEK, ENTER 888.

IF RESPONDENT REPORTS IN PACKS OR CARTONS, PROBE TO FIND OUT HOW MANY ARE IN EACH AND CALCULATE TOTAL NUMBER]

a. Manufactured cigarettes?				<i>PER WEEK</i>
b. Pipes full of meneija?				<i>PER WEEK</i>
c. Cigars or cigarillos?				<i>PER WEEK</i>
d. Tobacco pipes?				<i>PER WEEK</i>
e. Cigars or cigarillos?				<i>PER WEEK</i>
f. Number of chicha (waterpipe) tobacco sessions per week?				<i>PER WEEK</i>
Any others?				<i>PER WEEK</i>

→ g1. Please specify the other type you currently smoke:

[SKIP TO NEXT SECTION WP.]

[FORMER SMOKERS]

B09a. How long has it been since you stopped smoking?

[ONLY INTERESTED IN WHEN RESPONDENT STOPPED SMOKING REGULARLY- DO NOT INCLUDE RARE INSTANCES OF SMOKING.

ENTER UNIT ON THIS SCREEN AND NUMBER ON NEXT SCREEN]

- YEARS..... 1
- MONTHS 2
- WEEKS..... 3
- DAYS 4

LESS THAN 1 DAY 5 → **SKIP TO B10**
DON'T KNOW -7 → **SKIP TO NEXT SECTION WP**
REFUSED..... -9 → **SKIP TO NEXT SECTION WP**

B09b. [ENTER NUMBER OF (YEARS/MONTHS/WEEKS/DAYS)]

[NO DK/REF]

--	--	--

[IF B09a/b < 1 YEAR (< 12 MONTHS), THEN CONTINUE WITH B10. OTHERWISE, SKIP TO NEXT SECTION WP]

B10. Have you visited a doctor or other health care provider in the past 12 months?

YES..... 1
NO..... 2 → **SKIP TO B14**
REFUSED..... -9 → **SKIP TO B14**

B11. How many times did you visit a doctor or health care provider in the past 12 months? Would you say 1 or 2 times, 3 to 5 times, or 6 or more times?

1 OR 2 1
3 TO 5 2
6 OR MORE 3
REFUSED..... -9

B12. During any visit to a doctor or health care provider in the past 12 months, were you asked if you smoke tobacco?

YES..... 1
NO..... 2 → **SKIP TO B14**
REFUSED..... -9 → **SKIP TO B14**

B13. During any visit to a doctor or health care provider in the past 12 months, were you advised to quit smoking tobacco?

YES..... 1

NO 2
 REFUSED..... -9

B14. During the past 12 months, did you use any of the following to try to stop smoking tobacco?

	YES ▼	NO ▼	REFUSED ▼
a. Counseling, including at a smoking cessation clinic?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
b. Nicotine replacement therapy, such as patches or chewing gum?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
c. Other prescription medications, for example <i>Bupropion, Varénicline</i> ?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
d. Traditional remedies, for example, <i>tooth-rubbing sticks or prayers</i> ?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
e. Telephone counseling or quit-smoking helpline (800 005 050)?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
f. Using electronic cigarettes instead (<i>Iqos, pouches</i>).....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
g. Use of heated tobacco products as a substitute? (<i>Poon</i>).....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
h. Try to quit without assistance?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9

B15. When you quit smoking, which of the following reasons motivated you?

	YES ▼	NO ▼	DON'T KNOW ▼	REFUSED ▼
a. Concern for your health?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> 9			
b. Concern about the effects of your tobacco smoke on non-smokers?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> 9			
c. Because society disapproves of smoking?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
d. Because of the price of smoking tobacco products?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
e. Because smoking is/was prohibited inside your home?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
f. Because of smoking bans at work				

or in public places? 1..... 2..... -7
..... -9

g. To set a good example for children? 1..... 2..... -7
..... -9

h. Because your friends and family
criticized you for smoking? 1..... 2..... -7
..... -9

Optional section WP– Waterpipe module (Chicha/Hookah)

ROUTING: B06f/B10f ask for number of waterpipe sessions per day/week

- If B01 = 1 AND B06f = 888 (CURRENT WATERPIPE SMOKERS, LESS THAN DAILY), GO TO WP1
- If B01 = 2 AND B10f > 0 AND <= 888 (CURRENT WATERPIPE SMOKERS, LESS THAN DAILY), GO TO WP1
- IF B01 = 3 AND B03 = 1 OR 2 (FORMER SMOKERS), GO TO WP2
- IF (B01 = 1 OR 2) AND (B06f = 0 OR B10f = 0), (CURRENT SMOKERS BUT NOT WATERPIPE USERS), GO TO WP2
- OTHERWISE, GO TO NEXT SECTION EC

WP1. I would now like to ask you a few questions about the waterpipe.

Have you ever smoked a waterpipe daily in the past?

- YES 1 → **SKIP TO NEXT SECTION EC**
- NO..... 2 → **SKIP TO NEXT SECTION EC**
- REFUSED 9 → **SKIP TO NEXT SECTION EC**

WP2. I would now like to ask you a few questions about the waterpipe.

In the past, did you smoke a waterpipe daily, less than once a day, or not at all?

[IF RESPONDENT HAS DONE BOTH "DAILY" AND "LESS THAN DAILY" IN THE PAST, CHECK "DAILY"]

- DAILY..... 1
- LESS THAN DAILY 2
- NOT AT ALL 3
- REFUSED 9

SKIP TO NEXT SECTION EC

SECTION EC. ELECTRONIC CIGARETTES

EC1. Electronic cigarettes include any product using batteries or other methods to produce vapor containing nicotine. They are also known as e-cigarettes, vape pen, e-shisha, or e-pipe. Before today, had you ever heard of electronic cigarettes?

- YES 1
- NO..... 2 → **SKIP TO NEXT SECTION C**
- REFUSED 9 → **SKIP TO NEXT SECTION C**

EC2. Do you currently use electronic cigarettes daily, less than daily, or not at all?

- DAILY 1 → **SKIP TO NEXT SECTION C**
- LESS THAN DAILY 2..... → **SKIP TO NEXT SECTION C**
- NOT AT ALL 3
- REFUSED..... 9

EC3. Have you ever used an electronic cigarette, even just once?

- YES 1
- NO..... 2
- REFUSED..... 9

Section C. Smokeless Tobacco

[C01 TO C03 ARE MANDATORY. OTHER QUESTIONS IN THIS SECTION ARE OPTIONAL.]

- C01.** The next questions are about using smokeless tobacco, *such as chem*. Smokeless tobacco is tobacco that is not smoked, but is sniffed through the nose, held in the mouth, or chewed.

Do you currently use smokeless tobacco daily, less than daily, or not at all?

[IF RESPONDENT DOES NOT KNOW WHAT SMOKELESS TOBACCO IS, EITHER PRESENT A SHOWCARD OR READ DEFINITION FROM QXQ SCREEN]

- DAILY 1 → **SKIP TO C04**
LESS THAN DAILY 2
NOT AT ALL 3 → **SKIP TO C03**
DON'T KNOW -7 → **SKIP TO NEXT SECTION D1**
REFUSED -9 → **SKIP TO NEXT SECTION D1**

- C02.** Have you ever used smokeless tobacco daily in the past?

- YES 1 → **SKIP TO C04**
NO 2 → **SKIP TO C04**
DON'T KNOW -7 → **SKIP TO C04**
REFUSED -9 → **SKIP TO C04**

- C03.** In the past, did you use smokeless tobacco daily, less than once a day, or not at all?

[IF RESPONDENT INDICATED "DAILY" AND "LESS FREQUENTLY," CHECK "DAILY."]

- DAILY 1 → **SKIP TO C04**
LESS THAN DAILY 2 → **SKIP TO C04**
NOT AT ALL 3 → **SKIP TO NEXT SECTION D1**
DON'T KNOW -7 → **SKIP TO NEXT SECTION D1**
REFUSED -9 → **SKIP TO NEXT SECTION D1**

C15. When you stopped using smokeless tobacco, which of the following reasons led you to consider quitting?

	YES ▼	NO ▼	DON'T KNOW ▼	REFUSED ▼
a. Concern for your health?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
b. Because society disapproves of smokeless tobacco use?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
c. Because of the price of smokeless tobacco products?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
d. Because it is/was prohibited to use smokeless tobacco inside your home?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
e. Because of bans on smokeless tobacco use at work or in public places?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
f. To set a good example for children?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
g. Because your friends and family criticized you for using smokeless tobacco?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			

Section D1. Cessation — Tobacco Smoking

D00COMP

**IF B01 = 1 OR 2 (RESPONDENT CURRENTLY SMOKES TOBACCO), CONTINUE WITH THIS SECTION.
IF B01 = 3, -7, OR -9 (RESPONDENT DOES NOT CURRENTLY SMOKE TOBACCO). SKIP TO NEXT SECTION D2.**

D01. The next question ask about any attempts to stop smoking that you might have made during the past 12 months. Please think about tobacco smoking.

During the past 12 months, have you tried to stop smoking?

YES..... 1

NO 2 → **SKIP TO INSTRUCTION BEFORE D04**

REFUSED..... -9 → **SKIP TO INSTRUCTION BEFORE D04**

D02a. Thinking about the last time you tried to quit, how long did you stop smoking?

[ENTER UNIT ON THIS SCREEN AND NUMBER ON NEXT SCREEN]

MONTHS 1

WEEKS..... 2

DAYS 3

LESS THAN 1 DAY (24 HOURS)..... 4 → **SKIP TO D03**

DON'T KNOW -7 → **SKIP TO D03**

REFUSED..... -9 → **SKIP TO D03**

D02b. [ENTER NUMBER OF (MONTHS/WEEKS/DAYS)]

[NO DK/REF]

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D03. During the past 12 months, did you use any of the following to try to stop smoking tobacco?

	YES ▼	NO ▼	REFUSED ▼
a. Counseling, including at a smoking cessation clinic?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
b. Nicotine replacement therapy, such as patches or chewing gum?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
c. Other prescription medications, for example <i>Bupropion, Varénicline</i> ?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
d. Traditional remedies, for example, <i>tooth-rubbing sticks or prayers</i> ?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
e. Telephone counseling or quit-smoking helpline (800 00 50 50)?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
f. Using electronic cigarettes instead (<i>Iqos, pouches</i>).....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
g. Use of heated tobacco products as a substitute?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
h. Try to quit without assistance?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9

D03x1. During the past 12 months, did you use any of the following to try to stop smoking tobacco?

	YES ▼	NO ▼	DON'T KNOW ▼	REFUSED ▼
a. Concern for your health?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
b. Concern about the effects of your tobacco smoke on non-smokers?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
c. Because society disapproves of smoking?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
d. Because of the price of smoking tobacco products?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
e. Because smoking is/was prohibited inside your home?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
f. Because of smoking bans at work				

or in public places? 1..... 2..... -7
..... -9

g. To set a good example for children? 1..... 2..... -7
..... -9

h. Because your friends and family
criticized you for smoking? 1..... 2..... -7
..... -9

D03COMP

IF C10 HAS NOT BEEN ASKED → SKIP TO D04

IF C10 = YES → SKIP TO D06

IF C10 = NO OR REFUSED → SKIP TO D08

D04. Have you visited a doctor or other health care provider in the past 12 months?

- YES..... 1
- NO..... 2 → **SKIP TO D08**
- REFUSED..... -9 → **SKIP TO D08**

D05. How many times did you visit a doctor or health care provider in the past 12 months? Would you say 1 or 2 times, 3 to 5 times, or 6 or more times?

- 1 OR 2 1
- 3 TO 5 2
- 6 OR MORE 3
- REFUSED..... -9

D06. During any visit to a doctor or health care provider in the past 12 months, were you asked if you smoke tobacco?

- YES..... 1
- NO..... 2 → **SKIP TO D08**
- REFUSED..... -9 → **SKIP TO D08**

D07. During any visit to a doctor or health care provider in the past 12 months, were you advised to quit smoking tobacco?

- YES..... 1
- NO..... 2
- REFUSED..... -9

D08. Which of the following best describes your thinking about quitting smoking? I am planning to quit within the next month, I am thinking about quitting within the next 12 months, I will quit someday but not within the next 12 months, or I am not interested in quitting?

- QUIT WITHIN THE NEXT MONTH 1
- THINKING WITHIN THE NEXT 12 MONTHS 2
- QUIT SOMEDAY, BUT NOT NEXT 12 MONTHS 3
- NOT INTERESTED IN QUITTING 4
- DON'T KNOW -7
- REFUSED -9

Section **D2.** Cessation — Smokeless Tobacco

D08COMP

IF C01 = 1 OR 2 (RESPONDENT CURRENTLY USES SMOKELESS TOBACCO), CONTINUE WITH THIS SECTION.

IF C01 = 3, -7, OR -9 (RESPONDENT DOES NOT CURRENTLY USE SMOKELESS TOB), SKIP TO NEXT SECTION E.

D09. The next questions ask about any attempts to stop using smokeless tobacco that you might have made during the past 12 months. Please think about your use of smokeless tobacco.

During the past 12 months, have you tried to stop using smokeless tobacco?

- YES 1
- NO 2 → **SKIP TO INSTRUCTION BEFORE D12**
- REFUSED -9 → **SKIP TO INSTRUCTION BEFORE D12**

D10a. Thinking about the last time you tried to quit, how long did you stop using smokeless tobacco?

[ENTER UNIT ON THIS SCREEN AND NUMBER ON NEXT SCREEN]

- MONTHS 1
- WEEKS 2
- DAYS 3
- LESS THAN 1 DAY (24 HOURS) 4 → **SKIP TO D11**

DON'T KNOW -7 → **SKIP TO D11**
 REFUSED..... -9 → **SKIP TO D11**

D10b. [ENTER NUMBER OF (MONTHS/WEEKS/DAYS)]

[NO DK/REF]

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D11. During the past 12 months, have you used any of the following to try and stop using smokeless tobacco?

	YES ▼	NO ▼	REFUSED ▼
a. Counseling, including at a smoking cessation clinic?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
b. Nicotine replacement therapy, such as patches or chewing gum?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
c. Other prescription medications, for example <i>Bupropion, Varénicline</i> ?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
d. Traditional remedies, for example, <i>tooth-rubbing sticks or prayers?</i>	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
e. Telephone counseling or quit-smoking helpline (800 00 50 50)?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
f. Using electronic cigarettes instead (<i>Iqos, pouches</i>).....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
g. Use of heated tobacco products as a substitute?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9
h. Try to quit without assistance?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -9

D11x1. During the past 12 months, have any of the following reasons led you to consider quitting smokeless tobacco?

	YES ▼	NO ▼	DON'T KNOW ▼	REFUSED ▼
a. Concern for your health?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....			<input type="checkbox"/> -9	

- c. Because society disapproves of smokeless tobacco use?
 smokeless tobacco use? 1..... 2..... -7
 -9
- d. Because of the price of smokeless tobacco products? 1..... 2..... -7
 -9
- e. Because it is / was prohibited to use smokeless tobacco inside your home?
 1..... 2..... -7
 -9
- f. Because of bans on smokeless tobacco use at work or in public places?
 1..... 2..... -7
 -9
- g. To set a good example for children? 1..... 2..... -7
 -9
- h. Because your friends and family criticized you for using smokeless tobacco?
 smokeless tobacco? 1..... 2..... -7
 -9

D11COMP

IF BOTH B10 AND D04 HAVE NOT BEEN ASKED → CONTINUE WITH D12

IF B10 OR D04 = YES → SKIP TO D14

IF B10 OR D04 = NO OR REFUSED → SKIP TO D16

D12. Have you visited a doctor or other health care provider in the past 12 months?

- YES..... 1
 NO 2 → **SKIP TO D16**
 REFUSED..... -9 → **SKIP TO D16**

D13. How many times did you visit a doctor or health care provider in the past 12 months? Would you say 1 or 2 times, 3 to 5 times, or 6 or more times?

- 1 OR 2 1
 3 TO 5 2
 6 OR MORE 3
 REFUSED..... -9

D14. During any visit to a doctor or health care provider in the past 12 months, were you asked if you use smokeless tobacco?

- YES..... 1
- NO 2 → **SKIP TO D16**
- REFUSED..... -9 → **SKIP TO D16**

D15. During any visit to a doctor or health care provider in the past 12 months, were you advised to stop using smokeless tobacco?

- YES..... 1
- NO 2
- REFUSED..... -9

D16. Which of the following best describes your thinking about quitting smokeless tobacco? I am planning to quit within the next month, I am thinking about quitting within the next 12 months, I will quit someday but not within the next 12 months, or I am not interested in quitting?

- QUIT WITHIN THE NEXT MONTH 1
- THINKING WITHIN THE NEXT 12 MONTHS 2
- QUIT SOMEDAY, BUT NOT NEXT 12 MONTHS 3
- NOT INTERESTED IN QUITTING..... 4
- DON'T KNOW -7
- REFUSED..... -9

Section E. Secondhand Smoke

E01. I would now like to ask you a few questions about smoking in various places.

Which of the following best describes the rules about smoking inside of your home: Smoking is allowed inside of your home, smoking is generally not allowed inside of your home but there are exceptions, smoking is never allowed inside of your home, or there are no rules about smoking in your home?

- ALLOWED..... 1
NOT ALLOWED
- , BUT EXCEPTIONS 2
NEVER ALLOWED..... 3 → **SKIP TO E04**
NO RULES 4 → **SKIP TO E03**
DON'T KNOW -7 → **SKIP TO E03**
REFUSED..... -9 → **SKIP TO E03**

E02. Inside your home, is smoking allowed in every room?

- YES..... 1
NO 2
DON'T KNOW -7
REFUSED..... -9

E03. How often does anyone smoke inside your home? Would you say daily, weekly, monthly, less than monthly, or never?

- DAILY 1
NOT DAILY, BUT AT LEAST ONCE A WEEK..... 2
NOT EVERY WEEK, BUT AT LEAST ONCE A MONTH..... 3
LESS THAN ONCE A MONTH 4
NEVER 5
DON'T KNOW -7
REFUSED..... -9

E04. Do you currently work outside of your home?

- YES..... 1
NO/DON'T WORK..... 2 → **SKIP TO E09**

REFUSED..... -9 → **SKIP TO E09**

E05. Do you usually work indoors or outdoors?

INDOORS 1 → **SKIP TO E07**
OUTDOORS 2
BOTH 3 → **SKIP TO E07**
REFUSED..... -9

E06. Are there any indoor areas at your workplace?

YES..... 1
NO 2 → **SKIP TO E09**
DON'T KNOW -7 → **SKIP TO E09**
REFUSED..... -9 → **SKIP TO E09**

E07. Which of the following best describes the indoor smoking policy where you work: Smoking is allowed anywhere, smoking is allowed only in some indoor areas, smoking is not allowed in any indoor areas, or there is no policy?

ALLOWED ANYWHERE 1
ALLOWED ONLY IN SOME INDOOR AREAS..... 2
NOT ALLOWED IN ANY INDOOR AREAS 3
THERE IS NO POLICY..... 4
DON'T KNOW -7
REFUSED..... -9

E08. During the past 30 days, did anyone smoke in indoor areas where you work?

YES..... 1
NO 2
DON'T KNOW -7
REFUSED..... -9

E09. During the past 30 days, did you visit any government buildings or government offices?

YES..... 1

NO 2 → **SKIP TO E11**
DON'T KNOW -7 → **SKIP TO E11**
REFUSED..... -9 → **SKIP TO E11**

E10. Did anyone smoke inside of any government buildings or government offices that you visited in the past 30 days?

YES..... 1
NO 2
DON'T KNOW -7
REFUSED..... -9

E11. During the past 30 days, did you visit any health care facilities?

YES..... 1
NO 2 → **SKIP TO E13**
DON'T KNOW -7 → **SKIP TO E13**
REFUSED..... -9 → **SKIP TO E13**

E12. Did anyone smoke inside of any health care facilities that you visited in the past 30 days?

YES..... 1
NO 2
DON'T KNOW -7
REFUSED..... -9

E13. During the past 30 days, did you visit any restaurants?

YES..... 1
NO 2 → **SKIP TO E15**
DON'T KNOW -7 → **SKIP TO E15**
REFUSED..... -9 → **SKIP TO E15**

E14. Did anyone smoke inside of any restaurants that you visited in the past 30 days?

YES..... 1
NO 2
DON'T KNOW -7
REFUSED..... -9

E15. In the last 30 days, have you been inside any bars or nightclubs?

- YES..... 1
- NO 2 → **SKIP TO E17**
- DON'T KNOW -7 → **SKIP TO E17**
- REFUSED..... -9 → **SKIP TO E17**

E16. Did anyone smoke inside the bars or nightclubs you visited in the past 30 days?

- YES..... 1
- NO 2
- DON'T KNOW -7
- REFUSED..... -9

E17. During the past 30 days, did you use any public transportation?

- YES..... 1
- NO 2 → **SKIP TO E19**
- DON'T KNOW -7 → **SKIP TO E19**
- REFUSED..... -9 → **SKIP TO E19**

E18. Did anyone smoke inside of any public transportation that you used in the past 30 days?

- YES..... 1
- NO 2
- DON'T KNOW -7
- REFUSED..... -9

E19. During the past 30 days, did you visit any universities?

- YES..... 1
- NO 2 → **SKIP TO E21**
- DON'T KNOW -7 → **SKIP TO E21**
- REFUSED..... -9 → **SKIP TO E21**

E20. Did anyone smoke inside of any university buildings that you visited in the past 30 days?

- YES..... 1
- NO 2

DON'T KNOW -7
 REFUSED..... -9

E21. During the past 30 days, did you visit any schools?

YES..... 1
 NO..... 2 → **SKIP TO E23**
 DON'T KNOW -7 → **SKIP TO E23**
 REFUSED..... -9 → **SKIP TO E23**

E22. Did anyone smoke inside of any school buildings that you visited in the past 30 days?

YES..... 1
 NO..... 2
 DON'T KNOW -7
 REFUSED..... -9

E23. Based on what you know or believe, does breathing other people's smoke cause serious illness in non-smokers?

YES..... 1
 NO..... 2
 DON'T KNOW -7
 REFUSED..... -9

E25. For each of the following public places, please tell me whether you think smoking should be allowed or prohibited indoors:

[or]

Do you support the law prohibiting smoking inside the following public places?

	SHOULD BE ALLOWED	SHOULD BE PROHIBITED/BANNED	DON'T KNOW	REFUSED
	YES	NO	DON'T KNOW	REFUSED
	▼	▼	▼	▼
a. Hospitals?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
b. Workplace?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
c. Restaurants?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
d. Bars?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9

- e. Public transportation? 1 2 -7 -9
- f. Schools? 1 2 -7 -9
- g. Universities? 1 2 -7 -9
- h. Places of worship? 1 2 7 -9

Section F. Economics — Manufactured Cigarettes

F00COMP

IF (B01 = 1 OR 2 (RESPONDENT CURRENTLY SMOKES DAILY OR LESS THAN DAILY))

AND

[(B06a OR B08a) > 0 AND <= 888 (RESPONDENT SMOKES MANUFACTURED CIGARETTES)],

THEN CONTINUE WITH THIS SECTION,

OTHERWISE, SKIP TO NEXT SECTION G.

F01a. The next few questions are about the last time you purchased cigarettes for yourself to smoke.

The last time you bought cigarettes for yourself, did you buy loose cigarettes, packs, cartons, or something else?

[DO NOT INCLUDE ELECTRONIC CIGARETTES OR HEATED TOBACCO PRODUCTS]

CIGARETTES 1

PACKS 2

CARTONS 3

OTHER (SPECIFY) 4 → **F01c.** [SPECIFY THE UNIT]:

NEVER BOUGHT CIGARETTES 5 → **SKIP TO NEXT SECTION G**

REFUSED -9 → **SKIP TO F03**

F01b. The last time you bought cigarettes for yourself, how many {FILL F01a: cigarettes/packs/cartons/{FILL F01c}} did you buy?

[NO DK/REF]

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[IF F01a=CIGARETTES, GO TO F02]

[IF F01a=PACKS, GO TO F01dPack.]

[IF F01a=CARTONS, GO TO F01dCart]

[IF F01a=OTHER, GO TO F01dOther]

F01dPack. Did each pack contain 10 cigarettes, 20 cigarettes, or another amount?

10..... 1

20..... 2

OTHER AMOUNT..... 7 → **F01dPackA.** How many cigarettes were in each pack? **[NO**

DK/REF]

DON'T KNOW..... -7

REFUSED..... -9

[GO TO F02.]

F01dCart. Did each carton contain 100 cigarettes, 200 cigarettes or another amount?

100 1

200 2

OTHER AMOUNT 7 → **F01dCartA.** How many cigarettes were in each carton? **[NO DK/REF]**

DON'T KNOW -7

REFUSED -9

[GO TO F02.]

F01dOther. How many cigarettes were in each {F01c}?

--	--	--

F02. In total, how much money did you pay for this purchase?

--

RANGE: 500-1000

F03. What brand did you buy the last time you purchased cigarettes for yourself?

MARLBORO 1

EXCELLENCE 2

HOUSTON 3

DUNHILL 4

DAVIDOFF 5

GOLD SEAL 6

OTHER ? → **F03a.** [SPECIFY BRAND]: _____

REFUSED -9

F03b. The {FILL IN BRAND INDICATED IN F03} cigarettes that you last purchased — did they have a capsule releasing a flavor when crushed?

YES 1

NO 2

DON'T KNOW -7

REFUSED..... -9

F04. The last time you purchased cigarettes for yourself, where did you buy them?

VENDING MACHINE 1

STORE/SHOP 2

STREET VENDOR 3

MILITARY STORE..... 4

DUTY-FREE SHOP..... 5

OUTSIDE THE COUNTRY 6

KIOSK 7

INTERNET 8

FROM ANOTHER PERSON..... 9

OTHER 10

→ **F04a.** [SPECIFY

LOCATION]: _____

DON'T REMEMBER -7

REFUSED..... -9

F05. Did those cigarettes have a filter or not?

FILTER 1

NO FILTER 2

REFUSED..... -9

F06. Were those cigarettes labeled as light, mild, or low tar?

LIGHT 1

MILD..... 2

LOW TAR..... 3

NONE OF THE ABOVE 4

DON'T KNOW 7

REFUSED..... -9

Section G. Media

Structure 1 – Interview covering a single product (e.g., cigarettes)

G01intro. The next few questions ask about your exposure to the media and advertisements in the last 30 days. I will first ask about noticing anti-cigarette information and then ask about noticing cigarette advertisements and promotions.

G01. In the last 30 days, have you noticed information about the dangers of smoking cigarettes or that encourages quitting in any of the following places?

	YES ▼	NO ▼	NOT APPLICABLE ▼	REFUSED ▼
a. In newspapers or in magazines?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
b. On television?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
c. On the radio?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
d. On billboards?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
e. On the Internet / social media?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
f. Somewhere else?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9

[DO NOT INCLUDE HEALTH WARNINGS ON CIGARETTE PACKAGES]

→ f1. Please specify where: _____

G02COMP

If B01 = 1 OR 2 (RESPONDENT CURRENTLY SMOKES TOBACCO), GO TO G02. ELSE, GO TO G04

G02. In the last 30 days, did you notice any health warnings on cigarette packages?

YES..... 1

NO..... 2 → **SKIP TO G04**

DID NOT SEE ANY CIGARETTE PACKAGES..... 3 → **SKIP TO G04**

REFUSED..... -9 → **SKIP TO G04**

G03. In the last 30 days, have warning labels on cigarette packages led you to think about quitting?

- YES..... 1
 NO..... 2
 DON'T KNOW -7
 REFUSED..... -9

G04. In the last 30 days, have you noticed any advertisements or signs promoting cigarettes in the following places?

	YES ▼	NO ▼	NOT APPLICABLE ▼	REFUSED ▼
b. On television?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
c. On the radio?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
d. On billboards?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
e. On posters?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
f. In newspapers or magazines?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
g. In cinemas?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
h. On the Internet or social media?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
i. On public transportation vehicles or stations?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
j. On public walls?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
k. Somewhere else?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2		
.....	<input type="checkbox"/> -9			

→ k1. Please specify where: _____

G05. In the last 30 days, have you noticed any sport or sporting event that is associated with cigarette brands or cigarette companies?

YES..... 1
 NO..... 2
 DON'T KNOW -7
 REFUSED..... -9

G06. In the last 30 days, have you noticed any of the following types of cigarette promotions?

	YES ▼	NO ▼	DON'T KNOW ▼	REFUSED ▼
a. Free samples of cigarettes?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
b. Cigarettes at sale prices?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
c. Coupons for cigarettes?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
d. Free gifts or special discount offers on other products when buying cigarettes?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
e. Clothing or other items with a cigarette brand name or logo?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
f. Cigarette promotions in the mail?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
g. Promotions through social media (WhatsApp, etc.)?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			

Structure 2 – Interview covering two or more products (e.g., cigarettes, bidis/waterpipe, smokeless tobacco)

G201intro. The next questions are about your exposure to media and advertising in the past 30 days. First, I will ask if you have noticed anti-tobacco messages, and then if you have noticed tobacco advertising and promotions.

G201. In the last 30 days, have you seen messages about the dangers of cigarettes or encouragement to quit smoking in the following media?

	YES ▼	NO ▼	NOT APPLICABLE ▼	REFUSED ▼
a1. In newspapers or magazines?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
b1. On television?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
c1. On the radio?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
d1. On billboards?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
e1. On the Internet?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
f1. On social media?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
g1. Somewhere else?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....		<input type="checkbox"/> -9

[DO NOT INCLUDE HEALTH WARNINGS ON CIGARETTE PACKAGES]

→ f1a. Please specify the type of media: _____

G201. In the last 30 days, have you seen messages about the dangers [bidis/waterpipes] or encouragements to quit smoking in the following media?

	YES ▼	NO ▼	NOT APPLICABLE ▼	REFUSED ▼
a2. In newspapers or magazines?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
b2. On television?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
c2. On the radio?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
d2. On billboards?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
e2. On the Internet?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9
f2. On social media?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9

g2. Somewhere else?..... 1..... 2..... -9

[DO NOT INCLUDE HEALTH WARNINGS DISPLAYED ON **[PACKS OF BIDIS/WATERPIPE TOBACCO]**]

→ f2a. Please specify the type of media: _____

G201. In the last 30 days, have you seen messages about the dangers of smokeless tobacco or encouragement to quit using it in the following media?

YES ▼	NO ▼	NOT APPLICABLE ▼	REFUSED ▼
----------	---------	------------------------	--------------

a3. In newspapers or magazines? 1..... 2..... 7..... -9

b3. On television? 1..... 2..... 7..... -9

c3. On the radio?..... 1..... 2..... 7..... -9

d3. On billboards?..... 1..... 2..... 7..... -9

e3. On the Internet? 1..... 2..... 7..... -9

f3. On social media? 1..... 2..... 7..... -9

g3. Somewhere else?..... 1..... 2..... -9

[DO NOT INCLUDE HEALTH WARNINGS DISPLAYED ON SMOKELESS TOBACCO PACKAGES]

→ f3a. Please specify the type of media: _____

G202COMP
If B01 = 1 OR 2 (RESPONDENT CURRENTLY SMOKES TOBACCO), GO TO G202a. OTHERWISE GO TO G202BCOMP.]

G202a. In the last 30 days, did you notice any health warnings on cigarette packages?

YES..... 1

NO..... 2 → **SKIP TO NEXT INSTRUCTION**

DID NOT SEE ANY CIGARETTE PACKAGES 3 → **SKIP TO NEXT INSTRUCTION**

REFUSED..... -9 → **SKIP TO NEXT INSTRUCTION**

G203a. In the last 30 days, have the warning messages on cigarette packs led you to consider quitting smoking?

- YES..... 1
- NO 2
- DON'T KNOW -7
- REFUSED..... -9

G202BCOMP

IF B01 = 1 OR 2 AND THE RESPONDENT CURRENTLY USES [PRODUCT], GO TO G202b. OTHERWISE GO TO G202CCOMP.]

G202b. In the last 30 days, have you seen health warnings on *[bidis/waterpipe tobacco]* packs?

- YES..... 1
- NO 2 → **SKIP TO NEXT**

INSTRUCTION

DID NOT SEE ANY *[BIDIS/WATERPIPE TOBACCO]*...PACKAGE 3 → **SKIP TO NEXT**

INSTRUCTION

REFUSED..... -9 → **SKIP TO NEXT**

INSTRUCTION

G203b. In the last 30 days, have the warning messages on *[bidis/waterpipe tobacco]* packs led you to consider quitting smoking?

- YES..... 1
- NO 2
- DON'T KNOW -7
- REFUSED..... -9

G202CCOMP

IF C01 = 1 OR 2 (RESPONDENT IS A CURRENT SMOKELESS TOBACCO USER), GO TO G202c. OTHERWISE GO TO G204.

G202c. In the last 30 days, have you seen health warnings on smokeless tobacco products?

- YES..... 1
- NO 2 → **SKIP TO G204**

DID NOT SEE ANY SMOKELESS TOBACCO PRODUCTS..... 3 → **SKIP TO G204**
 REFUSE..... -9 → **SKIP TO G204**

G203c. In the last 30 days, have the warning messages on smokeless tobacco products led you to consider quitting their use?

YES..... 1
 NO..... 2
 DON'T KNOW -7
 REFUSED..... -9

G204. I will now ask whether you have noticed any tobacco marketing, including smoking and smokeless tobacco. In the last 30 days, have you seen advertisements or displays promoting tobacco products (smoked and/or smokeless) in the following places?

	YES ▼	NO ▼	NOT APPLICABLE ▼	REFUSED ▼
b. On television?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
c. On the radio?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
d. On billboards?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
e. On posters?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
f. In newspapers or magazines?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
g. In cinemas?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
h. On the Internet?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
i. On vehicles or at public transport stops?	<input type="checkbox"/>			
1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7.....	<input type="checkbox"/> -9	
j. On public walls?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 7	
.....	<input type="checkbox"/> -9			
k. Somewhere else?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2		
.....	<input type="checkbox"/> -9			

→ k1. Please specify where: _____

G205. In the last 30 days, have you seen a sport or sporting event sponsored by a tobacco brand or manufacturer (smoked and/or smokeless)?

- YES..... 1
 NO..... 2
 DON'T KNOW -7
 REFUSED..... -9

G206. In the last 30 days, have you noticed the following types of promotions for tobacco products (smoked and/or smokeless)?

	YES ▼	NO ▼	DON'T KNOW ▼	REFUSED ▼
a. Free tobacco product samples?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
b. Tobacco products on sale?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
c. Discount coupons for tobacco products?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
d. Gifts or exclusive discounts on other items with the purchase of tobacco products?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
e. Clothing or other items bearing the name or logo of a tobacco brand?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
f. Email promotions for cigarettes?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			
g. Promotions through social media (WhatsApp, etc.)?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7	
.....	<input type="checkbox"/> -9			

Section H. Knowledge, Attitudes & Perceptions

H01. The next question is asking about smoking tobacco.

Based on what you know or believe, does smoking tobacco cause serious illness?

- YES..... 1
 NO..... 2
 DON'T KNOW -7
 REFUSED..... -9

H02A. H02. Based on what you know or believe, does smoking tobacco cause the following...

	YES ▼	NO ▼	DON'T KNOW ▼	REFUSED ▼
a. Stroke (blood clots in the brain that may cause paralysis)?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
b. Heart attack?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
c. Lung cancer?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
d. Bladder cancer	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
e. Stomach cancer	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
f. Laryngeal cancer	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
g. Pharyngeal cancer.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
h. Premature births	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
i. Bone loss	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
j. Diabetes?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9
k. Emphysema?.....	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> -7.....	<input type="checkbox"/> -9

H03. Based on what you know or believe, does using smokeless tobacco cause serious illness?

- YES..... 1
 NO..... 2
 DON'T KNOW -7
 REFUSED..... -9

H04. Are you in favor of or against the law prohibiting smoking in public places, places open to the public, or shared spaces such as workplaces, restaurants and bars, hotels, guesthouses, airports, healthcare facilities, schools, universities, and vocational training centers?

- IN FAVOR 1
- AGAINST 2
- DON'T KNOW ... -7
- REFUSED..... -9

H05. Would you be in favor of or opposed to increasing taxes on tobacco products?

- IN FAVOR 1
- AGAINST 2
- DON'T KNOW ... -7
- REFUSED..... -9

End Individual Questionnaire

I00. Those are all the questions I have. Thank you very much for participating in this important survey.

I02. [RECORD ANY NOTES ABOUT INTERVIEW:]

I03. [INTERVIEWER: Was anyone else present at the same time as the respondent during the interview?]

- YES 1
- NO 2

Appendix E: Summary of MPOWER Indicators

Table F.1: MPOWER Summary indicators – GATS Senegal, 2023

Indicator	Overall	Sex		Residence	
		Male	Female	Urban	Rural
M: Monitoring tobacco consumption and prevention policies					
Current tobacco use	4.4	8.2	0.8	5.0	3.9
Current tobacco smokers	4.1	7.8	0.4	4.6	3.6
Current cigarette smokers	3.6	7.1	0.2	4.1	3.2
Current manufactured cigarette smokers	2.9	5.8	0.0	3.7	2.2
Current smokeless tobacco use	0.4	0.3	0.5	0.4	0.4
Average number of cigarettes smoked per day ¹	8.3	8.4	*	9.8	6.7
Average age at start of daily tobacco use ²	21.0	21.0	*	20.5	*
Former tobacco smokers among daily smokers	49.1	50.4	*	49.9	48.3
P: Protect people from tobacco smoke					
Exposure to secondhand smoke at home at least once a month	15.0	17.1	12.9	15.6	14.5
Exposure to secondhand smoke at work ³	21.1	23.7	16.1	18.9	25.4
Exposure to secondhand smoke in public places: ^{3,5}					
Government building/offices	15.4	15.8	14.6	15.9	14.6
Healthcare facilities	6.0	4.9	6.8	5.4	6.7
Restaurants	24.8	24.1	26.2	28.3	17.3
Bars and nightclubs	74.8	78.6	*	69.8	*
Public transportation	11.7	12.5	10.7	12.2	11.1
O: Offer help to quit smoking					
I attempted once to quit smoking in the past 12 months ⁴	52.4	52.2	*	53.8	50.6
A healthcare professional recommended I quit smoking ^{4,5}	*	*	*	*	*
I tried to quit smoking using a specific withdrawal method: ⁴					
Pharmacotherapy	1.4	1.5	*	2.5	0.0
Counseling/advice	3.8	4.1	*	6.2	0.8
Interest in quitting smoking ⁶	62.5	63.1	*	60.2	65.2
W: Warn about the dangers of tobacco					
Believes smoking tobacco causes serious diseases	87.2	87.8	86.6	87.5	86.9
Belief that smoking causes stroke, heart attack, and lung cancer	51.2	51.9	50.6	49.8	52.5
Belief that breathing in secondhand smoke causes serious illnesses in non-smokers	85.7	87.1	84.4	90.5	81.6
I noticed anti-smoking information everywhere ⁵	49.7	53.6	45.8	55.1	45.0
I am thinking about quitting smoking because of the health warnings on cigarette packs ^{6,5}	37.5	39.7	*	39.4	35.4
E: Enforce bans on tobacco advertising, promotion and sponsorship					
Have you noticed any advertising, sponsorship, or promotion of cigarettes? ^{7,8}	10.7	11.1	10.4	12.1	9.6
R: Increase tobacco taxes					
Monthly expenditure on cigarettes (CFA franc) ⁷	8,777.8	8,802.4	*	10,363.5	6,700.8
Average cost of 20 manufactured cigarettes (CFA francs) ⁷	849.2	848.8	*	867.9	813.7
The last cigarette purchase was in a store ⁷	26.6	26.6	*	18.3	38.9
Note:					
¹ Among current cigarette smokers.					
² Among respondents aged 20 to 34 who are daily tobacco smokers.					
³ Among those people who visited the place in the last 30 days.					
⁴ Among tobacco smokers in the previous year (includes current smokers and those who quit smoking in the past 12 months).					
⁵ Among those who consulted a healthcare provider in the past 12 months.					
⁶ Among current tobacco smokers.					
⁷ Among current manufactured cigarette smokers.					
⁸ In the last 30 days.					
* Indicates that the estimate is suppressed due to an unweighted sample size less than 25.					

Source: ANSD, GATS 2023

Table F.2: Summary of trends in MPOWER indicators - GATS Senegal, 2015 and 2023

Indicator	2015			2023			Relative change		
	Overall	Male	Female	Overall	Male	Female	Overall	Male	Female
M: Monitoring tobacco use and prevention policies									
Current tobacco use ¹	6.0 (5.1, 7.0)	11.0 (9.4, 12.9)	1.2 (0.7, 2.0)	4.4 (3.6, 5.4)	8.2 (6.8, 9.9)	0.8 (0.4, 1.5)	-25.6**	-25.4**	-37.7
Current tobacco use	5.4 (4.6, 6.3)	10.7 (9.1, 12.5)	0.4 (0.2, 0.8)	4.1 (3.3, 5.0)	7.8 (6.4, 9.5)	0.4 (0.2, 1.1)	-24.0**	-26.8**	14.4
Current cigarette consumption	4.9 (4.1, 5.8)	9.7 (8.2, 11.5)	0.3 (0.1, 0.7)	3.6 (3.0, 4.5)	7.1 (5.8, 8.7)	0.2 (0.1, 0.6)	-25.1**	-26.6**	-18.6
Current consumption of manufactured cigarettes	4.0 (3.2, 4.8)	8.0 (6.5, 9.7)	0.2 (0.1, 0.5)	2.9 (2.3, 3.6)	5.8 (4.6, 7.2)	0.0 (0.0, 0.2)	-27.1**	-27.4**	-73.4**
Average number of cigarettes smoked per day ²	9.4 (8.0, 10.8)	9.5 (8.0, 10.9)	*	8.3 (7.2, 9.4)	8.4 (7.2, 9.6)	*	-11.8	-11.6	*
Average age of tobacco use initiation ³	17.2 (16.2, 18.2)	17.3 (16.2, 18.3)	*	21.0 (19.4, 22.6)	21.0 (19.4, 22.7)	*	22.0**	21.9**	*
Former smokers among daily smokers	50.6 (44.8, 56.3)	51.2 (45.3, 57.0)	*	49.1 (41.2, 57.1)	50.4 (42.6, 58.3)	*	-2.9	-1.4	*
P: Protect people from tobacco smoke									
Exposure to secondhand smoke at home at least once a month	21.6 (19.4, 24.0)	24.5 (21.5, 27.8)	19.0 (16.8, 21.4)	15.0 (13.1, 17.1)	17.1 (14.6, 19.9)	12.9 (10.8, 15.5)	-30.7**	-30.2**	-31.8**
Exposure to secondhand smoking in the workplace ⁵	30.4 (26.5, 34.6)	33.0 (28.4, 37.9)	25.1 (19.4, 31.7)	21.1 (17.4, 25.4)	23.7 (18.8, 29.3)	16.1 (11.3, 22.3)	-30.6**	-28.3**	-36.0**
Exposure to secondhand smoke in public places: ^{4,5}									
Government buildings/offices	24.2 (20.9, 27.9)	26.8 (22.3, 31.7)	20.3 (15.5, 26.0)	15.4 (12.1, 19.2)	15.8 (11.9, 20.8)	14.6 (10.3, 20.3)	-36.6**	-40.9**	-27.9
Healthcare facilities	10.2 (8.3, 12.4)	11.7 (8.6, 15.6)	9.1 (7.0, 11.8)	6.0 (4.6, 7.9)	4.9 (3.1, 7.7)	6.8 (4.9, 9.4)	-40.8**	-58.0**	-25.0
Restaurants	28.8 (23.7, 34.5)	27.0 (21.0, 34.1)	32.9 (24.9, 42.0)	24.8 (19.5, 30.9)	24.1 (18.3, 31.1)	26.2 (17.4, 37.3)	-13.9	-10.8	-20.4
Bars or nightclubs	79.3 (67.0, 87.8)	83.8 (67.4, 92.9)	66.4 (44.4, 83.1)	74.8 (56.8, 87.0)	78.6 (56.5, 91.3)	-	-5.7	-6.2	-
Public transportation	14.3 (12.6, 16.3)	17.5 (14.9, 20.5)	10.9 (9.1, 13.1)	11.7 (9.8, 13.8)	12.5 (10.0, 15.5)	10.7 (8.3, 13.7)	-18.6**	-28.5**	-2.4
O: Offer help to quit smoking									
Has attempted once to quit smoking in the past 12 months ⁵	59.6 (52.4, 66.5)	59.9 (52.5, 67.0)	*	52.4 (42.7, 62.0)	52.2 (42.1, 62.1)	*	-12.1	-12.9	*
Was advised by a healthcare provider to quit smoking ^{6,7}	50.9 (34.4, 67.3)	51.9 (34.6, 68.7)	*	-	-	*	*	*	*
Tried to quit smoking using a specific withdrawal method: ⁵									
Pharmacotherapy	10.5 (5.8, 18.2)	10.8 (6.0, 18.7)	*	1.4 (0.3, 6.9)	1.5 (0.3, 7.3)	*	-86.4**	-86.0**	*
Counseling/advice	4.8 (2.1, 10.5)	4.9 (2.2, 10.8)	*	3.8 (1.5, 9.7)	4.1 (1.6, 10.2)	*	-19.5	-17.3	*
Interest in quitting smoking ⁷	79.8 (73.5, 85.0)	80.3 (73.7, 85.6)	*	62.5 (51.8, 72.2)	63.1 (51.6, 73.3)	*	-21.7**	-21.4**	*

Source: ANSD, GATS 2023

Table F.2 --- CONTINUED

Indicator	2015			2023			Relative change		
	Overall	Male	Female	Overall	Male	Female	Overall	Male	Female
W: Warn against the dangers of tobacco									
Belief that smoking causes serious illnesses	93.9 (92.7, 94.8)	94.2 (92.7, 95.3)	93.6 (92.1, 94.8)	87.2 (85.2, 88.9)	87.8 (85.2, 90.0)	86.6 (84.3, 88.7)	-7.1**	-6.8**	-7.4**
Belief that smoking causes strokes, heart attacks, and lung cancer	61.4 (58.8, 63.9)	62.3 (59.3, 65.3)	60.4 (57.3, 63.4)	51.2 (48.5, 54.0)	51.9 (48.5, 55.2)	50.6 (47.3, 53.9)	-16.5**	-16.8**	-16.3**
Belief that breathing in other people's smoke causes serious illnesses	91.9 (90.6, 93.0)	92.3 (90.6, 93.7)	91.5 (89.7, 92.9)	85.7 (84.1, 87.2)	87.1 (85.1, 88.9)	84.4 (82.3, 86.3)	-6.7**	-5.6**	-7.7**
Noticed information about the fight against smoking everywhere ⁵	46.6 (44.1, 49.0)	47.6 (44.6, 50.5)	45.7 (42.6, 48.8)	49.7 (47.0, 52.4)	53.6 (50.2, 57.1)	45.8 (42.7, 49.0)	6.7	12.8*	0.4
Thought about quitting smoking because of the health warnings on cigarette packs ^{7,8}	31.5 (25.2, 38.7)	31.9 (25.4, 39.2)	*	37.5 (28.4, 47.7)	39.7 (30.3, 49.9)	*	19.0	24.3	-
E: Enforce bans on tobacco advertising, promotion, and sponsorship									
Noticed an advertisement, sponsorship, or promotion for cigarettes ⁵	20.6 (18.7, 22.7)	25.1 (22.4, 27.9)	16.5 (14.4, 18.8)	10.7 (9.2, 12.5)	11.1 (9.2, 13.3)	10.4 (8.6, 12.5)	-48.0**	-55.8**	-36.9**
R: Increase tobacco taxes									
Average expenditure on cigarettes per month (<i>CFA francs</i>) ^{8,9}	8,565.8 (7,194.2, 9,937.4)	8,525.7 (7,146.7, 9,904.6)	*	8,777.8 (6,244.9, 11,310.7)	8,802.4 (6,245.9, 11,358.9)	*	2.5	3.2	*
Average cost of 20 manufactured cigarettes (<i>CFA francs</i>) ^{8,9}	700.6 (641.8, 759.4)	699.0 (638.3, 759.7)	*	849.2 (658.7, 1039.7)	848.8 (657.2, 1040.3)	*	21.2	21.4	*
The last cigarette purchase was in a store ⁷	32.1 (24.3, 41.1)	31.0 (23.3, 39.8)	*	26.6 (17.4, 38.5)	26.6 (17.3, 38.5)	*	-17.1.	-14.1.	*
¹ Current tobacco use includes current smoking, current smokeless tobacco use, or current use of heated tobacco products (included in the 2023 questionnaire but not in the 2015 questionnaire). ² Among adults who currently smoke cigarettes daily. ³ Among adults aged 20 to 34 who have ever smoked tobacco daily. ⁴ Among those who visited the location in the past 30 days. ⁵ Among adults who smoked tobacco in the past year (including adults who smoked tobacco and those who quit in the past 12 months). ⁶ Among those who consulted a healthcare provider in the past 12 months. ⁷ Among adults who currently smoke tobacco. ⁸ Among adults who currently smoke manufactured cigarettes. ⁹ Data on costs from GATS Senegal 2015 have been adjusted for inflation for direct comparison with 2023 using the inflation rate for average consumer prices from the International Monetary Fund's World Economic Outlook database. ⁵ In the last 30 days. * Indicates that the estimate is suppressed due to an unweighted sample size less than 25. ** p<0.05 Results of prevalence estimates/means and 95% CIs are rounded to the nearest decimal (0.1). Relative changes are calculated from unrounded prevalence estimates and may differ if calculated from the rounded prevalence estimates in this table.									

Source: ANSD, GATS 2023