

The Global Tobacco Surveillance System (GTSS)

Lessons Learned Conducting School-Based Surveys in Over 130 Countries

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Abstract

The Global Tobacco Surveillance System (GTSS) has collected data on youth and adult tobacco use since 1999. Over 130 countries have conducted components of the GTSS among over 2 million students. The GTSS includes data collection through three surveys: the Global Youth Tobacco Survey (GYTS) for youth, and the Global School Personnel Survey (GSPS) and the Global Health Professional Survey (GHPS) for adults. A key strength of GTSS is consistency in sampling procedures, core questionnaire items, field procedures, and data analysis across all survey sites. GTSS represents the most comprehensive tobacco surveillance system ever developed and implemented. Countries can use GTSS to monitor tobacco use among youth and adults; guide development, implementation, and evaluation of national tobacco prevention and control programs; and allow comparison of tobacco-related data at national, regional, and global levels. This paper will present select lessons learned during nearly 7 years of school-based survey activities.

In 1998, the World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC) convened a meeting of tobacco control experts to discuss the need for a global tobacco surveillance system. Two issues emerged at the meeting. First, adult and youth behavior surveillance systems exist in many developed countries, and many of these systems collect information about tobacco use. However, few developing countries support such surveillance systems, and population-based information about tobacco use is rare. Second, existing surveillance systems lack of common methodology, consistent questionnaire content, and address different populations of interest. These differences make comparisons of key tobacco indicators across countries difficult.

To bridge this information gap and support tobacco control at the global level, WHO, CDC, and the Canadian Public Health Association (CPHA) developed the Global Tobacco Surveillance System (GTSS) to assist all 192 WHO Member States in collecting data on youth and adult tobacco use. The GTSS provides a flexible system that includes common data items but allows countries to include important, unique information at their discretion. The GTSS also uses a common survey methodology, similar field procedures for data collection, and similar data management and processing techniques.

The GTSS includes data collection through three surveys: the Global Youth Tobacco Survey (GYTS) for youth, and the Global School Personnel Survey (GSPS) and the Global Health Professional Survey (GHPS) for adults. In March 1999, 11 countries (Barbados, China, Fiji, Jordan, Poland, Russian Federation, South Africa, Sri Lanka, Ukraine, Venezuela, and Zimbabwe) pilot tested the first GYTS in schools with grades that contain students 13-15 years old. All 11 countries completed surveys during 1999.

After this initial success, many countries asked WHO and CDC for assistance to conduct GYTS. GYTS has been conducted in the majority of the world's developing countries, including many areas that have recently experienced political instability and military conflicts. Kosovo, the Republic of Serbia, the Federation of Bosnia and Herzegovina, Afghanistan, Iraq, the Gaza Strip and West Bank, Nepal, and several countries impacted by the Asian tsunami such as the Maldives, Sri Lanka, and Indonesia are just a few of the recent successful survey areas. As of 2005, 132 countries had completed GYTS and about 30 countries are in the field collecting data or have been recently trained to implement GYTS. Twenty-five countries have completed a repeat GYTS, and about 20 others are in the field with their repeat GYTS during the 2005-2006 academic year.

The GSPS is conducted in tandem with the GYTS among school personnel in schools selected to participate in the GYTS. The GSPS has been conducted in 34 countries and about 40 countries will conduct GSPS in the 2005-2006 academic year.

The GHPS collects tobacco use information from 3rd year dental, nursing, medical, and pharmacy students. In 2005, ten countries pilot tested the GHPS. Following the initial release of findings from the GHPS, many countries approached CDC for technical assistance to conduct the survey among health professional students. Nearly 40 countries have been trained in the second cohort of GHPS participants. Many countries will conduct GHPS in multiple health professional disciplines, thus over 100 GHPS will be completed during the 2005-2006 academic year in dental, medical, nursing, and pharmacy schools.

The paper will focus on lessons learned in the process of conducting school-based surveys from the perspective of the coordinating agencies, research administrators, and end-users of data collected by the GTSS. We will discuss:

- Challenges developing methodologies applicable to all 192 WHO Member States
- Collaboration among governmental, non-governmental, and academic partners
- Budgetary concerns and sustainability of a global surveillance system
- Dissemination of findings in country, regional, and global reports
- Release and promotion of public use data for scientific research