

Awareness about Cigarettes and Other Tobacco Products Act (COTPA) in Kurnool, Andhra Pradesh – A cross sectional study**G. Manjunath¹, V. R. Anusha², K. Divya³**

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ABSTRACT:

Background: Tobacco is major epidemic in country like India which requires legislation to monitor its usage and COTPA is one such legislation. So present study was done to know the awareness about COTPA in India which is very less documented in previous studies.

Materials and Methods: A cross sectional questionnaire based study was done in Kurnool urban population with cluster random sampling methodology with a sample size of 325. Information was gathered using schedule interview method and analysed using SPSS.

Results: Overall awareness about COTPA was 54% and 100% are aware that tobacco leads to some kind of health problems. As age increases awareness level was increasing 4 times (OR 4.3) and also those with better education had 10 times increase in awareness level (OR 9.9). Those belonging to better occupation also showed increased awareness upto 4 times (OR 4.1) compared to their counterparts.

Conclusion: Every effort should be made to increase awareness among younger generation, less educated and those in semi-skilled and unskilled professions.

Keywords: Awareness, COTPA, Kurnool, Legislation, Tobacco.

INTRODUCTION

Portuguese introduced Tobacco in India hardly 400 years ago during Mughal Empire. Mainly due to a melange of diverse cultures in India, tobacco rapidly became a part of socio cultural milieu in various communities. India ranks 2nd in the world after china in consumption of tobacco products ¹.

There is 35% prevalence of tobacco use among adults (15 years and above). The prevalence of overall tobacco use among males and females is 48 percent and 20 percent respectively. Nearly two in five (38%) adults and one in four (25%) adults in rural and urban areas use tobacco in some form respectively².

Tobacco is the only legally available consumer product which kills people when it is used entirely as intended³. In India, beedi smoking is the most popular form of tobacco smoking (54%); cigarette smoking is the second most popular form of tobacco smoking (16%); while

tobacco chewing accounts for 30% of the total consumption. The major chewing form of tobacco is paan with tobacco. Dry tobacco, areca nut preparations such as paan masala, gutka, khaini and mawa are also popular and highly addictive⁴.

India has played a major role in global tobacco control. With the growing evidence of harmful and hazardous effects of tobacco, various legislations and comprehensive tobacco control measures were enacted by the Government of India ⁵.

Government of India is one of the first countries to ratify the WHO Framework Convention on Tobacco Control (WHO FCTC), which enlists key strategies for reduction in demand and reduction in supply of tobacco. Some of the demand reduction strategies include price and tax measures and non-price measures (statutory warnings,

comprehensive ban on advertisements, promotion and sponsorship, tobacco product regulation etc). The supply reduction strategies include combating illicit trade, providing alternative livelihood to tobacco farmers and workers and regulating sale to and by minors⁶. Parliament enacted the Cigarettes and Other Tobacco Products Act (COTPA), in 2003⁷. Act included prohibition of smoking in public places, sale of tobacco products to and by minor, advertisements of tobacco products, ban of tobacco products within 100 meters of all educational institutions and compulsory display of health warnings on tobacco products. Law regulates tobacco products for its tar and nicotine content by testing periodically. However after a long legal battle and interventions by the civil society, Revised Smoke-free Rules came into effect from 2 nd October, 2008⁸. Not many previous studies are there which enlighten the people about there is an act which is safeguarding and monitoring tobacco and other products usage in the country. The present study was done with an aim to know the awareness of COTPA in adult population in Kurnool.

MATERIALS AND METHODS

Present cross sectional study was carried out in Kurnool urban population and ethical approval was obtained from institutional review board (IRB number: GPRDCH/IEC/2015/020). Kurnool is located at distance of 210 km from Hyderabad and is famous for many historical places in surrounding region⁹.

The study was carried out between February 2016 to April 2016 and the target population was adults above 18 years residing in Kurnool city. Total sample size of present study was 320 which was drawn from larger population base by cluster sampling method and subjects were randomly picked from Kurnool municipal corporation area. Sample size is arrived based on pilot study which show awareness of 35% with an allowable error of 5%

Before actual study was started, a pilot study was conducted to know the feasibility of the study and to check the consistency and validity of questionnaire. Pilot study was conducted involving 25 subjects in a particular ward and were interviewed by single interviewer and same subjects were re-interviewed by another interviewer. Finally 50 sets of completed questionnaire were available for analysis. Questionnaire used was first translated from English into Telugu by one bilingual (English to Telugu translator) individual whose mother tongue was Telugu and back translated into English by another individual who was expert in Telugu to English translation.

Selected households were visited personally and reason for the study was explained. A total of 320 subjects were interviewed who were above the age group of 18 present in the house at the time of visit. Subjects who participated in the study were allowed a few minutes to look over the questionnaire and ask any questions concerning the contents.

The questionnaire consists of questions related to demographic data which include age, gender, education and occupation. It also consists of questions relating to knowledge to assess awareness about COTPA law in India, tobacco laws in India, about penalty, about ban of sales on tobacco products, health warnings its harmful effects on various organs.

After study completion data was entered into Microsoft excel 2007 package and subjected to statistical analysis using SPSS 15

RESULTS

In this study total 325 adults above 18 years participated and among them nearly 59.6% were male. When it comes to age group 67.7% belonged to age group of 18 to 45 years and least was found with age group of above 60 years. Regarding education many are literate with nearly 93% of study population have some form of education. Despite being literate majority of population from present study belong to clerical, skilled, semiskilled and

unskilled working category totaling to 79.5% (Table 1)

Table 1: Sociodemographic characteristics

Age group	Number	Percentage
18 – 30	98	30.15
31 – 45	121	37.23
46 – 60	73	22.46
60 & above	33	10.15
Gender		
Male	193	59.38
Female	132	40.62
Education		
Professionals	23	7.07
Graduates or post graduates	35	10.76
Intermediate	78	24
High school	84	25.84
Middle school	49	15.07
Primary school	36	11.07
illiterate	20	6.15
Occupation		
Profession	13	4
Semi – profession	17	5.23
Clerical,shop owner ,farmer	85	26.15
Skilled worker	58	17.84
Semi skilled worker	53	16.30
Unskilled worker	61	18.76
Unemployed	38	11.70

In this present study 53.3% were aware about COTPA legislation and also 40.3% were aware about fact that there is penalty for violation of rules. Among them 31% were aware about ban on selling tobacco products near educational institutions and 24% to minors. 22.5% were aware about harmful effects of second hand smoke and very less people 4.61% were aware about constituents of tobacco displayed on the pack. (Table – 2)

Regarding health problems associated with tobacco products astounding 100% were aware about harmful effects. Nearly 62.15% said it leads to cancer, followed by heart problems 43.3%, respiratory problems 35%, oral problems 21.5% and tuberculosis 16.92%. (Table – 2)

Statistically significant difference was found among 18-30 and 30 to 60 years age groups and found that awareness was more among age group of 30 to 60 years with odds ratio of 4.3, 95% CI 3.2 to 7.41. Graduates / post graduates were 10 times more aware than

primary school/illiterates with regard to COPTA legislation odd's ratio is 9.9 and 95% CI 7.3 to 18.4. Professional / semi - professionals are 4 times more aware than semi-skilled / unskilled workers with odds ratio of 4.1 and CI 2.6 to 7.7 (Table 3)

Table 2: Awareness about COPTA and tobacco associated health problems

Sl .no	Awareness COPTA and health problems	Number	Percentage
1	Awareness about COPTA legislation	173	53.30%
2	Awareness about penalty for violation of rules	131	40.30%
3	Awareness about ban on selling tobacco products near educational institutions,	101	31.01%
4	Awareness about ban on selling tobacco products to minors	78	24%
5	Awareness about health warning on tobacco products	89	27.38%
6	Awareness of tobacco related health problems	325	100%
	• Cancers	202	62.15%
	• Respiratory problems	115	35.38%
	• Heart problems	140	43.07%
	• Oral problems	70	21.53%
	• Tuberculosis	55	16.92%
7	Awareness about harmful effect of second hand smoke	73	22.46%
8	Awareness about tobacco products displayed on the pack	15	4.61%

Table 3: Awareness of COPTA and odd's ratio

	Odd's ratio	Confidence interval	P value
Age group			
• 18 – 30	R	3.2 – 7.4	0.003
• 30 – 60 years	4.3		
Education			
• Illiterate	R	7.3 – 18.4	0.0002
• Post graduation/graduation and above	9.9		
Occupation			
• Semi skilled/unskilled worker	R	2.6 – 7.7	0.000
• Profession / semi profession	4.1		

DISCUSSION

Awareness level regarding COTPA is more among male population which is similar to other studies done by Rao et al¹⁰. Reason for

more awareness among male could be based on fact that more number of male population have participated in the study. Further it needs to be emphasized that both male and female population need to be educated about for proper implementation of legislation.

Nearly 54% of population is aware about tobacco related legislation which is good and similar to other studies done by Rao et al¹⁰ and Sharma et al¹¹. There is need for further educating the people about their right on No smoking zones in public areas and also usage of this particular legislation for control of using tobacco related products.

In the present study surprising 100% of population is aware about harmful effects of tobacco and they are in agreement that it leads to some health problem over a period of time. The results are in contrast to study done in Kolkata where 80% of the population had no idea about adverse effect of tobacco¹². But results are very similar to other studies done in Gujarat and Telangana^{10, 13}. Tobacco products leading to various systemic health problems results are similar to other studies done previously^{14, 15}. In the present study awareness level of second hand smoke is low this was similar to other studies done previously^{17, 18}. Contrasting results were found in study done by Sharma et al¹¹. Awareness on COTPA increases statistically with age, higher education and better profession which is similar to other studies done previously^{10, 11}. The possible reason for increased awareness could be as age increases people understand the problems and will be up to date with current affairs on what new legislations are brought in the country. Awareness level also increases with increased education and better profession may be because of interest shown in updating knowledge through newspapers and television which shows messages about tobacco products. Also there is need to increase awareness about tobacco products and its legislation among illiterates and those with less education in order to make the existing legislation more powerful and there is a need

for every citizen to know about tobacco legislation.

CONCLUSION

More than half of the population has good awareness about COTPA, its rules penalties involved and where tobacco products should not be sold. Even after knowing the rules there are certain limitations about who exactly is monitoring the tobacco products sale and usage is still not clear. Also there is need for more emphasis on whom to approach in case someone is violating the rules framed by government. Study also highlights need for creating more awareness programs so that people with less education and who are semi-skilled, unskilled and illiterate know about existing legislation.

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