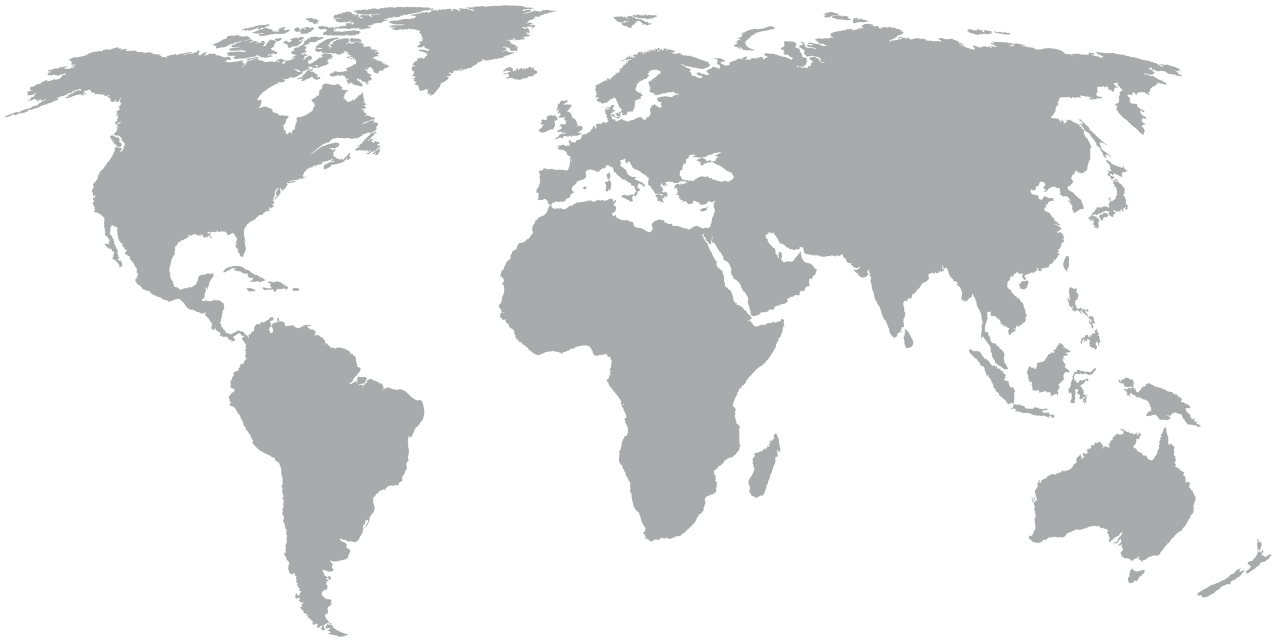
Global Adult Tobacco Survey (GATS)



Implementing Agency Selection Guidelines

Global Adult Tobacco Survey (GATS)
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September 2020

Global Adult Tobacco Survey (GATS)
Comprehensive Standard Protocol

GATS Questionnaire
Core Questionnaire with Optional Questions
Question by Question Specifications

GATS Sample Design
Sample Design Manual
Sample Weights Manual

GATS Fieldwork Implementation
Field Interviewer Manual
Field Supervisor Manual
Mapping and Listing Manual

GATS Data Management
Programmer's Guide to General Survey System
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Country Report: Tabulation Plan and Guidelines
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Data Release Policy
Data Dissemination: Guidance for the Initial Release of the Data

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GATS Collaborating Organizations

- United States Centers for Disease Control and Prevention (CDC)
- CDC Foundation
- Johns Hopkins Bloomberg School of Public Health (JHSPH)
- RTI International
- World Health Organization (WHO)

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Disclaimer: The views expressed in this manual are not necessarily those of the GATS collaborating organizations.

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1. Introduction

Tobacco use is a major preventable cause of premature death and disease worldwide, with approximately 1.4 billion people age 15 years or older using tobacco[1]. Furthermore, more than 8 million people die each year due to tobacco-related illnesses[2]. If current trends continue, tobacco use may kill a billion people by the end of this century, and it is estimated that more than three quarters of these deaths will be in low- and middle-income countries[3]. An efficient and systematic surveillance mechanism is essential to monitor and manage the epidemic.

The ***Global Adult Tobacco Survey*** (GATS), a component of Global Tobacco Surveillance System (GTSS), is a global standard for systematically monitoring adult tobacco use and tracking key tobacco control indicators. GATS is a nationally representative household survey of adults 15 years of age or older using a standard core questionnaire, sample design, and data collection and management procedures that were reviewed and approved by international experts. GATS is intended to enhance the capacity of countries to design, implement and evaluate tobacco control interventions.

In order to maximize the efficiency of the data collected from GATS, a series of manuals has been created. These manuals are designed to provide countries with standard requirements as well as several recommendations on the design and implementation of the survey in every step of the GATS process. They are also designed to offer guidance on how a particular country might adjust features of the GATS protocol in order to maximize the utility of the data within the country. In order to maintain consistency and comparability across countries, following the standard protocol is strongly encouraged.

GATS manuals provide systematic guidance on the design and implementation of the survey.

1.1 Overview of the Global Adult Tobacco Survey

GATS is designed to produce national and sub-national estimates among adults across countries. The target population includes all non-institutionalized men and women 15 years of age or older who consider the country to be their usual place of residence. All members of the target population will be sampled from the household that is their usual place of residence.

GATS uses a geographically clustered multistage sampling methodology to identify the specific households that Field Interviewers will contact. First, a country is divided into Primary Sampling Units, segments within these Primary Sampling Units, and households within the segments. Then, a random sample of households is selected to participate in GATS.

The GATS interview is composed of two parts: *Household Questionnaire* and *Individual Questionnaire*. These questionnaires are administered using an electronic data collection device.

[1] World Health Organization. WHO report on the global tobacco epidemic, 2019: Offer help to quit tobacco use. Geneva, Switzerland: World Health Organization; 2019 https://apps.who.int/iris/bitstream/handle/10665/326043/9789241516204-eng.pdf?ua=1

[2] GBD 2017 Risk Factor Collaborators. Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks for 195 countries and territories, 1990-2017: a systematic analysis for the Global Burden of Disease Study 2017. Seattle, WA: Institute for Health Metrics and Evaluation; 2018.

[3] Mathers, C.D., and Loncar, D. Projections of Global Mortality and Burden of Disease from 2002 to 2030. *PLoS Medicine*, 2006, 3(11):e442.

The GATS interview consists of two parts: the *Household Questionnaire* and the *Individual Questionnaire.* The *Household Questionnaire* (household screening) and the *Individual Questionnaire* (individual interview) will be conducted using an electronic data collection device.

At each address in the sample, Field Interviewers will administer the *Household Questionnaire* to one adult who resides in the household. The purposes of the *Household Questionnaire* are to determine if the selected household meets GATS eligibility requirements and to make a list, or roster, of all eligible members of the household. Once a roster of eligible residents of the household is completed, one individual will be randomly selected to complete the *Individual Questionnaire*. The *Individual Questionnaire* asks questions about background characteristics; tobacco smoking; electronic cigarettes; smokeless tobacco; cessation; secondhand smoke; economics; media; and knowledge, attitudes, and perceptions about tobacco.

1.2 Use of These Guidelines

The purpose of this document is to provide guidance for the selection of an in-country agency to conduct data collection for GATS.

1.3 Partners and Partner Roles

Partners and partner roles in GATS include the following:

- National governments provide leadership and coordination at the country level;
- World Health Organization (WHO) provides global, regional, and in-country leadership as well as monitoring of global tobacco control policy implementation;
- United States Centers for Disease Control and Prevention (CDC), a WHO Collaborating Center for Global Tobacco Surveillance, provides technical assistance for implementation of the surveillance system;
- Johns Hopkins Bloomberg School of Public Health (JHSPH) provides technical assistance on data analysis and reporting;
- RTI International provides training and technical assistance in electronic data collection; and
- CDC Foundation provides resources and program support.

Funding for GATS is provided by the Bloomberg Initiative to Reduce Tobacco Use, a program of Bloomberg Philanthropies; the Bill & Melinda Gates Foundation; and various governmental agencies.

2. Criteria to Select the GATS Implementing Agency

In most countries that have previously conducted GATS, the GATS implementing agency (IA) has been either the national statistical office (NSO) or a national surveillance agency (e.g., census bureau). In selecting the IA, the criteria listed below should be considered and followed.

2.1 Experience

Partnership with the Ministry of Health (MoH): It is desirable that the agency has experience or has expressed interest to partner with the MoH.

National Household Surveys: The agency should have demonstrated experience in conducting large-scale, nationally representative household surveys, preferably public health surveys (i.e., National Health Surveys, Demographic and Health Surveys, Reproductive Health Surveys), income, labor and expenditure surveys, international surveys, etc.

2.2 Infrastructure and Human Resources

Infrastructure: The agency should have a central headquarters where the overall project is coordinated and managed. In addition, sufficient infrastructure and resources should be available for training activities, fieldwork preparation, implementation, networks and data management procedures at sub-national and local levels.

Information Technology Support: An informatics department to provide support for software and hardware needs, data management procedures, and other related activities.

Human Resources: A dedicated team of survey coordinators, supervisors, interviewers and IT teams, and availability of key personnel and their time to engage in this initiative is essential.

Dedicated GATS Project Manager: The GATS implementation will require leadership, oversight, coordination, and management of the entire process. The implementing agency should provide a dedicated project manager to liaise with GATS partners and oversee the entire GATS process from initial preparations of survey to data release. The individual serving in this position should have relevant experience in managing and overseeing large-scale, national household surveys and should be capable of managing teams and resources, and making decisions. This position is important, and the IA may consider assigning one of its staff to this position, or if possible, recruit using its internal recruiting procedures.

Communication and Connectivity Facilities: Communication between central and regional survey teams is essential and must be operational, permitting frequent communication by telephone, fax, and e-mail. The agencies should have internet connections between central offices, and regional and local staff, which allows for quick and secure data transfer. Remote or distant offices may need other necessary communication and connectivity facilities or equipment, including telephones or computers.

Administrative Support: The agency should provide administrative and management staff and support system for the entire course of the survey.

2.3 Coverage

National and/or Sub-National: The implementing agency should have the capacity to undertake national or sub- national surveys as per the country GATS sample design directly and/or through a contractor.

3. Capability and Capacity to Implement Standard Procedures

Generally, agencies that implement large-scale surveys have standardized procedures for planning and implementing surveys, including staff training, fieldwork and data management, and record keeping and reporting. In addition to these capacities and given the global standards of GATS, the agency should also have the willingness and ability to comply with the process and procedures set forth in the GATS Comprehensive Standard Protocol (outlined in the *GATS Process Chart* in *Section 6.1*). Additionally, to ensure a sustainable approach, the implementing agency should have the capacity to repeat the survey. Specific details regarding standardized procedures are listed below.

Sample Frame and Sample Design: The agency should have access to or ability to generate an updated and most recent national sampling frame that covers the entire country. The agency should also be able to select and implement a probability sample in accordance with guidelines outlined in the *GATS Sample Design Manual*.

Availability of Mapping and Listing Information: The agency must have access to geographical, cartography and census data, not only to design and draw the sample, but also to provide the field staff with addresses or maps to households and neighborhoods, traveling alternatives, routes and itineraries.

Training: The agency should either have a training department or access to training facilities. The agency should also have experience in training all personnel involved in survey fieldwork and implementation.

Translation Capacity: The implementing agency should have the capacity to translate the questionnaire and key manuals and guidelines either internally or through a contractor.

Quality Assurance: Quality assurance must occur at all levels of GATS, including pre-data collection, data collection and management, and post-data collection. Detailed guidance on quality assurance processes and procedures for different stages of the GATS process is available in the *GATS Quality Assurance: Guidelines and Documentation* manual. The implementing agency should be prepared to comply with all guidelines set forth in that manual.

Confidentiality Policies: All personnel in contact with respondents' data should preserve the confidentiality of those data in all ways. Access to all files in paper and electronic format may be granted only with appropriate authorization.

Data Management: The agency should be prepared to comply with all the requirements set forth in the *GATS Data Management Implementation Plan*. The agency should identify and assign staff knowledgeable and capable of using at least one of the statistical software packages, such as SPSS, SAS, or STATA. In addition to familiarity with statistical packages, the agency should have its staff capable of efficiently learning new software systems such as the General Survey System (GSS), which is the software used to implement GATS using electronic handheld devices. The GSS contains modules that allow for data collection, management, and aggregation. Using these modules, the agency must have the ability to securely store and access survey data in a manner that is most appropriate to the country's specific IT context and analysis needs.

Data Analysis: A statistical analysis plan is outlined in the *GATS Analysis and Reporting Package*. The agency should have the capacity to operate internationally acceptable statistical software for data analysis such as SPSS, SAS, or STATA. The GATS partners will be available to provide technical support.

GATS Data Release Policy: The implementing agency should review and agree to the *GATS Data Release Policy*. The policy addresses important information regarding data collection and processing, and conditions regarding release of the GATS data.

4. Practical and Administrative Considerations

Problem Solving: The implementing agency should have the necessary planning and management approaches to overcome challenges and ensure successful and timely implementation and completion of the survey.

Contract Administration: The ability to administer contracts efficiently is critical to the timely implementation of the survey. The implementing agency should be able to enter into international contracts, including those that allow for hiring staff, procuring equipment and receiving foreign funds from GATS partners.

Budget and Funding Process: The implementing agency should have the ability to develop budget proposals and have the mechanisms to receive and process funding from donor agencies or GATS partners. To the extent possible, the agency should be able to receive funds in United States dollars (USD). Appropriate documentation should be submitted with the GATS proposal certifying the existence of a USD bank account that can be used to receive funds. The GATS funding disbursements are linked to the receipt of deliverables. The agency should be prepared to produce the appropriate technical and financial reports in a timely manner required for the release of funds. Funding disbursements are not released until agreed upon deliverables are received by the appropriate partners. Further details are available in the *GATS Proposal Development Guidelines*.

Timeline and Availability: An approximate timeframe of 8 to 12 months is required from the start of pretesting to the completion of final reports and data release. The agency should commit to conducting and concluding the survey within the agreed and specified time.

5. Selection of the GATS Implementing Agency

Using the criteria contained in these guidelines and in consultation with GATS partners, the MoH will nominate the IA that is most suitable for survey implementation. The nomination of the IA will need to be confirmed by the MoH in a formal letter to the GATS Partners. In addition, the IA should also confirm its interest and commitment to implement the survey in a formal communication to MoH and GATS partners. Please see the templates for letters in the *GATS Country Engagement Process*. Final approval of an agency as an IA will be made by the WHO Contract Review Committee.

6. Resources

6.1 GATS Process Chart

GATS Process Chart

Global Adult Tobacco Survey

The Global Adult Tobacco Survey (GATS) is the global standard to systematically monitor adult tobacco use (smoking and smokeless) and tracking key tobacco control indicators.

GATS is a nationally representative survey, using a consistent and standard protocol across countries. GATS enhances countries' capacity to design, implement, and evaluate tobacco control programs.

It will also assist countries to fulfill their obligations under the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) to generate comparable data within and across countries. WHO developed MPOWER, a technical package of selected demand reduction measures contained in the WHO FCTC:

mpower

Monitor tobacco use and prevention policies
Protect people from tobacco smoke
Offer help to quit tobacco use
Warn about the dangers of tobacco
Enforce bans on tobacco advertising, promotion, and sponsorship
Raise taxes on tobacco

Process

1 Indicates technical workshop series

Introductory Country Engagement
• Country commitment

GATS Implementing Agency Selection
• National statistics office/census agency

GATS Orientation 1
• Technical • Process • Proposal

Proposal Submission, Review & Funding
• Technical and budget reviews

Pretest Training & Implementation 2

GATS Implementing Agency READY
• Questionnaire adapted and finalized
• Sample design approved
• Mapping and listing completed
• Handhelds received and programmed

Full Survey Training 3
• Fieldwork • Data Management

FIELDWORK & DATA MANAGEMENT

Fieldwork (6 to 13 weeks)

Data Management
• Quality assurance
• National data aggregation

Sample Weighting, Quality Assurance, Analysis & Reporting 4
• Sample weighting approval
• Fact Sheet and tables adaptation
• Data analysis and tabulation
• Country Report writing

RELEASE & DISSEMINATION 5
• Fact Sheets • Executive Summary
• Country Report • Public Use Data Set

Data to Action

Guidelines and Protocol

Implementation Guidelines
Country Engagement Process
Implementing Agency Selection Guidelines
Proposal Development Guidelines
Implementation Instructions

Comprehensive Standard Protocol

GATS Questionnaire
a. Core Questionnaire with Optional Questions
b. Question by Question Specifications

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