

Introduction

Public Health Impact

Tobacco use is one of the chief preventable causes of death in the world. The World Health Organization attributes some 4 million deaths a year to tobacco smoking and the figure is expected to raise to 10 million by the year 2030. By that time, 70% of those deaths will occur in developing countries. Recent trends indicate rising smoking prevalence rates and earlier initiation among children and adolescents.

Most people begin to use tobacco before the age of 18. If these patterns continue, tobacco use will result in the deaths of 250 million children and adolescents who are alive today, many of whom are in the developing countries.

Global Youth Tobacco Survey

In recent years, WHO, UNICEF, G8 Ministers of the Environment, ministers responsible for youth, and many national health agencies have called for concerted action against tobacco use by young people. However, comprehensive tobacco prevention control information on young people is not available for most developing countries. To address this data gap, in 1998, the World Health Organization in collaboration with the US Centre for Disease Control and Prevention initiated a global surveillance project on tobacco use among young people that would allow for cross comparison.

GYTS is school-based and self-administered; it uses common methodology and protocol for collecting data on tobacco across all countries. The purpose of GYTS was to enhance the capacity of countries to monitor tobacco use among of tobacco prevention and control programmes and policies.

Tobacco Use In Dominica

Dominica is one of the PAHO affiliated Islands and was invited to participate in the GYTS. Dominicans like other nationalities use tobacco, but information on the exact situation as it relates to public health impact of tobacco use is not available.

The following is evident:

Tobacco products are imported and sold locally. Everyone who desires to smoke has access to various brands and types of cigarettes. Tobacco was once grown and used to produce cigarettes and dried for pipe smoking. Presently, the factory continues to produce cigarettes but imports the tobacco. Cigars are imported from Cuba and Trinidad & Tobago.

In 1998, the expense for tobacco and cigarette importation was \$1,451,797. CIF Value for net weight, 97,294-product kg., and income for cigarette exports that year was FOB \$1,000,822 for net weight 13,173 kg.

There are no laws restricting age of purchase, use or media advertisement of tobacco. However, the Health Promotion Resource Centre of the Ministry of Health continues to

provide prevention education on tobacco use through the media, community groups, and the Health and Family Life Education Programme for schools.

Additionally, Dominica joins the rest of the world to observe World No Tobacco Day annually. On that day, the Ministry of Health launches public awareness campaigns highlighting the dangers of tobacco, environmental tobacco smoking, and ways to combat smoking habits.

Dominica's participation in GYTS will provide the island with the opportunity to address the following issues:

- Level of tobacco use among students who are at schools in the first to fourth forms at secondary and primary schools with Junior Secondary Programs; Age of initiation of tobacco use among these students; Levels of susceptibility to become cigarette smokers.
- Exposure to tobacco advertising; ability to identify key intervention variables, such as attitudes, beliefs and behavioural norms with regards to tobacco use that could be used for non-smoking policy and creating supportive environment for planning and implementing school-based and community intervention programmes.

Twenty-three (23) selected schools participated in the survey, ten (10) secondary and thirteen (13) primary schools with junior secondary programmes (JSP).

Methods

GYTS Dominica was conducted from May 24 - June 20, 2000 among 1626 students of the first to fourth forms from 23 schools. The survey employed a two-stage cluster sample design.

Sample Description

All schools containing forms one, two, three and or four in Dominica were included in the sampling frame. A two-stage cluster sample design was used to produce a representative sample of forms one, two, three and four.

The first stage-sampling frame consisted of all schools containing students in forms one, two, three and or four. Schools were selected with probability proportional to schools enrollment size. Twenty-three (23) schools were selected -10 secondary and 13 primary schools with JSP. At class level the second sampling stage consisted of systematic equal probability sampling of classes from each school that participated in the survey. Number of eligible classes ranged from one to fifteen in schools sampled and the number of students in a class ranged from six to thirty five. All of the 23 selected schools participated; however, the students' response rate was 86.6 percent, 1626 of the 1877 eligible sampled students having completed usable questionnaires.