

Introduction

Tobacco use is one of the major preventable cause of death and disability worldwide. The emergence of tobacco related diseases is a burgeoning public health problem. According to recent WHO estimates, 4.9 million deaths annually are attributed to tobacco.¹ This figure is expected to rise to 10 million in 2030, with 7 million of these deaths occurring in developing countries, mainly China and India.^{2,3} Currently about one-fifth of all worldwide deaths attributed to tobacco occur in India, more than 800000 people die and 12 million people become ill as a result of tobacco use each year.^{3,4} Everyday about 80,000 to 100,000 young people initiate smoking, most of them in the developing countries.⁵ With current smoking patterns, about 500 million people alive today will eventually be killed by tobacco use. More than half of these future deaths will occur among today's children and teenagers.⁵

India is the world's second largest producer of tobacco. The country manufactured 94 billion cigarettes in 2001.⁶ In the country, other forms of tobacco use are more prevalent than cigarette smoking, particularly among women⁷. According to the National Sample Survey in 1993-94, among persons aged 10 years and older, 29.3% of rural males, 20.2% of urban males, 2.3% of rural females and 0.7% of urban females smoked cigarettes or bidis.^{7,8} Whereas for other forms of tobacco such as snuff, chewing tobacco, burnt tobacco, powder and paste, 19.3% rural males, 9.9% urban males, 9.3% rural females and 4.3% urban females in the same age-group used these.⁷ In India, annually there are around 900 thousand tobacco related deaths. The deaths attributable to tobacco, in India, are expected to rise from 1.4% of all deaths in 1990 to 13.3% in 2020.⁹

It is estimated that like other developing countries, the most susceptible time for initiating tobacco use in India is during adolescence and early adulthood, ages 15-24.⁸ The majority of users start using tobacco before age 18, while some even start as young as 10.¹⁰ It is estimated that 5,500 adolescents start using tobacco every day in India, joining the 4 million young people under the age of 15 who already regularly use tobacco.^{9,10} This early age of initiation is a pointer that there is an urgent need to conduct a needs assessment survey and plan effective interventions for this vulnerable age group. GYTS is a project aimed at describing tobacco use habits among youth around the world, in order to catalyze programmes for intervening and weaning them away from tobacco use. In the context of rapid globalisation, this becomes particularly important in contemporary time since India is undergoing a rapid epidemiological transition. It has resulted in noticeable changes in the lifestyles (habits/practices) of Indian population due to affluence, prevailing tobacco products being easily accessible and youth being targeted by aggressive marketing. It is expected that with income rise in India, that traditional uses of tobacco will diminish and cigarette smoking will increase. With urbanization, cigarette smoking is likely to become more fashionable, particularly in urban India.⁷ According to a study among Delhi students aged 11-14 years, 9.3% of students reported having experimented with smoking, in absence of any intervention programme.¹¹