

Dissertation Title  
**“Monitoring and Evaluation  
Of  
National Tobacco Control Programme”**

A Dissertation Proposal for  
**Post Graduate Diploma in Health and Hospital Management**

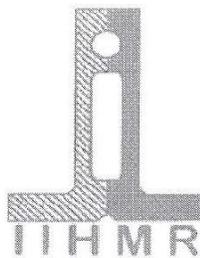
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**Date: 15 January, 2011**

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## **Introduction**

### **Background**

The World Health Organization's (WHO) report on the Global Tobacco Epidemic in 2008 highlighted that approximately 5.4 million deaths every year are related to tobacco use.<sup>[1]</sup> Tobacco is a risk factor for six of the eight leading causes of death in the world.<sup>[1]</sup> In India tobacco kills around 1 million people each year and about 2200 people each day.<sup>[2]</sup> There are 275 million tobacco users in India.<sup>[3]</sup> More than one third (34.6%) adults in India use tobacco in some form.<sup>[3]</sup> India is one such nation which took lead in fighting tobacco epidemic. In 2003, parliament enacted “Cigarette and other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act (COTPA)” with comprehensive regulations against the serious threat of tobacco use.<sup>[5]</sup> In 2004, the government of India ratified the treaty WHO- Framework convention on Tobacco Control (FCTC).<sup>[4]</sup>

To fulfill the obligations under the COTPA act and WHO-FCTC, the Ministry of Health and Family Welfare, India proposed National Tobacco Control Programme (NTCP) in the 11th Five Year Plan (2007-08).<sup>[5]</sup> The pilot phase of the NTCP was launched in 2007 – 08 covering 18 Districts of 9 States. Further in 2008-09, 12 new states covering 24 districts have been added.<sup>[5]</sup>

### **The main components of NTCP are as under:**

#### National level

- Public awareness/mass media campaigns for awareness building and for behavioral change.
- Establishment of tobacco products testing laboratories, to build regulatory capacity, as required under COTPA, 2003.
- Mainstreaming the programme components as part of the health delivery mechanism under the overall NRHM framework.
- Mainstreaming research and training- on alternate crops and livelihoods with other nodal ministries.
- Monitoring and evaluation including surveillance e.g. Global Adult Tobacco Survey (GATS India).

### State level

- Dedicated tobacco control cell for effective implementation and monitoring of Tobacco Control Initiatives at state level.

### District level

•**Training:** Training of School teachers, health workers, health professionals, law enforcers, NGO's, women SHG's on tobacco control in the districts.

•**Information Education, Communication (IEC):** Using local media, Nukkad/Street Corner Shows, Exhibitions, Melas, etc in regional languages at the grass root level.

•**School Programme:** As part of School Health Programme of the state govt. or with the help of NGOs to train school teachers and sensitize children on harmful effects of tobacco, SHS and provisions under the law. 50 Schools are covered in each district.

•**Monitoring Enforcement of Tobacco Control Laws:** The implementation of tobacco laws in the district is monitored by establishing mechanism for the same at various levels.

•**Tobacco Cessation Centers (TCC):** Setting up of Tobacco Cessation facilities at the District hospital level. A trained counselor provides these services.

### **The problem statement**

One of the components of National Tobacco Control Programme is Monitoring and Evaluation. State Tobacco Control Cells are being set up under the programme to facilitate, drive and monitor the proposed district tobacco control programme. The nodal officer at state level is responsible for the coordination, monitoring and evaluation of the programme at the state level. There are monthly and quarterly Performa's in which states submit their reports to centre. The reports from Resource centers for tobacco control (RCTCs) are also submitted to Centre. During my observation of the programme I felt that implementation status of National Tobacco Control Programme needs to be assessed under the present M&E (Monitoring and Evaluation) framework since it has not been done so far. I also felt the need to develop a robust monitoring and evaluation system for the programme. Therefore I state the problem as, "**Monitoring and Evaluation of National Tobacco Control Programme**".

## **Review of Literature**

The establishment of a strong and sustainable foundation for conducting sound evaluation of multi-site programs requires three critical elements at the organizational level: dedicated funding, identification of performance measures, and a data collection system to measure progress.<sup>[6]</sup> Researchers should consider how to integrate tobacco content with other health-related surveillance. This integration should involve developing content to address interacting or associated behaviours, such as other drug use, and content to better understand the social context(s) in which consumption occurs.<sup>[7]</sup> The immediate results of tobacco control are the outputs from strategic components implemented as part of a comprehensive tobacco control strategy (i.e., the tobacco control inputs). Inputs are realized through the availability of sufficient capacity in tobacco control programs. These immediate program and policy outputs are posited to have subsequent impacts in the future. For example, in the short-term, knowledge and attitudes related to smoking may change; over a longer time span, smoking rates and consumption levels may change, with an ultimate impact on future human health.<sup>[7]</sup> In Myanmar the monitoring of the tobacco control activities is carried out at all levels of administration, by the township, State and Divisional and central levels. Reports of activities conducted is prepared by parties concerned and sent to the National Committee for Tobacco Control. This committee regularly monitors the progress of the programme. Surveys and research activities are also monitored by the National Committee and health personnel at various levels. Monitoring visits to different parts of the country are made regularly by the National Committee personnel to supervise education activities, advocacy campaigns and other activities. Progress on legislation and activities of other Ministries is also monitored. Programme review meeting is conducted at the end of each year to evaluate the strengths and weaknesses of the programme and to analyze the lessons learnt from the past to take action for the future.<sup>[8]</sup>

## **Objectives**

### **General Objective**

To assess the implementation status of the different components of the National Tobacco Control Programme under the existing system of monitoring and evaluation and to provide inputs in the development of an efficient and effective monitoring and evaluation system.

### **Specific Objectives**

1. To evaluate the capacity building component of the National Tobacco Control Programme which includes trainings of different health and other functionaries.
2. To determine the effectiveness of the IEC (Information, Education and Communication) activities done under National Tobacco Control Programme.
3. To assess the extent of implementation of “Schools Programme” under National Tobacco Control Programme.
4. To assess the status of enforcement of tobacco control laws.
5. To review the functioning of the Tobacco Cessation Centres at the district level under National Tobacco Control Programme.
6. To give recommendations/inputs for the improvement of existing monitoring and evaluation system and development of a robust monitoring and evaluation system.

### **The Research Problem and Research questions**

The research problem which have been stated previously is, “Monitoring and Evaluation of National Tobacco Control Programme”.

The research problem could be explained with the help of following questions or Hypothesis:

1. What is the existing monitoring and evaluation system?
2. What are the results of monitoring and evaluation done under existing system? It includes both the qualitative and quantitative results. It can be further broken down in to subset of questions.
  - a. What is the current status of trainings done under National Tobacco Control Programme?
  - b. What is the current status of IEC activities done under National Tobacco Control Programme?
  - c. What is the current status of implementation of “Tobacco Free Schools Programme” under National Tobacco Control Programme?
  - d. What is the current status of enforcement of tobacco control laws?
  - e. What is the current status of Tobacco Cessation Centres under National Tobacco Control Programme?

3. Is the information obtained under existing monitoring and evaluation system valid, reliable and sufficient to monitor and evaluate the programme or do we need some modifications in the existing system?
4. How can the existing monitoring and evaluation system be further developed in to a robust monitoring and evaluation system?

## **The Research Design**

### **The Study Design**

The study design will be descriptive cross-sectional. It will be an applied research. It will include evaluation of an existing programme so that some lessons could be learn for future course of programme. It will include both the quantitative as well as qualitative research.

### **The data source**

The primary data sources will include state tobacco cells and district tobacco cells. The pilot phase of the NTCP was launched in 2007 – 08 covering 18 Districts of 9 States (Assam, West Bengal, Madhya Pradesh, Tamil Nadu, Karnataka, Gujarat, Rajasthan, Delhi, and Uttar Pradesh). In these states both state tobacco cells and district tobacco cells had been set up. Further in 2008-09, 12 new states covering 24 dists (Bihar, Jharkhand, Orissa, Sikkim, Arunachal Pradesh, Mizoram, Nagaland, Tripura, Maharastra, Goa, Uttarakhand, & Andhra Pradesh.) have been added. In these states only district tobacco cells have been set up. The primary data source will also include NGOs working under National Tobacco Control Programme.

### **The sampling design and sampling frame**

The sampling design for this evaluation study will be **purposive sampling**. The sampling frame for quantitative data will include all the 21 state tobacco cells and 42 district tobacco cells in which programme is being implemented. The sample size for the qualitative data will use the concept of **saturation**. This means that data collection will continue until the researcher finds that no new information about the research question can be obtained from additional cases.<sup>[9]</sup>

### **The data collection procedure**

The primary data will be collected at district level from district tobacco cells. Districts will send the data to states. In each state one focal point has been identified who coordinate

the activities of the districts and monitor the programme at state level. These focal points are responsible for providing data to the centre for monitoring and evaluation of the programme at centre level. There are process and outcome indicators which have been arranged in the form of monthly and quarterly performas. These performas will be sending to focal points at the states. The states will then prepare the quarterly reports of their states in the given performa and will send it to centre. The quarterly report will be collected from tobacco cessation centres in the given performas. The best practices reports will be sent by various NGOs and other organizations involved in tobacco control.

**The data analysis**

The data analysis will include both quantitative as well as qualitative data analysis. For e.g. amount of fine collected and number of persons challaned under COTPA act could be known through quantitative data analysis but description of IEC activities done could be analysed through qualitative data analysis. Various softwares like SPSS (Statistical Package for Social Sciences) and MS Excel will be used for quantitative data analysis. Qualitative data like best practices under national tobacco control programme will be analysed through **grounded theory methodology**. With this methodology, theory development begins with the data. Data is coded and categorized as the researcher begins to see patterns emerge. Theory is developed throughout the research process as data interpretation takes place and comparison of that interpretation is made with new data that is collected. However, the important principle is that grounded theory tries to develop and elaborate theory by constant comparison with the data gathered during the research process.<sup>[10][11]</sup>

**Time Frame**

Activity	10 Jan-31 Jan	1Feb – 15 Feb	16 Feb – 28 Feb	1March – 15 March	16 March – 31 March	1 April – 15 April
Preparing data collection schedule or checklist						

Collecting data from states, TCCs, NGOs and other sources						
Data Analysis						
Finding gaps in the existing monitoring and evaluation system and developing a new model of robust monitoring and evaluation system.						
Writing first draft of the report						

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