Original Research Article

DOI: http://dx.doi.org/10.18203/2394-6040.ijcmph20185140

A cross sectional study to assess the operationalization of national tobacco control program in a tertiary level hospital of central India

Rupali Saroshe¹, Satish Saroshe²*, Sanjay Dixit²

¹SAIMS Dental College, Indore, Madhya Pradesh, India

Received: 22 November 2018 Revised: 11 December 2018 Accepted: 12 December 2018

*Correspondence:

Dr. Satish Saroshe,

E-mail: drsatishsaroshe@gmail.com

Copyright: © the author(s), publisher and licensee Medip Academy. This is an open-access article distributed under the terms of the Creative Commons Attribution Non-Commercial License, which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

ABSTRACT

Background: To implement the Anti- Tobacco laws and to sensitize all stakeholders, The National Tobacco Control Programme (NTCP) was launched by the Ministry of Health and Family Welfare (MoHFW), Government of India in 2007- 08, during the 11th five year plan. This study aims to identify the level of the awareness of ill health effects of tobacco, the basic tenets of NTCP and COTPA among the hospital staff of the tertiary level medical college hospital (M.Y Hospital Indore) involved in the process.

Methods: An analytical study. Was carried out in tertiary level medical college hospital among service providers involved in anti-tobacco cell using inter-personal interview of the service providers (Medical Officers, Staff Nurses, Health Care Personnel) using pre-designed pretested semi structured questionnaire based on the salient features of NTCP and provisions of COTPA- cigarettes and other tobacco products act, 2003.

Results: Regarding the ill health effects of tobacco doctors had slightly better knowledge awareness than nurses. However, it was ironical that nurses had a slightly better awareness when it comes to NTCP. Doctors were better aware of new COTPA guidelines as compared to nurses. Thus, nurses had less knowledge about ill effects of tobacco consumption and new COTPA guidelines as compared to doctors.

Conclusions: Although most of the health care personnel involved in operationalization of NTCP are aware of the basic tenets of NTCP, COTPA and ill health effects of tobacco there is a dire need of the refresher training of both the doctors and the nurses. Also this type of the present study should be contemplated on multi-centric basis on a larger scale for better data results.

Keywords: Tobacco, Smoking, COTPA, NTCP

INTRODUCTION

Studies have shown that smoking and tobacco consumption causes more deaths each year than the following causes combined human immunodeficiency virus (HIV), illegal drug use, alcohol use, motor vehicle injuries and fire arm related incidents. The medical community has a key role in combating the tobacco epidemic and as advocates for tobacco control. Health professionals can also use their influence in society to

encourage governments to put in place tobacco control measures.²

To implement the anti- tobacco laws and to sensitize all stakeholders, The National Tobacco Control Programme (NTCP) was launched by the Ministry of Health and Family Welfare (MoHFW), Government of India in 2007-08, during the 11th five year plan, with the following objectives:

²Department of Community Medicine, MGM Medical College, Indore, Madhya Pradesh, India

- To bring about greater awareness about the harmful effects of tobacco use and about the Tobacco Control Laws (COTPA- Cigarettes and Other Tobacco Products Act, 2003)
- To facilitate effective implementation of the Tobacco Control Laws.³

The NTCP is being operational in M.Y Government Medical College tertiary care hospital through the antitobacco cell which works as the nodal department in the hospital dealing with the diagnosis, investigations, treatment and awareness of the tobacco and its health effects. The present study contemplates to assess the level of awareness of the health care providers (HCPs) about the ill health effects of tobacco, basic tenets of NTCP and features of the COTPA act (cigarettes and other tobacco products) (prohibition of advertisement and regulation of trade and commerce, production, supply and distribution) (Amendment) Bill 2015 (COTPA).

This study aims to identify the level of the awareness of ill health effects of tobacco, the basic tenets of NTCP and COTPA among the hospital staff of the tertiary level medical college hospital (M.Y Hospital Indore) involved in the process.

METHODS

Type of study: Analytical study.

Study site: M.Y (Maharaja Yashwantrao) Hospital Indore

Study subjects: Service providers involved in NTCP

Study technique: Inter-personal Interview of the Service Providers (Medical Officers, Staff Nurses, Health Care Personnel)

Sample size: All the service providers (medical officers, staff nurses, and health care personnel) will be interviewed.

Data collection: Primary data collection from the service providers. Secondary data collection- relevant data pertaining to the study.

Study tools: Pre-designed pretested semi structured questionnaire based on the salient features of National Tobacco Control Program and provisions of Tobacco Control Act 2003.

Ethical issues: Written informed consent will be obtained from the study subjects.

Inclusion criteria: Those study subjects giving written informed consent.

Exclusion criteria: Those study subjects not giving written informed consent.

Study design

An observational, questionnaire-based cross-sectional study was conducted of all service providers. A predesigned semi structured questionnaire was distributed among the health care service personnel after written informed consent was obtained from them. The Service providers were asked the questions on the awareness of ill health hazards of tobacco, NTCP and COTPA. An arbitrary time limit of 30 minutes was set for the study subjects to completely fill the questionnaire.

Data analysis

Data was entered in Microsoft Excel and analyzed using the open source Epi-data software. Descriptive statistical analysis was performed and percentages, means and standard deviations were calculated for all relevant variables. P value was based on significance of 0.05 levels.

RESULTS

As far as HCPs (Health Care Professionals) are concerned, there were 5 doctors and 45 nurses. All the doctors interviewed were males and all the nurses were females. Thus there were 45 females and 5 males in the study group. All the females study participants (100%) were in the age group of <40 years. On the other hand among the males 2 out of 5 (40%) were in the age group of 40-60 years and rest 60% were in the age group of <40 years. Most of the health care personnel claimed that they have attended any recent anti-tobacco training but none were able to produce any certificate regarding the same. Regarding the knowledge about ill health effects of Tobacco, 90% nurses and 100% doctors were aware. As far as awareness regarding NTCP is concerned, 100% nurses were aware of NTCP and its guidelines however only 80% doctors were aware of NTCP.

Table 1: Total number of study participants based on their occupation.

Study participants	Number	Percentage (%)
Doctor	5	10
Nurses	45	90
Total	90	100

Table 2: Total number of study participants based on their gender.

Gender	Number	Percentage (%)
Male	5	10
Female	45	90
Total	90	100

Regarding the new COTPA guidelines, doctors had an edge over nurses as 75.0% nurses and 80% doctors were aware of the new COTPA guidelines. Regarding the ill health effects of tobacco doctors had slightly better knowledge awareness than nurses. However, it was

ironical that nurses had a slightly better awareness when it comes to NTCP. Doctors were better aware of new COTPA guidelines as compared to nurses. Thus, nurses had less knowledge about ill effects of tobacco consumption and new COTPA guidelines as compared to doctors. As far as second hand smoking (SHS) is concerned, almost two third (66%) of the staff accepted of being frequently exposed to second hand smoking (SHS) at some point of their life. 100% study participants welcomed the move of complete tobacco ban in the public places but only 25% admitted that this ban is strictly followed in the public places.

Table 3: Total number of study participants based on their age group.

Age (years)	Number	Percentage (%)
<40	45	90
40-60	2	4
>60	3	6
Total	90	100

Table 4: Knowledge regarding the ill health effects of tobacco.

Study participants	Aware no (out of total)	Unaware (out of total)	Percentage (%)
Nurses	41 (45)	4 (45)	90
Doctors	5 (5)	0 (0)	100

Chi Square with Yates correction $\chi^2 = 0.2716$, p value=0.05, not statistically significant.

Table 5: Knowledge regarding the NTCP.

Study participants	Aware no (out of total)	Unaware (out of total)	Percentage (%)
Nurses	45 (45)	0 (0)	100
Doctors	4 (5)	0 (0)	80

Chi Square with Yates correction $\chi^2=0.44$, p=0.05, not statistically significant.

Table 6: Knowledge regarding the new COTPA guidelines.

Study participants	Aware no (Out of total)	Unaware (Out of total)	Percentage (%)
Nurses	34 (45)	11 (45)	75
Doctors	4 (5)	1 (5)	80

Chi Square with Yates correction $\chi^2 = 1.54$, p=0.05, not statistically significant.

DISCUSSION

Tobacco is a substance whose consumption involves all the systems of the body, and doctors and nurses working in all disciplines of medicine are involved in its management.

Tobacco cessation forms one of the critical key activities under NTCP. Health professionals have received little training, very few thus carry out proper assessments and interventions among tobacco users.4 With the formation of anti-tobacco cell in a tertiary government medical college hospital like MYH Nurses and doctors are usually responsible for carrying out diagnosis, counselling, routine investigations, treatment management and discharge of patients affected by tobacco consumption.^{3,5}

The present study was aimed to identify the level of the awareness of ill health effects of tobacco, the basic tenets of NTCP and COTPA among the hospital staff involved in the process. Most of the health care providers were aware of the basic principles of the NTCP, ill effects of tobacco consumption and features of the COTPA act. Regarding the ill health effects of tobacco doctors had slightly better knowledge awareness than nurses. However, it was ironical that nurses had a slightly better awareness when it comes to NTCP. Doctors were better aware of new COTPA guidelines as compared to nurses. Thus, nurses had less knowledge about ill effects of tobacco consumption and new COTPA guidelines as compared to doctors.

Our study suggests that there is a dire need of refresher training regarding tobacco control, NTCP and COTPA awareness of all the health care personnel. Also, the present study recommends more comprehensive tobacco awareness drive. Many studies have stressed on the need of more comprehensive awareness drive regarding tobacco control. 8,9 Some authors have recommended the adoption of stringent legal measures to curb the menace of tobacco. 10,111 Some participants in the present study have recommended tailored-made interventions rather than one size fits for all approach which is backed by many studies. ^{12,13} The awareness of ill health hazards of tobacco, NTCP and new COTPA rules should be an essential component of undergraduate curricula in all medical, paramedical and nursing schools. 14-16

CONCLUSION

Although most of the health care personnel involved in operationalization of NTCP are aware of the basic tenets of NTCP, COTPA and ill health effects of tobacco there is a dire need of the refresher training of both the doctors and the nurses. Also this type of the present study should be contemplated on multi-centric basis on a larger scale for better data results.

Funding: No funding sources Conflict of interest: None declared

Ethical approval: The study was approved by the

Institutional Ethics Committee

REFERENCES

Mokdad AH, Marks JS, Stroup DF, Gerberding JL. Actual Causes of Death in the United States. J Am Med Assoc. 2004;291(10):1238-45.

- Mohan S, Pradeepkumar AS, Thresia CU, Thankappan KR, Poston WSC, Haddock CK, et al. Tobacco use among medical professionals in Kerala, India: The need for enhanced tobacco cessation and control efforts. Addictive Behaviors, 2006;31(12):2313–8.
- 3. Jiloha RC. National Tobacco Control Program. Delhi Psychiatry J. 2010;13(2):211-28.
- 4. Murthy P, Saddichha S. Tobacco Cessation services in India: Recent developments and the need for expansion. Indian J Cancer. 2010;47(1):69-74.
- Persai D, Panda R, Gupta A. Examining Implementation of Tobacco Control Policy at the district level: A case study analysis from a high burden state in India. Adv Prevent Med. 2016;2016;4018023.
- Smith DR, Leggat PA. An international review of tobacco smoking in the medical profession: 1974-2004. BMC Public Health. 2007;7:115.
- 7. Schultz AS, Bottorff JL, Johnson JL. An ethnographic study of tobacco control in hospital settings. Tobacco Control. 2006;15(4):317-22.
- 8. Golechha M. Health Promotion Methods for Smoking Prevention and Cessation: A Comprehensive Review of Effectiveness and the Way Forward. Int J Prevent Med. 2016;7:7.
- McKay AJ, Patel RKK, Majeed A. Strategies for Tobacco Control in India: A Systematic Review. PLoS ONE. 2015;10(4):e0122610.
- 10. Chadda RK, Sengupta SN. Tobacco use by Indian adolescents. Tobacco Induced Dis. 2002;1(1):8.

- Venugopal DC, Vidhubala E, Sundaramoorthy C. Does Awareness on Tobacco Control Legislations Pertaining to Tobacco Sellers Lead to Compliance?

 A Study from Chennai, India. Asian Pac J Cancer Prev. 2017;18(9):2349-54.
- 12. Bennett K, Gilbert H, Sutton S. Computer-tailored smoking cessation advice matched to reading ability: Perceptions of participants from the ESCAPE trial. Patient Educ Counseling, 2015;98(12):1577–84.
- 13. Kreuter MW, Strecher V, Glassman B. One size does not fit all: the case for tailoring print materials. Ann Behav Med. 1999;21:276–83.
- 14. Botelho C, Silva AM, Melo CD. Smoking among undergraduate health sciences students: prevalence and knowledge. J Brasileiro de Pneumologia, 2011;37(3):360-6.
- 15. Roddy E, Rubin P, Britton J. A study of smoking and smoking cessation on the curricula of UK medical schools Tobacco Control. 2004;13:74-7.
- 16. Muramoto ML, Lando H. Faculty development in tobacco cessation: training health professionals and promoting tobacco control in developing countries. Drug Alcohol Rev. 2009;28(5):498-506.

Cite this article as: Saroshe R, Saroshe S, Dixit S. A cross sectional study to assess the operationalization of national tobacco control program in a tertiary level hospital of central India. Int J Community Med Public Health 2019;6:119-22.