Malawi Global Youth Tobacco Survey Report

2001

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INTRODUCTION

Tobacco use, according to WHO, is regarded to be the chief preventable cause of death around the world. WHO attributes about 4 million deaths a year to tobacco use. This Figure expected to increase to 10 million by 2030 and 7 million of these deaths will occur in developing countries.

The GYTS is a worldwide collaborative surveillance initiative that includes governments and NGOs under mainly the leadership and support of the WHO TFI and the CDC of the United States of America. The GYTS is a school based tobacco specific survey, which focuses on adolescents aged 13-15 years. There are over 100 countries in various stages of participating in this survey.

The survey is aimed at documenting and monitoring of prevalence of tobacco use such as smoking cigarettes, cigars, pipes and the use of smokeless tobacco. In addition, this survey assess learners knowledge, beliefs and attitudes related to tobacco use, behaviors, minors access to tobacco, smoking cessation programmes, environmental tobacco smoke (ETS), school curriculum media and advertising.

The survey is a process of data collection, analysis and dissemination of representative and reliable information, which can be compared across countries. GYTS is also intended to enhance the capacity of governments, NGOs and individuals within countries to design, implement and evaluate tobacco control and prevention surveillance programs.

The project is conceived as a dynamic and interactive process whereby the activities and products of each phase will be used to inform and guide the subsequent activities and this will include harnessing the evidence from data for action, analyzing country data and undertaking new areas of research to support actions and establishing research based evidence for future actions.

THE WHO RESOLUTIONS

Between 1970 and 1995, WHO adopted 14 resolutions on the need for both national and international tobacco control policies. Four of the 14 resolutions are relevant to the UNF project-GYTS. Member states were encouraged to implement comprehensive tobacco control strategies that contain the following:

(a) Measures to ensure that non-smokers receive effective protection, to which they are entitle, from involuntary exposure to tobacco smoke.
(b) Measures to promote abstention from the use of tobacco so as to protect children and young people from becoming addicted.
(c) The establishment of programmes of education and public information on tobacco and health issues, including smoking cessation programmes, with active involvement of the health professions and media.
(d) Monitoring trends in smoking and other forms of tobacco use, tobacco related diseases, and effectiveness of national smoking control action.

TOBACCO INDUSTRY IN MALAWI

Malawi is a land-locked country in South-Eastern Africa and has a total area of about 120 000 square kilometers, a fifth of which is covered by water.
According to official statistics, nearly 80% of the total population, which is about 10 million, are smallholder farmers residing in the rural areas.

The country is one of the two countries[1] worldwide that are significantly dependent on raw tobacco for their export earnings. About 70% of Malawi's export earnings come from this single commodity, contributing about 33% of the GDP and 23% of total tax revenue.
It is estimated that about 52% of Malawi population derive their livelihood from the tobacco industry[2]

Tobacco growing in the country is encouraged and supported by the tobacco Industry, financial institutions and the government through the provision of technical, material and financial support to tobacco growers. The Malawi government and tobacco Industry has pumped in a lot of resources to improve production of the crop; institutions have been established to provide farm input loans, research and extension services.
Tobacco is the only crop that enjoys such support.

Nonetheless, despite growing tobacco for numerous years, the country is still among the poorest countries in the world.[3]
Malawi's social-economic indicators show that the economy as well as the living standards of the people has not improved despite increased tobacco production and exports over the past years.
It is only the tobacco industry that has benefited greatly from the crop. While tobacco companies continue to grow, the farmer/ordinary man who grows the crop remains poor.

Inspite of the knowledge and awareness of the adverse impact of tobacco on the health of consumers, proponents of tobacco production argue that there is no real economic substitute for tobacco. They contend that no other crop in the country can compete with tobacco in terms of growth and cash potential, sustainability to local environmental conditions, manpower requirements and existing infrastructure or reliable earnings.

The Malawi government also realises the consequences of heavy reliance on tobacco to generate foreign exchange since this leaves the economy vulnerable to price fluctuations on the international markets as well as crop failure.
But, since early 1990s, the government stand on tobacco is unchanged; it (the government) contends that the crop would be produced in the country until a suitable substitute is identified.

PREVARENCE OF TOBACCO USE

Statistics on the prevalence of tobacco use in Malawi are not available but apparently tobacco use among the young people is on the rise due to the following reasons (among many others):

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[1] The other country is Zimbabwe.
[2] Currently, there is no producer of cigarettes or other tobacco products in the country. B.A.T (Malawi), which operated for the past 50 years, closed down its production line about four years ago and now imports all cigarettes that are sold on the local market. Other traders have emerged and supply the market with both smuggled and duty paid tobacco products.
[3] In 2000, the UNDP ranked Malawi 163rd out of 174 countries in Human Development Index.

(a) Lack of information on the dangers of tobacco use.
(b) Rampant child labour in tobacco farming and trade exposes children to tobacco products.
(c) The aggressive promotion activities of tobacco firms woo the youth into smoking.
(d) Most youths misinterpret the meaning of democracy and they smoke to express their "freedom".
(e) Peer pressure significantly influences the youth to begin smoking.

METHODOLOGY

The global Youth Tobacco Survey (GYTS) is a school-based survey. In Malawi, the survey was conducted in the year 2001 in two regions and districts of Blantyre and Lilongwe, among mostly teenage pupils of standard 7, standard 8 and Form 1.

Malawi has 26 administrative districts; 5 in Northern Region, 9 at the Centre and 12 in the Southern Region. Blantyre (in the Southern region) and Lilongwe (centre) are Malawi's Commercial and Capital cities respectively. The latter is one of the main tobacco growing districts in the country.

SAMPLING

The 2001 Malawi GYTS is a school-based survey, which employed a two-stage cluster sampling design to produce a nationally representative sample of standard 7,standard 8, and form1 students. The first sampling frame consisted of all regular government/public primary and secondary schools in the two districts; Blantyre and Lilongwe. Schools were chosen with probability proportional to school enrollment size. 51schools in total were selected; 26 from Blantyre district and 25 from Lilongwe district.
The second sampling stage consisted of systematic equal probability sampling, with a random start, of classes from each school that took part in the survey. All classes in the selected school were included in the sampling frame. All students in the selected classes were eligible to participate in the survey.

A weighting factor was applied to each student record to adjust for non-response and for the varying probabilities of selection. The school response rate, the student response rate and the overall response rate were 92.3%, 85.2% and 78.6% respectively for Blantyre. In Lilongwe the school response rate, the student response rate and the overall response rate were 100%, 83.9 and 83.9% respectively.
Epi info was used to compute the 95% confidence intervals for the estimates.

QUESTIONNAIRE DEVELOPMENT

A group of experts on tobacco addiction from the first group of countries selected to carry out GYTS, and staff members of WHO-TFI and CDC, wrote the 57 questions of the “core” part of the GYTS, which was adapted by the Malawi GYTS.
In addition, Malawi developed more questions in order to take into account local tobacco-using behavior and the psychosocial, cultural and contextual determinants thereof.
All the questions were multiple-choice apart from very few that asked for background information such as age, gender and school class.
The questionnaire was translated into Chichewa, which is Malawi’s national language.

Respondents were given the chance of completing the questionnaire of the language of their choice.
The questionnaire was pre-tested before it was administered to schools.
The questionnaire completion time was atmost 45 minutes.

DATA COLLECTION PROCEDURES

Survey procedures were designed to protect the privacy of the students by allowing for anonymous and voluntary participation. The self-administered questionnaire was administered in the classroom. Students recorded their responses directly on an answer sheet that could be scanned by a computer.
The fieldwork was done from 23rd August to 31st August 200. The fieldwork was conducted and coordinated by Consumers Association of Malawi staff and other auxiliary staff; 18 in each district.
The training workshops of survey coordinators and administrators were done (four weeks prior to data collection) where field researchers were instructed on the standard procedures to assure comparability on data collection.

RESULTS

A total of 3 704 students were sampled from the two districts; 1 536 from Blantyre and 2 168 from Lilongwe.
Out of 1 536 that were sampled in Blantyre, 1 308 students participated in the survey, giving the student response rate of 85.2%. The school and the overall response rates for the district were 92.35 and 78.6% respectively.
In Lilongwe, 1 820 students completed the questionnaires. The school response rate in the region was perfect-100%, the student response rate and the overall response rate were the same-83.95%.

Table 1: BACKGROUND CHARACTERISTICS OF RESPONDENTS

Characteristic		**BLANTYRE n (%)**	**LILONGWE n (%)**
Total		1 308	1 820
Sex	Male	574 (48.7)	869 (50.2)
	Female	610 (51.3)	856 (49.8)
Class	Standard 7	196 (51.3)	876 (53.4)
	Standard 8	857 (43.3)	620 (42.1)
	Form 1	133 (5.4)	221 (4.5)
Age	< 11	75 (10.3)	153 (8.6)
	12	146 (20.7)	296 (17.9)
	13	233 (20.9)	395 (23.6)
	14	308 (23.0)	414 (23.6)
	15	242 (14.4)	274 (15.6)
	16	151 (8.8)	153 (7.9)
	17 +	36 (1.8)	54 (2.8)

Table 2: PREVALENCE

		Ever Smoked Cigarettes	Current Use			First smoked cigarettes before age of 10	Likely to Initiate smoking 5 years from now
			Cigarettes	Any form of tobacco	Other tobacco products		
		%	%	%	%	%	%
BLANTYRE	Sex: Male	22.3	4.1	17.9	15.1	49.9	0.1
	Female	7.8	1.6	15.3	14.1	53.8	0.6
	Class: Std 7	13.4	2.9	17.9	15.8	53.4	0.6
	Std 8	15.4	2.7	14.3	12.2	47.5	0.1
	Form 1	24.9	6.0	19.7	16.8	46.4	0.0
	Age: <12	10.2	2.1	17.2	16.3	71.8	0.0
	13	12.4	2.4	21.0	19.2	64.7	1.5
	14	17.3	1.2	12.2	11.3	48.3	0.0
	15	15.3	4.3	17.8	13.7	28.4	0.0
	16+	26.4	6.9	12.9	6.7	47.1	0.7
LILONGWE	Sex: Male	28.6	9.1	21.1	15.1	42.8	0.7
	Female	10.1	2.8	14.7	13.4	51.4	0.3
	Class: Std 7	13.9	3.5	14.8	12.5	48.3	0.3
	Std 8	25.2	9.4	20.9	15.7	43.3	0.6
	Form 1	25.3	8.8	23.9	19.7	39.5	0.0
	Age: <12	15.9	4.6	15.9	13.4	63.3	0.6
	13	17.4	2.9	14.3	12.2	49.4	1.0
	14	21.4	8.8	17.4	11.3	44.4	0.3
	15	17.2	6.7	19.9	16.3	35.2	0.0
	16+	31.7	8.9	26.5	20.8	27.9	0.0

As the table 2 above shows, the proportion of students who had ever smoked cigarettes was higher for Lilongwe (19.35%) than for Blantyre (15.05%).

Male students were more likely to have ever tried cigarette smoking, 22.3% (95% CI [9.2,35.4]) than their female counterparts, 7.8% (95% (95% CI [5.1,10.5]) for Blantyre and 28.6% (95% CI [6.0, 14.2]) for males and females respectively for Lilongwe.

The differences in the prevalence between male and female students were significant in Lilongwe.

Current cigarette smokers were 9.1% for boys and 2.8% for girls and 4.1% for boys and 1.6% for girls, for Lilongwe and Blantyre respectively.

The differences in current cigarette smokers between boys and girls was statistically significant for Lilongwe only at the 95% Confidence Interval.

The percentages of boys and girls that had used any form of and other tobacco products, about 17% and 15% respectively were almost the same for both districts.

In Blantyre, higher proportion for students who had used other tobacco products was amongst the younger students who were aged not more than12 years. In Lilongwe the percentage was higher for students who were atleast 16 years old.

The percentages of students who first smoked cigarettes before the age of 10 were 47% and 51.5% for Lilongwe and Blantyre respectively. Standard 7 students were more likely to have tried smoking before the age of 10 than standard 8 and form 1 students.

In both regions, a negligible proportion of never smokers said are likely to start smoking 5 years from the year of the survey.

Table 3: ACCESS

		Usually smoke at home	Usually Smoke at school	Usually smoke at a friend's place	Usually smoke at social events	Bought their own cigarettes in a store	Bought cigarettes and were not refused because of age
		%	%	%	%	%	%
BLANTYRE	Sex: Male	2.6	0.0	20.0	42.2	33.3	68.7
	Female	7.5	12.7	19.8	47.0	34.8	52.3
	Class: Std 7	0.0	0.0	4.7	56.8	19.2	78.4
	Std 8	9.8	0.1	37.7	34.2	44.8	43.4
	Form 1	28.7	32.9	15.3	23.2	41.0	31.7
	Age: <12	0.0	0.0	0.0	93.2	0.0	51.6
	13	18.9	0.0	42.6	15.3	9.6	60.3
	14	17.4	0.0	42.7	22.3	65.0	48.2
	15	0.0	0.0	11.1	0.0	0.0	86.2
	16+	8.9	0.0	1.1	80.2	83.1	73.4
LILONGWE	Sex: Male	25.8	0.0	27.0	22.2	22.6	58.4
	Female	27.4	0.0	30.1	33.1	25.7	20.2
	Class: Std 7	25.2	0.0	21.9	17.6	15.8	53.4
	Std 8	27.2	0.0	30.0	27.9	25.6	43.0
	Form 1	24.9	0.0	14.9	32.4	12.2	45.7
	Age: <12	23.9	5.9	21.4	24.9	46.2	48.0
	13	21.6	0.0	34.0	18.3	20.2	70.2
	14	44.4	0.0	15.3	22.4	14.1	31.6
	15	9.5	0.0	40.0	28.4	24.1	80.6
	16+	11.4	0.0	41.8	21.1	18.6	35.3

Most students, as the table above indicates, smoked at social events and at a friend's place than at their own homes or at school.
Nearly 1 in every 3 and 1 in every 4 of current smokers get their cigarettes from a store in Blantyre and Lilongwe respectively.
In both districts, about half of the current smokers said they bought their own cigarettes and were not refused because of age.

Table 4: CESSATION AND ADDICTION

		Desire to stop	Tried to stop	Able to stop if wish so	Need/have a cigarette 1st thing in the morning	Ever received help to stop smoking
		%	%	%	%	%
BLANTYRE	Sex: Male	87.6	55.6	97.0	3.2	27.5
	Female	100.0	100.0	100.0	0.0	28.0
	Class: Std 7	100.0	50.0	100	0.0	22.9
	Std 8	89.1	61.4	93.9	0.0	23.5
	Form 1	85.2	100.0	62.7	16.9	31.9
	Age: <12	100.0	87.0	100.0	0.0	20.8
	13	100.0	83.4	53.5	0.0	36.0
	14	100.0	100.0	100.0	0.0	19.1
	15	93.6	14.5	100.0	0.0	38.6
	16+	72.1	70.0	92.7	5.3	20.3
LILONGWE	Sex: Male	78.3	89.7	93.2	17.8	15.1
	Female	87.8	97.2	78.6	13.9	16.7
	Class: Std 7	81.8	91.7	94.4	7.0	8.1
	Std 8	80.1	91.5	87.3	16.7	20.0
	Form 1	70.9	89.0	100.0	33.0	30.2
	Age: <12	100.0	88.4	90.2	30.2	8.5
	13	73.1	78.3	100.0	0.0	17.4
	14	37.8	100.0	90.0	30.3	6.6
	15	81.7	100.0	100.0	0.0	30.3
	16+	100.0	84.5	80.8	5.6	22.1

Of the current smokers in Blantyre, 9 in every 10 (about 94%) wanted to stop smoking now and almost 8 in every 10 (78%) had ever tried to stop in the past year.

In Lilongwe, the proportions were almost 83% and 93.5% for those who wanted to quit smoking and those who attempted to do so respectively.

About a third and a fifth of current smokers in Blantyre and Lilongwe respectively said they received help to stop smoking.

Basing on the need for a cigarette early in the morning as the indicator of addiction, youth in Lilongwe can be said to be more addicted to tobacco compared to their fellows in Blantyre; about 15.5% and 1.6% of current smokers reported that they have/need a cigarette as the first thing in the morning in Lilongwe and Blantyre respectively.

Table 5: KNOWLEDGE AND ATTITUDES

		CS: tobacco is harmful	NS: Once someone starts smoking, difficult to stop	CS: Safe to smoke for 1year or 2 years	NS: Boys who smoke have more friends	NS: Girls who smoke have more friends	CS: Smoking help people feel more comfortable in social gathering
		%	%	%	%	%	%
BLANTYRE	Sex: Male	79.0	22.6	23.6	56.3	19.2	31.0
	Female	83.1	29.8	58.3	49.5	23.9	35.7
	Class: Std 7	77.5	21.3	40.3	42.2	25.9	45.5
	Std 8	86.4	33.2	20.1	46.4	17.8	38.4
	Form 1	72.0	33.1	32.9	37.9	13.5	37.5
	Age: <12	73.3	26.5	48.1	43.3	23.9	36.2
	13	80.1	26.9	12.8	42.3	23.6	36.6
	14	85.7	22.2	17.0	41.8	16.5	43.4
	15	86.9	26.3	14.5	46.9	23.4	56.5
	16+	86.2	32.4	16.8	46.1	16.9	33.4
LILONGWE	Sex: Male	46.2	30.0	9.6	43.3	16.0	31.4
	Female	50.6	33.1	13.9	53.0	22.6	58.9
	Class: Std 7	45.3	30.4	14.5	48.7	20.2	29.9
	Std 8	52.7	33.0	8.0	49.7	19.6	41.6
	Form 1	43.2	26.4	16.5	50.2	21.3	42.7
	Age: <12	44.9	29.5	21.9	49.4	21.2	36.7
	13	54.9	34.1	9.8	47.4	21.2	22.4
	14	47.7	35.7	7.9	50.6	15.3	39.5
	15	45.9	27.3	11.7	49.5	25.0	52.1
	16+	47.6	31.1	6.6	43.4	13.2	25.5

On average, almost 8 in every 10 of current smokers in Blantyre definitely thought that smoking was harmful, while in Lilongwe less than half thought likewise.
Nearly 1 in every 3 of never smokers in both districts said it is difficult to stop once someone starts smoking.
About 4 in every 10 students (current smokers) reported that smoking make them feel more comfortable in social gatherings.

Table 6: MEDIA AND ADVERTISING

		Saw anti-smoking messages	Saw a lot anti-smoking messages at sporting & other events	Discussed the effects of smoking in a school class	Saw ads for cigarettes on billboards	Saw ads for cigarettes in n/papers & magazines	Saw brand names when watching sports events or other TV programs
		%	%	%	%	%	%
BLANTYRE	Sex: Male	67.1	54.6	60.7	45.9	47.3	32.6
	Female	73.1	61.0	61.4	36.4	42.2	34.0
	Class: Std 7	66.8	57.8	57.7	41.2	49.9	36.7
	Std 8	74.2	58.3	65.4	38.8	39.2	29.4
	Form 1	70.5	58.4	55.2	51.4	35.5	31.5
	Age: <12	64.6	59.5	53.7	44.5	42.8	32.0
	13	67.4	51.2	57.9	36.0	47.5	33.1
	14	75.2	58.8	68.4	44.8	48.7	39.6
	15	78.3	62.1	64.4	41.7	43.0	30.9
	16+	71.3	52.9	71.0	35.9	37.1	28.0
LILONGWE	Sex: Male	72.1	56.5	70.3	39.3	43.7	41.6
	Female	73.6	58.1	65.9	33.2	34.2	34.8
	Class: Std 7	74.7	59.7	66.8	35.9	38.5	37.9
	Std 8	71.4	56.1	70.1	34.4	38.7	38.5
	Form 1	64.2	42.2	57.4	44.0	41.0	35.1
	Age: <12	73.4	54.9	62.8	41.1	40.0	38.3
	13	74.1	58.9	67.3	35.7	37.0	39.5
	14	71.9	55.9	67.5	35.4	41.1	37.7
	15	72.2	56.6	70.8	35.2	42.8	36.8
	16+	72.1	59.1	78.5	31.8	34.1	38.8

Extents of students exposure to both positive and negative information from different media are as shown by the table 6 above.]

Approximately 7 in every 10 students from both Blantyre and Lilongwe had seen anti-smoking media messages.

As the table shows, the school environment offers a good opportunity to deliver anti-smoking messages. About 6 in every 10 students in both districts said they discussed the effects of smoking in a school class. In both districts, the proportion was higher for standard 8 students than for students of other classes.

Students' exposure to anti-smoking messages at sporting and other public events were/is quite high. Over half of the students reported to have seen anti-smoking messages at sports/public events.

Exposure to cigarette advertisements on billboards is also high in both districts. Almost 4 in every 10 students had seen these in Blantyre and about a third (37%) of students said they had seen cigarette advertisements on billboards in Lilongwe.

The proportions for students that had seen advertisements for cigarettes in newspapers and magazines were similar for the two districts.

There were also slight differences between the percentages of students who had seen cigarette brand names at sports events or when watching sports/other television

Programs; 19 out of every 50 students in Blantyre said they saw brand names when watching sports events/other TV programs, in Lilongwe it was17 out of every 50 students who said so.

Table 7: ENVIRONMENTAL TOBACCO SMOKE (ETS)

		Others smoke in their home	Around others who smoke in other places	NS: Definitely think ETS is harmful to them	NS: Think smoking should be banned from public places	Have most or all friends who smoke	Have one or both parents who smoke
		%	%	%	%	%	%
BLANTYRE	Sex: Male	21.8	36.6	81.3	88.9	6.5	13.3
	Female	18.8	28.2	87.6	87.6	4.1	9.4
	Class: Std 7	22.8	27.3	84.6	85.9	6.2	11.2
	Std 8	16.5	35.5	86.1	91.6	4.5	11.1
	Form 1	23.4	40.4	74.4	80.9	2.2	10.2
	Age: <12	17.5	31.9	82.9	87.4	6.0	11.4
	13	16.6	29.2	82.0	92.0	4.5	7.7
	14	18.9	26.8	90.3	86.6	5.4	10.7
	15	21.1	38.0	86.1	91.8	4.2	13.9
	16+	30.4	41.9	86.9	86.4	5.3	14.3
LILONGWE	Sex: Male	20.4	44.0	81.2	88.2	5.2	9.6
	Female	13.9	27.3	85.8	85.4	4.7	8.8
	Class: Std 7	14.3	30.4	83.5	84.9	4.4	7.2
	Std 8	20.0	42.4	83.4	88.7	5.2	11.5
	Form 1	27.7	37.4	74.1	81.3	4.8	11.3
	Age: <12	15.6	32.3	81.6	85.5	5.2	7.2
	13	11.9	33.5	83.3	84.3	3.2	8.1
	14	19.8	37.7	86.3	88.7	5.3	9.8
	15	16.5	35.4	81.0	84.7	4.1	6.5
	16+	31.5	49.4	86.3	92.2	5.9	21.3

A number of questions were asked on students' exposure and attitudes to ETS.
Nearly one in five students from both districts had someone smoke in their homes, in their presence. This exposure was only for the past seven days, with about 3% having been exposed daily.

In addition, many students had been exposed in other places other than their homes, with approximately a third having been exposed in both districts.

The majority, over 80%, in both districts said smoke from other people was harmful to them. And, so many students were in favor of banning smoking in public places.

DISCUSSION

Although the study was conducted in only two districts of the country, a general extent of tobacco prevalence among the youth in the country can be drawn from the collected data.

PREVALENCE, ACCESS AND CESSATION

According to the findings of the study, significant proportions of the youth in the country use tobacco products. Nearly 18% of the youth that participated in the survey admitted to have ever smoked cigarettes; but many quitted because of healthy reasons. 5% of the students is currently smoking cigarettes, 17% use any form of tobacco and almost 15% revealed to have used other tobacco products. In both districts and for all categories of smokers, smoking rates among males are significantly higher than in their female counterparts. One other noteworthy feature that emerged from the survey is the higher use of tobacco products by (male) youth in Lilongwe. Unlike Blantyre, Lilongwe is one of the districts where a lot of tobacco is cultivated in the country. High prevalence of tobacco among the youth in the district could therefore be attributed to easier access the young people in Lilongwe have to (raw) tobacco.

The survey results also show that nearly half of the ever smokers reported they started smoking at an early age of 10 and some at the age of less than 10. On the possibility for the non-smokers to initiate smoking by the year 2006, a small proportion (about 0.4%) said they would.

Although a significant proportion of young people use tobacco, the majority of the current smokers who were interviewed knows the harmful effects of tobacco and said they desire to quite smoking but very few of those who tried were successful.
The reasons might be because they (young people) consider smoking as a normal social behavior and tend to correlate smoking with independence and an appearance of confidence, an image that is intensively projected in tobacco advertising and promotional activities, and reinforced by movie/music idols who smoke.

Some young people who are regularly exposed to tobacco messages believe that tobacco provides certain benefits that will help them through adolescence. The risks of tobacco use, which are perceived to be remote, are outweighed by immediate psychological benefits.

PUBLIC AWARENESS AND KNOWLEDGE ABOUT THE DANGERS OF TOBACCO

Public awareness programs and activities on the harmful effects of tobacco in Malawi started in the mid1990s when the Consumers Association of Malawi (CAMA); a national non-governmental consumer rights body was established.
CAMA is actively involved in the anti-smoking awareness campaigns for the reduction in the consumption of tobacco in the country and educating communities especially schools children on the dangers of tobacco smoking, in line with the Global fight against tobacco smoking and complementing the Framework Convention on Tobacco Control (FCTC).

Among the issues that CAMA is addressing in tobacco control includes lobbying the government to legislate tobacco control laws which will include a ban on smoking in public places, ban on tobacco advertising and educating and sensitizing the public on

the dangers associated with tobacco smoking. CAMA has also established a coalition of networks on the fight against tobacco between CAMA secretariat and the public, colleges and schools. The anti-smoking campaign is however, been diluted by contradicting messages from the Government and the tobacco Industry who continue to counter attack the campaigns and supporting the Tobacco industry to continue carrying out smoking advertisements in the media, on billboards, at social events etc portraying "positive" images of using tobacco products; young people are easily influenced by these messages, they are made to believe that smoking is "cool", fun and modern.
It is mostly children who reside in urban areas that are more exposed to both types of messages because generally more people have access to televisions, radio, newspapers and magazines. Most billboards are erected and also more sporting events are held in these urban centres.

The anti-smoking campaign in Malawi is also facing an uphill battle mainly due to lack of political will; despite mounting anti-smoking lobby, the government still retains and supports tobacco as the backbone of the country's economy. The government insists that tobacco will remain the country's main export product for many years to come.

REGULATIONS TO CONTROL TOBACCO SMOKING IN YOUNG PEOPLE IN MALAWI

There is no any law in Malawi that explicitly restricts the sale of tobacco products to young people. Youth freely buy cigarettes and other tobacco products from any tobacco retail outlets. The situation has been aggravated by the influx of vendors more especially in urban and peri-urban areas. Since cigarettes are sold loose, there by making access by everyone easy and relatively “cheap” vendors find this as an advantage to sell more tobacco products and operating at any point.

Realizing the vulnerability to exploitation of the consumers in Malawi, CAMA spearheaded the drafting of Consumer Protection Bill[4] that is aimed at curbing the injustices that consumers face on the market. It is hoped that when the bill will be passed, the malpractice of selling harmful products like tobacco to young people would be arrested or reduced and the draft law is also aimed at regulating tobacco advertising.

INTERACTIVE COMMUNICATION METHODS

The survey also tried to explore communication methods which are interactive, other than the media which through its use for disseminating information is good in terms of larger audience it reaches, it is not/less interactive. The findings indicate that the school environment in Malawi makes considerable contribution in providing pupils with messages on the harmful effects of tobacco.

In both districts, over half of the students said they had discussed the effects of smoking tobacco in a classroom. The survey results also show that parents/guardians assist greatly in educating their children on the dangers of smoking. About 80% of never smokers and current smokers in both districts said their families had discussed the negative effects of smoking tobacco.
But, some parents/guardians set a very bad example for their children; nearly 10% of students reported that their parents smoke.

[4] CAMA has previously been instrumental in the formulation of two important Bills: Consumer Protection and Competition and Fair Trading Bills. After vigorous lobbying the Competition Bill was passed in 1998.

ENVIRONMENTAL TOBACCO SMOKE (ETS)

Most of the homes and places frequented by the youth interviewed do not have anti smoking rules within their premises; almost 1 in every 5 and 1 in every 3 students said they were around others who smoke in their homes and other places (other than their homes) respectively, in a week prior to the interview.
The efforts to protect non-smokers from the health effects of passive smoking are not being supported by the government, that is, at the policy level.
The government parries frequent appeals by CAMA to ban tobacco smoking in public. It (the government) contends that the move would be detrimental to the already ailing economy of the country.

> " Government is looking for alternative (main export product) for tobacco,
> but it cannot just ban tobacco now" said Anthony Livuza, then the
> Chief Information Officer (Ministry of Information) - reported by *The Nation* on July 2, 2001.

Nonetheless, some few service providers have banned /restrict smoking in or around their premises.[5]

RECOMMENDATIONS

Based on the findings of the study, the following recommendations are made:

(1) Intensification of education and awareness campaigns especially to the rural areas, where most youth in the country reside and where majority of them are ignorant of the risks associated with the use of tobacco products/ ETS.
There is need for full involvement of the Ministry of Education, Ministry of Health, NGO`s, religious and traditional authorities for the campaigns to be more effective.

(2) Although considerable levels of tobacco related issues are currently discussed in Schools, comments on the content or intensity of the lessons given cannot be Made. It is therefore, recommended that further research be pursued in this area and that tobacco control must be incorporated in the school curricular. And also, since a significant proportion of the youth start smoking at the age of 10 (or less), there is need for tobacco control education to be introduced at an early age, possibly at school inception and that parents and guardians must involved be in the campaign.

(3) Lobbying for anti tobacco legislation, which will regulate marketing and distribution of tobacco products and ban tobacco advertisements and tobacco sponsorship to sports. It would be useful to monitor how the tobacco industry adapt its strategies to induce young people into smoking so that appropriate Counteractions should be developed.

[5] Smoking is for example not allowed in bank halls, supermarkets, public transport (taxis, buses, ferries etc) and at Petroleum Filling Stations.

(4) Formulate public policies and enact and enforce tobacco control legislation that would prevent the youth from buying tobacco products and tobacco trade.

(5) Training of media personnel on how to effectively inform and educate the public, more especially the youth, on issues pertaining to tobacco use.

(6) In order to obtain a more comprehensive picture of tobacco prevalence among the youth in the country, the survey needs to be repeatedly done (possibly once or twice a decade), should be conducted in good number of districts in all the three regions of the country and should also be expanded to the youth who are not school goers.[6]

In sum, the study revealed rampant and ravaging use of tobacco among the youth in the country. It is therefore, imperative that all possible expedient actions be taken to redress the situation that can be addressed by a good tobacco control legislation and policy.

APPENDIX 1: WEIGHTING, VARIANCE ESTIMATION AND STATISTICAL TESTING

School, classroom and students data were weighed to produce total population estimates. The weighting factors reflect the probability of selection, non-response, and post-stratification (gender and school class). Variances were estimated using the general linear variance estimators. This method of computing variances takes into account the complex nature of the design and the classroom cluster effect. It also accounts for sampling with the probability proportional to measure size.
Epi info was used to compute standard errors for the estimates.

A percent and its estimated standard error may be used to construct confidence intervals (CI) about the percent. The CI is expressed as a range (upper and lower bound) around the percent. The CI range contains the average value of the percent which result is all possible samples were produced. The 95%CI suggests that if 100 samples were drawn and CIs were calculated for each, then the average value of the percent would be contained in 95 of the 100 CIs.

The test of statistical significance is done by comparing the 95% CI for two percentages. If the CIs do not overlap then the percentages are significantly different.
If they overlap, then there is no statistical difference between the percentages.

[6] A number of young people in Malawi, because of massive poverty and/or AIDS epidemic; do not go to school e.g. street kids.

APPENDIX 2: DEFINITIONS OF KEY TERMS

Current smoker: Those who smoke cigarettes on 1 or more days in the past 30 days.

Never smoker: A person who had never tried or experimented with cigarette smoking even one or two puffs.

Population: Set of people or entities to which findings are to be generalized.

Sample: A correction of units, selected to draw conclusions about a population.

Significance: The percent chance that a relationship found in the data is just due to an unlucky sample, and if we took another sample we might find nothing.

Youth: Aged between 10 and 21.

APPENDIX 3: ACRONYMS AND ABBREVIATIONS

Ads	Advertisements
AIDS	Acquired Immune Deficiency Syndrome
BAT	British Tobacco Control
CAMA	Consumers Association of Malawi
CDC	Center for Disease Control
CI	Confidence Interval
CS	Current Smokers
ES	Ever Smokers
ETS	Environmental Tobacco Smoke
FCTC	Framework Control on Tobacco Prevention
GDP	Gross Domestic Product
GYTS	Global Youth Tobacco Survey
NGO	Non Governmental Organization
NS	Never Smokers
TFI	Tobacco Free Initiative
UNDP	United Nations Development Program
UNICEF	United Nations Children's Fund
WHO	World Health Organization

APPENDIX 4: REFERENCES

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BLANTYRE

Bangwe Catholic
Catholic Institute
Chichiri Primary
Chigumula Primary
Chirimba Primary
Chitsime Primary
Kanjedza Primary
Kapeni Demonstration
Limbe Primary
Lumbira Primary
Makata Primary
Manja Primary
Namalimwe Primary
Namatapa Primary
Namatete Primary
Namilango Primary
Nayizi Primary
Ndirande Primary
Nkolokoti Primary
Nyambadwe Primary
South Lunzu Primary
Zingwangwa Primary
Chichiri Secondary
H.H.I Secondary
Soche Hill Secondary
Zingwangwa Secondary

LILONGWE

Chatata Primary
Chatuwa Primary
Chigoneka Primary
Chilinde Primary
Chimutu Primary
Chinkhuti Primary
Chinsapo Primary
Chiwoko Primary
Kaliyeka Primary
Khumula Primary
Lilongwe Boys Primary
Lilongwe Girls Primary
Lilongwe Demonstration
Magwero Primary
Mkomachi Primary
Mkukula Primary
Mlodza Primary
Mvunguti Primary
Nankhaka Primary
Ngwenya Primary
St. Johns Primary
Tsokankwanansi Primary
Bwaila Secondary School
Chipasula Secondary School
Lilongwe Girls Secondary School