




GATS Objectives

The Global Adult Tobacco Survey (GATS) is the global standard for systematically monitoring adult tobacco use (smoked or smokeless tobacco) and tracking key tobacco control indicators. In Brazil the GATS was known as the Special Survey on Tobacco Use in Brazil (PETab), and was conducted as a special supplement of the 2008 National Household Sample Survey, (PNAD), among persons aged 15 and over. The PNAD aims to provide basic information / data for the study of Brazilian socioeconomic development.

GATS is a nationally representative survey, using a consistent and standard protocol across countries including Brazil. GATS enhances countries' capacity to design, implement and evaluate tobacco control programs. It will also assist countries to fulfill their obligations under the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) to generate comparable data within and across countries. The WHO has developed MPOWER, a technical assistance package of six evidence-based policies that include:

-  **M**onitor tobacco use and prevention policies
- P**rotect people from tobacco smoke
- O**ffer help to quit tobacco use
- W**arn about the dangers of tobacco
- E**nforce bans on tobacco advertising, promotion, and sponsorship
- R**aise taxes on tobacco.

GATS Methodology

GATS uses a global standardized methodology. It includes information on respondents' background characteristics, tobacco use (smoking and smokeless), cessation, secondhand smoke, economics, media, and knowledge, attitudes and perceptions towards tobacco use. In Brazil, GATS was conducted in 2008 as a household survey of persons age 15 and over by the Brazilian Institute of Geography and Statistics (IBGE), in collaboration with the GATS National Committee and Brazilian partners. The sample design for Brazil is a multi-stage stratified sample with a total of 51,011 households, which is a subsample of one-third of the total households included in the National Household Sample Survey (PNAD). One individual was randomly chosen from each selected household to participate in the survey. Survey information was collected using handheld devices. The Brazil sample design will provide nationally representative estimates for urban-rural areas stratified by gender, in addition to five regional estimates. The household response rate was 95.0%, the person response rate was 98.9% and the overall response rate was 94.0%. There were a total of 39,425 completed interviews.

GATS Highlights

Tobacco Use

- In Brazil 21.6% of men, 13.1% of women, and 17.2% overall (24.6 million adults) currently smoke tobacco.

Cessation

- 5 in 10 current smokers plan to or are thinking about quitting.

Second-hand Smoke

- 11.6 million adults (24.4% of adults) are exposed to tobacco smoke at the workplace.

Media

- 67.0% of adults noticed anti-cigarette smoking information on the television or radio.
- 3 in 10 adults have noticed cigarette marketing where cigarettes are sold.
- 2 in 10 adults have noticed cigarette marketing (other than where cigarettes are sold) or sporting event sponsorship.

Knowledge, Attitudes and Perceptions

- 96.1% of adults believe smoking causes serious illness.



Tobacco Use

TOBACCO SMOKERS	OVERALL(%)	MEN(%)	WOMEN(%)
Current tobacco smokers	17.2	21.6	13.1
Current tobacco smokers (urban)	16.6	20.6	13.1
Current tobacco smokers (rural)	20.4	26.3	13.5
Daily tobacco smokers	15.1	18.9	11.5
Current cigarette smokers ¹	17.1	21.5	13.0
Daily cigarette smokers ¹	14.5	18.3	11.0
Former daily tobacco smokers ² (among all adults)	14.1	17.2	11.2
Former daily tobacco smokers ² (among ever daily smokers)	46.9	46.4	47.7
SMOKELESS TOBACCO USERS	OVERALL(%)	MEN(%)	WOMEN(%)
Current smokeless tobacco users	0.4	0.6	0.3
TOBACCO USERS (SMOKED AND/OR SMOKELESS)	OVERALL(%)	MEN(%)	WOMEN(%)
Current tobacco users	17.5	22.0	13.3

Cessation

	OVERALL(%)	MEN(%)	WOMEN(%)
Smokers who made a quit attempt in past 12 months ³	45.6	43.0	49.5
Current smokers who plan to or are thinking about quitting	52.1	49.2	57.1
Smokers advised to quit by a health care provider in past 12 months ^{3,4}	57.1	55.7	58.5

Second-hand Smoke

	OVERALL(%)	MEN(%)	WOMEN(%)
Adults exposed to tobacco smoke at the workplace ^{5,1}	24.4	28.5	20.4
Adults exposed to tobacco smoke in the home	27.9	28.9	27.0
Adults exposed to tobacco smoke in restaurants	9.9	10.8	9.0

Economics

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Average price of a pack of manufactured cigarettes	2.56
OVERALL(%)	
Price of 100 packs of manufactured cigarettes as a percentage of per capita Gross Domestic Product (GDP)	1.7
Smokers whose last cigarette purchase was from a street vendor	2.4

Media

TOBACCO INDUSTRY ADVERTISING	OVERALL(%)	CURRENT SMOKERS(%)	NON-SMOKERS(%)
Adults who noticed cigarette marketing where cigarettes are sold [†]	31.3	38.2	29.9
Adults who noticed any cigarette advertisements/promotions (other than where cigarettes are sold) or sporting event sponsorship [†]	21.3	20.1	21.5
COUNTER ADVERTISING	OVERALL(%)	MEN(%)	WOMEN(%)
Current smokers who thought about quitting because of a warning label [†]	65.0	63.5	67.2
OVERALL(%) CURRENT SMOKERS(%) NON-SMOKERS(%)			
Adults who noticed anti-cigarette smoking information on the television or radio [†]	67.0	67.7	66.9
Adults who noticed anti-cigarette smoking information in any media	73.1	72.7	73.2

Knowledge, Attitudes and Perceptions

	OVERALL(%)	CURRENT SMOKERS(%)	NON-SMOKERS(%)
Adults who believe smoking causes serious illness	96.1	93.0	96.7
Adults who believe exposure to tobacco smoke causes serious illness in nonsmokers	91.4	86.3	92.4
OVERALL(%) CURRENT SMOKELESS USERS(%) NON-USERS(%)			
Adults who believe smokeless tobacco use causes serious illness	68.2	51.9	68.3

¹ Includes manufactured cigarettes and hand-rolled cigarettes. ² Current non-smokers. ³ Includes current smokers and those who quit in past 12 months. ⁴ Among those who visited a health care provider in past 12 months. ⁵ Among those who work outside of the home who usually work indoors or both indoors and outdoors. [†] During the past 30 days.

NOTE: Current use refers to daily and less than daily use. Adults refer to persons age 15 years and older. Data have been weighted to be nationally representative of all non-institutionalized men and women age 15 years and older. Percentages reflect the prevalence of each indicator in each group, not the distribution across groups.

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