

GATS | Botswana



Global Adult Tobacco Survey: Report 2017



Republic of Botswana



World Health
Organization



THE FACTORS OF TODAY
ARE THE SEEDS OF TOMORROW

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FOREWORD



The Government of Botswana is committed to protecting the health of Botswana citizens from the adverse impact of tobacco while at the same time complying with the World Health Organisation Framework Convention on Tobacco Control (WHO FCTC). The country enacted its first legislation on Tobacco in 1992, signed and ratified the WHO FCTC in 2003 and 2005 respectively. The country also signed the Protocol to Eliminate Illicit Trade in Tobacco products in 2013 and introduced 30% Tobacco levy in 2014.

Furthermore, Botswana conducted the Global Youth Tobacco Survey (GYTS) in 2002 and 2008 and incorporated tobacco questions in the 2014 NCD STEPwise Risk Factors Survey (STEPS). Botswana has also regularly participated in Conference of Parties (COP) meetings and commemorated World No Tobacco Day over many years. All these are aimed at controlling tobacco use, mitigating its adverse effects and promoting and protecting health.

The emergence of new forms of tobacco use and other developments including industry interference prompted Botswana to review its tobacco legislation to make it fully WHO FCTC compliant. However, paucity of data on tobacco use among adults in the country posed challenges for tobacco control. This prompted implementation of Botswana's first Global Adult Tobacco Survey (GATS) which provides globally comparative data for evidence-based tobacco control. The country will endeavor to conduct GATS every five years to monitor progress and inform tobacco control efforts.

The GATS results and recommendations will help the country to make further improvements in tobacco control, in line with the evidence-based, tried and tested WHO-FCTC **MPOWER** measures.

The government will take an All-of-Government and All-of-Society approach including coordination and collaboration with civil society, the private sector and communities.

A handwritten signature in black ink, consisting of a large, stylized initial 'E' followed by a series of loops and a long horizontal stroke.

Honourable Dr. Edwin G. Dikoloti
Minister of Health and Wellness
Botswana

FOREWORD



On behalf of the U.S. Centers for Disease Control and Prevention's (CDC) Office on Smoking and Health, congratulations to Botswana on release of its first Global Adult Tobacco Survey (GATS) Country Report. This report represents Botswana's commitment to track and monitor tobacco use and key tobacco control measures using global standards. The data reported can help further improve tobacco control and prevention efforts in Botswana, supported by the World Health Organization's Framework Convention on Tobacco Control (WHO-FCTC) and the MPOWER measures – **Monitor** tobacco use and prevention policies; **Protect** people from tobacco smoke; **Offer** help to quit tobacco use; **Warn** about the dangers of tobacco; **Enforce** bans on tobacco advertising, promotion and sponsorship; and **Raise** taxes on tobacco.

GATS data presented in this report show baseline tobacco measures for Botswana, including tobacco use, secondhand smoke exposure, warning labels and knowledge, attitudes and beliefs regarding tobacco. The data show that approximately 240,000 (17.6%) adults currently use tobacco in Botswana. In addition, 40,000 (12.2%) and 190,000 (13.8%) adults were exposed to secondhand smoke at the workplace and at home respectively. GATS results present an opportunity for Botswana to reduce and prevent the burden of tobacco use.

Tobacco use is a major global public health challenge, which, has been increasing in low- and middle-income countries. It is a leading preventable risk factor for non-communicable diseases including cancer, cardiovascular diseases, diabetes and chronic lung disease. It contributes significantly to increased health care cost and loss of economic productivity. GATS provides countries the mechanism to monitor both international and national targets, goals and strategies. GATS Botswana provides important information to stakeholders and decision makers to protect the health of the public. Comprehensive implementation of the WHO MPOWER measures including continued monitoring of these measures can help further reduce the burden of tobacco-related diseases and deaths in Botswana.

It is important to recognize the collective effort led by the Botswana Ministry of Health & Wellness in collaboration with the Statistics Botswana. Also, it is important to acknowledge the coordination and support provided by the World Health Organization (WHO) country office and WHO Regional Office for Africa. The collective efforts were critical to making the 2017 GATS Botswana a success.

We thank you for your leadership and look forward to continuing collaboration in global tobacco control and prevention.

A handwritten signature in black ink, appearing to read 'Indu B. Ahluwalia', with a long horizontal flourish extending to the right.

Indu B. Ahluwalia, MPH, PhD
Branch Chief
Global Tobacco Control Branch
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Centers for Disease Control and Prevention

ACKNOWLEDGMENTS



Botswana through Ministry of Health & Wellness has successfully conducted the Global Adult Tobacco Survey (GATS) and this success could not have been achieved without the maximum support and commitment of various stakeholders. The Government of Botswana particularly appreciates the immense support of the World Health Organization (WHO), US Centers for Disease Control and Prevention (CDC), CDC Foundation, and RTI International. Special thanks go to Statistics Botswana, which provided technical expertise in the survey methodology.

Our gratitude also goes to all the field enumerators, supervisors and the IT team, who met serious unforeseen challenges during data collection but demonstrated courage and resilience which culminated in the successful completion of GATS in Botswana. Many thanks also go to the diligent and dedicated GATS Coordinators from Ministry of Health & Wellness who worked tirelessly to ensure that the GATS project is a success. I am hopeful that this report will provide a new impetus to our efforts towards effective tobacco control and prevention.

A handwritten signature in black ink, appearing to read 'M. Keetile'.

Mr. Moses Keetile
Deputy Permanent Secretary – Health Policy, Research and Development
Ministry of Health & Wellness
Botswana

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EXECUTIVE SUMMARY

Botswana, with an estimated population of 2 million people, does not produce tobacco; however with increasing tobacco use particularly among adolescents, it is one of the major public health concerns in the country. Therefore, establishing baseline information on key tobacco control indicators is critical to prevent and reduce tobacco use. In 2017, the Global Adult Tobacco Survey (GATS) was implemented for the first time by the Botswana Ministry of Health & Wellness in collaboration with Statistics Botswana and World Health Organization (WHO) country office.

The WHO, the U.S. Centers for Disease Control and Prevention (CDC), and RTI International, provided technical assistance for the implementation of the survey. Program support was provided by the CDC Foundation. Financial support was provided by the CDC Foundation with a grant from the Bill & Melinda Gates Foundation. The 2017 GATS in Botswana was a nationally representative household survey of persons aged 15 years or older. It was conducted to produce internationally comparable data on adult tobacco use and track key tobacco control indicators using a consistent and standard protocol.

A multi-stage, geographically clustered sample design was used. One individual was randomly chosen from each selected household to participate in the survey. The survey information was collected using handheld electronic devices. The survey provided information on respondents' background characteristics, tobacco use (smoking and smokeless), cessation, secondhand smoke, economics, media, and knowledge, attitudes and perceptions towards tobacco use. A total of 5,965 households were sampled and there were 4,643 completed individual interviews. The household response rate was 81.8 percent, the person-level response rate was 97.8 percent, and overall response rate was 80.0 percent.

Tobacco Use: In 2017, 17.6 percent (240,000) of adults in Botswana reported current tobacco use in any form (27.0% among men and 8.8% among women). Overall, 14.2 percent (190,000) of adults smoked tobacco (25.7% among men and 3.6% among women) and 4.3 percent (60,000) adults used smokeless tobacco (2.1% among men, and 6.3% among women). In rural areas, 16.1 percent

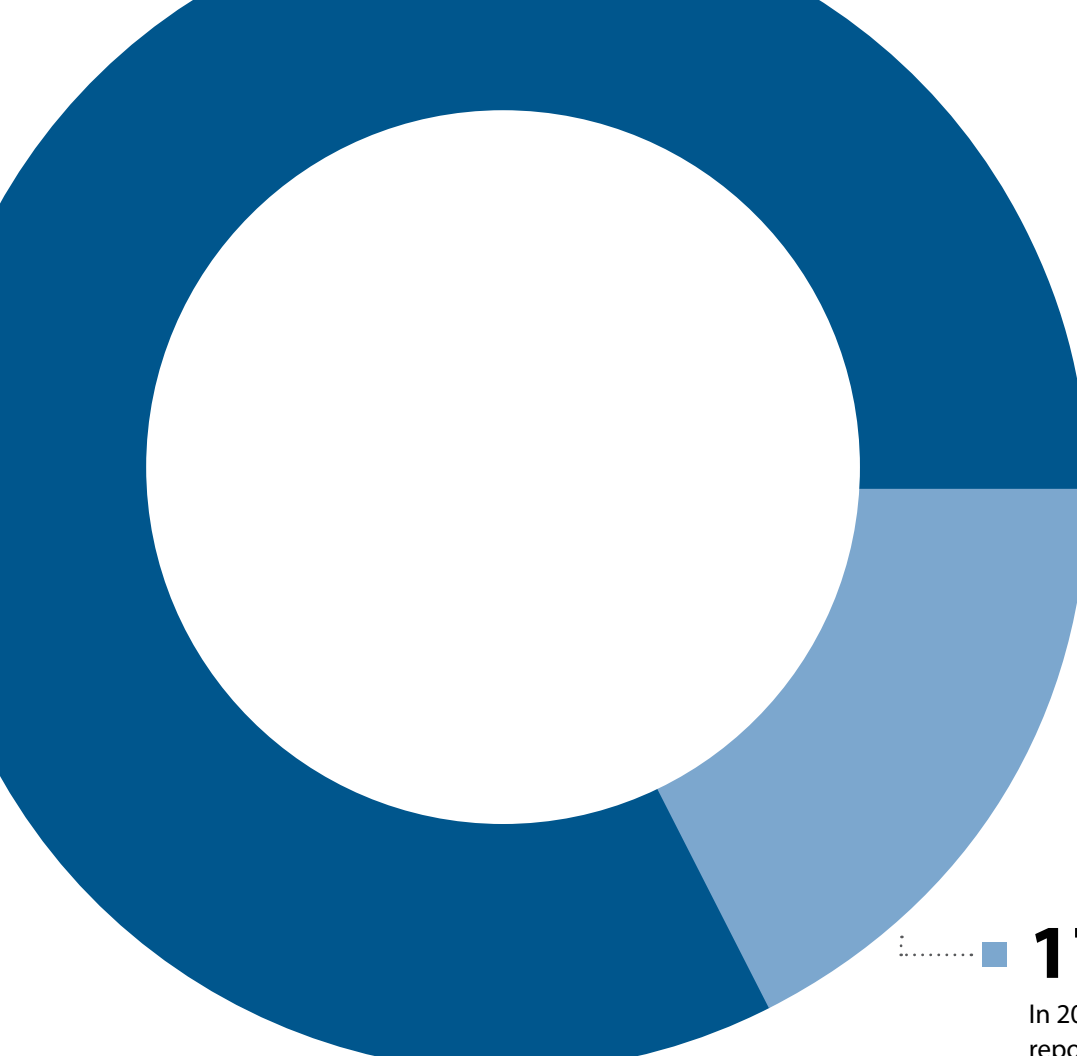
of adults currently smoked tobacco and 5.7 percent of adults currently used smokeless tobacco; in urban areas, 12.0 percent of adults currently smoked tobacco and 2.6 percent of adults currently used smokeless tobacco. Overall, 11.7 percent of adults currently smoked manufactured cigarettes and 4.5 percent of adults currently smoked hand-rolled cigarettes. In addition, 12.6 percent and 10.8 percent of adults in rural and urban areas respectively currently smoked manufactured cigarettes. Furthermore, 7.2 percent and 1.4 percent of adults smoked hand-rolled cigarette in rural and urban areas respectively.

Smoking Cessation: In 2017, 83.9 percent of current tobacco smokers planned to or were thinking about quitting. More than half (57.8%) of current tobacco smokers made a quit attempt in the past 12 months. Two-thirds of current tobacco smokers (67.0%) who made a quit attempt in the past 12 months tried to do so without any assistance. Among smokers¹ who visited health care providers in the past 12 months, 51.8 percent were asked if they smoked and 43.7 percent were advised to quit smoking. Overall, 7.0 percent of smokers¹ quit in the past 12 months.

Exposure to Secondhand Smoke: Among adults who worked indoors, 12.2 percent were exposed to tobacco smoke at their workplace in the past 30 days. Among noncurrent tobacco smokers, 11.9 percent were exposed at work. Overall, 13.8 percent of adults were exposed to tobacco smoke at home. Among noncurrent tobacco smokers, 10.6 percent were exposed to tobacco smoke at home. Among adults who visited various public places in the past 30 days, levels of exposure to secondhand smoke were as follows: 67.4 percent in bars and nightclubs, 19.9 percent in cafes, 16.9 percent in restaurants, 16.3 percent in universities, 12.9 percent in schools, 8.5 percent in government buildings, 7.5 percent in public transport, and 6.5 percent in healthcare facilities.

Economics: Among current cigarette smokers, 48.3 percent purchased their last cigarettes from a street vendor and 30.5 percent from a store. Over 8 in 10 (82.2%) of current manufactured cigarette smokers purchased single sticks of cigarettes. The average (mean) monthly expenditure for manufactured cigarettes was P789.10 (Botswana Pula).

¹ Current tobacco smokers and former tobacco smokers who have been abstinent for less than 12 months



..... ■ **17.6%**

In 2017, 17.6 percent of adults in Botswana reported current tobacco use in any form.

The average (median) cost of 20 manufactured cigarettes was P48.30 (Botswana Pula). The cost of 100 packs of manufactured cigarettes as a percentage of per capita Gross Domestic Product (GDP) in 2017 was 12.96 percent.

Advertising, Promotion, and Sponsorship: Among all adults, 27.8 percent noticed any cigarette advertisement, sponsorship, or promotion during the last 30 days. Overall, 11.3 percent of adults noticed any smokeless tobacco advertisement, sponsorship, or promotion in the past 30 days in various places. Overall, 65.6 percent of adults noticed anti-cigarette smoking information on television or radio in the past 30 days. Almost half (49.6%) of adults noticed anti-cigarette smoking information in magazines and in newspapers in the past 30 days.

Knowledge, Attitudes and Perceptions: Overall, 95.3 percent of adults believed smoking causes serious illness: lung cancer (96.5%), heart attack (80.0%) and stroke (71.3%). Similarly, 91.4 percent of adults believed breathing other peoples' smoke causes serious illness in non-smokers.

Conclusions²: GATS is a tool to monitor the extent of the tobacco epidemic, and to identify opportunities for preventing and reducing tobacco use in Botswana. Continued commitment to implementation of the WHO FCTC could further prevent and reduce tobacco use in Botswana through implementation of the WHO MPOWER strategies. Examples of these evidence-based strategies include:

- Protecting people from secondhand smoke in all public places, including bars/nightclubs and restaurants.
- Integration of tobacco cessation services, including counseling and provision of pharmacotherapy, in the national health care system to help tobacco users to quit.
- Warning on the dangers of tobacco use through large, pictorial health warnings on tobacco products.
- Reduce exposure to pro-tobacco messages and tobacco industry marketing.
- Reduce affordability of cigarettes by increasing prices of tobacco products and prohibiting of the sale of single cigarettes.

²The policy recommendations in this report are consistent with recommendations from WHO FCTC and MPOWER. The recommendations do not necessarily represent the official positions of the U.S. Centers for Disease Control and Prevention (CDC)."



1.0. INTRODUCTION



Botswana is a landlocked country located in Southern Africa bordered by South Africa, Namibia, Zambia, and Zimbabwe. It is a mid-sized country of just over 2 million people and a land surface area of 581,730 km² of which 70 percent is covered by the Kalahari Desert. Health care delivery in Botswana is anchored on primary health care to ensure universal coverage guided by the National Vision 2036, National Health Policy 2011, National Development Plan 11, and the Sustainable Development Goals. Health care service delivery in Botswana operates through a hierarchical network of health care facilities, ranging from mobile stops, health posts to clinic, district, primary hospitals and referral hospitals.

Tobacco use is a major public health concern in Botswana (1). Recognizing this concern, the Ministry of Health in collaboration with Statistics Botswana, the CDC, and WHO implemented Global Adult Tobacco Survey (GATS) for the first time in the country to determine the magnitude of tobacco use among adults in the country. GATS is a global standard for systematically monitoring adult tobacco use and tracking key tobacco control indicators. GATS also helps to enhance the country's capacity to design, implement, and evaluate tobacco control and prevention programs as well as fulfill the country's obligations under the WHO Framework Convention on Tobacco Control (WHO FCTC).

1.1. Burden of Tobacco Use in Botswana

Tobacco use is a major preventable cause of premature deaths and diseases worldwide as approximately more than 8 million people die each year due to tobacco-related illnesses (2). This figure is expected to increase to more than ten million a year by 2030. If current trends continue, tobacco use may kill a billion people by the end of this century. It is estimated that more than three-quarters of these deaths will be in low- and middle-income countries, Botswana inclusive. Therefore, an efficient and systematic surveillance mechanism is essential to monitor and manage the tobacco epidemic (3).

Botswana is not a tobacco-producing country but rather a consumer of a variety of tobacco products. While there is insufficient data on tobacco prevalence, especially among adults aged 15 years and above, the Botswana WHO STEPwise approach to Surveillance (STEPS) survey was conducted in 2007 and 2014. The STEPS survey 2007 enrolled adults aged 25 – 64 years while STEPS 2014 was a population-based survey of adults aged 15 – 69 years. Tobacco use questions were included in the survey questionnaires. STEPS survey of 2014 found that 18.3 percent of adults were smoking tobacco and 14.6 percent smoked tobacco daily. The survey indicated that the average initiation age for smoking was around 22 years. The survey also found that an estimated 16.7 percent of adults smoked manufactured cigarettes and an average of eight manufactured cigarettes smoked per day among daily smokers. The Botswana Core Welfare Indicator Survey of 2009/2010 also indicated that 15 percent of adults, aged 15 years and above smoked tobacco.

1.2. Tobacco Control Policy/Legislation in Botswana

Botswana, through the Ministry of Health developed the Control of Smoking Act in 1992 to ban tobacco advertising, promotion and sponsorship, prohibit smoking among persons under the age of 18, and prohibit smoking in workplaces, public service vehicles, and schools (4). The Act was then amended in 2004 to impose a partial ban on smoking in public places. The country further signed and ratified the WHO Framework Convention on Tobacco Control (FCTC) in 2003 and 2005 respectively. The country is planning to repeal the Control of Smoking Act of 2004 and replace it with a more comprehensive law that addresses most of the articles of the WHO FCTC. The Ministry of Health has further established a Tobacco Control focal point within the Department of Public Health to ensure compliance with and enforcement of tobacco regulations.



1.3. Survey Objectives

Botswana conducted GATS for the first time in 2017 to fulfill its obligations under WHO FCTC and further implement the WHO MPOWER package. GATS generates comparable data within and across countries, and allows for monitoring of key MPOWER package indicators. The MPOWER package is comprised of six evidence-based tobacco control measures:

- **Monitor** tobacco use and prevention policies
- **Protect** people from tobacco smoke
- **Offer** help to quit tobacco use
- **Warn** about the dangers of tobacco
- **Enforce** bans on tobacco advertising, promotion, and sponsorship
- **Raise** taxes on tobacco

Specifically, GATS in Botswana was conducted to produce nationally representative estimates of (a) adult tobacco use estimates for both smoked and smokeless tobacco, (b) prevalence of secondhand smoking, (c) cessation patterns, (d) economics of tobacco use and (e) exposure to tobacco marketing, and (f) perceptions, knowledge and attitudes of Botswana towards tobacco use. The results are presented for both urban and rural populations.

2.0. METHODOLOGY

2.1. Target Population and Sample Frame

The Global Adult Tobacco Survey (GATS) is the global standard for systematically monitoring adult tobacco use and tracking key tobacco control indicators. It is a nationally representative adult household survey using a consistent and standard protocol, questionnaire, sample design, data collection, and management procedures across countries including Botswana. GATS Botswana targeted all non-institutionalized adult men and women aged 15 years and above who considered Botswana as their usual place of residence. All members of the target population were sampled from the households they considered their usual place of residence. A usual member of a sampled household was any otherwise-eligible resident who has no other residence, or has multiple residences, but has been living in the selected household for at least half of the time during the past 12 months. The target population included individuals who resided in Botswana even if they were not citizens of Botswana. Non-citizens were eligible to participate in this survey provided they had been residing in Botswana for at least 6 months of the 12 months before the administration of the GATS questionnaire, as recommended by the GATS Sample Design Manual. The sample selected excludes individuals visiting the country as tourists and those who were institutionalized (i.e. those in military camps, boarding schools, hospitals, prisons, nursing homes, and others).

Furthermore, since Botswana was conducting GATS for the first time, a smaller stand-alone sample design was chosen to produce national estimates separately by urbanicity. The sampling frame for GATS Botswana was delineated from the 2011 Population and Housing Census. During the 2011 Population and Housing census, Botswana was divided into census districts. Therefore, stratified random sampling was used and the sampling units were stratified by census districts. The 26 census districts in Botswana thus served as the strata. However, during the analysis, the separate domains of estimation were urban and rural areas where semi-urban areas in the country were split into either urban or rural depending on the ratio of urban EAs to rural EAs in a district. Mostly urban districts, (i.e. more than

50% of urban EAs), fell within the urban stratum and the same logic with the rural stratum. Thus, the urban stratum was made up of 10 urban districts, whereas the rural stratum was comprised of 16 rural districts, as illustrated by **Table 1** below. The Primary Sampling Units (PSUs) were the Enumeration Areas (EAs) whereas Secondary Sampling Units (SSUs) and Tertiary Sampling Units (TSUs) were households and GATS-eligible household residents, respectively.

The 2011 Population and Housing census defined the Enumeration Area (EA) as the smallest geographic unit, which represents an average workload for an enumerator over a specified period. The EA was established using the average number of dwelling units because a dwelling unit in Botswana has identifiable boundaries. A dwelling unit in its traditional sense consists of one or more structures or buildings, permanent or temporary, usually surrounded by a fence/wall or something to mark its boundaries. In some areas, the huts and/or other structures may not be fenced, but they are usually in very close proximity. Dwelling units in Botswana have target addresses, which provide access to the household(s).

Furthermore, a household was defined as any unit, family, or group of people having the same cooking arrangements and/or "living under the same roof" in the same dwelling unit and making common provision for food or other living arrangements. Although some dwelling units in Botswana contain more than one household, it is common practice that the group of people living in a dwelling unit with more than one household will be found to be making common provision for food or other essentials for those living together, hence meeting the definition of a household.

2.2. Survey Design Specifications

The formula used to determine the sample size for GATS Botswana was:

$$n = \frac{z_{\alpha}^2 * p * (1-p)}{e^2} = \frac{4 * p * (1-p)}{e^2} * D$$



Where:

- i. n = is the required sample size for the KEY indicator,
- ii. 4 = is a factor to achieve the 95 percent level of confidence, ($z_{\alpha} = 1.96$ at 5% level of significance, so approximately $z^2 \approx 4$ is taken).
- iii. $p = 0.15$ is the predicted or anticipated prevalence (coverage rate) for the key indicator, which is based upon the smallest target group (in terms of its proportion of the total population), therefore it is the proportion of people who smoked tobacco to adult population (15 years and over) from the Botswana Core Welfare Indicator Survey (BCWIS) 2009/10.
- iv. e = is the margin of error to be tolerated (in general 5% but in this survey the allowable error was 3%),
- v. $D = \text{Design effect}$; The Survey Design Effect (*Deff*) is defined as the ratio of sample variances from the survey to that of a simple random sample of the same size. It is a measure of how much “worse” the survey variance is compared to a simple random sample, in terms of its reliability. The *Deff* from the previous surveys with similar objectives that have been carried out in the country may be assumed to be equal, otherwise, an acceptable range of *Deff* should be between 1.5 and 2.5. Generally *Deff* = 2 is used. It is also important to note that failure to take account of the survey design effect in the estimates of standard errors can lead to invalid interpretation of the survey results.
- vi. As this was a standard survey and conducted for the first time in Botswana, GATS Botswana was designed to estimate tobacco use at the national level by urbanicity only, thus aimed to attain a

minimum of 4,000 respondents nationally and this was allocated 50:50 to urban and rural areas. The domains of estimation at the analysis stage were therefore urban and rural areas where urban areas comprised of Cities/Towns and some semi-urban areas, whereas rural areas were made up of all rural villages and the other semi-urban areas. The 2011 Population and Housing census had, however, grouped census districts into 3 areas being urban, semi-urban, and rural areas. As such, it was recommended that for each reporting domain, the overall sample size be increased substantially for the results to be acceptably reliable hence the recommended multiplying factor of $D^{0.65}$ where D is the number of stratification domains (in this survey, $D=3$)¹. The factor $3^{0.65} = 2.04$, therefore, implied that the calculated sample size n was increased by 2.04 for this GATS to produce reliable sub-national estimates. The sample size was further adjusted by 15 percent for individual non-response and 2 percent for individual ineligibility. The sample was also adjusted by 10 percent, 5 percent, and 2 percent for household ineligibility, non-screened and non-responses respectively.

- vii. Hence the target sample size was **6,000**. However, because of the heterogeneity of the districts and lack of up-to-date information on the magnitude of tobacco use in the country, a decision was made to have all the districts in Botswana represented in the sample. Thus a minimum requirement of 2 EAs per census district was set and this increased the sample size to **6,015** households as illustrated by columns 6 and 7 in **Table 1** below).

Table 1. Domains of estimation, proportional allocation of EAs and households

District Name	Total # of EAs	% Urban	Total # of Households	Proportion to Total Households	Sampled Households	Final Sampled EAs	Final Sampled Households
	1	2	3	4	5	6	7
Urban Areas							
Gaborone	597	100	74,957	0.29281	878	58	870
Francistown	211	100	31,297	0.12226	367	24	360
Lobatse	81	100	9,214	0.03599	108	7	105
Selibe Phikwe	148	100	16,058	0.06273	188	13	195
Orapa	30	100	3,292	0.01286	39	3	45
Jwaneng	45	100	5,940	0.02320	70	5	75
Sowa	15	100	1,191	0.00465	14	2	30
South East	204	78	23,990	0.09371	281	19	285
Kweneng East	601	72	68,317	0.26687	801	53	795
Ngamiland East	210	58	21,736	0.08491	255	17	255
Total Urban	2,142		255,992		3,000	201	3,015
Rural Areas							
Ngwaketse	307	48	31,480	0.106983	321	21	315
Borolong	125	18	13,758	0.046756	140	9	135
Ngwaketse West	38	0	3,556	0.012085	36	3	45
Kweneng West	127	13	12,231	0.041567	125	8	120
Kgatleng	228	46	24,915	0.084673	254	17	255
Serowe/Palapye	531	45	46,188	0.156968	471	31	465
Mahalapye	337	38	29,795	0.101257	304	20	300
Bobonong	210	48	19,155	0.065097	195	13	195
Central Boteti	138	32	14,110	0.047952	144	10	150
Tutume	432	38	38,352	0.130338	391	26	390
North East	144	22	15,865	0.053917	162	11	165
Ngamiland West	131	22	13,164	0.044737	134	9	135
Chobe	55	33	6,830	0.023211	70	5	75
Ghanzi	110	30	11,354	0.038586	116	8	120
Kgalagadi South	93	28	7,956	0.027038	81	5	75
Kgalagadi North	55	29	5,542	0.018834	57	4	60
Total Rural	3,061		294,251		3,000	200	3,000
Grand Total	5,203		550,243		6,000	401	6,015

A stratified three-stage probability sampling design was used to select the sample for this survey. The sample was first allocated proportionately across the census districts as shown by **Table 1** above and the first stage was the selection of EAs (PSUs). In this survey, the measure of size was the number of households in a district as per the 2011 Population and Housing Census. Probability Proportional to Size (PPS) systematic sampling method with a random start was then applied to select the EAs and fifteen (15) households per EA.

Although the EAs were established using the average number of dwelling units and the average size of an EA was approximately 120-150 dwelling units, a list of all EAs in Botswana with corresponding sizes (i.e. number of households) were created during the mapping and listing exercise. The cumulative population sizes of the EAs were also established and this was divided by the calculated sample size to determine the Sampling Interval (SI). A random number between 1 and SI was then selected and subsequent sampling numbers were calculated. Sampling numbers were then compared with the cumulated sizes and the PSUs selected were the first whose cumulated sizes were greater or equal to the sampling numbers.

Botswana GATS teams were then provided with the list of sampled EAs and their respective maps. An EA was either a whole locality (this is the case of a small village which is an EA by itself), a part of a locality (this is the case of a bigger village which has been divided into more than one EA), or a group of localities (this is the case of cattle posts, lands areas or freehold farms). For an EA which consisted of smaller localities, Botswana GATS teams were given a map showing the location of the localities in the EA and the approximate number of dwelling units in each locality. Furthermore, the EA that formed part of a big village was identified by using the map that showed the location of the EA relative to adjacent areas in the village. The boundaries of an EA in a city/town were identifiable through landmarks, like roads and streets, which had names and plots with plot numbers. In most cases, the road/street names and plot numbers were marked on signboards and on the map. EA boundaries were marked by a visible colour line on the map. Therefore, to identify the EA, the field interviewers and supervisors depended on the EA map and the census/dwelling unit numbers usually pinned to one of the household doors within a dwelling unit.



The second stage of sampling was selection of households (SSUs). Fresh lists of households within the selected EAs were prepared by Botswana GATS team (more specifically the supervisors and IT staff) during households mapping and listing. Mapping and listing were conducted prior to deployment of the interviewers and this helped in the preparation of case files. Statistics Botswana also provided technical support during mapping and listing of households. New household listing was used to update the household information in selected enumeration areas and to take care of the expected variation in both the average size and differential growth of the EAs since the last mapping was done in 2011. Both occupied and non-occupied households were listed in this survey and the listing followed the GATS Household Listing manual. Households within a dwelling unit were *listed independently* provided that people living in those households *do not* make common provision for food or other essentials for living together. Otherwise, a dwelling unit with more than one household, in which people living in it make common provision for food or other essentials for living together, was considered as one household. Systematic random sampling with a random start was then applied to select households from the roster of households prepared. The systematic selection interval was determined as the number of occupied households on the EA listing form divided by the number of households selected per EA, rounded to the nearest integer.

The third stage of sampling was the selection of eligible individuals residing in selected households (TSUs). A roster of individuals, aged 15 years and above within the selected household, was created and one individual, aged 15 years or older within the selected household, was then randomly selected from the roster to administer the questionnaire. A summary of sample design features is illustrated in **Table 2** below.

Table 2. Summary of sample design features

Stage	Sampling Unit	Stratification	Sample Selection	Overall Sample Size
1.	<p>Primary Sampling Unit (PSU)</p> <p>Enumeration Areas (EAs) were selected as PSUs. According to the 2011 Population and Housing Census, there were 5203 Enumeration Areas (EAs) and 550243 households in Botswana. The EAs were established using the average number of dwelling units and the average size of an EA was approximately 120-150 dwelling units.</p> <p>GATS Sampling Frame:</p> <p>401 PSUs (Enumeration Area) were selected from the 2011 Population and Housing Census list of EAs.</p>	<p>Selection of the Enumeration Areas was stratified by census districts. The 26 census districts in Botswana were the strata. However, during the analysis, the domains of estimation were urban and rural areas, where semi-urban areas were split into either urban or rural areas. The urban stratum was therefore made up of 10 urban districts, whereas the rural stratum comprised of 16 rural districts.</p>	<p>Probability Proportional to Size (PPS) sampling technique was used to select the EAs.</p>	<p>401 EAs were selected throughout Botswana.</p>
2.	<p>Secondary Sampling Unit (SSU)</p> <p>The list of households within each of the 401 selected EAs (PSUs) was taken as the sampling frame.</p>		<p>Systematic random sampling with a random start was then used to select households. In this survey equal number of households in each EA was selected. That is, 15 households in each EA were sampled irrespective of whether the EA was in urban area or rural area.</p>	<p>Total number of households targeted was 6,015 after adjustment for both individual and household non-responses and ineligibility, factoring in the proportion of adults 15 years and above who smoke tobacco as well as applying the set requirement of a minimum of 2 EAs per each census district.</p>
3.	<p>Tertiary Sampling Unit</p> <p>A roster of all individuals aged 15 years and above was prepared for each and every selected household.</p>		<p>One individual aged 15 years or older within the selected household was then randomly selected to administer the questionnaire.</p>	<p>The survey targeted total number of 6,015 individuals as well.</p>

2.3. Survey Implementation

The implementation of Global Adult Tobacco Survey (GATS) in Botswana was conducted with a pretesting exercise, which included pretest training and fieldwork, followed by mapping and listing. Survey training, data entry for listed households, systematic sampling of 15 occupied households in each listed EA, and creation and uploading of case-files into the tablets were done immediately after the mapping and listing exercise. The survey fieldwork was done for a total of 5,965 households sampled and 4,643 completed individual interviews.

2.4. Data Collection Procedures

The standard Global Adult Tobacco Survey questionnaire was adapted. The questionnaire was administered via a face-to-face approach and in either English or Setswana depending on the respondent's preference. Tobacco use in Botswana is not gender-sensitive therefore, gender randomization is not necessary as both participating sexes were able to respond to either male or female interviewer.

An overall response rate of 85 percent or greater was anticipated. Pretesting of the questionnaire was done and the questionnaire was modified based on pretest outcomes. Furthermore, a total of 72 field personnel comprising of 48 interviewers, 8 supervisors, and 16 drivers were recruited to carry out this exercise.

The field teams were established by the size of an administrative block consisting of enumeration areas selected and the number of households selected within an EA. Sixteen (16) field teams were therefore established taking into consideration the geographical location, proximity of the districts within Botswana, and the total number of households selected in each district.

These parameters (geographic location and proximity) were used to group districts into clusters as illustrated by **Table 3** below and the teams were established in such a way that each team was made up of three interviewers and each driver was assigned a cluster of districts with less than 500 sampled households. Each cluster was allocated one supervisor.

Table 3. Allocation of field teams

District/Cluster	Final Households in Sample	Number of Teams Allocated	Number of Enumerators	Number of Supervisors
Gaborone, South East and Kgatleng	1,410	3	9	1
Francistown, Sowa, Tutume, North East and Chobe	1,020	3	9	1
Lobatse, Ngwaketse, Jwaneng, Borolong and Ngwaketse West	675	2	6	1
Bobonong, Selibe Phikwe and Mahalapye	690	2	6	1
Orapa, Central Boteti and Serowe/Palapye	660	2	6	1
Kweneng West and Kweneng East	915	2	6	1
Ngamiland East and Ngamiland West	390	1	3	1
Ghanzi, Kgalagadi South and Kgalagadi North	255	1	3	1
Totals	6,015	16	48	8

3.0. SAMPLE AND POPULATION CHARACTERISTICS

A total of 401 EAs and 6,015 households were targeted with 50:50 urban-rural breakdowns. The results in **Table 3.1** indicate that 5,965 households were sampled and 4,643 completed individual interviews. These figures translate to the household, person-level and overall response rates of 81.8 percent, 97.8 percent and 80.0 percent, respectively. Furthermore, 53.8 percent of adults 15 years and above were interviewed in rural areas while 46.8 percent were from urban areas. As illustrated by **Table 3.2**, seventy-five (75%) of the respondents were aged less than 45 years and the rest were 45 years old and above.

Table 3.1. Number and percent of households and persons interviewed and response rates, by residence (unweighted) – GATS Botswana, 2017

	Residence				Total	
	Urban		Rural			
	n	%	n	%	n	%
Selected Household						
Completed, person selected for interview	2,426	81.7	2,329	77.8	4,755	79.7
Completed, none eligible for interview	1	0.0	0	0.0	1	0.0
Incomplete	4	0.1	9	0.3	13	0.2
No screening respondent	11	0.4	8	0.3	19	0.3
Nobody home	193	6.5	214	7.1	407	6.8
Refused	68	2.3	17	0.6	85	1.4
Unoccupied	66	2.2	72	2.4	138	2.3
Address not a dwelling	7	0.2	6	0.2	13	0.2
Other ¹	194	6.5	340	11.4	534	9.0
Total households selected	2,970	100	2,995	100	5,965	100
Household Response Rate (HRR) (%)²	83.8%		79.8%		81.8%	
Selected Person						
Completed	2,355	97.1	2,288	98.2	4,643	97.6
Incomplete	2	0.1	1	0.0	3	0.1
Not eligible	5	0.2	2	0.1	7	0.1
Not at home	37	1.5	11	0.5	48	1.0
Refused	13	0.5	9	0.4	22	0.5
Incapacitated	13	0.5	17	0.7	30	0.6
Other	1	0.0	1	0.0	2	0.0
Total eligible persons	2,426	100	2,329	100	4,755	100
Person-Level Response Rate (PRR) (%)³	97.3%		98.3%		97.8%	
Total Response Rate (TRR) (%)⁴	81.5%		78.5%		80.0%	

¹ Other refers to cases not worked for various other reasons including sampled cases from 24 selected PSUs that were not contacted.

² The Household Response Rate (HRR) is calculated as:

$$\frac{HC * 100}{HC + HINC + HNS + HNH + HR + HO}$$

³ The Person-level Response Rate (PRR) is calculated as:

$$\frac{PC * 100}{PC + PINC + PNH + PR + PI + PO}$$

⁴ The Total Response Rate (TRR) is calculated as: $(HRR \times PRR) / 100$

Table 3.2. Distribution of adults ≥ 15 years old, by selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Weighted		Unweighted Number of Adults
	Percentage	Number of Adults	
	(95% CI ¹)	(in Thousands)	
Overall	100	1,365.1	4,643
Gender			
Male	48.1 (46.0, 50.1)	656.0	1,915
Female	51.9 (49.9, 54.0)	709.1	2,728
Age (Years)			
15-24	30.1(28.0, 32.3)	411.1	816
25-44	44.9 (42.8, 47.0)	612.9	2,281
45-64	17.6 (16.0, 19.3)	240.3	1,094
65+	7.4 (6.5, 8.4)	100.9	452
Residence			
Urban	46.2 (43.7, 48.7)	630.7	2,355
Rural	53.8 (51.3, 56.3)	734.5	2,288
Education Level²			
No formal education	16.7 (14.7, 18.9)	227.4	937
Primary	14.9 (13.4, 16.4)	202.5	753
Secondary	49.9 (47.4, 52.4)	680.3	2,041
Tertiary	18.5 (16.5, 20.8)	252.8	905

Note: The following observations were missing: [0] for age, [0] for gender, [0] for residence, and [7] for education

¹ 95% Confidence Interval

² Education Level: No formal education =[No formal schooling or Less than primary school completed]; Primary = [Primary school completed or less than (Junior) secondary school completed]; Secondary = [(Junior) Secondary school completed or Less than (Senior) secondary school completed or High (Senior) school completed]; Tertiary = [College/University completed or Post graduate degree completed]

4.0. TOBACCO USE



4.1. Prevalence of Tobacco Smoking

Overall, 14.2 percent (194,300) of adults aged 15 years and above in Botswana are current tobacco smokers and 85.8 percent are non-smokers, as shown in **Table 4.1**. Almost 70 percent of tobacco smokers are daily smokers, whereas around 30 percent of tobacco smokers smoked occasionally. Furthermore, around 87 percent of tobacco smokers were males and about 61 percent of tobacco smokers were from rural areas.

Table 4.1. Percentage of adults ≥15 years old, by detailed smoking status, gender and residence – GATS Botswana, 2017

Smoking Status	Overall	Male	Female	Urban	Rural
	Percentage (95% CI)				
Current Tobacco Smoker	14.2 (12.8, 15.8)	25.7 (23.1, 28.4)	3.6 (2.8, 4.7)	12.0 (10.3, 14.0)	16.1 (14.0, 18.5)
Daily smoker	9.9 (8.7, 11.2)	18.2 (16.0, 20.7)	2.2 (1.6, 3.0)	8.2 (6.7, 10.0)	11.3 (9.6, 13.3)
Occasional smoker	4.3 (3.5, 5.3)	7.5 (5.9, 9.3)	1.4 (0.9, 2.2)	3.8 (2.8, 5.1)	4.8 (3.6, 6.3)
Occasional smoker, formerly daily	1.8 (1.4, 2.4)	3.1 (2.3, 4.2)	0.6 (0.3, 1.3)	1.5 (1.1, 2.2)	2.0 (1.4, 3.0)
Occasional smoker, never daily	2.5 (1.9, 3.4)	4.3 (3.1, 6.1)	0.8 (0.5, 1.4)	2.3 (1.4, 3.6)	2.7 (1.9, 4.0)
Non-Smoker	85.8 (84.2, 87.2)	74.3 (71.6, 76.9)	96.4 (95.3, 97.2)	88.0 (86.0, 89.7)	83.9 (81.5, 86.0)
Former daily smoker	3.8 (3.2, 4.6)	6.9 (5.6, 8.3)	1.0 (0.7, 1.5)	4.1 (3.2, 5.2)	3.6 (2.8, 4.6)
Never daily smoker	81.9 (80.3, 83.5)	67.5 (64.6, 70.2)	95.3 (94.2, 96.3)	83.9 (81.7, 85.9)	80.3 (77.8, 82.5)
Former occasional smoker	2.6 (2.0, 3.3)	4.2 (3.2, 5.6)	1.1 (0.7, 1.7)	2.8 (2.0, 4.0)	2.4 (1.7, 3.4)
Never smoker	79.3 (77.7, 80.9)	63.2 (60.4, 66.0)	94.3 (93.0, 95.3)	81.1 (78.8, 83.1)	77.9 (75.4, 80.1)

Note: Current tobacco smokers includes both daily and occasional (less than daily) use.

4.2. Prevalence of Smokeless Tobacco Use

Table 4.2 shows that 4.3 percent (58,100) of adults 15 years and older in Botswana are current smokeless tobacco users and 95.7 percent are non-smokeless tobacco users. Almost 99 percent of non-smokeless tobacco users never used it at all but around 1 percent are former smokeless tobacco users. **Table 4.2** also shows that 3.1 percent of adults 15 years and older currently used smokeless tobacco daily and 4.5 percent of females aged 15 years and older used smokeless tobacco daily. Smokeless tobacco use is more prevalent in rural areas (5.7%) than in urban areas (2.6%).

Table 4.2. Percentage of adults ≥15 years old, by detailed smokeless tobacco use status, gender and residence – GATS Botswana, 2017

Smokeless Tobacco Use Status	Overall	Male	Female	Urban	Rural
	Percentage (95% CI)				
Current Smokeless Tobacco User	4.3 (3.5, 5.1)	2.1 (1.4, 3.1)	6.3 (5.2, 7.6)	2.6 (1.9, 3.6)	5.7 (4.5, 7.1)
Daily user	3.1 (2.5, 3.8)	1.6 (1.0, 2.6)	4.5 (3.6, 5.5)	1.7 (1.3, 2.4)	4.2 (3.2, 5.5)
Occasional user	1.2 (0.9, 1.6)	0.5 (0.3, 0.9)	1.8 (1.3, 2.5)	0.9 (0.5, 1.5)	1.4 (1.0, 2.0)
Occasional user, formerly daily	0.4 (0.3, 0.7)	0.2 (0.1, 0.6)	0.6 (0.4, 1.1)	0.4 (0.2, 0.8)	0.4 (0.2, 0.9)
Occasional user, never daily	0.7 (0.5, 1.1)	0.3 (0.1, 0.7)	1.2 (0.8, 1.7)	0.5 (0.2, 1.0)	1.0 (0.6, 1.5)
Non-User of Smokeless Tobacco	95.7 (94.9, 96.5)	97.9 (96.9, 98.6)	93.7 (92.4, 94.8)	97.4 (96.4, 98.1)	94.3 (92.9, 95.5)
Former daily user	0.7 (0.5, 1.0)	0.3 (0.1, 0.8)	1.0 (0.7, 1.5)	0.6 (0.3, 1.0)	0.8 (0.5, 1.2)
Never daily user	95.1 (94.2, 95.8)	97.6 (96.5, 98.4)	92.7 (91.4, 93.8)	96.8 (95.8, 97.6)	93.6 (92.1, 94.8)
Former occasional user	0.7 (0.5, 1.0)	0.7 (0.4, 1.3)	0.7 (0.5, 1.1)	0.5 (0.3, 1.1)	0.8 (0.6, 1.3)
Never user	94.4 (93.4, 95.2)	97.0 (95.7, 97.9)	92.0 (90.6, 93.2)	96.3 (95.2, 97.1)	92.7 (91.1, 94.0)

Note: Current smokeless tobacco use includes both daily and occasional (less than daily) use.

4.3. Various Smoked Tobacco Products

Table 4.3 shows, overall, 11.7 percent of current smokers in Botswana smoked manufactured cigarettes, while 4.5 percent smoked hand-rolled cigarettes. The GATS survey findings also showed that 13.9 percent of current smokers aged 65 years and older smoked any tobacco product. **Table 4.3 (cont.)** shows that almost 26 percent of the male current smokers smoked any tobacco product, while 3.6 percent of female current smokers also smoked any tobacco product.

Table 4.3. Percentage of adults ≥15 years old who are current smokers of various smoked tobacco products, by gender and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Any Smoked Tobacco Product	Type of Cigarette		Waterpipe
		Manufactured	Hand-Rolled	
	Percentage (95% CI)			
Overall	14.2 (12.8, 15.8)	11.7 (10.4, 13.2)	4.5 (3.6, 5.7)	0.2 (0.1, 0.4)
Age (Years)				
15-24	8.3 (5.9, 11.4)	7.9 (5.6, 11.0)	1.8 (0.9, 3.7)	0.3 (0.1, 1.1)
25-44	18.1 (16.0, 20.5)	15.7 (13.7, 18.0)	5.1 (3.9, 6.5)	0.2 (0.1, 0.6)
45-64	14.6 (11.7, 18.1)	10.3 (7.7, 13.6)	6.1 (4.1, 9.0)	0.0 (0.0, 0.4)
65+	13.9 (9.3, 20.1)	6.8 (3.4, 13.4)	8.8 (4.9, 15.2)	0.3 (0.0, 2.0)
Residence				
Urban	12.0 (10.3, 14.0)	10.8 (9.0, 12.8)	1.4 (0.9, 2.0)	0.2 (0.1, 0.5)
Rural	16.1 (14.0, 18.5)	12.6 (10.7, 14.8)	7.2 (5.6, 9.3)	0.2 (0.1, 0.6)
Education Level				
No formal education	21.6 (17.2, 26.8)	14.5 (10.6, 19.5)	13.1 (9.6, 17.5)	0.1 (0.0, 0.4)
Primary	16.0 (12.1, 20.8)	11.5 (8.4, 15.4)	6.0 (3.7, 9.6)	0.2 (0.0, 0.6)
Secondary	12.6 (10.8, 14.8)	11.5 (9.7, 13.7)	2.8 (2.0, 3.8)	0.2 (0.1, 0.7)
Tertiary	10.3 (8.1, 13.1)	9.9 (7.7, 12.7)	0.4 (0.2, 0.9)	0.3 (0.1, 1.1)
Wealth Index¹				
Lowest	18.1 (15.2, 21.4)	13.0 (10.4, 16.0)	10.5 (8.1, 13.5)	0.1 (0.0, 0.6)
Low	18.7 (12.4, 27.2)	14.8 (9.2, 23.0)	5.0 (2.4, 10.1)	0.2 (0.0, 1.4)
Middle	16.5 (13.0, 20.8)	14.4 (11.1, 18.4)	3.8 (2.3, 6.0)	0.4 (0.1, 1.8)
High	10.9 (8.5, 14.0)	10.5 (8.0, 13.6)	2.1 (1.1, 3.8)	0.2 (0.1, 0.7)
Higher	10.5 (8.2, 13.2)	9.1 (7.0, 11.7)	1.3 (0.5, 3.0)	0.1 (0.0, 0.6)

Note: Current tobacco smokers includes both daily and occasional (less than daily) use.

¹ A wealth index for the GATS Botswana was constructed by assigning a weight or factor score to each household asset through principal component analysis. These scores were summed by household, and individuals were ranked according to the total score of the household in which they reside. The sample individuals were then divided into quintiles – five groups

Table 4.3. (cont.) Percentage of adults ≥15 years old who are current smokers of various smoked tobacco products, by gender and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Any Smoked Tobacco Product	Type of Cigarette		Waterpipe
		Manufactured	Hand-Rolled	
	Percentage (95% CI)			
Male	25.7 (23.1, 28.4)	22.0 (19.4, 24.9)	8.1 (6.3, 10.2)	0.4 (0.2, 0.8)
Age (Years)				
15-24	15.4 (11.2, 20.9)	14.8 (10.6, 20.2)	3.6 (1.7, 7.4)	0.5 (0.1, 2.2)
25-44	32.5 (28.8, 36.4)	28.5 (24.5, 32.9)	8.5 (6.5, 11.2)	0.4 (0.1, 1.1)
45-64	26.4 (20.6, 33.1)	19.9 (14.7, 26.4)	10.8 (6.8, 16.7)	0.1 (0.0, 0.8)
65+	24.0 (15.0, 36.3)	15.9 (7.9, 29.4)	19.1 (10.5, 32.2)	0.0 N/A
Residence				
Urban	22.6 (19.4, 26.2)	20.4 (16.9, 24.3)	2.8 (1.9, 4.1)	0.3 (0.1, 0.9)
Rural	28.4 (24.5, 32.6)	23.5 (19.9, 27.6)	12.7 (9.6, 16.6)	0.5 (0.2, 1.3)
Education Level				
No formal education	37.8 (30.5, 45.7)	28.0 (20.6, 36.9)	23.1 (16.7, 31.0)	0.1 (0.0, 0.8)
Primary	29.4 (21.8, 38.3)	22.0 (15.8, 29.7)	11.3 (6.8, 18.3)	0.3 (0.1, 1.4)
Secondary	23.6 (20.1, 27.5)	21.8 (18.3, 25.6)	5.4 (3.9, 7.4)	0.4 (0.1, 1.3)
Tertiary	18.6 (14.4, 23.7)	17.8 (13.6, 23.0)	0.8 (0.3, 1.8)	0.5 (0.1, 2.1)
Female	3.6 (2.8, 4.7)	2.2 (1.6, 3.0)	1.3 (0.8, 2.0)	0.1 (0.0, 0.2)
Age (Years)				
15-24	1.4 (0.6, 3.3)	1.3 (0.5, 3.2)	0.1 (0.0, 0.7)	0.0 N/A
25-44	4.1 (2.8, 6.0)	3.2 (2.1, 4.9)	1.7 (0.8, 3.3)	0.1 (0.0, 0.3)
45-64	4.7 (3.2, 6.9)	2.2 (1.2, 4.3)	2.1 (1.2, 3.8)	0.0 N/A
65+	6.7 (3.5, 12.4)	0.4 (0.1, 1.7)	1.5 (0.5, 4.6)	0.5 (0.1, 3.3)
Residence				
Urban	2.0 (1.3, 3.2)	1.8 (1.1, 2.9)	0.1 (0.0, 0.2)	0.2 (0.0, 0.5)
Rural	5.0 (3.7, 6.7)	2.6 (1.8, 3.9)	2.3 (1.4, 3.7)	0.0 N/A
Education Level				
No formal education	8.3 (5.4, 12.7)	3.4 (1.8, 6.5)	4.8 (2.8, 8.2)	0.0 N/A
Primary	4.8 (2.9, 8.0)	2.7 (1.4, 5.3)	1.5 (0.6, 4.0)	0.0 N/A
Secondary	2.4 (1.4, 3.8)	1.9 (1.1, 3.4)	0.4 (0.1, 2.2)	0.1 (0.0, 0.6)
Tertiary	1.4 (0.7, 3.1)	1.4 (0.7, 3.1)	0.0 N/A	0.2 (0.0, 0.7)

N/A - The estimate is "0.0"

4.4. Percentage Distribution of Cigarettes Smoked Per Day Among Daily Cigarette Smokers

Table 4.4 shows that, on average, daily cigarette smokers smoke around 8 cigarettes per day. Daily cigarette smokers with no formal education smoked, on average, 9 cigarettes per day. The results also show that 17.7 percent of adult daily cigarette smokers, aged 65 years and above, smoke 20 or more cigarettes per day.

Table 4.4. Average number and percentage distribution of cigarettes smoked per day among daily cigarette smokers ≥15 years old, by gender and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Average Number of Cigarettes Smoked Per Day ¹	Distribution of Number of Cigarettes Smoked on Average Per Day ¹					
		<5	5-9	10-14	15-19	≥20	Total
	Mean (95% CI)	Percentage (95% CI)					
Overall	7.8 (6.9, 8.7)	38.2 (31.8, 45.1)	34.2 (28.1, 40.8)	15.4 (11.1, 21.2)	5.3 (2.9, 9.6)	6.8 (4.6, 10.0)	100
Gender							
Male	7.9 (6.9, 8.9)	37.4 (30.8, 44.6)	34.5 (27.9, 41.8)	16.1 (11.4, 22.3)	5.6 (2.9, 10.3)	6.4 (4.1, 9.8)	100
Female	7.0 (5.0, 8.9)	46.6 (28.4, 65.8)	31.2 (15.5, 52.7)	8.2 (2.9, 21.3)	2.7 (0.4, 17.3)	11.2 (4.8, 24.0)	100
Age (Years)							
15-24	7.5 (5.1, 9.9)	40.1 (21.9, 61.5)	31.2 (16.5, 50.9)	14.7 (4.8, 37.4)	11.1 (3.4, 30.3)	2.9 (0.7, 11.0)	100
25-44	7.7 (6.6, 8.9)	37.3 (29.4, 45.8)	36.4 (28.1, 45.6)	15.8 (10.3, 23.4)	4.4 (2.0, 9.1)	6.2 (3.6, 10.4)	100
45-64	8.0 (6.7, 9.3)	41.2 (28.8, 54.9)	28.2 (16.7, 43.6)	17.8 (8.4, 33.8)	4.3 (1.5, 11.5)	8.4 (4.5, 15.3)	100
65+	8.6 (4.6, 12.6)	33.5 (16.5, 56.3)	39.5 (19.6, 63.5)	8.1 (1.9, 28.6)	1.1 (0.1, 7.8)	17.7 (5.1, 46.2)	100
Residence							
Urban	7.3 (5.9, 8.7)	40.1 (31.5, 49.4)	35.1 (26.4, 44.9)	15.8 (9.8, 24.6)	3.0 (1.2, 7.1)	6.0 (3.2, 10.9)	100
Rural	8.1 (6.9, 9.3)	37.0 (28.2, 46.8)	33.6 (25.6, 42.7)	15.2 (9.5, 23.3)	6.9 (3.3, 13.9)	7.3 (4.4, 11.9)	100
Education Level							
No formal education	9.3 (7.2, 11.4)	30.2 (20.5, 42.2)	36.3 (25.4, 48.8)	17.3 (9.7, 28.8)	4.1 (1.8, 9.0)	12.1 (6.3, 22.0)	100
Primary	7.8 (5.7, 9.8)	42.3 (28.0, 58.1)	29.6 (16.6, 47.0)	16.1 (8.4, 28.5)	5.6 (1.6, 18.3)	6.3 (2.7, 14.0)	100
Secondary	7.1 (5.8, 8.4)	43.6 (33.1, 54.8)	31.3 (22.3, 41.9)	14.7 (7.8, 26.1)	5.5 (2.0, 13.9)	4.9 (2.5, 9.3)	100
Tertiary	6.9 (5.5, 8.4)	33.2 (20.1, 49.6)	43.9 (29.8, 59.0)	12.7 (6.0, 24.9)	7.4 (1.6, 27.5)	2.8 (0.6, 11.9)	100

¹ Among daily cigarette smokers. Cigarettes include manufactured and hand-rolled.

4.5. Daily Smoking Initiation Among Ever-Daily Smokers Aged 20-34 Years Old

Table 4.5 shows the average age at which ever-daily adults smokers aged 20-34 years initiated daily tobacco smoking was 19.4 years. The results also indicate that 33.5 percent of 20-34 years old males initiated daily tobacco smoking at the age of 17-19 years, whereas 22.5 percent of females started daily tobacco smoking at the age of 17-19 years. Daily tobacco smoking among adults aged 20 – 34 years in rural areas started at less than 15 years of age (10.1%).

Table 4.5. Average and percentage distribution of ever-daily smokers 20-34 years old, by age at daily smoking initiation, gender, residence and education – GATS Botswana, 2017

Demographic Characteristics	Average Age of Initiation	Age at Daily Smoking Initiation (Years) ¹				Total
		<15	15-16	17-19	20+	
	Mean (95% CI)	Percentage (95% CI)				
Overall	19.4 (18.8, 20.0)	7.3 (4.5, 11.5)	12.0 (8.1, 17.5)	32.3 (24.9, 40.8)	48.3 (39.9, 56.8)	100
Gender						
Male	19.3 (18.7, 20.0)	7.4 (4.4, 12.2)	12.9 (8.6, 18.9)	33.5 (25.7, 42.5)	46.1 (37.4, 55.2)	100
Female	19.8 (18.8, 20.9)	6.6 (2.2, 18.1)	4.7 (1.1, 17.6)	22.5 (8.1, 48.8)	66.2 (42.3, 83.9)	100
Residence						
Urban	19.6 (19.0, 20.2)	4.2 (1.8, 9.2)	13.0 (8.3, 19.8)	34.9 (25.3, 46.0)	47.9 (37.3, 58.7)	100
Rural	19.2 (18.2, 20.3)	10.1 (5.7, 17.4)	11.2 (5.8, 20.5)	30.0 (19.6, 43.0)	48.7 (36.2, 61.4)	100
Education Level						
No formal education	--	--	--	--	--	--
Primary	--	--	--	--	--	--
Secondary	19.2 (18.5, 20.0)	8.6 (4.9, 14.8)	12.2 (8.1, 18.0)	30.9 (22.7, 40.5)	48.2 (38.4, 58.2)	100
Tertiary	20.0 (19.1, 20.9)	1.5 (0.4, 6.2)	7.6 (2.7, 19.6)	38.1 (22.0, 57.2)	52.8 (35.4, 69.6)	100

¹ Among respondents 20-34 years of age who are ever daily smokers.

-- Indicates estimates based on less than 25 unweighted cases and has been suppressed.

4.6. Current Non-Tobacco Smokers and Quit Ratio for Daily Smoking

According to **Table 4.6**, 3.8 percent of adults aged 15 years and older, who were daily smokers, are now current non-smokers (stopped smoking). Among ever-daily smokers aged 15 years and older, 24.6 percent are now non-smokers.

Table 4.6. Percentage of all adults and ever-daily smokers ≥15 years old who are former daily smokers, by selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Former Daily Smokers ¹ (Among All Adults)	Former Daily Smokers ¹ (Among Ever-Daily Smokers) ²
	Percentage (95% CI)	
Overall	3.8 (3.2, 4.6)	24.6 (20.9, 28.8)
Gender		
Male	6.9 (5.6, 8.3)	24.3 (20.2, 28.9)
Female	1.0 (0.7, 1.5)	26.8 (18.4, 37.2)
Age (Years)		
15-24	2.1 (1.2, 3.6)	24.0 (14.0, 37.9)
25-44	2.8 (2.1, 3.8)	16.4 (12.3, 21.5)
45-64	6.5 (4.9, 8.6)	33.1 (25.0, 42.2)
65+	10.8 (7.3, 15.6)	45.2 (31.1, 60.1)
Residence		
Urban	4.1 (3.2, 5.2)	29.5 (23.8, 35.9)
Rural	3.6 (2.8, 4.6)	21.2 (16.6, 26.8)
Education Level		
No formal education	8.4 (6.1, 11.5)	30.3 (21.9, 40.3)
Primary	3.7 (2.5, 5.5)	23.8 (16.0, 33.7)
Secondary	2.6 (1.9, 3.6)	19.7 (14.6, 26.1)
Tertiary	3.1 (1.9, 4.8)	29.3 (20.5, 40.1)

¹ Current non-smokers.

² Also known as the quit ratio for daily smoking.

4.7. Time Since Quitting Smoking

Overall, 38.9 percent of former daily smokers indicated that they quit smoking for 10 years and more (**Table 4.7**). Furthermore, 41.1 percent of male former daily smokers stopped smoking for 10 years and more. The study has also showed that 73.0 percent of former daily smokers, aged 65 years and older, have stopped smoking tobacco for 10 years and above. The study has also revealed that 48.9 percent of former daily smokers, aged 15 years and above, residing in rural areas quit smoking tobacco for 10 years and above. Additionally, 62.0 percent of former daily smokers with no formal education stopped smoking for 10 years and above.

Table 4.7. Percentage distribution of former daily smokers ≥15 years old, by time since quitting smoking and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Time Since Quitting Smoking (Years) ¹				Total
	<1	1 to <5	5 to <10	≥10	
	Percentage (95% CI)				
Overall	14.0 (8.0, 23.4)	25.6 (18.3, 34.5)	21.5 (14.7, 30.2)	38.9 (30.5, 48.0)	100
Gender					
Male	14.5 (7.8, 25.4)	22.7 (15.3, 32.4)	21.7 (14.2, 31.6)	41.1 (31.5, 51.3)	100
Female	10.8 (3.9, 26.4)	43.9 (24.7, 65.2)	20.1 (8.7, 39.9)	25.2 (12.9, 43.4)	100
Age (Years)					
15-24	--	--	--	--	--
25-44	19.9 (9.7, 36.5)	32.9 (21.4, 46.8)	32.2 (19.0, 49.0)	15.0 (7.0, 29.3)	100
45-64	9.0 (3.4, 21.6)	8.7 (2.8, 24.0)	18.5 (9.3, 33.4)	63.8 (48.2, 77.0)	100
65+	5.4 (1.5, 17.8)	14.2 (5.5, 32.1)	7.3 (2.5, 19.9)	73.0 (54.9, 85.8)	100
Residence					
Urban	18.4 (8.6, 35.1)	26.4 (16.1, 40.1)	26.1 (16.1, 39.4)	29.1 (18.2, 43.1)	100
Rural	9.5 (4.6, 18.7)	24.8 (15.6, 37.0)	16.7 (8.9, 29.4)	48.9 (37.4, 60.5)	100
Education Level					
No formal education	9.0 (3.7, 20.0)	11.9 (5.0, 25.5)	17.2 (7.0, 36.4)	62.0 (45.6, 76.0)	100
Primary	7.7 (2.1, 24.9)	24.5 (11.4, 45.1)	23.9 (10.6, 45.4)	43.8 (27.5, 61.7)	100
Secondary	21.2 (8.7, 43.0)	28.2 (16.4, 44.0)	27.9 (16.0, 44.2)	22.7 (12.0, 38.9)	100
Tertiary	15.4 (4.5, 41.2)	52.6 (29.9, 74.3)	14.1 (4.8, 34.7)	17.9 (7.7, 36.2)	100

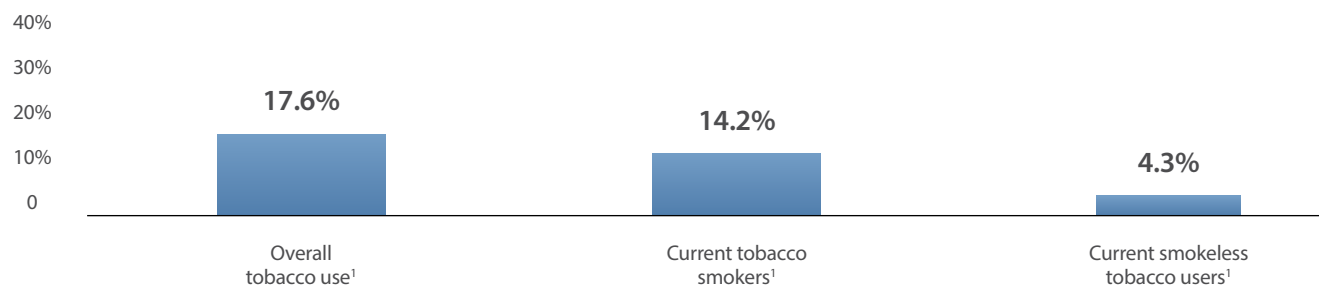
¹ Among former daily smokers (current non-smokers).

-- Indicates estimates based on less than 25 unweighted cases and has been suppressed.

4.8. Prevalence of Tobacco Use in Botswana

The results in **Figure 1.1** below show the prevalence of tobacco use among adults aged 15 years and above in Botswana is 17.6 percent. Overall, 14.2 percent of adults aged 15 years and older are current tobacco smokers and 4.3 percent of adults were current smokeless tobacco users.

Figure 1.1. Prevalence of current tobacco use among adults ≥15 years – GATS Botswana, 2017

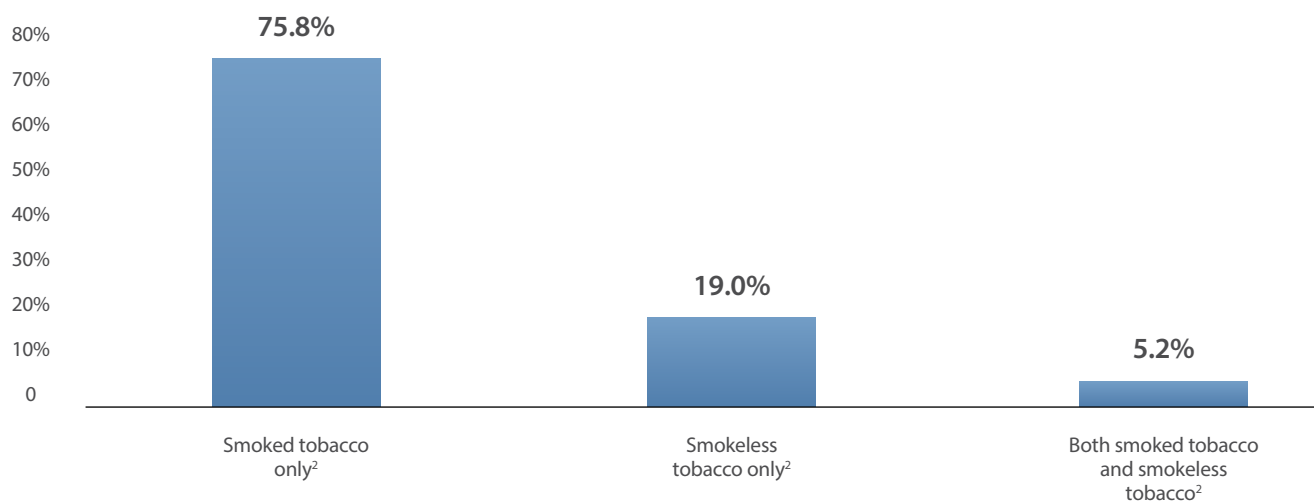


Notes

¹ Among adults aged ≥ 15 years

Figure 1.2 shows that 75.8 percent of tobacco users smoked tobacco only, 19 percent of tobacco users used smokeless tobacco only, and 5.2 percent used both smoked tobacco and smokeless tobacco.

Figure 1.2. Prevalence of tobacco product type used among current tobacco users ≥ 15 years old – GATS Botswana, 2017



Notes

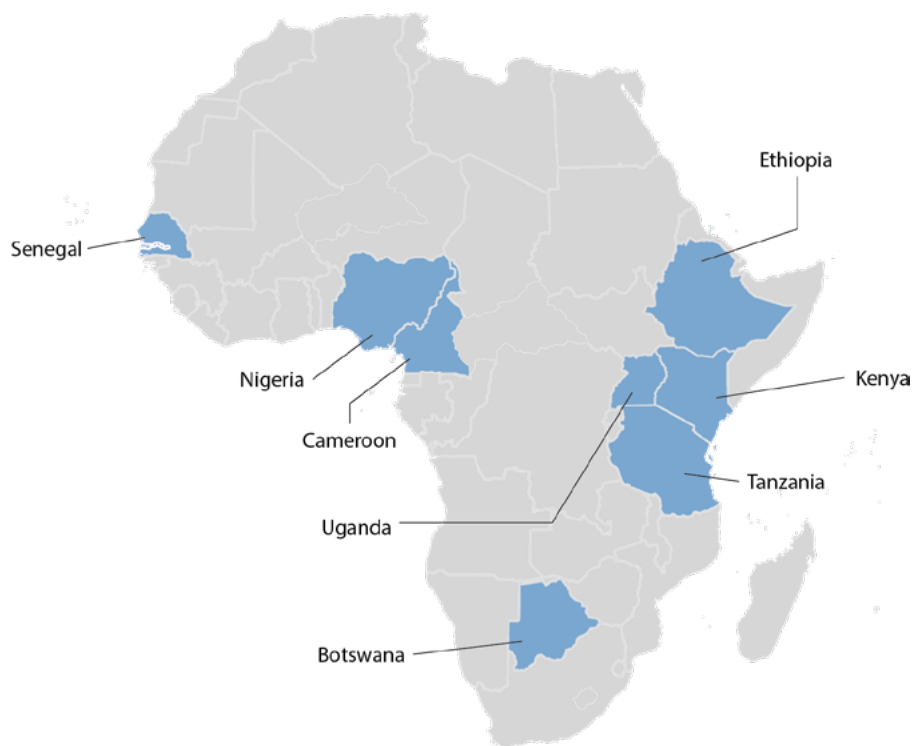
² Among tobacco users aged ≥ 15 years

Table 4.8 shows that among current tobacco users within the age groups, smoked only ranged from 29.9 percent for the 65 and older age-group to 96.1 percent for the 15-24 years. Use of smokeless tobacco only ranged from 3.6 percent for the 15-24 age group to 51.9 percent for 65 and older age group. Overall, 20.3 percent of adults in rural areas used tobacco as compared to 14.3 percent of adults in urban areas. Furthermore, 8.3 percent of adults with no formal education used both smoked and smokeless tobacco.

Table 4.8. Percentage distribution of current tobacco users ≥15 years old, by tobacco use pattern and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Current Tobacco Users ¹	Type of Current Tobacco Use			
		Smoked Only	Smokeless Only	Both Smoked and Smokeless	Total
	Percentage (95% CI)				
Overall	17.6 (16.0, 19.2)	75.8 (71.7, 79.4)	19.0 (15.9, 22.5)	5.2 (3.7, 7.5)	100
Gender					
Male	27.0 (24.4, 29.8)	92.4 (88.7, 94.9)	4.9 (3.0, 7.8)	2.8 (1.4, 5.3)	100
Female	8.8 (7.6, 10.3)	28.9 (22.2, 36.6)	58.8 (50.6, 66.6)	12.3 (7.8, 18.8)	100
Age (Years)					
15-24	8.6 (6.2, 11.7)	96.1 (89.7, 98.5)	3.6 (1.3, 10.1)	0.3 (0.0, 2.2)	100
25-44	20.2 (18.0, 22.7)	86.5 (81.2, 90.4)	10.3 (7.2, 14.5)	3.2 (1.7, 6.0)	100
45-64	21.4 (17.8, 25.5)	62.1 (54.1, 69.4)	31.8 (24.9, 39.6)	6.2 (3.7, 10.2)	100
65+	28.8 (23.0, 35.4)	29.9 (21.0, 40.5)	51.9 (39.1, 64.4)	18.2 (10.4, 29.9)	100
Residence					
Urban	14.3 (12.5, 16.3)	81.7 (75.6, 86.6)	16.1 (11.5, 22.0)	2.2 (1.2, 4.3)	100
Rural	20.3 (17.9, 23.0)	72.2 (66.8, 77.0)	20.7 (16.8, 25.4)	7.1 (4.7, 10.4)	100
Education Level					
No formal education	34.4 (29.5, 39.7)	54.6 (46.7, 62.2)	37.1 (29.7, 45.2)	8.3 (4.9, 13.6)	100
Primary	20.2 (16.1, 25.1)	72.1 (61.0, 81.0)	20.9 (13.8, 30.2)	7.1 (3.5, 13.7)	100
Secondary	13.5 (11.6, 15.7)	90.6 (86.2, 93.7)	6.7 (4.4, 10.0)	2.7 (1.1, 6.4)	100
Tertiary	11.0 (8.7, 13.8)	92.7 (84.0, 96.8)	6.2 (2.4, 15.2)	1.1 (0.3, 4.4)	100

¹ Includes daily and occasional (less than daily) smokers or smokeless users.



4.9. Tobacco Use in Botswana and Other GATS African Countries

Table 4.9 below shows prevalence of tobacco use in Botswana and in seven other African countries that conducted GATS (5-11).

Table 4.9. Tobacco use in Botswana and other African countries which conducted GATS

Country	Survey	Prevalence of Tobacco Use	Year of Study
Botswana	Global Adult Tobacco Survey (GATS)	17.6%	2017
Cameroon	Global Adult Tobacco Survey (GATS)	8.9%	2013
Ethiopia	Global Adult Tobacco Survey (GATS)	5.0%	2016
Kenya	Global Adult Tobacco Survey (GATS)	11.6%	2014
Nigeria	Global Adult Tobacco Survey (GATS)	5.6%	2012
Senegal	Global Adult Tobacco Survey (GATS)	6.0%	2015
Tanzania	Global Adult Tobacco Survey (GATS)	8.7%	2018
Uganda	Global Adult Tobacco Survey (GATS)	7.9%	2013

4.10. Time to First Tobacco Use Upon Waking Up Among Daily Tobacco Users

Table 4.10 shows that overall, 36.9 percent of daily tobacco users, aged 15 years and older, used tobacco within 5 minutes of waking up. The results further show that 46.5 percent of female daily tobacco users used tobacco within 5 minutes of waking up. Among age groups, 48.9 percent of daily tobacco users, aged 15-24 years, use tobacco within 5 minutes of waking up while, 51.5 percent of daily tobacco users, aged 65 years and above, used tobacco within 5

minutes upon waking up.

Table 4.10. Percentage distribution of daily tobacco users ≥15 years old, by time to first tobacco use upon waking and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Time to First Tobacco Use				Total
	≤5 Minutes	6-30 Minutes	31-60 Minutes	>60 Minutes	
	Percentage (95% CI)				
Overall	36.9 (31.9, 42.1)	23.7 (19.4, 28.5)	13.6 (10.8, 17.1)	25.9 (21.3, 30.9)	100
Gender					
Male	33.6 (27.6, 40.2)	25.1 (19.5, 31.6)	13.2 (10.1, 17.1)	28.2 (22.6, 34.4)	100
Female	46.5 (37.9, 55.3)	19.5 (14.2, 26.3)	14.8 (9.6, 22.2)	19.1 (13.3, 26.8)	100
Age (Years)					
15-24	48.9 (29.4, 68.7)	30.5 (15.6, 51.2)	4.5 (1.7, 11.4)	16.1 (7.1, 32.7)	100
25-44	34.7 (27.4, 42.8)	19.9 (14.1, 27.2)	15.8 (11.5, 21.3)	29.7 (23.1, 37.2)	100
45-64	26.1 (18.8, 35.1)	27.2 (18.3, 38.4)	17.2 (11.1, 25.6)	29.5 (21.8, 38.6)	100
65+	51.5 (39.4, 63.5)	24.0 (15.0, 36.3)	8.9 (4.5, 16.5)	15.6 (9.4, 24.8)	100
Residence					
Urban	30.5 (23.5, 38.4)	22.7 (16.3, 30.6)	15.1 (10.9, 20.6)	31.7 (24.0, 40.6)	100
Rural	40.5 (34.0, 47.3)	24.2 (18.9, 30.5)	12.8 (9.2, 17.4)	22.5 (17.3, 28.8)	100
Education Level					
No formal education	40.3 (33.4, 47.6)	24.9 (18.0, 33.3)	13.4 (8.7, 20.0)	21.5 (15.2, 29.4)	100
Primary	43.6 (32.0, 55.9)	17.9 (10.9, 27.8)	10.9 (6.3, 18.3)	27.6 (18.2, 39.6)	100
Secondary	36.4 (26.0, 48.2)	19.9 (13.2, 28.9)	14.4 (9.7, 21.0)	29.3 (21.1, 39.0)	100
Tertiary	17.4 (9.6, 29.4)	39.3 (25.0, 55.8)	15.9 (8.7, 27.5)	27.4 (15.8, 43.1)	100



5.0. SMOKING CESSATION



5.1. Smoking Cessation and Health Care Seeking Behavior

Figure 2 shows the distribution of interest in quitting smoking among current tobacco smokers in Botswana. Overall, 83.9 percent of current tobacco smokers, aged 15 years and older, are interested in quitting smoking tobacco.

Figure 2. Interest in quitting smoking – GATS Botswana, 2017

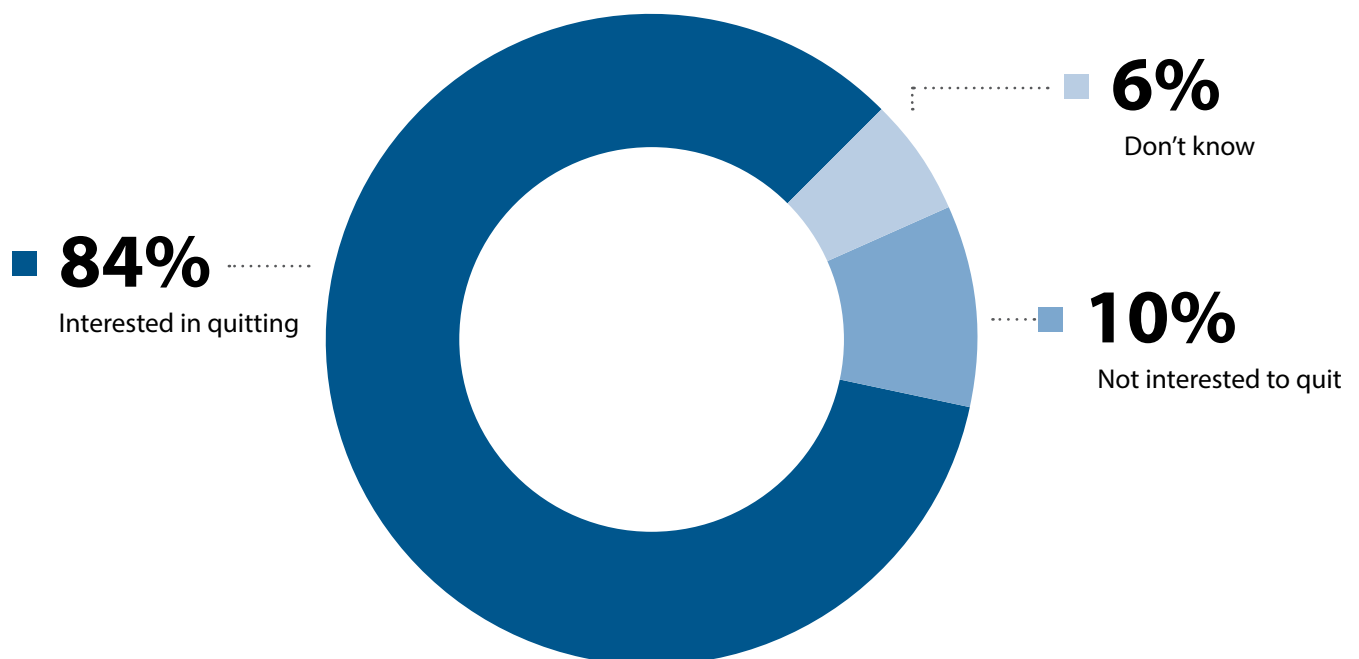


Table 5.1 shows that 57.8 percent of smokers made a quit attempt in the past 12 months. It also shows that 39.6 percent of smokers reported visiting a health care provider in the past 12 months. Almost 52 percent of smokers, who visited the health care provider, were asked if they smoke tobacco and 43.7 percent were advised to quit by a health care provider.

Table 5.1. Percentage of smokers ≥ 15 years old who made a quit attempt and received health care provider (HCP) advice in the past 12 months, by selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Smoking Cessation and Health Care Seeking Behaviour			
	Made Quit Attempt ¹	Visited a HCP ^{1,2}	Asked by HCP if a Smoker ^{2,3}	Advised to Quit by HCP ^{2,3}
	Percentage (95% CI)			
Overall	57.8 (52.7, 62.8)	39.6 (34.4, 45.1)	51.8 (43.7, 59.9)	43.7 (35.9, 51.8)
Gender				
Male	59.4 (53.9, 64.6)	38.1 (32.3, 44.3)	49.7 (40.9, 58.5)	41.8 (33.5, 50.7)
Female	47.8 (35.2, 60.7)	49.4 (37.6, 61.2)	63.1 (46.9, 76.8)	53.3 (36.4, 69.5)
Age (Years)				
15-24	76.9 (63.7, 86.4)	37.2 (24.6, 51.9)	31.3 (13.6, 56.9)	24.2 (8.3, 53.0)
25-44	56.7 (49.4, 63.8)	39.1 (32.7, 45.8)	50.6 (39.5, 61.6)	41.5 (31.3, 52.5)
45-64	42.9 (33.4, 53.0)	43.3 (32.4, 55.0)	73.2 (59.9, 83.4)	65.2 (50.4, 77.6)
65+	51.7 (32.4, 70.6)	41.0 (24.3, 60.2)	55.8 (34.7, 75.0)	51.9 (32.4, 70.9)
Residence				
Urban	60.0 (52.5, 67.0)	43.6 (35.8, 51.8)	39.6 (29.2, 50.9)	34.1 (24.4, 45.3)
Rural	56.4 (49.3, 63.2)	36.9 (30.0, 44.2)	61.7 (49.9, 72.3)	51.4 (40.3, 62.4)
Education Level				
No formal education	51.7 (40.9, 62.4)	35.9 (26.6, 46.3)	73.4 (60.4, 83.3)	59.6 (45.2, 72.5)
Primary	50.0 (35.3, 64.8)	34.5 (24.0, 46.8)	64.6 (45.7, 79.7)	50.5 (33.9, 67.0)
Secondary	61.1 (53.1, 68.5)	43.3 (35.3, 51.8)	36.8 (25.8, 49.3)	33.2 (22.9, 45.5)
Tertiary	66.0 (55.7, 75.1)	39.1 (27.9, 51.5)	57.2 (38.2, 74.2)	47.0 (29.4, 65.4)

¹ Among current smokers and former smokers who have been abstinent for less than 12 months.

² HCP = health care provider.

³ Among current smokers and former smokers who have been abstinent for less than 12 months, and who visited a HCP during the past 12 months.

5.2. Smoking Cessation Method Used

Table 5.2 shows the proportion of smokers who made a quit attempt and the various cessation methods used. Among smokers who made a quit attempt, 67.0 percent tried to do so without assistance, 13.9 percent used pharmacotherapy, and 11 percent used counseling/advice.

Table 5.2. Percentage of smokers ≥ 15 years old who attempted to quit smoking in the past 12 months, by cessation methods used and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Use of Cessation Method ¹				
	Pharmacotherapy ²	Counselling/ Advice ³	Attempt to Quit Without Assistance	Traditional Medicine	Other ⁴
	Percentage (95% CI)				
Overall	13.9 (9.6, 19.7)	11.0 (6.9, 17.2)	67.0 (59.6, 73.7)	0.6 (0.2, 2.6)	13.1 (8.8, 19.0)
Gender					
Male	12.5 (8.0, 18.9)	10.1 (5.8, 16.9)	66.9 (58.8, 74.1)	0.7 (0.2, 2.9)	12.2 (7.8, 18.6)
Female	25.6 (11.6, 47.4)	18.9 (6.8, 42.9)	67.9 (47.6, 83.1)	0.0 N/A	20.4 (9.6, 38.3)
Age (Years)					
15-24	15.5 (5.8, 35.0)	16.3 (6.1, 36.6)	68.8 (48.5, 83.8)	0.5 (0.1, 3.6)	11.7 (3.8, 31.1)
25-44	15.3 (10.4, 22.1)	10.2 (5.7, 17.5)	68.8 (60.4, 76.2)	1.0 (0.2, 4.8)	13.9 (8.9, 20.9)
45-64	8.1 (2.6, 22.9)	7.5 (3.2, 16.3)	66.3 (51.4, 78.5)	0.0 N/A	11.7 (4.7, 26.3)
65+	6.8 (1.7, 23.7)	4.1 (0.6, 22.5)	45.1 (18.7, 74.5)	0.0 N/A	15.2 (3.1, 50.1)
Residence					
Urban	11.4 (7.0, 17.9)	5.6 (2.8, 11.0)	69.4 (59.6, 77.8)	1.0 (0.1, 6.9)	12.9 (7.6, 21.0)
Rural	15.7 (9.4, 25.0)	14.9 (8.5, 25.0)	65.2 (54.5, 74.6)	0.4 (0.1, 1.6)	13.3 (7.5, 22.4)
Education Level					
No formal education	11.3 (5.1, 22.9)	5.2 (2.1, 12.2)	45.3 (32.9, 58.3)	0.0 N/A	13.9 (6.2, 28.3)
Primary	8.7 (3.4, 20.4)	24.1 (9.5, 48.9)	67.1 (49.9, 80.7)	0.7 (0.1, 5.0)	7.4 (3.0, 16.8)
Secondary	17.6 (10.3, 28.5)	12.0 (6.1, 22.1)	75.1 (64.2, 83.5)	1.2 (0.2, 5.5)	13.5 (7.3, 23.5)
Tertiary	11.2 (4.8, 23.9)	5.2 (1.4, 17.0)	74.5 (58.7, 85.8)	0.0 N/A	16.4 (7.1, 33.4)

¹ Among current smokers who made a quit attempt in the past 12 months and former smokers who have been abstinent for less than 12 months.

² Pharmacotherapy includes nicotine replacement therapy and prescription medications.

³ Includes counselling and a telephone helpline.

⁴ Other includes switching to smokeless tobacco and any other reported methods.

N/A - The estimate is "0.0"

6.0. SECONDHAND SMOKE

6.1. Exposure to Tobacco Smoke at Work

GATS Botswana 2017 revealed that overall 12.2 percent (42,100) of adults aged 15 years and older who worked in indoor areas were exposed to tobacco smoke at work in the past 30 days as shown in **Table 6.1** below. Among adult non-smokers who worked in indoor areas, 11.9 percent (35,300) reported being exposed to tobacco smoke in enclosed areas at their workplace in the last 30 days. The results also indicate that almost 15 percent (16,900) of non-smokers residing in rural areas were exposed to tobacco smoke at their workplace in the last 30 days.

Table 6.1. Percentage and number of adults ≥15 years old who work indoors and are exposed to tobacco smoke at work, by smoking status and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Adults Exposed to Tobacco Smoke at Work ¹			
	Overall		Non-Smokers	
	Percentage (95% CI)	Number in Thousands	Percentage (95% CI)	Number in Thousands
Overall	12.2 (9.6, 15.4)	42.1	11.9 (9.1, 15.3)	35.3
Gender				
Male	14.0 (10.5, 18.6)	24.4	14.5 (10.3, 20.0)	19.0
Female	10.3 (7.5, 14.1)	17.7	9.8 (6.9, 13.6)	16.3
Age (Years)				
15-24	9.7 (4.4, 19.9)	4.6	8.5 (3.4, 19.4)	3.8
25-44	12.0 (8.7, 16.3)	27.9	12.3 (8.7, 17.1)	24.0
45-64	13.7 (9.4, 19.6)	8.2	12.5 (8.3, 18.5)	6.6
65+	27.4 (11.2, 53.1)	1.4	--	--
Residence				
Urban	10.0 (7.3, 13.6)	21.3	10.0 (7.2, 13.8)	18.4
Rural	15.7 (11.0, 22.1)	20.7	14.8 (9.9, 21.7)	16.9
Education Level				
No formal education	21.2 (10.6, 37.9)	3.5	12.9 (6.1, 25.2)	1.5
Primary	12.2 (6.6, 21.5)	3.7	13.5 (7.1, 24.3)	3.0
Secondary	14.3 (10.3, 19.6)	23.6	14.5 (10.1, 20.4)	20.8
Tertiary	8.3 (5.8, 11.8)	11.1	8.3 (5.6, 12.1)	10.0

¹ In the past 30 days. Among those respondents who work outside of the home, usually indoors or both indoors and outdoors.

-- Indicates estimates based on less than 25 unweighted cases and has been suppressed.

6.2. Exposure to Tobacco Smoke at Home

Table 6.2 show the proportion of adults 15 years and older who reported exposure to tobacco smoke at home. Overall, 13.8 percent (185,100) of adults aged 15 years and above indicated being exposed to tobacco smoke at home in the past month. Among non-smokers, 10.6 percent were exposed to tobacco smoke at home. The proportions of non-smokers aged 15-24 years and 65 years and above who were exposed to tobacco smoke at home was 12.8 percent and 14.9 percent, respectively.

Table 6.2. Percentage and number of adults ≥15 years old who are exposed to tobacco smoke at home, by smoking status and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Adults Exposed to Tobacco Smoke at Home ¹			
	Overall		Non-Smokers	
	Percentage (95% CI)	Number in Thousands	Percentage (95% CI)	Number in Thousands
Overall	13.8 (12.1, 15.6)	185.1	10.6 (9.1, 12.2)	121.6
Gender				
Male	17.1 (14.5, 20.1)	111.0	11.6 (9.1, 14.6)	56.0
Female	10.7 (9.1, 12.5)	74.0	9.8 (8.3, 11.6)	65.6
Age (Years)				
15-24	13.6 (10.5, 17.4)	55.2	12.8 (9.6, 16.8)	47.5
25-44	13.7 (11.6, 16.0)	82.2	9.2 (7.5, 11.2)	45.2
45-64	11.3 (9.0, 14.2)	26.9	8.0 (5.8, 10.9)	16.3
65+	21.0 (15.8, 27.5)	20.7	14.9 (11.0, 19.8)	12.6
Residence				
Urban	11.4 (9.6, 13.5)	70.8	9.0 (7.3, 11.0)	49.2
Rural	15.8 (13.3, 18.7)	114.3	12.0 (9.8, 14.6)	72.4
Education Level				
No formal education	20.5 (16.0, 25.9)	45.7	15.3 (11.4, 20.3)	26.7
Primary	14.0 (10.8, 18.0)	27.6	10.6 (7.6, 14.7)	17.5
Secondary	13.5 (11.3, 15.9)	90.4	11.4 (9.3, 14.0)	67.1
Tertiary	8.3 (6.2, 11.0)	20.7	4.6 (3.1, 6.8)	10.3

¹ Adults reporting that smoking inside their home occurs daily, weekly, or monthly.

6.3. Exposure to Tobacco Smoke at Various Public Places

Table 6.3 shows the proportion of adults 15 years and older who reported exposure to tobacco smoke in various public places they visited in the past 30 days. Among adults who visited various public places, 67.4 percent were exposed to tobacco smoke in bars and nightclubs, 16.9 percent in restaurant, 19.9 percent in cafes, 7.5 percent on public transport. In addition, 16.3 percent were exposed to tobacco smoke in universities, 12.9 percent in schools, 8.5 percent in government buildings and 6.5 percent in health care facilities.

Table 6.3. Percentage of adults ≥15 years old who visited various public places in the past 30 days and were exposed to tobacco smoke, by smoking status and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Adults Exposed to Tobacco Smoke ¹ in...							
	Government Buildings	Health Care Facilities	Restaurants	Public Transportation	Universities	Schools	Bars/Nightclubs	Cafes
	Percentage (95% CI)							
Overall	8.5 (6.5, 11.1)	6.5 (5.2, 8.0)	16.9 (14.6, 19.4)	7.5 (6.1, 9.1)	16.3 (13.0, 20.1)	12.9 (10.5, 15.8)	67.4 (63.7, 71.0)	19.9 (15.6, 24.9)
Gender								
Male	9.2 (6.3, 13.1)	7.4 (5.4, 10.1)	16.9 (13.5, 20.9)	6.8 (4.9, 9.3)	15.7 (10.8, 22.1)	15.4 (11.5, 20.5)	66.0 (61.5, 70.2)	19.6 (14.2, 26.5)
Female	8.0 (5.9, 10.6)	5.8 (4.5, 7.3)	16.9 (13.8, 20.4)	8.1 (6.5, 10.0)	16.8 (12.2, 22.7)	10.8 (8.0, 14.3)	70.5 (63.2, 76.9)	20.1 (14.0, 28.0)
Age (Years)								
15-24	5.7 (3.3, 9.8)	4.5 (2.7, 7.4)	17.1 (12.5, 23.0)	8.9 (6.4, 12.3)	22.4 (16.0, 30.4)	19.2 (14.5, 25.0)	71.8 (64.4, 78.2)	15.1 (7.2, 28.9)
25-44	10.2 (7.1, 14.2)	7.0 (5.2, 9.3)	18.8 (15.6, 22.4)	7.6 (5.7, 10.1)	13.2 (8.8, 19.3)	10.8 (7.8, 14.8)	69.0 (64.6, 73.0)	22.3 (16.3, 29.7)
45-64	7.1 (4.4, 11.4)	8.1 (5.7, 11.3)	11.6 (8.3, 15.9)	5.6 (3.6, 8.6)	13.3 (7.1, 23.7)	5.9 (3.4, 10.3)	48.8 (39.4, 58.3)	19.7 (12.1, 30.5)
65+	9.6 (3.8, 22.2)	6.0 (3.0, 11.3)	11.8 (6.3, 20.9)	3.2 (1.1, 8.6)	--	0.0 N/A	73.6 (56.4, 85.8)	--
Residence								
Urban	5.4 (3.9, 7.4)	5.8 (4.2, 7.8)	17.7 (15.1, 20.5)	6.8 (5.3, 8.7)	18.6 (14.5, 23.4)	12.9 (9.7, 17.1)	63.7 (58.3, 68.8)	23.6 (18.6, 29.6)
Rural	11.5 (8.0, 16.2)	7.0 (5.2, 9.4)	16.0 (12.5, 20.4)	8.2 (6.1, 10.8)	13.3 (8.6, 19.9)	12.9 (9.7, 17.1)	71.2 (65.9, 76.0)	13.9 (8.0, 23.3)
Education Level								
No formal education	8.9 (4.6, 16.3)	7.1 (4.9, 10.1)	9.8 (6.2, 15.2)	5.1 (3.1, 8.3)	6.6 (1.7, 22.2)	3.8 (1.6, 8.4)	55.6 (45.1, 65.6)	--
Primary	9.8 (5.3, 17.5)	8.1 (4.9, 13.0)	8.1 (5.3, 12.0)	5.1 (2.9, 8.8)	4.4 (1.1, 15.8)	9.9 (4.5, 20.2)	62.7 (49.1, 74.5)	12.6 (4.7, 29.4)
Secondary	9.2 (6.3, 13.4)	6.2 (4.2, 8.9)	16.7 (13.6, 20.5)	8.1 (6.2, 10.5)	14.8 (10.5, 20.4)	16.0 (12.3, 20.5)	67.1 (61.9, 71.8)	18.5 (12.3, 26.9)
Tertiary	6.7 (4.5, 9.8)	5.4 (3.4, 8.6)	25.1 (20.6, 30.2)	9.2 (6.5, 13.1)	24.8 (18.4, 32.4)	10.6 (7.1, 15.7)	76.2 (67.6, 83.2)	23.7 (17.5, 31.3)

¹ Among those that visited the place in the past 30 days.

N/A - The estimate is "0.0"

- Indicates estimates based on less than 25 unweighted cases and has been suppressed.

Table 6.3. (cont.) Percentage of adults ≥ 15 years old who visited various public places in the past 30 days and were exposed to tobacco smoke, by smoking status and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Adults Exposed to Tobacco Smoke ¹ in...							
	Government Buildings	Health Care Facilities	Restaurants	Public Transportation	Universities	Schools	Bars/Nightclubs	Cafes
	Percentage (95% CI)							
Non-Smokers	8.4 (6.2, 11.1)	6.3 (4.9, 8.0)	18.1 (15.5, 20.9)	7.6 (6.2, 9.4)	16.5 (13.0, 20.6)	11.9 (9.5, 14.7)	70.8 (65.8, 75.4)	18.1 (13.6, 23.7)
Gender								
Male	9.0 (5.7, 13.9)	7.2 (4.9, 10.6)	19.4 (15.1, 24.6)	7.5 (5.3, 10.6)	15.1 (10.2, 22.0)	13.3 (9.5, 18.3)	70.5 (64.9, 75.5)	15.7 (10.0, 23.8)
Female	7.9 (5.8, 10.6)	5.7 (4.5, 7.3)	17.0 (13.9, 20.7)	7.7 (6.1, 9.6)	17.4 (12.6, 23.4)	10.9 (8.0, 14.5)	71.3 (63.7, 77.9)	20.2 (14.0, 28.2)
Age (Years)								
15-24	6.1 (3.5, 10.5)	4.9 (2.9, 8.1)	18.3 (13.3, 24.6)	9.3 (6.5, 13.0)	21.9 (15.4, 30.1)	17.6 (13.1, 23.2)	71.7 (63.4, 78.8)	13.1 (5.7, 27.5)
25-44	10.1 (6.7, 14.9)	6.8 (4.8, 9.4)	20.2 (16.4, 24.5)	8.0 (5.9, 10.8)	13.3 (8.5, 20.3)	9.1 (6.6, 12.5)	74.8 (68.5, 80.2)	21.1 (14.6, 29.6)
45-64	6.1 (3.8, 9.6)	7.2 (5.0, 10.5)	13.0 (9.3, 17.9)	5.3 (3.5, 8.1)	12.9 (6.7, 23.4)	5.8 (3.1, 10.6)	48.9 (38.3, 59.5)	18.7 (10.9, 30.1)
65+	10.0 (3.9, 23.5)	5.8 (2.9, 11.6)	11.6 (6.0, 21.2)	1.3 (0.5, 3.4)	--	0.0 N/A	--	--
Residence								
Urban	4.9 (3.5, 6.9)	5.7 (4.1, 7.7)	18.8 (15.9, 22.2)	7.2 (5.5, 9.2)	19.6 (15.1, 25.1)	13.4 (10.0, 17.7)	66.1 (57.9, 73.5)	21.2 (15.7, 27.9)
Rural	11.7 (8.0, 16.8)	6.7 (4.8, 9.5)	17.3 (13.3, 22.1)	8.1 (5.9, 11.1)	12.4 (7.6, 19.4)	10.6 (7.5, 14.6)	76.0 (70.1, 81.0)	13.5 (7.2, 23.7)
Education Level								
No formal education	7.2 (3.5, 14.3)	7.1 (4.8, 10.5)	9.8 (6.0, 15.5)	3.8 (2.4, 6.0)	2.8 (0.8, 8.9)	4.1 (1.6, 10.1)	61.4 (47.7, 73.5)	--
Primary	10.3 (5.3, 19.4)	7.1 (4.5, 10.9)	8.7 (5.4, 13.7)	4.7 (2.4, 8.8)	6.3 (1.7, 21.4)	6.8 (3.5, 12.8)	65.1 (51.5, 76.6)	13.8 (4.7, 34.1)
Secondary	9.3 (6.1, 14.0)	6.3 (4.2, 9.3)	18.3 (14.7, 22.5)	8.5 (6.4, 11.2)	14.1 (9.8, 20.0)	14.6 (11.0, 19.0)	70.2 (64.3, 75.5)	17.8 (11.3, 27.0)
Tertiary	6.4 (4.3, 9.5)	4.9 (3.1, 7.8)	25.6 (20.6, 31.2)	9.6 (6.6, 13.8)	25.7 (18.7, 34.2)	10.7 (7.1, 15.8)	76.7 (66.2, 84.8)	19.9 (13.7, 28.0)

¹ Among those that visited the place in the past 30 days.

N/A - The estimate is "0.0"

- Indicates estimates based on less than 25 unweighted cases and has been suppressed.

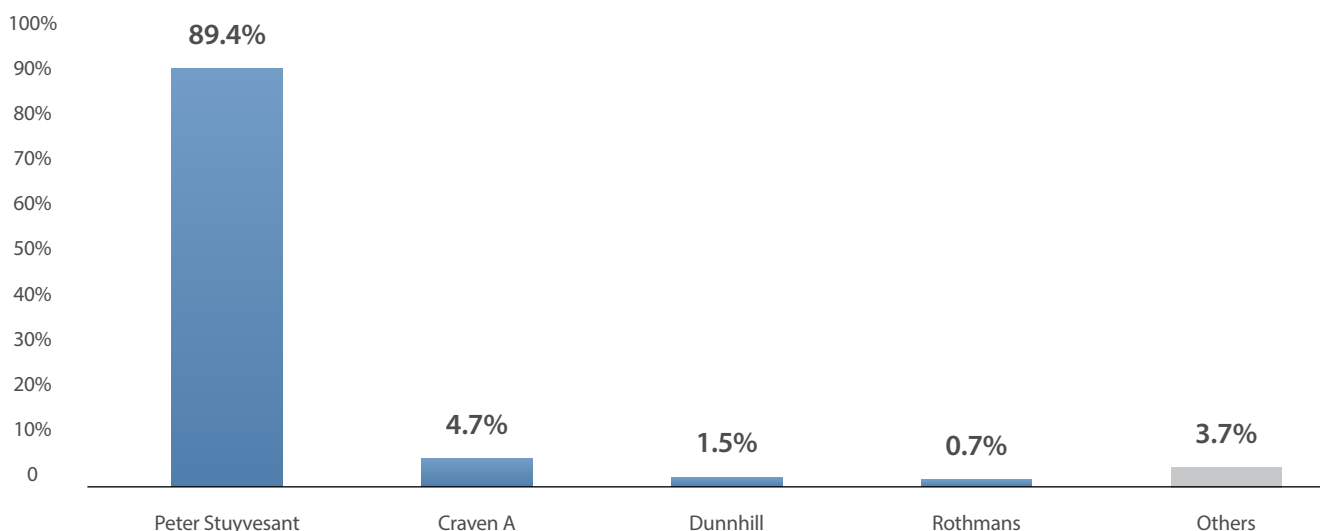
7.0. ECONOMICS



7.1. Manufactured Cigarette Brand Purchased

As shown in **Figure 3** below, 89.4 percent of current manufactured cigarette smokers, aged 15 years and older, purchased Peter Stuyvesant, while the least purchased brand was Rothmans (0.7%).

Figure 3. Last cigarette brand purchased – GATS Botswana, 2017



7.2. Source of Last Manufactured Cigarette Purchased

Figure 4 shows the location of last cigarette purchase among current tobacco smokers. Overall, 48.3 percent and 30.5 percent of manufactured cigarette smokers bought their last cigarettes from street vendors and stores respectively. Among manufactured cigarette smokers aged 15-24 years, 64.6 percent purchased cigarettes from street vendors (**Table 7.2**).

Figure 4. Sources of last purchased cigarette – GATS Botswana, 2017

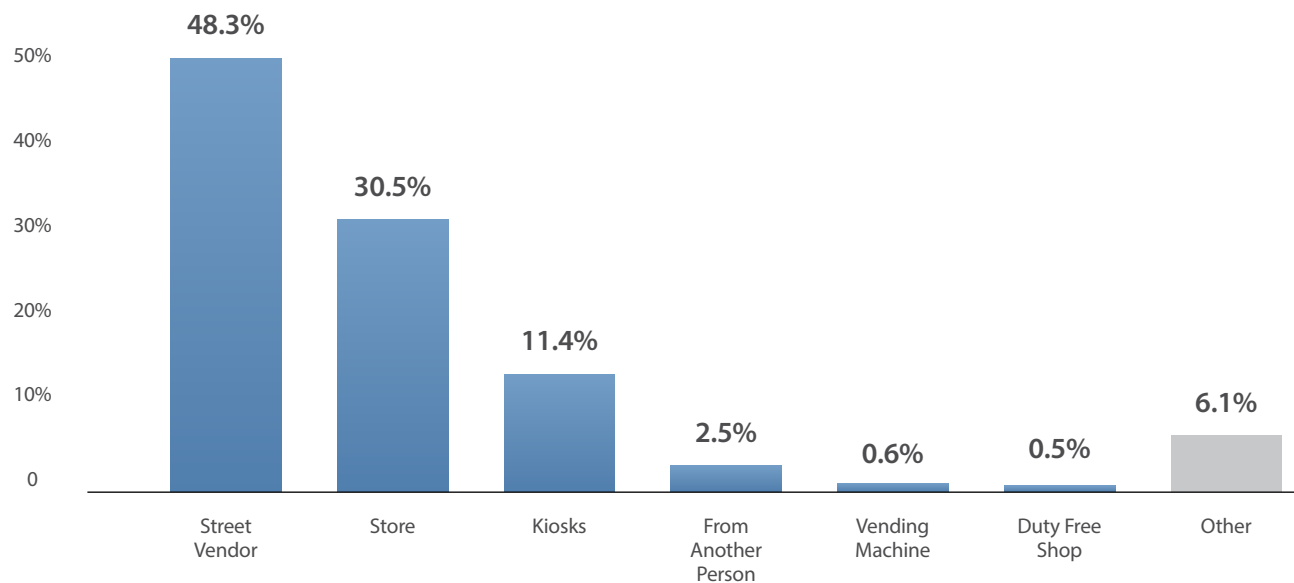


Table 7.1. Percentage distribution of manufactured cigarette smokers ≥15 years old, by the source of last purchase of cigarettes and selected demographic characteristics – GATS Botswana, 2017

Source	Overall	Gender		Age (Years)		Residence	
		Male	Female	15-24	25+	Urban	Rural
	Percentage (95% CI)						
Vending machine	0.6 (0.2, 1.7)	0.7 (0.2, 1.9)	0.0 N/A	1.1 (0.1, 7.6)	0.5 (0.2, 1.6)	1.2 (0.4, 3.7)	0.2 (0.0, 1.5)
Store	30.5 (24.7, 37.0)	30.4 (24.4, 37.2)	31.0 (17.5, 48.7)	24.0 (12.6, 40.8)	32.1 (26.3, 38.5)	27.3 (21.1, 34.5)	32.8 (24.1, 42.9)
Street vendor	48.3 (41.1, 55.7)	48.3 (40.8, 56.0)	48.2 (31.4, 65.5)	64.6 (46.9, 79.0)	44.2 (36.9, 51.8)	51.4 (42.9, 59.9)	46.0 (35.3, 57.2)
Military store	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A
Duty-free shop	0.5 (0.2, 1.4)	0.5 (0.2, 1.6)	0.5 (0.1, 3.5)	0.0 N/A	0.6 (0.2, 1.8)	1.2 (0.4, 3.3)	0.0 N/A
Outside the country	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A
Kiosks	11.4 (8.0, 16.1)	11.9 (8.2, 16.9)	6.8 (2.5, 17.0)	6.3 (2.2, 16.4)	12.7 (8.8, 18.1)	13.5 (8.5, 20.8)	9.8 (5.7, 16.5)
Internet	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A	0.0 N/A
From another person	2.5 (1.2, 5.4)	2.6 (1.1, 5.8)	1.8 (0.3, 12.1)	1.1 (0.3, 4.5)	2.9 (1.3, 6.6)	0.6 (0.1, 4.2)	3.9 (1.7, 8.8)
Other	6.1 (4.0, 9.3)	5.5 (3.5, 8.5)	11.7 (2.9, 36.6)	3.0 (0.7, 11.5)	6.9 (4.4, 10.8)	4.7 (2.4, 9.0)	7.2 (4.1, 12.3)
Total	100	100	100	100	100	100	100

N/A - The estimate is "0.0"

Table 7.2 shows the average monthly expenditure for cigarettes was Botswana Pula (P)789.10. Among manufactured cigarette smokers, the average cost of a pack of 20 manufactured cigarettes was P105.50.

Table 7.2. Average cigarette expenditure (Botswana Pula) per month among manufactured cigarette smokers ≥15 years old, by selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Cigarette Expenditure Per Month	Cigarette Expenditure Per Month	Average Cost of 20 Manufactured Cigarettes	Average Cost of 20 Manufactured Cigarettes
	Average (95% CI)	Median (95% CI)	Average (95% CI)	Median (95% CI)
Overall	789.1 (486.5, 1091.7)	239.8 (191.7, 314.0)	105.5 (64.4, 146.6)	48.3 (44.0, 48.8)
Gender				
Male	754.2 (454.1, 1054.3)	240.5 (208.9, 321.6)	98.2 (58.5, 138.0)	48.2 (43.3, 48.8)
Female	1,116.7 (0.0, 2450.9)	168.2 (90.6, 349.5)	197.2 (0.0, 419.1)	48.2 (38.7, 56.5)
Age (Years)				
15-24	735.4 (82.6, 1388.1)	281.8 (115.1, 379.9)	95.3 (6.9, 183.7)	45.0 (33.4, 48.6)
25-44	892.4 (440.7, 1344.1)	239.1 (199.6, 326.3)	119.1 (58.5, 179.7)	48.7 (44.9, 49.4)
45-64	547.7 (278.6, 816.7)	217.7 (120.1, 281.8)	86.4 (45.7, 127.2)	48.3 (39.1, 49.0)
65+	--	--	--	--
Residence				
Urban	558.5 (304.6, 812.4)	295.4 (227.5, 302.3)	74.2 (41.8, 106.7)	48.4 (43.9, 49.1)
Rural	983.3 (471.1, 1495.5)	217.7 (137.8, 316.6)	132.0 (60.0, 204.1)	48.0 (39.4, 49.1)
Education Level				
No formal education	1,206.0 (137.4, 2274.7)	209.2 (113.9, 372.6)	137.6 (13.0, 262.2)	48.5 (36.2, 57.3)
Primary	648.3 (78.8, 1217.8)	221.0 (119.2, 298.6)	99.6 (7.7, 191.5)	43.2 (39.6, 47.0)
Secondary	792.5 (395.7, 1189.2)	263.6 (167.1, 304.0)	106.3 (52.3, 160.2)	48.6 (45.3, 49.4)
Tertiary	404.9 (223.1, 586.7)	220.5 (53.3, 333.2)	59.8 (35.7, 83.9)	39.9 (39.4, 47.0)

- Indicates estimates based on less than 25 unweighted cases and has been suppressed.



7.3. Last Purchased Cigarette Package

Figure 5 and **Table 7.3** show that, overall, 82.2 percent of manufactured cigarette smokers purchased single sticks of cigarette, while 10.2 percent purchased a pack of 20 cigarettes; 3.9 percent bought the pack of 10 cigarettes; and 3.6 percent other. **Table 7.3** also indicates 87.2 percent of female manufactured cigarette smokers purchased single sticks whereas 81.7 percent of male manufactured cigarette smokers bought single sticks of cigarettes.

Figure 5. Last purchased cigarette package type – GATS Botswana, 2017

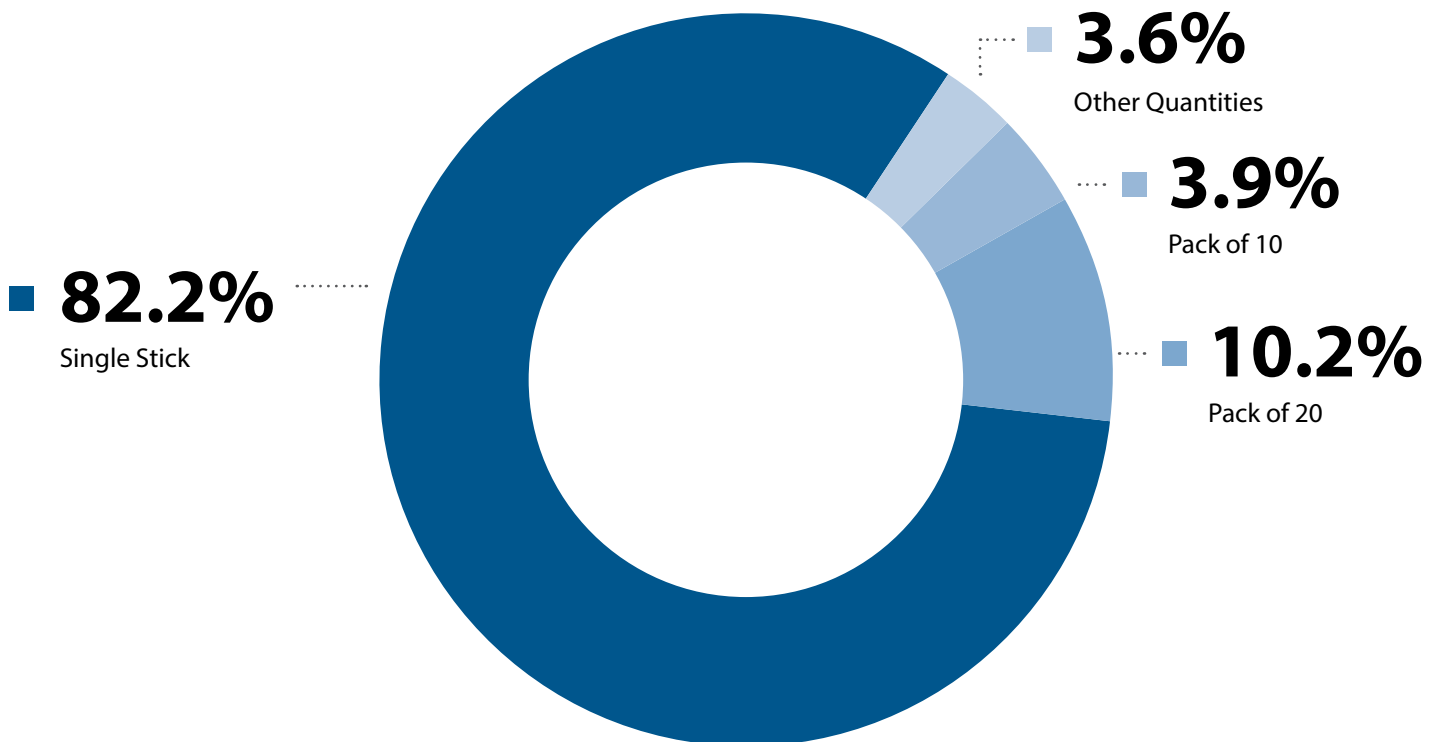


Table 7.3. Percentage distribution of manufactured cigarette smokers ≥ 15 years old, by the packaging type of last purchase of cigarettes selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Single Stick	Pack of 10	Pack of 20	Other Quantities	Total
	Percentage (95% CI)				
Overall	82.2 (76.7, 86.6)	3.9 (2.3, 6.5)	10.2 (6.4, 15.8)	3.6 (2.1, 6.1)	100
Gender					
Male	81.7 (75.9, 86.3)	3.7 (2.1, 6.5)	10.6 (6.6, 16.8)	3.8 (2.2, 6.5)	100
Female	87.2 (74.0, 94.2)	5.2 (1.4, 17.2)	5.8 (2.2, 14.2)	1.8 (0.3, 12.1)	100
Age (Years)					
15-24	88.2 (71.1, 95.8)	1.4 (0.2, 9.5)	10.3 (3.2, 28.1)	0.1 (0.0, 0.9)	100
25-44	83.1 (76.4, 88.2)	5.2 (2.9, 9.2)	7.8 (4.1, 14.3)	3.6 (1.9, 7.0)	100
45-64	78.0 (65.3, 87.0)	3.0 (0.8, 10.3)	16.8 (8.7, 30.0)	1.9 (0.7, 5.5)	100
65+	--	--	--	--	--
Residence					
Urban	84.8 (78.9, 89.4)	6.4 (3.6, 11.0)	6.5 (3.9, 10.7)	2.2 (1.0, 5.0)	100
Rural	80.2 (71.6, 86.7)	2.0 (0.6, 6.0)	12.9 (7.1, 22.5)	4.6 (2.4, 8.9)	100
Education Level					
No formal education	77.3 (63.2, 87.1)	0.0 N/A	16.0 (7.1, 32.3)	6.5 (2.5, 15.5)	100
Primary	94.1 (86.7, 97.5)	0.0 N/A	2.7 (1.0, 7.4)	2.6 (0.8, 7.9)	100
Secondary	85.2 (76.4, 91.0)	3.8 (2.0, 7.3)	9.3 (4.4, 18.9)	1.7 (0.7, 4.2)	100
Tertiary	67.4 (54.6, 78.1)	13.1 (6.4, 25.1)	12.4 (6.6, 22.2)	7.1 (2.4, 18.9)	100

- Indicates estimates based on less than 25 unweighted cases and has been suppressed.

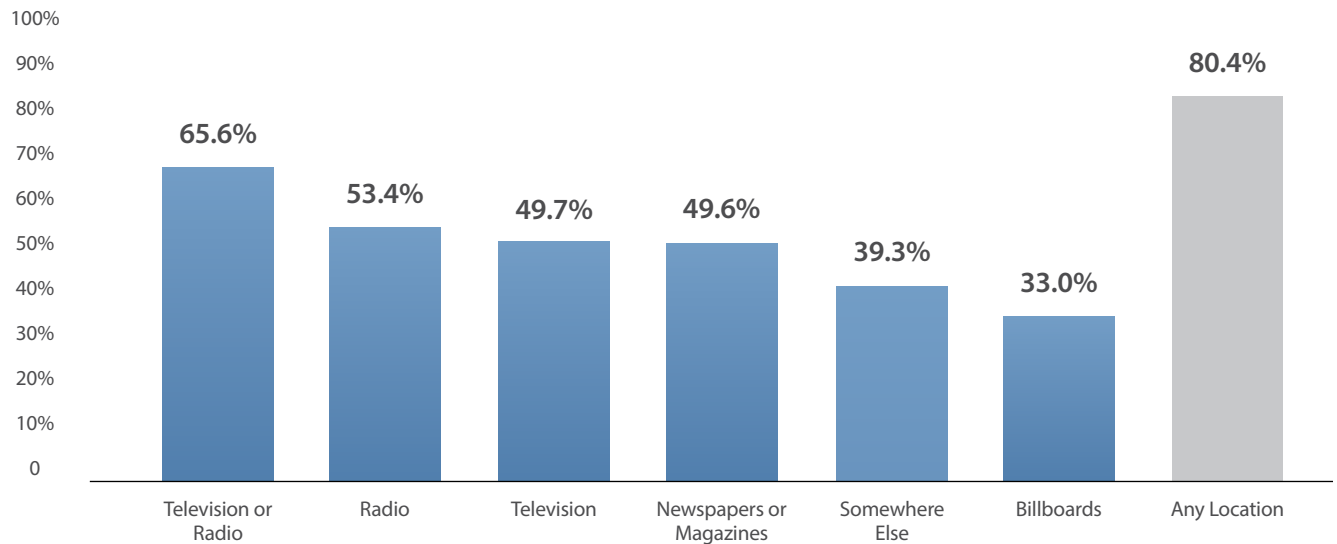
N/A - The estimate is "0.0"

8.0. MEDIA



Overall, the findings show 80.4 percent of adults aged 15 years and older have noticed anti-cigarette smoking information on any location during the last 30 days. Furthermore, 53.4 percent and 49.7 percent of adults noticed anti-cigarette smoking information on the radio and television respectively.

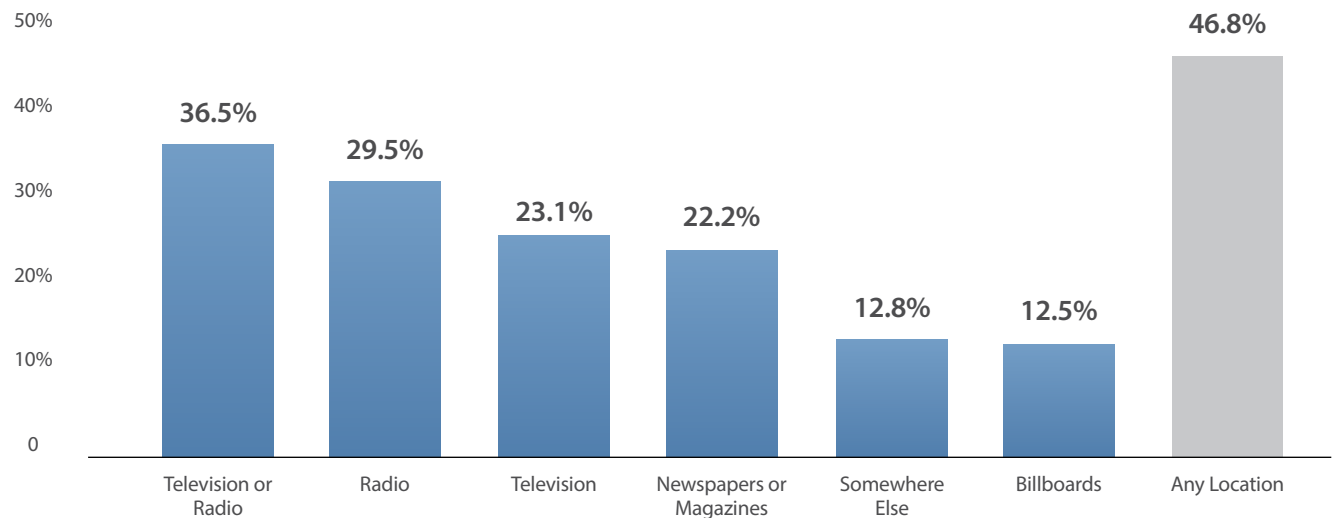
Figure 6. Noticed anti-cigarette smoking information by various media* – GATS Botswana, 2017



*Somewhere else includes hospitals, clinics, schools.

Overall, the findings show 46.8 percent of adults aged 15 years and older have noticed anti-smokeless tobacco information on any location during the last 30 days. In addition, 29.5 percent and 23.1 percent of adults noticed anti-smokeless tobacco information on the radio and television, respectively.

Figure 7. Noticed anti-smokeless tobacco information by various media* – GATS Botswana, 2017



*Somewhere else includes hospitals, clinics, schools.

8.1. Health Warnings on Cigarette Package

Overall, 61.3 percent of current smokers noticed health warning labels on cigarette package. Among current smokers, who noticed health warning labels on cigarette package, 42.5 percent thought of quitting because of the health warning labels.

Among those with no formal education, 30.8 percent noticed health warnings on cigarette packages. Among current smokers with no formal education, who noticed health warning labels, only 18.2 percent thought of quitting because of the health warnings.

Table 8.1. Percentage of current smokers ≥ 15 years and old who noticed health warnings on cigarette packages and considered quitting because of the warning labels during the last 30 days, by selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Current Smokers ¹ Who...	
	Noticed Health Warnings on Cigarette Package ²	Thought About Quitting Because of Warning Label ²
	Percentage (95% CI)	
Overall	61.3 (55.3, 66.9)	42.5 (37.0, 48.1)
Gender		
Male	63.1 (56.6, 69.2)	43.5 (37.5, 49.7)
Female	49.3 (36.1, 62.6)	36.1 (24.6, 49.5)
Age (Years)		
15-24	57.1 (40.4, 72.3)	41.2 (26.6, 57.6)
25-44	70.9 (64.6, 76.6)	50.0 (43.0, 56.9)
45-64	48.4 (36.4, 60.7)	31.3 (22.2, 42.1)
65+	25.9 (12.8, 45.3)	13.3 (6.0, 27.2)
Residence		
Urban	77.6 (70.5, 83.4)	55.7 (47.8, 63.4)
Rural	50.8 (43.0, 58.5)	34.0 (27.4, 41.2)
Education Level		
No formal education	30.8 (21.0, 42.6)	18.2 (11.4, 27.7)
Primary	63.8 (50.5, 75.3)	47.8 (32.7, 63.3)
Secondary	69.7 (60.8, 77.4)	50.6 (41.8, 59.4)
Tertiary	86.3 (77.0, 92.2)	53.7 (42.2, 64.9)

¹ Includes daily and occasional (less than daily) smokers.

² During the last 30 days.

8.2. Marketing of Tobacco Products

Overall, 27.8 percent of adults, aged 15 years and older, noticed cigarette advertisement, sponsorship or promotion (**Table 8.2**). The study shows that 11.3 percent of adults noticed cigarette advertisements, sponsorship or promotion of smokeless tobacco during the last 30 days in various places (**Table 8.3**).

Table 8.2. Percentage of adults ≥15 years old who noticed cigarette marketing during the last 30 days in various places, by selected demographic characteristics – GATS Botswana, 2017

Places	Overall	Gender		Age (Years)		Residence	
		Male	Female	15-24	25+	Urban	Rural
	Percentage (95% CI)						
<i>Noticed Advertisements</i>							
In stores	8.7 (7.4, 10.1)	10.8 (8.7, 13.2)	6.7 (5.3, 8.4)	8.8 (6.0, 12.6)	8.6 (7.4, 10.1)	8.6 (7.0, 10.6)	8.7 (6.9, 10.9)
On television	5.1 (4.2, 6.2)	5.0 (3.8, 6.6)	5.2 (3.9, 6.9)	6.7 (4.6, 9.6)	4.5 (3.7, 5.4)	5.4 (4.1, 7.1)	4.9 (3.7, 6.4)
On the radio	2.0 (1.5, 2.6)	1.7 (1.1, 2.6)	2.2 (1.6, 3.1)	2.7 (1.6, 4.4)	1.7 (1.2, 2.3)	2.4 (1.6, 3.4)	1.6 (1.1, 2.4)
On billboards	2.0 (1.5, 2.8)	2.6 (1.7, 4.0)	1.5 (0.9, 2.5)	3.4 (2.0, 5.8)	1.4 (1.0, 2.1)	1.9 (1.3, 2.9)	2.1 (1.3, 3.4)
On posters	2.2 (1.7, 3.0)	2.7 (1.9, 3.9)	1.8 (1.2, 2.7)	2.5 (1.4, 4.4)	2.1 (1.6, 2.9)	2.9 (2.0, 4.0)	1.7 (1.0, 2.8)
In newspapers or magazines	2.5 (2.0, 3.1)	3.0 (2.2, 4.0)	2.1 (1.4, 2.9)	1.9 (1.1, 3.3)	2.7 (2.1, 3.5)	2.8 (2.1, 3.8)	2.2 (1.6, 3.1)
In cinemas	0.9 (0.6, 1.3)	1.0 (0.6, 1.7)	0.8 (0.5, 1.2)	1.1 (0.5, 2.4)	0.8 (0.5, 1.1)	1.0 (0.6, 1.8)	0.8 (0.5, 1.3)
On the internet	4.1 (3.4, 5.0)	4.4 (3.4, 5.8)	3.9 (2.9, 5.1)	6.1 (4.4, 8.3)	3.3 (2.6, 4.2)	5.8 (4.5, 7.5)	2.7 (1.9, 3.7)
On public transportation	1.5 (1.2, 2.0)	1.7 (1.1, 2.5)	1.4 (0.9, 2.1)	1.4 (0.7, 2.6)	1.6 (1.2, 2.2)	2.0 (1.4, 2.8)	1.2 (0.7, 1.9)
On public walls	1.7 (1.2, 2.4)	1.7 (1.0, 3.0)	1.6 (1.0, 2.5)	2.8 (1.5, 5.0)	1.2 (0.8, 1.7)	2.1 (1.4, 3.1)	1.3 (0.7, 2.5)
Somewhere else	2.6 (1.9, 3.3)	2.8 (2.0, 4.0)	2.3 (1.5, 3.4)	3.5 (2.1, 5.9)	2.1 (1.6, 2.8)	2.2 (1.5, 3.3)	2.8 (1.9, 4.1)
Noticed Sports Sponsorship	2.2 (1.7, 2.8)	2.5 (1.8, 3.5)	1.9 (1.3, 2.8)	3.4 (2.1, 5.3)	1.7 (1.3, 2.3)	2.8 (2.1, 3.7)	1.8 (1.1, 2.7)
<i>Noticed Cigarette Promotions</i>							
Free samples	1.1 (0.8, 1.6)	1.2 (0.8, 1.9)	1.0 (0.6, 1.7)	1.1 (0.6, 2.2)	1.1 (0.8, 1.6)	1.5 (1.0, 2.5)	0.8 (0.5, 1.2)
Sale prices	5.1 (4.2, 6.1)	6.5 (5.0, 8.4)	3.8 (2.9, 5.0)	6.0 (4.1, 8.7)	4.7 (3.8, 5.8)	5.8 (4.6, 7.4)	4.5 (3.3, 6.0)
Coupons	0.6 (0.4, 1.0)	0.5 (0.3, 0.9)	0.8 (0.4, 1.3)	1.3 (0.7, 2.3)	0.4 (0.2, 0.6)	0.8 (0.5, 1.3)	0.5 (0.3, 1.0)
Free gifts/ discounts on other products	0.9 (0.6, 1.2)	1.2 (0.7, 1.9)	0.6 (0.3, 1.0)	0.9 (0.4, 1.9)	0.9 (0.6, 1.3)	1.2 (0.8, 1.9)	0.5 (0.3, 1.0)
Clothing/item with brand name or logo	7.9 (6.8, 9.3)	8.5 (6.8, 10.6)	7.4 (6.1, 8.9)	12.1 (9.4, 15.4)	6.1 (4.9, 7.6)	7.7 (6.3, 9.4)	8.1 (6.4, 10.2)
Mail promoting cigarettes	0.5 (0.3, 0.9)	0.6 (0.3, 1.3)	0.4 (0.2, 0.8)	1.0 (0.4, 2.2)	0.3 (0.2, 0.5)	0.6 (0.3, 1.0)	0.5 (0.2, 1.1)
Noticed Any Advertisement, Sponsorship, or Promotion	27.8 (25.9, 29.7)	31.1 (28.0, 34.5)	24.6 (22.3, 27.1)	35.4 (31.3, 39.8)	24.5 (22.3, 26.7)	29.8 (27.1, 32.7)	26.0 (23.4, 28.8)

Table 8.3. Percentage of adults ≥15 years old who noticed smokeless tobacco marketing during the last 30 days in various places, by selected demographic characteristics – GATS Botswana, 2017

Places	Overall	Gender		Age (Years)		Residence	
		Male	Female	15-24	25+	Urban	Rural
	Percentage (95% CI)						
<i>Noticed Advertisements</i>							
In stores	3.6 (2.8, 4.5)	3.8 (2.7, 5.4)	3.3 (2.5, 4.4)	3.9 (2.3, 6.6)	3.4 (2.7, 4.3)	3.9 (2.9, 5.2)	3.3 (2.3, 4.8)
On television	1.1 (0.8, 1.7)	1.3 (0.7, 2.2)	1.0 (0.6, 1.7)	1.5 (0.7, 3.3)	1.0 (0.7, 1.4)	1.1 (0.7, 1.8)	1.1 (0.6, 2.0)
On the radio	0.8 (0.5, 1.2)	0.8 (0.4, 1.6)	0.7 (0.4, 1.3)	0.9 (0.4, 2.1)	0.7 (0.4, 1.1)	1.1 (0.6, 1.9)	0.5 (0.2, 0.9)
On billboards	0.9 (0.6, 1.3)	1.0 (0.6, 1.9)	0.7 (0.4, 1.4)	0.8 (0.3, 1.8)	0.9 (0.6, 1.5)	1.1 (0.6, 2.0)	0.7 (0.3, 1.3)
On posters	1.2 (0.9, 1.7)	1.1 (0.6, 2.0)	1.3 (0.9, 2.0)	1.0 (0.5, 2.2)	1.3 (0.9, 1.9)	1.8 (1.2, 2.6)	0.7 (0.4, 1.4)
In newspapers or magazines	0.9 (0.6, 1.5)	0.8 (0.4, 1.6)	1.0 (0.6, 1.8)	0.9 (0.4, 1.9)	1.0 (0.6, 1.6)	1.4 (0.8, 2.3)	0.6 (0.3, 1.2)
In cinemas	0.5 (0.3, 0.8)	0.4 (0.2, 0.9)	0.5 (0.2, 0.8)	0.4 (0.1, 2.0)	0.5 (0.3, 0.8)	0.6 (0.3, 1.3)	0.3 (0.2, 0.6)
On the internet	0.8 (0.6, 1.3)	1.1 (0.6, 1.8)	0.6 (0.4, 1.1)	1.1 (0.5, 2.3)	0.7 (0.5, 1.1)	1.4 (0.9, 2.3)	0.3 (0.1, 0.8)
On public transportation	0.5 (0.4, 0.8)	0.6 (0.3, 1.2)	0.5 (0.3, 0.9)	0.6 (0.2, 1.3)	0.5 (0.3, 0.9)	0.8 (0.5, 1.2)	0.4 (0.2, 0.8)
On public walls	0.7 (0.4, 1.1)	0.7 (0.3, 1.4)	0.7 (0.4, 1.3)	1.0 (0.4, 2.2)	0.6 (0.3, 1.0)	0.9 (0.5, 1.6)	0.5 (0.2, 1.3)
Somewhere else	0.9 (0.6, 1.6)	0.9 (0.4, 1.8)	1.0 (0.5, 2.0)	2.1 (1.0, 4.3)	0.4 (0.3, 0.7)	1.0 (0.5, 1.9)	0.9 (0.4, 2.0)
Noticed Sports Sponsorship	0.6 (0.4, 0.9)	0.6 (0.3, 1.3)	0.5 (0.3, 1.0)	0.7 (0.3, 1.7)	0.5 (0.3, 0.9)	0.8 (0.4, 1.4)	0.4 (0.2, 0.9)
<i>Noticed Cigarette Promotions</i>							
Free samples	0.7 (0.5, 1.1)	0.5 (0.3, 1.0)	0.9 (0.5, 1.5)	0.7 (0.3, 1.7)	0.7 (0.5, 1.1)	0.7 (0.4, 1.3)	0.7 (0.4, 1.2)
Sale prices	1.9 (1.4, 2.5)	1.9 (1.2, 2.9)	1.9 (1.3, 2.9)	1.8 (1.0, 3.2)	1.9 (1.4, 2.7)	2.4 (1.6, 3.6)	1.4 (0.9, 2.3)
Coupons	0.1 (0.1, 0.3)	0.1 (0.0, 0.4)	0.1 (0.0, 0.5)	0.3 (0.1, 0.8)	0.1 (0.0, 0.2)	0.3 (0.1, 0.6)	0.0 N/A
Free gifts/discounts on other products	0.5 (0.3, 0.9)	0.8 (0.4, 1.5)	0.3 (0.1, 0.7)	0.6 (0.3, 1.6)	0.5 (0.3, 0.9)	0.7 (0.4, 1.3)	0.4 (0.2, 0.9)
Clothing/item with brand name or logo	0.9 (0.6, 1.4)	0.6 (0.3, 1.1)	1.2 (0.7, 2.0)	1.7 (0.8, 3.7)	0.5 (0.4, 0.8)	1.1 (0.6, 2.0)	0.7 (0.3, 1.6)
Mail promoting cigarettes	0.3 (0.2, 0.5)	0.2 (0.1, 0.4)	0.4 (0.2, 0.8)	0.4 (0.2, 1.1)	0.2 (0.1, 0.5)	0.4 (0.2, 0.8)	0.2 (0.1, 0.6)
Noticed Any Advertisement, Sponsorship, or Promotion	11.3 (10.0, 12.7)	11.3 (9.4, 13.6)	11.2 (9.6, 13.1)	12.7 (10.0, 16.0)	10.6 (9.3, 12.1)	12.6 (10.7, 14.8)	10.1 (8.4, 12.1)

9.0. KNOWLEDGE, ATTITUDES AND PERCEPTIONS

Overall, 95.3 percent of adults believed that smoking causes serious illnesses. Furthermore, majority of adults aged 15 years and older believed that smoking causes lung cancer (96.5%), heart attack (80.0%) and stroke (71.3%). The results also indicated that 91.4 percent of adults believed that breathing other people's smoke causes serious illnesses in non-smokers (**Table 9.1**).

Table 9.1. Percentage of adults ≥15 years old who believe that smoking causes serious illness and various diseases, by smoking status and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Adults Who Believe That Smoking Causes...			
	Serious Illness	Stroke	Heart Attack	Lung Cancer
	Percentage (95% CI)			
Overall	95.3 (94.2, 96.2)	71.3 (69.1, 73.4)	80.0 (78.3, 81.7)	96.5 (95.8, 97.2)
Smoking Status				
Current smokers ¹	93.2 (90.2, 95.3)	73.9 (68.8, 78.4)	81.2 (76.8, 84.9)	93.0 (90.1, 95.1)
Non-smokers ²	95.6 (94.4, 96.6)	70.9 (68.5, 73.2)	79.8 (77.9, 81.6)	97.1 (96.3, 97.7)
Gender				
Male	94.7 (92.9, 96.1)	70.7 (67.6, 73.7)	80.5 (77.8, 82.9)	96.0 (94.7, 97.0)
Female	95.8 (94.7, 96.7)	71.8 (69.2, 74.3)	79.6 (77.4, 81.6)	97.0 (96.1, 97.7)
Age (Years)				
15-24	96.7 (93.7, 98.3)	69.3 (64.8, 73.5)	75.4 (71.1, 79.3)	97.6 (95.9, 98.6)
25-44	95.6 (94.4, 96.6)	71.5 (68.1, 74.8)	83.2 (81.2, 85.1)	97.0 (95.9, 97.9)
45-64	95.0 (93.0, 96.5)	74.4 (71.1, 77.4)	81.5 (78.8, 83.9)	96.5 (94.8, 97.6)
65+	88.1 (83.5, 91.5)	70.8 (65.3, 75.8)	75.4 (70.3, 79.8)	89.0 (84.9, 92.1)
Residence				
Urban	96.1 (95.1, 97.0)	70.4 (67.0, 73.6)	80.0 (77.4, 82.4)	97.5 (96.4, 98.2)
Rural	94.5 (92.7, 95.9)	72.1 (69.1, 74.9)	80.0 (77.6, 82.2)	95.7 (94.6, 96.6)
Education Level				
No formal education	87.6 (83.6, 90.8)	70.4 (66.3, 74.1)	73.0 (68.7, 76.9)	90.2 (87.6, 92.3)
Primary	96.2 (94.0, 97.6)	72.8 (68.3, 77.0)	82.6 (78.9, 85.7)	95.7 (93.4, 97.3)
Secondary	96.7 (95.3, 97.7)	71.6 (68.7, 74.4)	80.1 (77.5, 82.4)	98.0 (96.9, 98.7)
Tertiary	97.6 (96.2, 98.5)	70.1 (65.0, 74.7)	84.0 (80.7, 86.8)	98.9 (98.0, 99.4)

¹ Includes daily and occasional (less than daily) smokers.

² Includes former and never smokers.



Table 9.2. Percentage of adults ≥ 15 years old who believe that breathing other people's smoke causes serious illness in non-smokers, by smoking status and selected demographic characteristics – GATS Botswana, 2017

Demographic Characteristics	Belief that Breathing Other People's Smoke Causes Serious Illness in Non-Smokers
	Percentage (95% CI)
Overall	91.4 (89.9, 92.8)
Smoking Status	
Current smokers ¹	89.7 (85.6, 92.7)
Non-smokers ²	91.7 (90.1, 93.1)
Gender	
Male	90.7 (88.1, 92.8)
Female	92.1 (90.5, 93.4)
Age (Years)	
15-24	89.2 (85.4, 92.1)
25-44	92.6 (90.6, 94.2)
45-64	93.8 (91.6, 95.4)
65+	87.3 (82.6, 90.8)
Residence	
Urban	91.7 (89.8, 93.2)
Rural	91.2 (88.7, 93.2)
Education Level	
No formal education	85.6 (80.0, 89.8)
Primary	93.7 (90.6, 95.8)
Secondary	92.0 (90.0, 93.6)
Tertiary	93.3 (88.3, 96.3)

¹ Includes daily and occasional (less than daily) smokers

² Includes former and never smokers.

10.0. DISCUSSIONS AND CONCLUSIONS

10.1. Discussions

10.1.1. Monitor Tobacco Use and Prevention Policies

Tobacco use in Botswana is prevalent as indicated by 17.6 percent of adults reported current tobacco use in any form and is generally higher than in some of the African countries that have conducted GATS (5–9). Overall, 14.2 percent of adults smoked tobacco (25.7% among men and 3.6% among women) and 4.3 percent of adults used smokeless tobacco (2.1% among men, and 6.3% among women). In rural areas, 16.1 percent of adults currently smoked tobacco and 5.7 percent of adults currently used smokeless tobacco; in urban areas, 12.0 percent of adults currently smoked tobacco and 2.6 percent of adults currently used smokeless tobacco. GATS Botswana also found out that adults aged 20 – 34 years in rural areas and male adults aged 20 – 34 years initiated daily smoking at an average age lower than the legalized age of tobacco use (18 years and above). Daily cigarette smokers aged 65 years and above smoke at least a pack of 20 cigarettes per day. The survey also revealed that daily tobacco users aged 15 – 24 years and 65 years and older use tobacco within a shorter period of time of 30 minutes and below upon waking up. There were also daily tobacco users who indicated that they used tobacco within 5 minutes upon waking up. Use of tobacco on a daily basis and within a shorter period of time (30 minutes and below) upon waking up might be a sign of addiction to tobacco.

10.1.2. Protect People from Tobacco Smoke

Exposure to tobacco smoke in various public places in Botswana was prevalent and ranged from 6.5 percent in health care facilities to 67.4 percent in bars and nightclubs. Overall, majority of non-smokers who visited bars and nightclubs (70.8%) reported exposure to tobacco smoke at those locations. Among non-smokers, who visited various public places, exposure to tobacco smoke ranged from 6.3 percent in health care facilities to 70.8 percent in bars and nightclubs. Among non-smokers, who worked in indoor workplaces, 11.9 percent were exposed to tobacco smoke at work and 10.6 percent of non-smokers were exposed to tobacco smoke at home.

Exposure to tobacco smoke at home, among non-smokers aged 15-24 years and 65 years and above, is a public health concern since it may influence young adults to indulge in tobacco smoking at an early age while it may also make the elderly vulnerable to serious illnesses associated with tobacco use.

10.1.3. Offer Help to Quit Tobacco Use

Interestingly, the majority of current tobacco smokers (83.9%) in Botswana are willing to quit smoking and there is evidence that quitting of smoking tobacco is possible. There were daily former smokers (38.9%) who stopped smoking for quite a long period of 10 years and more. Current tobacco smokers (83.9%) are interested in quitting and some (57.8%) made a quit attempt in the past 12 months. However, 67.0 percent of those who made quit attempts tried to do so without assistance. Among smokers who visited a health care provider in the past 12 months, 43.7 percent were advised to quit.

10.1.4. Warn About the Dangers of Tobacco

Adults in Botswana believe that smoking causes serious illnesses like lung cancer (96.5%), heart attack (80.0%) and stroke (71.3%). This demonstrates that people are knowledgeable about these tobacco smoking related diseases. Availability of anti-cigarette smoking information in Botswana in any location seems to be adequate (80.4%). However, 19.6 percent of adults did not notice anti-cigarette smoking information in any location and this is still a public health concern. Availability of anti-smokeless tobacco information in any location is inadequate (46.8%). Health warning labels on cigarettes packages were not noticed by people with no formal education (69.2%), which may be because the messages are presented as text only with no pictorial messages.

10.1.5. Enforce Bans on Tobacco Advertising, Promotion and Sponsorship

Cigarette advertisement, sponsorship, and promotion is still prevalent in Botswana probably because of exposure to international media, especially from South Africa.



Advertisement, sponsorship and promotion of smokeless tobacco in Botswana is generally low; however, it is important to keep monitoring to prevent any proliferation.

10.1.6. Raise Taxes on Tobacco

Among current manufactured cigarette smokers in Botswana, 82.2 percent purchased single sticks of cigarette and almost half (48.3%) purchased cigarettes from street vendors. On average, cigarette smokers spent P789.10 per month on cigarettes.

10.2. Conclusion

The Global Adult Tobacco Survey is a tool to monitor the extent of tobacco epidemic and to identify opportunities in preventing and reducing tobacco use in Botswana. Continued commitment to implementation of WHO FCTC could further prevent and reduce tobacco use through implementation of the WHO MPOWER strategies. Examples of these evidence-based strategies include:

- Protect people from secondhand smoke in all public places including bars/nightclubs and restaurants.
- Integrate tobacco cessation services, including counseling and provision of pharmacotherapy in the national health care system to help tobacco users to quit.
- Health warnings should be presented in cigarette packages using large pictorials, in order to cater for people with no formal education.

- Reduce exposure to tobacco industry activities in tobacco advertising, promotion, and sponsorship.
- Reduce affordability of cigarettes by increasing tobacco levy and prohibit sales of single cigarettes.

Other strategies that Botswana can apply include:

- Strengthening regional collaboration on regulation of cigarette and smokeless tobacco advertisement, sponsorship, or promotion.
- Strengthening enforcement of tobacco control legislation.
- Empowering and supporting Anti-tobacco support groups i.e. Non-governmental organizations (NGOs) like Stop Smoking Support Group (SSSG), Botswana Substance Abuse Network (BOSASNET), Anti-Tobacco Network (ATN), Cancer Association of Botswana (CAB) and others in order to curb early smoking initiation.
- Integrating tobacco control in the school curriculum.
- Intensify public education focusing on anti-smokeless tobacco through other media for example social media.
- Intensify public health education more especially in rural areas and focusing on adults aged 15 – 24 years and 65 years.
- Intensify public education to increase knowledge of the dangers of smoking.

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APPENDIX A: QUESTIONNAIRE



Republic of Botswana



MINISTRY of HEALTH
REPUBLIC OF BOTSWANA

Global Adult Tobacco Survey (GATS) Botswana Questionnaire

Final
20 October 2016

GENERAL INFORMATION

IDENTIFICATION				
STRATUM CODE				
DISTRICT NAME /CODE				
VILLAGE NAME/CODE				
LOCALITY NAME/CODE				
EA NUMBER				
DWELLING NUMBER				
HOUSEHOLD NUMBER				
PERSON SERIAL NUMBER.				
NAME OF ENUMERATOR				
NAME OF SUPERVISOR				

	INTERVIEWERS VISITS			INTERVIEW STATUS FINAL VISIT	
	1	2	3	INTERVIEWERS CODE	
DATE				RESULT CODE	
NAME				TOTAL VISITS	
RESULTS					
NEXT VISIT:	DATE				
	TIME				

<p>RESULT CODE</p> <p>1. COMPLETED 2. PRESENT BUT NOT AVAILABLE FOR INTERVIEWS 3. POSTPONED 4. REFUSED 5. PARTIALLY COMPLETED 6. OTHER (<i>SPECIFY</i>) _____</p>	<p>COMMENTS BOX</p>
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IF FOUND PLEASE SEND TO: MINISTRY OF HEALTH, PRIVATE BAG 0038, GABORONE
 OR NEAREST DISTRICT COMMISSIONERS OFFICE

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GATS Core Questionnaire Formatting Conventions

Text in **RED FONT** = Programming logic and skip instructions.

Text in [BRACKETS] = Specific question instructions for interviewers—not to be read to the respondents.

Text in underline = Words that interviewers should emphasize when reading to respondents.

Household Questionnaire

INTRO. [THE HOUSEHOLD SCREENING RESPONDENT SHOULD BE 18 YEARS OF AGE OR OLDER AND YOU MUST BE CONFIDENT THAT THIS PERSON CAN PROVIDE ACCURATE INFORMATION ABOUT ALL MEMBERS OF THE HOUSEHOLD. IF NEEDED, VERIFY THE AGE OF THE HOUSEHOLD SCREENING RESPONDENT TO MAKE SURE HE/SHE IS 18 YEARS OF AGE OR OLDER.]

THE HOUSEHOLD SCREENING RESPONDENT CAN BE LESS THAN 18 YEARS OLD, ONLY IF NO HOUSEHOLD MEMBERS ARE 18 YEARS OF AGE OR OLDER.]

INTRO1. An important survey of adult tobacco use behavior is being conducted by the Ministry of Health throughout Botswana and your household has been selected to participate. All houses selected were chosen from a scientific sample and it is very important to the success of this project that each participates in the survey. All information gathered will be kept strictly confidential. I have a few questions to find out who in your household is eligible to participate.

Patlisiso e ya botlhokwa e e itebagantseng le tiriso ya motsoko e dirwa ke ba **Lephata la Botsogo mono Botswana**. Ka jalo lelwapa la lona le tlhophilwe go tsaya karolo mo patlisisong e. Matlo otlhe a a tlhophilweng a tlhophilwe ka mokgwa wa khupele-khupule, ka jalo go botlhokwa gore lolwapa lengwe le lengwe le le tlhophilweng le tseye karolo go netefatsa gore patlisiso e e dirwa ka matsetseleko. Dikitsotsofhe tse di tla tsewang mo go lona di tla bewa e le sephiri. Ke na le dipotso di se kae tse ke tla di go botsang e le go batla yo o maleba mo lolwapeng la lona yo o ka tsayang karolo mo patlisisong e.

HH1. First, I'd like to ask you a few questions about your household. In total, how many persons live in this household?
Ke eletsa go go botsa dipotso di se kae mabapi le fa o nnang teng. Ke batho ba le kae ba ba nnang fa?

[INCLUDE ANYONE WHO CONSIDERS THIS HOUSEHOLD THEIR USUAL PLACE OF RESIDENCE]

HH2. How many of these household members are 15 years of age or older?

Ke ba le kae banni ba lefelo le ba ba dingwaga di lesome le botlhano kgotsa go feta?

[IF HH2 = 00 (NO HOUSEHOLD MEMBERS ≥ 15 IN HOUSEHOLD)]

[THERE ARE NO ELIGIBLE HOUSEHOLD MEMBERS.]

THANK THE RESPONDENT FOR HIS/HER TIME.

THIS WILL BE RECORDED IN THE RECORD OF CALLS AS A CODE 201.]

Appendix A continued

HH4. I now would like to collect information about only these persons that live in this household who are 15 years of age or older. Let's start listing them from oldest to youngest.

Ke batla jaanong go itse ka batho ba ba nnang mo lefelong le ba ba dingwaga di le lesome le bothano kgotsa go feta. Re tla simolola ka go ba tlhomaganya ka go latelana ga dingwaga tsa bone, go simolola ka yo motona go feleletsa ka yo monnye.

HH4a. What is the {oldest/next oldest} person's first name? _____
Leina la nthla la motho {yo motona kgotsa yo o mo latelang} ke mang?

HH4b. What is this person's age?
Dingwaga tsa motho yo di kae?

[IF RESPONDENT DOESN'T KNOW, PROBE FOR AN ESTIMATE]

--	--	--

[IF REPORTED AGE IS 15 THROUGH 17, BIRTH DATE IS ASKED]

HH4c. What is the month of this person's date of birth?
Motho yo o tshotswe ka kgwedi mang?

--	--

HH4cYEAR. What is the year of this person's date of birth?
Motho yo o tshotswe ka ngwaga mang?

[IF DON'T KNOW, ENTER 7777
IF REFUSED, ENTER 9999]

--	--	--	--

HH4d. Is this person male or female?
Motho yo ke monna kgotsa mosadi?

MALE 1
FEMALE 2

HH4e. Does this person currently smoke tobacco, including cigarettes, cigars, and pipes?
A motho yo o goga motsoko, e kanna sepe sa tse di latelang sekerese, cigars, motsoko wa peipi ?

YES..... 1
NO 2
DON'T KNOW.. 7
REFUSED..... 9

[REPEAT HH4a – HH4e FOR EACH PERSON REPORTED IN HH2]

Appendix A continued

HH5. [NAME OF THE SELECTED ELIGIBLE PERSON IS:

{FILL SELECTED HH MEMBER'S FIRST NAME}

ASK IF SELECTED RESPONDENT IS AVAILABLE AND IF SO, PROCEED TO THE INDIVIDUAL QUESTIONNAIRE.

IF SELECTED RESPONDENT IS NOT AVAILABLE, MAKE AN APPOINTMENT AND RECORD IT AS A COMMENT ON RECORD OF CALLS.]

Individual Questionnaire

CONSENT1. [SELECT THE APPROPRIATE AGE CATEGORY BELOW. IF NEEDED, CHECK THE AGE OF SELECTED RESPONDENT FROM THE “CASE INFO” SCREEN IN THE TOOLS MENU.]

- 15-17..... ₁ → **GO TO CONSENT2**
 18 OR OLDER..... ₂ → **GO TO CONSENT5**
 EMANCIPATED MINOR (15-17)..... ₃ → **GO TO CONSENT5**

CONSENT2. Before starting the interview, I need to obtain consent from a parent or guardian of [NAME OF RESPONDENT] and from [NAME OF RESPONDENT].
 Pele ke simolola ka potsolotso, ke tlhokana le go fiwa tetla ke motsadi kgotsa mothokomedi wa ga [LEINA LA YO O TLHOPHILWENG] le mo go ene [LEINA LA YO O TLHOPHILWENG].

[IF BOTH SELECTED RESPONDENT AND PARENT/GUARDIAN ARE AVAILABLE, CONTINUE WITH INTERVIEW.

IF PARENT/GUARDIAN IS NOT AVAILABLE, BREAK-OFF INTERVIEW AND SCHEDULE AN APPOINTMENT TO RETURN.

IF MINOR RESPONDENT IS NOT AVAILABLE, CONTINUE WITH OBTAINING PARENTAL CONSENT.]

CONSENT3. [READ THE FOLLOWING TO THE PARENT/GUARDIAN AND SELECTED RESPONDENT (IF AVAILABLE):]

I am working with Ministry of Health. This institution is collecting information about tobacco use in Botswana. This information will be used for public health purposes by the Ministry of Health.
 Ke bereka mo **Lephateng la Botsogo**. Lephata le le dira dipatlisiso mabapi le tiriso ya motsoko mo **Botswana** ka kakaretso.

Your household and [NAME OF RESPONDENT] have been selected at random. [NAME OF RESPONDENT] responses are very important to us and the community, as these answers will represent many other persons.
 Lefelo le la lona la bonno ga mmogo le [LEINA LA YO O TLHOPHILWENG] di tlhophilwe ka khupele khupele. Dikarabo tsa ga [LEINA LA YO O TLHOPHILWENG] di bothokwa thata mo go rona le mo setshabeng ka kakaretso ka gore di tlaa fa sekao kgotsa selekanyo sa gore motsoko o dirisiwa go le kae mo setshabeng sa Botswana.

The interview will last around 30 minutes. [NAME OF RESPONDENT] participation in this survey is entirely voluntary. The information that [NAME OF RESPONDENT] will provide will be kept strictly confidential and [NAME OF RESPONDENT] will not be identified by his/her responses. Personal information will not be shared with anyone else, not even other family members including you. [NAME OF RESPONDENT] can withdraw from the study at any time, and may refuse to answer any question.

Potsoloso e e tla tsaya sebaka sa metsotso e le masome a mararo. Go tsaya karolo ga ga [LEINA LA YO O TLHOPHILWENG] mo patlisisong e ke boithaopo. Dikarabo tse [LEINA LA YO O TLHOPHILWENG] a tla di re fang, e tla nna sephiri sa rona le ene gape [LEINA LA YO O TLHOPHILWENG] o ka se lemogwe go ya ka dikarabo tsa gagwe. Kitso mabapi le motho yo o arabileng dipotso ga e kitla e bolelelwa ope le fa e le ba lelwapa la gagwe go akaretse le wena. [LEINA LA YO O TLHOPHILWENG] o a letlelesega go emisa go tsaya karolo mo patlisisong e

nako nngwe le nngwe, gape o a letlelesega go sa arabe potso nngwe le nngwe e a utlwang e mo ketefalela.

We will leave the necessary contact information with you. If you have any questions about this survey, you can contact the telephone numbers listed.

Re tla tlogela megala ya rona gore ga le batla go botsa sengwe le kgone go re tshwara ka megala e e tlabong e kwadiilwe.

If you agree with [NAME OF RESPONDENT]'s participation in this survey, we will conduct a private interview with him/her.

Fa o dumalana le go tsaya karolo ga ga [LEINA LA YO O TLHOPHILWENG] mo patlisisong e, re tla tshwara potsolotso e e faphegileng le ene.

[ASK PARENT/GUARDIAN:] Do you agree with [NAME OF RESPONDENT]'s participation?

A o dumalana le go tsaya karolo ga ga [LEINA LA YO O TLHOPHILWENG] mo patlisisong e?

YES..... 1 → **GO TO CONSENT4**

NO 2 → **END INTERVIEW**

CONSENT4. [WAS THE SELECTED MINOR RESPONDENT PRESENT?]

PRESENT 1 → **GO TO CONSENT6**

NOT PRESENT 2 → **GO TO CONSENT5**

CONSENT5. [READ TO THE SELECTED RESPONDENT:]

I am working with Ministry of Health. This institution is collecting information about tobacco use in Botswana. This information will be used for public health purposes by the Ministry of Health.

Ke bereka mo **Lephateng la Botsogo**. Lephata le le dira dipatlisiso mabapi le tiriso ya motsoko mo **Botswana** ka kakaretso. Maduo a dipatlisiso tse a tla dirisiwa ke ba Lephata la Botsogo go tokafatsa botsogo jwa setshaba.

Your household and you have been selected at random. Your responses are very important to us and the community, as these answers will represent many other persons. The interview will last around 30 minutes. Your participation in this survey is entirely voluntary. The information that you will provide us will be kept strictly confidential, and you will not be identified by your responses. Personal information will not be shared with anyone else, not even other family members. You can withdraw from the study at any time, and may refuse to answer any question.

Lefelo le la lona la bonno ga mmogo le wena, le tlhophiwe ka khupele khupele. Dikarabo tsa gago di bothokwa thata mo go rona le mo setshabeng ka kakaretso. Potsoloso e e tla tsaya sebaka sa metsotso e le masome a mararo. Go tsaya karolo ga gago mo patlisisong e ke boithaopo. Dikarabo tse o tlaa di re fang, e tlaa nna sephiri sa rona ebile ga gona yo o ka go lemogang ka dikarabo tsa gago. Kitso ka ga gago ga e kitla e bolelelwa ope le fa e le ba lelwapa la gago tota. O a letlelesega go emisa go tsaya karolo mo patlisisong e nako nngwe le nngwe, gape o a letlelesega go sa arabe potso nngwe le nngwe e o utlwang e go ketefalela.

We will leave the necessary contact information with you. If you have any questions about this survey, you can contact the telephone numbers listed.

Re tlaa tlogelela megala ya rona gore ga le batla go botsa dipotso dingwe le kgone go re leletsa mo -megaleng e e tlabong e kwadiilwe.

Appendix A continued

{FILL IF CONSENT4=2: Your parent/guardian has given his/her permission for you to participate in this study}

Motsadi/motlhokomedi wa gago o dumalane le gore o ka tsaya karolo mo patlisisong e.

If you agree to participate, we will conduct a private interview with you.

Fa o dumela go tsaya karolo mo patlisisong e, re tla go botsolotsa mo sephiring.

CONSENT6. [ASK SELECTED RESPONDENT:] Do you agree to participate?
A oa dumela go tsaya karolo mo patlisisong e?

YES..... 1 → **PROCEED WITH INTERVIEW**

NO 2 → **END INTERVIEW**

INTLANG. [INTERVIEW LANGUAGE]

ENGLISH..... 1

SETSWANA..... 2

Section A. Background Characteristics

A00. I am going to first ask you a few questions about your background.
Ke tla simolola ka go go botsa dipotso di le mmalwa ka ga gago.

A01. [RECORD GENDER FROM OBSERVATION. ASK IF NECESSARY.]

MALE 1
FEMALE 2

A02a. What is the month of your date of birth?
O tshotswe ka kgwedi efe?

01 1
02 2
03 3
04 4
05 5
06 6
07 7
08 8
09 9
10 10
11 11
12 12
DON'T KNOW.. 77
REFUSED..... 99

A02b. What is the year of your date of birth?
O tshotswe ka ngwaga mang?

[IF DON'T KNOW, ENTER 7777
IF REFUSED, ENTER 9999]

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[IF MONTH=77/99 OR YEAR=7777/9999, ASK A03. OTHERWISE SKIP TO A04.]

A03. How old are you?
O dingwaga di kae?

[IF RESPONDENT IS UNSURE, PROBE FOR AN ESTIMATE AND RECORD AN ANSWER.
IF REFUSED, STOP INTERVIEW (BREAK-OFF) AS WE CANNOT CONTINUE INTERVIEW WITHOUT AGE]

--	--	--

A03a. [WAS RESPONSE ESTIMATED?]

- YES..... 1
- NO 2
- DON'T KNOW..... 7

A04. What is the highest level of education you have completed?

Mo dithutong tsa sekolo o fitlheletse fa kae?

[SELECT ONLY ONE CATEGORY]

- NO FORMAL SCHOOLING..... 1
- LESS THAN PRIMARY SCHOOL COMPLETED 2
- PRIMARY SCHOOL COMPLETED..... 3
- LESS THAN (JUNIOR) SECONDARY SCHOOL COMPLETED .. 4
- (JUNIOR) SECONDARY SCHOOL COMPLETED 5
- LESS THAN (SENIOR) SECONDARY SCHOOL COMPLETED.. 4
- HIGH (SENIOR) SCHOOL COMPLETED..... 6
- COLLEGE/UNIVERSITY COMPLETED 7
- POST GRADUATE DEGREE COMPLETED 8
- DON'T KNOW..... 77
- REFUSED..... 99

A05. Which of the following best describes your main work status over the past 12 months? Government employee, non-government employee, self-employed, student, homemaker, retired, unemployed-able to work, or unemployed-unable to work?

Ke dife mo go tse di latelang tse di supang tiro ya gago ya konokono mo sebakeng sa dikgwedi tse di lesome le bobedi tse di fetileng? Mmerekwa wa puso, mmerekwa wa lephata le le ikemetseng ka nosi, moipereki, moithuti, modiri wa mo lolwapeng, tlogetse tiro ka bogodi, ga o bereke-mme o na le bokgoni jwa go bereka kgotsa ga o bereke-gape ga o na bokgoni jwa go bereka.

[INCLUDE SUBSISTENCE FARMING AS SELF-EMPLOYED]

- GOVERNMENT EMPLOYEE 1
- NON-GOVERNMENT EMPLOYEE..... 2
- SELF-EMPLOYED..... 3
- STUDENT..... 4
- HOMEMAKER (HOUSEWIFE)..... 5
- RETIRED 6
- UNEMPLOYED, ABLE TO WORK..... 7
- UNEMPLOYED, UNABLE TO WORK.... 8
- DON'T KNOW..... 77
- REFUSED..... 99

A06. Please tell me whether this household or any person who lives in the household has the following items:
 Tswee tswee tihalosa gore a lefelo le la lona la bonno kgotsa mongwe yo o nnang fa, o na le tse di
 latelang?

	YES ▼	NO ▼	DON'T KNOW ▼	REFUSED ▼
a. Electricity? Motlakase?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
b. Flush toilet? Ntlwana ya boitiketso e dirisang metsi?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
c. Fixed telephone? Mogala wa mo lwapeng?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
d. Cell telephone? Mogala wa lotheka?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
e. Television? Ditshwantsho tsa motshikinyego?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
f. Radio? Seromamowa?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
g. Refrigerator? Setsidifatsi?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
h. Car? Koloji?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
i. Moped/scooter/motorcycle? Sethuthu?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
j. Washing machine? Mochini yo o tlhatswang?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9

A10. What is your religion?
 Tumelo ya gago ke efe?

HINDU 1
 MUSLIM 2
 CHRISTIAN 3
 BUDDHISM 4
 OTHER 5 → A10a. [SPECIFY]: _____
 NONE 6
 DON'T KNOW 77
 REFUSED 99

A11. What is your marital status? Would you say single, married, separated, divorced, or widowed?
 Seemo sa gago mabapi le nyalo ke sefe? A o nyetswe, o kgaogane kgotsa o tlhokahaletswe ke
 molekane?

SINGLE 1
 MARRIED 2
 SEPARATED 3
 DIVORCED 4
 WIDOWED 5
 REFUSED 9

Section B. Tobacco Smoking

- B00.** I would now like to ask you some questions about smoking tobacco, including cigarettes, cigars, pipes, and waterpipes/shisha.
 Jaanong ke tla go botsa dipotso ka go goga motsoko, go akaretsa sekerese, cigars, dipeipe, motsoko wa pompo e e dirisang metsi/wa shisha.

Please do not answer about smokeless tobacco at this time.
 Tswee-tswee o seka wa araba ka motsoko o o sa tsweng mosi.

- B01.** Do you currently smoke tobacco on a daily basis, less than daily, or not at all?
 Mo bo jaanong a o motho o o gogang motsoko letsatsi le letsatsi, kgotsa nako nngwe, kgotsa gotlhelele ga o goge?

DAILY 1 → **SKIP TO B04**
 LESS THAN DAILY 2
 NOT AT ALL 3 → **SKIP TO B03**
 DON'T KNOW 7 → **SKIP TO NEXT SECTION**
 REFUSED 9 → **SKIP TO NEXT SECTION**

- B02.** Have you smoked tobacco daily in the past?
 A o kile wa goga motsoko letsatsi le letsatsi mo nakong e fetileng?

YES 1 → **SKIP TO B08**
 NO 2 → **SKIP TO B10**
 DON'T KNOW 7 → **SKIP TO B10**
 REFUSED 9 → **SKIP TO B10**

- B03.** In the past, have you smoked tobacco on a daily basis, less than daily, or not at all?
 Mo nakong e fetileng, a o ne o goga letsatsi le letsatsi, malatsi mangwe, kgotsa gotlhelele o ne o sa goge?

[IF RESPONDENT HAS DONE BOTH "DAILY" AND "LESS THAN DAILY" IN THE PAST, CHECK "DAILY"]

DAILY 1 → **SKIP TO B11**
 LESS THAN DAILY 2 → **SKIP TO B13**
 NOT AT ALL 3 → **SKIP TO NEXT SECTION**
 DON'T KNOW 7 → **SKIP TO NEXT SECTION**
 REFUSED 9 → **SKIP TO NEXT SECTION**

[CURRENT DAILY SMOKERS]

- B04.** How old were you when you first started smoking tobacco daily?
 O ne o le dingwaga di le kae nako ya ntlha o simolola go goga motsoko letsatsi le letsatsi?

[IF DON'T KNOW OR REFUSED, ENTER 99]

--	--

[IF B04=99, ASK B05. OTHERWISE SKIP TO B06.]

Appendix A continued

B05. How many years ago did you first start smoking tobacco daily?
 Ke dingwaga di le kae o simolotse go goga motsoko letsatsi le letsatsi?

[IF REFUSED, ENTER 99]

--	--

B06. On average, how many of the following products do you currently smoke each day? Also, let me know if you smoke the product, but not every day.
 Ka kakaretso, o goga di le kae tsa tse di latelang letsatsi le letsatsi? Supa gape tse o di gogang mme e se ka malatsi otlhe.

[IF RESPONDENT REPORTS SMOKING THE PRODUCT BUT NOT EVERY DAY, ENTER 888

IF RESPONDENT REPORTS IN PACKS OR CARTONS, PROBE TO FIND OUT HOW MANY ARE IN EACH AND CALCULATE TOTAL NUMBER]

a. Manufactured cigarettes? Disekerese tse di tlotlhweng?				PER DAY
a1. [IF B06a=888] On average, how many manufactured cigarettes do you currently smoke each week? Ka kakaretso o goga disekerese tse di tlotlhweng di le kae mo bekeng?				PER WEEK
b. Hand-rolled cigarettes? Motsoko o tshophilweng?				PER DAY
b1. [IF B06b=888] On average, how many hand-rolled cigarettes do you currently smoke each week? Ka kakaretso o goga metsoko e tshophilweng e le kae mo bekeng?				PER WEEK
d. Pipes full of tobacco? Dipeipi di tletse motsoko?				PER DAY
d1. [IF B06d=888] On average, how many pipes full of tobacco do you currently smoke each week? Ka kakaretso o goga dipeipi di tletse motsoko di le kae mo bekeng?				PER WEEK
e. Cigars, ? Motsoko wa cigar ?				PER DAY
e1. [IF B06e=888] On average, how many cigars, do you currently smoke each week? Ka kakaretso o goga metsoko ya cigar e le kae mo bekeng?				PER WEEK
f. Number of water pipe sessions per day? Makgetho a go goga motsoko wa dipompo tse di dirisang metsi mo letsatsing?				PER DAY
f1. [IF B06f=888] On average, how many water pipe sessions do you currently participate in each week? Ka kakaretso, o tsaya karolo ga kae mo go gogeng motsoko wa dipompo tse di dirisang metsi mo bekeng?				PER WEEK
g. Any others? (→g1. Please specify the other type you currently smoke each day: _____)				PER DAY

A go na le e mengwe? (Tswee-tswee tlhalosa ka botlalo mofuta wa motsoko o o gogang tsatsi le letsatsi ntle le e fa godimo? g2. [IF B06g=888] On average, how many [FILL PRODUCT] do you currently smoke each week? Ka kakaretso o goga mofuta o o boletseng [KWALA LEINA LA MOFUTA O DIRISANG] fa godimo ga kae mo bekeng?				
				PER WEEK

B07. How soon after you wake up do you usually have your first smoke? Would you say within 5 minutes, 6 to 30 minutes, 31 to 60 minutes, or more than 60 minutes?

O goga motsoko morago ga nako e kae o sena go tsoga? A ke mo sebakeng sa metsotso e metlhano, e marataro go ya ko go e masome a mararo, e masome a mararo le bongwe go ya ko go e masome a marataro, kgotsa morago ga e e fetang masome a marataro?

WITHIN 5 MINUTES..... 1
 6 TO 30 MINUTES..... 2
 31 TO 60 MINUTES 3
 MORE THAN 60 MINUTES 4
 REFUSED..... 9

[SKIP TO NEXT SECTION]

[CURRENT LESS THAN DAILY SMOKERS]

B08. How old were you when you first started smoking tobacco daily?
 O ne o le dingwaga di le kae fa o ne o simolola go goga motsoko letsatsi le letsatsi?

[IF DON'T KNOW OR REFUSED, ENTER 99]

[IF B08 = 99, ASK B09. OTHERWISE SKIP TO B10.]

B09. How many years ago did you first start smoking tobacco daily?
 Ke dingwaga di le kae tse di fitileng o ntse o goga motsoko letsatsi le letsatsi?

[IF REFUSED, ENTER 99]

B10. How many of the following do you currently smoke during a usual week?
 Ke di le kae tsa tse di latelang tse o tleng o di goge mo bekeng?

[IF RESPONDENT REPORTS DOING THE ACTIVITY WITHIN THE PAST 30 DAYS, BUT LESS THAN ONCE PER WEEK, ENTER 888

[IF RESPONDENT REPORTS IN PACKS OR CARTONS, PROBE TO FIND OUT HOW MANY ARE IN EACH AND CALCULATE TOTAL NUMBER]

Appendix A continued

a. Manufactured cigarettes? <i>Disekerese tse di tlothilweng?</i>				PER WEEK
b. Hand-rolled cigarettes? <i>Motsoko o tshophilweng?</i>				PER WEEK
d. Pipes full of tobacco? <i>Dipeipi di tletse motsoko?</i>				PER WEEK
e. Cigars, ? <i>Motsoko wa cigar?</i>				PER WEEK
f. Number of water pipe sessions per week? <i>Makgetho a go goga motsoko wa dipompo tse di dirisang metsi mo bekeng?</i>				PER WEEK
g. Any others? <i>E mengwe mefuta ya motsoko ntle le e e fa godimo?</i>				PER WEEK

→g1. Please specify the other type you currently smoke during a usual week:
Tswee-tswee bolela leina la mofuta o o dirisang mo bekeng:

[FORMER SMOKERS]

B11. How old were you when you first started smoking tobacco daily?
O ne o le dingwaga di le kae fa o simolola go goga motsoko letsatsi le letsatsi?

[IF DON'T KNOW OR REFUSED, ENTER 99]

--	--

[IF B11 = 99, ASK B12. OTHERWISE SKIP TO B13a.]

B12. How many years ago did you first start smoking tobacco daily?
Ke dingwaga di le kae o ntse o goga motsoko letsatsi le letsatsi?

[IF REFUSED, ENTER 99]

--	--

B13a. How long has it been since you stopped smoking?
O na le sebaka se se kae o tlogetse go goga motsoko?

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[ONLY INTERESTED IN WHEN RESPONDENT STOPPED SMOKING REGULARLY – DO NOT INCLUDE RARE INSTANCES OF SMOKING

ENTER UNIT ON THIS SCREEN AND NUMBER ON NEXT SCREEN]

- YEARS..... 1
- MONTHS 2
- WEEKS..... 3
- DAYS 4
- LESS THAN 1 DAY 5 → **SKIP TO B14**
- DON'T KNOW..... 7 → **SKIP TO NEXT SECTION**
- REFUSED..... 9 → **SKIP TO NEXT SECTION**

B13b. [ENTER NUMBER OF (YEARS/MONTHS/WEEKS/DAYS)]

--	--	--

[IF B13a/b < 1 YEAR (<12 MONTHS), THEN CONTINUE WITH B14. OTHERWISE SKIP TO NEXT SECTION.]

B14. Have you visited a doctor or other health care provider in the past 12 months?
A o kile wa etela ngaka kgotsa ba botsogo mo sebakeng sa dikgwedi tse di lesome le bobedi tse di fetileng?

- YES..... 1
- NO 2 → **SKIP TO B18**
- REFUSED..... 9 → **SKIP TO B18**

B15. How many times did you visit a doctor or health care provider in the past 12 months? Would you say 1 or 2 times, 3 to 5 times, or 6 or more times?
O etetse ngaka kgotsa ba botsogo ga kae mo sebakeng sa dikgwedi tse di lesome le bobedi tse di fetileng? A e ka nna gangwe kgotsa gabedi,gararo go ya ko botlhanong,kgotsa garataro kgotsa go feta?

- 1 OR 2 1
- 3 TO 5..... 2
- 6 OR MORE..... 3
- REFUSED..... 9

B16. During any visit to a doctor or health care provider in the past 12 months, were you asked if you smoke tobacco?
A go na le nako epe e ekileng yare o etetse Ngaka kgotsa ba botsogo mo sebakeng sa kgwedi tse di lesome le bobedi tse di fetileng wa botswa gore a o goga motsoko?

- YES..... 1
- NO 2 → **SKIP TO B18**
- REFUSED..... 9 → **SKIP TO B18**

B17. During any visit to a doctor or health care provider in the past 12 months, were you advised to quit smoking tobacco?
A go na le nako epe e ekileng yare o etetse Ngaka kgotsa ba botsogo mo sebakeng sa kgwedi tse di lesome le bobedi, wa gakololwa go tlogela go goga motsoko?

- YES..... 1

Appendix A continued

NO 2
 REFUSED..... 9

B18. During the past 12 months, did you use any of the following to try to stop smoking tobacco?
 Mo dikgweding tse di lesome le bobedi tse di fetileng a o kile wa leka sepe sa tse di latelang go tlogela go goga motsoko?

- | | YES | NO | REFUSED |
|--|----------------------------|----------------------------|----------------------------|
| a. Counseling, including at a smoking cessation clinic?.....
Tshidilo maikutlo go akaretsa le dithuto tse di amanang le go emisa tiriso ya motsoko? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| b. Nicotine replacement therapy, such as the patch or gum?
Kalafi ya go emisitsa motswako wa nicotine ka go dirisa dipeche kgotsa chunkama? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| c. Other prescription medications?
Mefuta e mengwe ya melemo ya sekgoa? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| d. Traditional medicines?
Melemo ya setso? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| e. A quit line or a smoking telephone support line?
Nomore ya mogala e e dirisiwang go kopa thuso ya go tlogela go goga motsoko? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| f. Switching to smokeless tobacco?
Go fetogela ko motsoko o o sa tsweng mosi ? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| h. Try to quit without assistance?
Go leka go tlogela ntle le go batla thuso epe? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| g. Anything else?
Se sengwe gape e ka nna eng? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |

→ g1. Please specify what you used to try to stop smoking:

Tswee-tswee tthalosa ka botlalo se o kileng wa leka go se dirisa go tlogela go goga motsoko ntle le tse di fa godimo:

Section C. Smokeless Tobacco

C00. The next questions are about using smokeless tobacco, such as snuff, chewing tobacco, and dip. Smokeless tobacco is tobacco that is not smoked, but is sniffed through the nose, held in the mouth, or chewed.

Dipotso tse di latelang di ka ga motsoko o o sa tsweng mosi, jaaka seneifi, motsoko o tshotliwang le dip. Motsoko o o sa tsweng mosi ke motsoko o o gogiwang ka dinko, o tsenngwa mo leganong kgotsa o tshotlhiwa.

C01. Do you currently use smokeless tobacco on a daily basis, less than daily, or not at all?
 Mo bo jaanong, a o dirisa motsoko o o sa tsweng mosi letsatsi le letsatsi, nako nngwe kgotsa ga o o dirise gotlhelele?

[IF RESPONDENT DOES NOT KNOW WHAT SMOKELESS TOBACCO IS, EITHER PRESENT A SHOWCARD OR READ DEFINITION FROM QXQ SCREEN]

- DAILY 1 → **SKIP TO C04**
 LESS THAN DAILY 2
 NOT AT ALL 3 → **SKIP TO C03**
 DON'T KNOW..... 7 → **SKIP TO NEXT SECTION**
 REFUSED..... 9 → **SKIP TO NEXT SECTION**

C02. Have you used smokeless tobacco daily in the past?
 A o kile wa dirisa motsoko o o sa tsweng mosi letsatsi le letsatsi mo nakong e e fetileng?

- YES..... 1 → **SKIP TO C08**
 NO 2 → **SKIP TO C10**
 DON'T KNOW..... 7 → **SKIP TO C10**
 REFUSED..... 9 → **SKIP TO C10**

C03. In the past, have you used smokeless tobacco on a daily basis, less than daily, or not at all?
 A mo nakong e fetileng o kile wa dirisa motsoko o o sa tsweng mosi letsatsi le letsatsi, nako nngwe kgotsa ga o ise o o dirise gotlhelele?

[IF RESPONDENT HAS DONE BOTH "DAILY" AND "LESS THAN DAILY" IN THE PAST, CHECK "DAILY"]

- DAILY 1 → **SKIP TO C11**
 LESS THAN DAILY 2 → **SKIP TO C13**
 NOT AT ALL 3 → **SKIP TO NEXT SECTION**
 DON'T KNOW..... 7 → **SKIP TO NEXT SECTION**
 REFUSED..... 9 → **SKIP TO NEXT SECTION**

[CURRENT DAILY SMOKELESS TOBACCO USERS]

C04. How old were you when you first started using smokeless tobacco daily?
 O ne o le dingwaga di le kae fa o simolola go dirisa motsoko o o sa tsweng mosi letsatsi le letsatsi?

[IF DON'T KNOW OR REFUSED, ENTER 99]

--	--

[IF C04 = 99, ASK C05. OTHERWISE SKIP TO C06.]

C05. How many years ago did you first start using smokeless tobacco daily?
 Ke sebaka sa dingwaga di le kae tse di fetileng, fa o ne o simolola go dirisa motsoko o o sa tsweng mosi letsatsi le letsatsi?

[IF REFUSED, ENTER 99]

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C06. On average, how many times a day do you use the following products? Also, let me know if you use the product, but not every day.
 Ka kakaretso o dirisa tse di lateng ga kae mo letsatsing? Tlhalosa gape gore a go na le tse o di dirisang mme e seng letsatsi le letsatsi.

[IF RESPONDENT REPORTS USING THE PRODUCT BUT NOT EVERY DAY, ENTER 888]

a. Snuff, by mouth? Motsoko o jewa ka legano?				PER DAY
a1. [IF C06a=888] On average, how many times a week do you currently use snuff, by mouth? Ka kakaretso, o dirisa motsoko o jewa ka legano ga kae mo bekeng?				PER WEEK
b. Snuff, by nose? Motsoko o sunediwang ka dinko?				PER DAY
b1. [IF C06b=888] On average, how many times a week do you currently use snuff, by nose? Ka kakaretso, o dirisa motsoko o o sunediwang ka dinko ga kae mo bekeng?				PER WEEK
c. Chewing tobacco? Motsoko o chotlhiwang?				PER DAY
c1. [IF C06c=888] On average, how many times a week do you currently use chewing tobacco? Ka kakaretso, o dirisa motsoko o o chotlhiwang ga kae mo bekeng?				PER WEEK
d. Betel quid with tobacco? Motswako wa matlhare a Betele le manoko a a arica.				PER DAY
d1. [IF C06d=888] On average, how many times a week do you currently use betel quid with tobacco?				PER WEEK

Appendix A continued

Ka kakaretso, o dirisa motsoko wa matlhare a Betele le manoko a a arica ga kae mo bekeng.				
e. Any others? (→e1. Please specify the other type you currently use each day: _____) E mengwe gape e ka nna eng? (e1. Tswee-tswee tlhalosa ka botlalo mohuta oo dirisang ka letsatsi ntle le e e fa godimo: _____)				PER DAY
e2. [IF C06e=888] On average, how many times a week do you currently use [FILL PRODUCT]? Ka kakaretso, o dirisa mohuta o ga kae mo bekeng?				PER WEEK

C07. How soon after you wake up do you usually use smokeless tobacco for the first time? Would you say within 5minutes, 6 to 30 minutes, 31 to 60 minutes, or more than 60 minutes?
 O dirisa motsoko o o sa tsweng mosi morago ga nako e kae o sena go tsoga? A ke mo sebakeng sa metsotso e methano,e merataro go ya ko go e masome a mararo,e masome a mararo le bongwe go ya ko go e masome a marataro,kgotsa morago ga e e fetang masome a marataro?

WITHIN 5 MINUTES..... 1
 6 TO 30 MINUTES..... 2
 31 TO 60 MINUTES 3
 MORE THAN 60 MINUTES..... 4
 REFUSED..... 9

[SKIP TO NEXT SECTION]

[CURRENT LESS THAN DAILY SMOKELESS TOBACCO USERS]

C08. How old were you when you first started using smokeless tobacco daily?
 O ne o le dingwaga di kae fa o simolola go dirisa motsoko o o sa tsweng mosi letsatsi le letsatsi?

[IF DON'T KNOW OR REFUSED, ENTER 99]

[IF C08 = 99, ASK C09. OTHERWISE SKIP TO C10.]

C09. How many years ago did you first start using smokeless tobacco daily?
 Ke dingwaga di le kae o ntse o dirisa motsoko o o sa tsweng mosi letsatsi le letsatsi?

[IF REFUSED, ENTER 99]

C10. How many times a week do you usually use the following?
 O dirisa tse di latelang ga kae mo bekeng?

[IF RESPONDENT REPORTS DOING THE ACTIVITY WITHIN THE PAST 30 DAYS, BUT LESS THAN ONCE PER WEEK, ENTER 888]

Appendix A continued

a. Snuff, by mouth? Motsoko o jewa ka legano?	<input type="text"/>	<input type="text"/>	<input type="text"/>	TIMES PER WEEK
b. Snuff, by nose? Motsoko o sunediwang ka dinko?	<input type="text"/>	<input type="text"/>	<input type="text"/>	TIMES PER WEEK
c. Chewing tobacco? Motsoko o chotlhiwang?	<input type="text"/>	<input type="text"/>	<input type="text"/>	TIMES PER WEEK
d. Betel quid with tobacco? Motswako wa mathhare a Betele le manoko a arica.	<input type="text"/>	<input type="text"/>	<input type="text"/>	TIMES PER WEEK
e. Any others? E mengwe gape e ka nna eng?	<input type="text"/>	<input type="text"/>	<input type="text"/>	TIMES PER WEEK

→e1. Please specify the other type you currently use during a usual week:
Tswee-tswee tlhalosa ka botlalo mehuta e mengwe e o e dirisang mo bekeng.

[FORMER SMOKELESS TOBACCO USERS]

C11. How old were you when you first started using smokeless tobacco daily?
O ne o le dingwaga di le kae fa o simolola go dirisa motsoko o o sa tsweng mosi letsatsi le letsatsi?

[IF DON'T KNOW OR REFUSED, ENTER 99]

[IF C11 = 99, ASK C12. OTHERWISE SKIP TO C13a.]

C12. How many years ago did you first start using smokeless tobacco daily?
O tsere dingwaga di le kae o ntse o dirisa motsoko o o sa tsweng mosi letsatsi le letsatsi?

[IF REFUSED, ENTER 99]

C13a. How long has it been since you stopped using smokeless tobacco?
O na le sebaka se se kae o ntse o tlogetse go dirisa motsoko o o sa tsweng mosi?

[ONLY INTERESTED IN WHEN RESPONDENT STOPPED USING SMOKELESS TOBACCO REGULARLY — DO NOT INCLUDE RARE INSTANCES OF USING SMOKELESS TOBACCO]

ENTER UNIT ON THIS SCREEN AND NUMBER ON NEXT SCREEN]

YEARS..... 1

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Appendix A continued

- MONTHS 2
 WEEKS 3
 DAYS 4
 LESS THAN 1 DAY 5 → **SKIP TO C14**
 DON'T KNOW 7 → **SKIP TO NEXT SECTION**
 REFUSED 9 → **SKIP TO NEXT SECTION**

C13b. [ENTER NUMBER OF (YEARS/MONTHS/WEEKS/DAYS)]

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[IF C13a/b < 1 YEAR (<12 MONTHS), THEN CONTINUE. OTHERWISE SKIP TO NEXT SECTION.]

IF B14 HAS NOT BEEN ASKED → CONTINUE WITH C14
IF B14 = YES → SKIP TO C16
IF B14 = NO OR REFUSED → SKIP TO C18

C14. Have you visited a doctor or other health care provider in the past 12 months?
 A o kile wa etela ngaka kgotsa ba botsogo mo sebakeng sa dikgwedi tse di lesome le bobedi tse di fetileng?

- YES 1
 NO 2 → **SKIP TO C18**
 REFUSED 9 → **SKIP TO C18**

C15. How many times did you visit a doctor or health care provider in the past 12 months? Would you say 1 or 2 times, 3 to 5 times, or 6 or more times?
 O etetse ngaka kgotsa ba botsogo ga kae mo sebakeng sa dikgwedi tse di lesome le bobedi tse di fetileng? A e ka nna gangwe kgotsa gabedi, gararo go ya ko botlhanong, kgotsa garataro kgotsa go feta?

- 1 OR 2 1
 3 TO 5 2
 6 OR MORE 3
 REFUSED 9

C16. During any visit to a doctor or health care provider in the past 12 months, were you asked if you use smokeless tobacco?
 A go na le nako epe e ekileng yare o etetse Ngaka kgotsa ba botsogo mo sebakeng sa kgwedi tse di lesome le bobedi tse di fetileng wa botswa gore a o dirisa motsoko o o sa tsweng mosi?

- YES 1
 NO 2 → **SKIP TO C18**
 REFUSED 9 → **SKIP TO C18**

C17. During any visit to a doctor or health care provider in the past 12 months, were you advised to stop using smokeless tobacco?
 A go na le nako epe e ekileng yare o etetse Ngaka kgotsa ba botsogo mo sebakeng sa kgwedi tse di lesome le bobedi, wa gakololwa go tlogela go dirisa motsoko o o sa tsweng mosi?

- YES 1
 NO 2
 REFUSED 9

C18. During the past 12 months, did you use any of the following to try to stop using smokeless tobacco?
 Mo dikgweding tse di lesome le bobedi tse di fetileng a o kile wa leka sepe sa tse di latelang go go thusa go tlogela go dirisa motsoko o o sa tsweng mosi?

	YES ▼	NO ▼	REFUSED ▼
a. Counseling, including at a cessation clinic? Tshidilo maikutlo go akaretsa le dithuto tse di amanang le go emisa tiriso ya motsoko?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 9
b. Nicotine replacement therapy, such as the patch or gum? Kalafi ya go emisetsa motswako wa nicotine ka go dirisa dipeche kgotsa chunkama ?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 9
c. Other prescription medications? Mefuta e mengwe ya melemo ya sekgoa?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 9
d. Traditional medicines? Melemo ya setso?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 9
e. A quit line or a telephone support line? Nomore ya mogala e e dirisiwang go kopa thuso ya go tlogela go goga motsoko?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 9
h. Try to quit without assistance? Go leka go tlogela ntle le go batla thuso epe?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 9
g. Anything else? Se sengwe gape e ka nna eng?	<input type="checkbox"/> 1.....	<input type="checkbox"/> 2.....	<input type="checkbox"/> 9

→ g1. Please specify what you used to try to stop using smokeless tobacco:

Tswee-tswee tihalosa ka botlalo se o kileng wa leka go se dirisa go tlogela go dirisa motsoko oo sa tsweng mosi ntle le tse di fa godimo: _____

Section D1. Cessation—Tobacco Smoking

**IF B01= 1 OR 2 (RESPONDENT CURRENTLY SMOKES TOBACCO), CONTINUE WITH THIS SECTION.
IF B01 = 3, 7, OR 9 (RESPONDENT DOES NOT CURRENTLY SMOKE TOBACCO), SKIP TO NEXT SECTION.**

D01. The next questions ask about any attempts to stop smoking that you might have made during the past 12 months. Please think about tobacco smoking.
Dipotso tse di latelang di itebagantse le maiteko a o a dirileng go leka go tlogela go goga motsoko mo kgweding tse di lesome le bobedi tse di fetileng. Tswee-tswee akanya ka motsoko o o gogwang.

During the past 12 months, have you tried to stop smoking?
Mo kgweding tse di lesome le bobedi tse di fetileng, a o kile wa leka go tlogela go goga motsoko?

- YES..... 1
 NO 2 → **SKIP TO INSTRUCTION BEFORE D04**
 REFUSED..... 9 → **SKIP TO INSTRUCTION BEFORE D04**

D02a. Thinking about the last time you tried to quit, how long did you stop smoking?
Ga o gakologelwa ka nako e o kileng wa leka go tlogela go goga motsoko, o tsere nako e kae o ntse o emisitse go goga motsoko?

[ENTER UNIT ON THIS SCREEN AND NUMBER ON NEXT SCREEN]

- MONTHS 1
 WEEKS 2
 DAYS 3
 LESS THAN 1 DAY (24 HOURS)..... 4 → **SKIP TO D03**
 DON'T KNOW..... 7 → **SKIP TO D03**
 REFUSED..... 9 → **SKIP TO D03**

D02b. [ENTER NUMBER OF (MONTHS/WEEKS/DAYS)]

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D03. During the past 12 months, did you use any of the following to try to stop smoking tobacco?
Mo kgweding tse di lesome le bobedi tse di fetileng, a o kile wa dirisa dipe tsa tse di latelang go leka go tlogela go goga motsoko?

- | | YES
▼ | NO
▼ | REFUSED
▼ |
|--|----------------------------|----------------------------|----------------------------|
| a. Counseling, including at a smoking cessation clinic?.....
Tshidilo maikutlo go akaretsa le dithuto tse di amanang le go emisa tiriso ya motsoko? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| b. Nicotine replacement therapy, such as the patch or gum?
Kalafi ya go emisetsa motswako wa nicotine ka go dirisa dipeche kgotsa chunkama ? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| c. Other prescription medications?.....
Mefuta e mengwe ya melemo ya sekgoa? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| d. Traditional medicines?.....
Melemo ya setso? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| e. A quit line or a smoking telephone support line?.....
Nomore ya mogala e e dirisiwang go kopa thuso ya go tlogela go goga motsoko? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |
| f. Switching to smokeless tobacco?..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 9 |

Appendix A continued

Go fetogela ko motsoko o o sa tsweng mosi?

h. Try to quit without assistance? 1 2 9

Go leka go tlogela ntle le go batla thuso epe?

g. Anything else? 1 2 9

Se sengwe gape e ka nna eng?

→ g1. Please specify what you used to try to stop smoking: _____

Tswee-tswee tihalosa ka botlalo se o kileng wa leka go se dirisa go tlogela go goga motsoko ntle le tse di fa godimo:

IF C14 HAS NOT BEEN ASKED → CONTINUE WITH D04

IF C14 = YES → SKIP TO D06

IF C14 = NO OR REFUSED → SKIP TO D08

D04. Have you visited a doctor or other health care provider in the past 12 months?

A o kile wa etela ngaka kgotsa ba botsogo mo sebakeng sa dikgwedi tse di lesome le bobedi tse di fetileng?

YES..... 1

NO 2 → **SKIP TO D08**

REFUSED..... 9 → **SKIP TO D08**

D05. How many times did you visit a doctor or health care provider in the past 12 months? Would you say 1 or 2 times, 3 to 5 times, or 6 or more times?

O etetse ngaka kgotsa ba botsogo ga kae mo sebakeng sa dikgwedi tse di lesome le bobedi tse di fetileng? A e ka nna gangwe kgotsa gabedi,gararo go ya ko botlhanong,kgotsa garataro kgotsa go feta?

1 OR 2 1

3 TO 5 2

6 OR MORE..... 3

REFUSED..... 9

D06. During any visit to a doctor or health care provider in the past 12 months, were you asked if you smoke tobacco?

A go na le nako epe e ekileng yare o etetse Ngaka kgotsa ba botsogo mo sebakeng sa kgwedi tse di lesome le bobedi tse di fetileng wa botswa gore a o goga motsoko?

YES..... 1

NO 2 → **SKIP TO D08**

REFUSED..... 9 → **SKIP TO D08**

D07. During any visit to a doctor or health care provider in the past 12 months, were you advised to quit smoking tobacco?

A go na le nako epe e ekileng yare o etetse Ngaka kgotsa ba botsogo mo sebakeng sa kgwedi tse di lesome le bobedi, wa gakololwa go tlogela go goga motsoko?

YES..... 1

NO 2

REFUSED..... 9

Appendix A continued

D08. Which of the following best describes your thinking about quitting smoking? I am planning to quit within the next month, I am thinking about quitting within the next 12 months, I will quit someday but not within the next 12 months, or I am not interested in quitting?

Ke sefe mo go tse di latelang se se tihalosang botoka dikakanyo tsa gago mabapi le go tlogela go goga motsoko? Ke ikaelela go tlogela go goga motsoko mo kgweding ee tlang, ke akanya go tlogela go goga motsoko mo dikgweding tse di lesome le bobedi tse di tlang, Ke tla tlogela go goga motsoko nako nngwe mme eseng mo dikgweding tse di lesome le bobedi tse di tlang, kgotsa ga ke na maikaelelo a go tlogela go goga motsoko?

- QUIT WITHIN THE NEXT MONTH 1
- THINKING WITHIN THE NEXT 12 MONTHS 2
- QUIT SOMEDAY, BUT NOT NEXT 12 MONTHS.... 3
- NOT INTERESTED IN QUITTING 4
- DON'T KNOW..... 7
- REFUSED..... 9

Section D2. Cessation— Smokeless Tobacco

**IF C01 = 1 OR 2 (RESPONDENT CURRENTLY USES SMOKELESS TOBACCO), CONTINUE WITH THIS SECTION.
IF C01 = 3, 7, OR 9 (RESPONDENT DOES NOT CURRENTLY USE SMOKELESS TOBACCO), SKIP TO NEXT SECTION.**

D09. The next questions ask about any attempts to stop using smokeless tobacco that you might have made during the past 12 months. Please think about your use of smokeless tobacco.
Dipotso tse di latelang di itebagantse le maiteko a o a dirileng go leka go tlogela go dirisa motsoko o o sa tsweng mosi mo kgweding tse di lesome le bobedi tse di fetileng. Tswee tswee akanya ka motsoko o o sa tsweng mosi?

During the past 12 months, have you tried to stop using smokeless tobacco?
Mo kgweding tse di lesome le bobedi tse di fetileng, a o kile wa leka go tlogela go dirisa motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2 → **SKIP TO INSTRUCTION BEFORE D12**
 REFUSED..... 9 → **SKIP TO INSTRUCTION BEFORE D12**

D10a. Thinking about the last time you tried to quit, how long did you stop using smokeless tobacco?
Fa o gakogelwa ka nako e o kileng wa leka go tlogela go dirisa motsoko o o sa tsweng mosi, o tsere nako e kae o ntse o emisitse go dirisa motsoko o?

[ENTER UNIT ON THIS SCREEN AND NUMBER ON NEXT SCREEN]

- MONTHS 1
 WEEKS 2
 DAYS 3
 LESS THAN 1 DAY (24 HOURS)..... 4 → **SKIP TO D11**
 DON'T KNOW..... 7 → **SKIP TO D11**
 REFUSED..... 9 → **SKIP TO D11**

D10b. [ENTER NUMBER OF (MONTHS/WEEKS/DAYS)]

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D11. During the past 12 months, have you used any of the following to try and stop using smokeless tobacco?
Mo kgweding tse di lesome le bobedi tse di fetileng, a o kile wa dirisa dipe tsa tse di latelang go leka go tlogela go dirisa motsoko o o sa tsweng mosi?

- | | | |
|-----|----|---------|
| YES | NO | REFUSED |
| ▼ | ▼ | ▼ |
- a. Counseling, including at a cessation clinic? 1 2 9
 Tshidilo maikutlo go akaretsa le dithuto tse di amanang le go emisa tiriso ya motsoko?
- b. Nicotine replacement therapy, such as the patch or gum? 1 2 9
 Kalafi ya go emisitsa motswako wa nicotine ka go dirisa dipeche kgotsa chunkama ?
- c. Other prescription medications? 1 2 9
 Mefuta e mengwe ya melemo ya sekgoa?
- d. Traditional medicines? 1 2 9
 Melemo ya setso?

Appendix A continued

e. A quit line or a telephone support line? 1..... 2..... 9

Nomore ya mogala e e dirisiwang go kopa thuso ya go tlogela go goga motsoko?

h. Try to quit without assistance? 1..... 2..... 9

Go leka go tlogela ntle le go batla thuso epe?

g. Anything else? 1..... 2..... 9

Se sengwe gape e ka nna eng?

→ g1. Please specify what you used to try to stop using smokeless tobacco: _____

Tswee-tswee tihalosa ka bottlalo se o kileng wa se dirisa go leka go tlogela go dirisa motsoko oo sa tsweng mosi ntle le tse di fa godimo:

IF BOTH B14 AND D04 HAVE NOT BEEN ASKED → CONTINUE WITH D12

IF B14 OR D04 = YES → SKIP TO D14

IF B14 OR D04 = NO OR REFUSED → SKIP TO D16

D12. Have you visited a doctor or other health care provider in the past 12 months?

A o kile wa etela ngaka kgotsa ba botsogo mo seabakeng sa dikgwedi tse di lesome le bobedi tse di fetileng?

YES..... 1

NO 2 → **SKIP TO D16**

REFUSED..... 9 → **SKIP TO D16**

D13. How many times did you visit a doctor or health care provider in the past 12 months? Would you say 1 or 2 times, 3 to 5 times, or 6 or more times?

O etetse ngaka kgotsa ba botsogo ga kae mo seabakeng sa dikgwedi tse di lesome le bobedi tse di fetileng? A e ka nna gangwe kgotsa gabedi,gararo go ya ko botlhanong,kgotsa garataro kgotsa go feta?

1 OR 2 1

3 TO 5..... 2

6 OR MORE..... 3

REFUSED..... 9

D14. During any visit to a doctor or health care provider in the past 12 months, were you asked if you use smokeless tobacco?

A go na le nako epe e ekileng yare o etetse Ngaka kgotsa ba botsogo mo seabakeng sa kgwedi tse di lesome le bobedi tse di fetileng wa botswa gore a o dirisa motsoko o o sa tsweng mosi?

YES..... 1

NO 2 → **SKIP TO D16**

REFUSED..... 9 → **SKIP TO D16**

D15. During any visit to a doctor or health care provider in the past 12 months, were you advised to stop using smokeless tobacco?

A go na le nako epe e ekileng yare o etetse Ngaka kgotsa ba botsogo mo seabakeng sa kgwedi tse di lesome le bobedi, wa gakololwa go tlogela go dirisa motsoko o o sa tsweng mosi?

YES..... 1

NO 2

REFUSED..... 9

Appendix A continued

D16. Which of the following best describes your thinking about quitting smokeless tobacco? I am planning to quit within the next month, I am thinking about quitting within the next 12 months, I will quit someday but not within the next 12 months, or I am not interested in quitting?

Ke sefe mo go tse di latelang se se tshalosang botoka dikakanyo tsa gago mabapi le go tlogela go dirisa motsoko o o sa tsweng mosi? Ke ikaelela go tlogela go dirisa motsoko o o sa tsweng mosi mo kgweding e tlang, ke akanya go tlogela go dirisa motsoko o o sa tsweng mosi mo dikgweding tse di lesome le bobedi tse di tlang, Ke tla tlogela go dirisa motsoko o o sa tsweng mosi nako nngwe mme eseng mo dikgweding tse di lesome le bobedi tse di tlang, kgotsa ga ke na maikaelelo a go tlogela go dirisa motsoko o o sa tsweng mosi gotlhelele?

- QUIT WITHIN THE NEXT MONTH 1
- THINKING WITHIN THE NEXT 12 MONTHS 2
- QUIT SOMEDAY, BUT NOT NEXT 12 MONTHS. 3
- NOT INTERESTED IN QUITTING 4
- DON'T KNOW..... 7
- REFUSED..... 9

Section E. Secondhand Smoke

E01. I would now like to ask you a few questions about smoking in various places.
 Jaanong ke tla itebaganya le dipotso tse di amanang le go gogela motsoko mo mafelong a farologaneng.

Which of the following best describes the rules about smoking inside of your home: Smoking is allowed inside of your home, smoking is generally not allowed inside of your home but there are exceptions, smoking is never allowed inside of your home, or there are no rules about smoking in your home?
 Ke sefe sa tse di latelang se se tihalosang melawana ya go gogela motsoko mo ntlong ya gago: Go gogela motsoko mo ntlong ya gago go a letlelesega, go gogela motsoko mo ntlong ya gago ga go letlelesege ko ntle ga gona le mabaka mangwe, go gogela motsoko mo ntlong ya gago ga go letlelesege gotlhelele, kgotsa ga gona melao ya go gogela motsoko mo ntlong ya gago?

- ALLOWED 1
- NOT ALLOWED, BUT EXCEPTIONS.... 2
- NEVER ALLOWED..... 3 → **SKIP TO E04**
- NO RULES 4 → **SKIP TO E03**
- DON'T KNOW..... 7 → **SKIP TO E03**
- REFUSED..... 9 → **SKIP TO E03**

E02. Inside your home, is smoking allowed in every room?
 Mo lapeng/ntlont la gago/gaeno, a go gogela motsoko mo kamoreng nngwe le nngwe hela go a letlelesega?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

E03. How often does anyone smoke inside your home? Would you say daily, weekly, monthly, less than monthly, or never?
 Ke makgetho a le kae, mongwe a gogela motsoko mo lapeng la gago/lona? A o kare letsatsi le letsatsi, beke le beke, kgwedi le kgwedi, ko tlase ga kgwedi kgotsa ga go na yo o gogelang motsoko mo lapeng?

- DAILY 1
- WEEKLY 2
- MONTHLY 3
- LESS THAN MONTHLY 4
- NEVER 5
- DON'T KNOW..... 7
- REFUSED..... 9

E04. Do you currently work outside of your home?
 A mo bo jaanong o berekela ko ntle ga lelwapa la gago/gaeno?

- YES..... 1
- NO/DON'T WORK..... 2 → **SKIP TO E09**
- REFUSED..... 9 → **SKIP TO E09**

E05. Do you usually work indoors or outdoors?
 A o berekela mo ntlont/mafelo a a tswetsweng kgotsa ko ntle?

Appendix A continued

- INDOORS..... 1 → **SKIP TO E07**
 OUTDOORS..... 2
 BOTH..... 3 → **SKIP TO E07**
 REFUSED..... 9

E06. Are there any indoor areas at your work place?
 A go na le mafelo/matlwana a a tswetsweng kwa o berekelang teng?

- YES..... 1
 NO 2 → **SKIP TO E09**
 DON'T KNOW..... 7 → **SKIP TO E09**
 REFUSED..... 9 → **SKIP TO E09**

E07. Which of the following best describes the indoor smoking policy where you work: Smoking is allowed anywhere, smoking is allowed only in some indoor areas, smoking is not allowed in any indoor areas, or there is no policy?
 Ke sefe mo go tse di latelang se se tihalosang ka botlalo molawana mabapi le go gogela motsoko mo mafelong a tswetsweng ko o berekelang teng? Go gogela motsoko gongwe le gongwe go a letlelesega, go goga motsoko go letlelesega mo mafelong mangwe a tswetsweng, go goga motsoko ga go letlelesege gope mo mafelong a tswetsweng, kgotsa ga gona molawana wa motsoko mo mafelong a tswetsweng.

- ALLOWED ANYWHERE 1
 ALLOWED ONLY IN SOME INDOOR AREAS ... 2
 NOT ALLOWED IN ANY INDOOR AREAS..... 3
 THERE IS NO POLICY 4
 DON'T KNOW..... 7
 REFUSED..... 9

E08. During the past 30 days, did anyone smoke in indoor areas where you work?
 Mo malatsing a masome a mararo a fetileng, a go na le mongwe yo o kileng a gogela motsoko mo mafelong a tswetsweng ko o berekelang teng?

- YES..... 1
 NO 2
 DON'T KNOW..... 7
 REFUSED..... 9

E09. During the past 30 days, did you visit any government buildings or government offices?
 Mo malatsing a masome a mararo a fetileng, a o kile wa etela dikago kgotsa diofisi dingwe tsa puso?

- YES..... 1
 NO 2 → **SKIP TO E11**
 DON'T KNOW..... 7 → **SKIP TO E11**
 REFUSED..... 9 → **SKIP TO E11**

E10. Did anyone smoke inside of any government buildings or government offices that you visited in the past 30 days?
 A go na le mongwe yo o kileng a gogela motsoko mo dikagong kgotsa diofisi dingwe tsa puso tse o kileng wa di etela mo malatsing a masome a mararo a fetileng?

- YES..... 1
 NO 2

Appendix A continued

DON'T KNOW.....7
 REFUSED.....9

E11. During the past 30 days, did you visit any health care facilities?
 Mo malatsing a masome a mararo a fetileng, a o kile wa etela nngwe ya dikokelwana/dikokelo?

YES.....1
 NO2 → **SKIP TO E13**
 DON'T KNOW.....7 → **SKIP TO E13**
 REFUSED.....9 → **SKIP TO E13**

E12. Did anyone smoke inside of any health care facilities that you visited in the past 30 days?
 A go na le mongwe yo o kileng a gogela motsoko mo nngweng ya dikokelwana/dikokelo tse o kileng wa di etela mo malatsing a masome a mararo a fetileng?

YES.....1
 NO2
 DON'T KNOW.....7
 REFUSED.....9

E13. During the past 30 days, did you visit any restaurants?
 Mo malatsing a masome a mararo a a fetileng, a o kile wa etela nngwe ya marekisetso a dijo?

YES.....1
 NO2 → **SKIP TO E15**
 DON'T KNOW.....7 → **SKIP TO E15**
 REFUSED.....9 → **SKIP TO E15**

E14. Did anyone smoke inside of any restaurants that you visited in the past 30 days?
 A go na le mongwe yo o kileng a gogela motsoko mo mangweng a marekisetso a dijo a o kileng wa a etela mo malatsing a masome a mararo a fetileng?

YES.....1
 NO2
 DON'T KNOW.....7
 REFUSED.....9

E15. During the past 30 days, did you use any public transportation?
 A o kile wa dirisa nngwe ya dipalamo tsa setshaba mo malatsing a masome a mararo a fetileng?

YES.....1
 NO2 → **SKIP TO E21**
 DON'T KNOW.....7 → **SKIP TO E21**
 REFUSED.....9 → **SKIP TO E21**

E16. Did anyone smoke inside of any public transportation that you used in the past 30 days?
 A go na le mongwe yo o kileng a gogela motsoko mo dingweng tsa dipagamo tsa setshaba tse o kileng wa di dirisa mo malatsing a masome a mararo a fetileng?

YES.....1
 NO2
 DON'T KNOW.....7
 REFUSED.....9

E21. During the past 30 days, did you visit any universities?
A o kile wa etela dikolo dingwe tsa dithuto tse dikgolo mo malatsing a a masome a mararo a a fetileng?

- YES..... 1
- NO 2 → **SKIP TO E19**
- DON'T KNOW..... 7 → **SKIP TO E19**
- REFUSED..... 9 → **SKIP TO E19**

E22. Did anyone smoke inside of any building of any universities that you visited in the past 30 days?
A go na le mongwe yo o kileng a gogela motsoko mo nngweng ya dikago tsa dikolo tse tsa dithuto tse dikgolo tse o kileng wa di etela mo malatsing a masome a mararo a fetileng?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

E19. During the past 30 days, did you visit any other schools or educational facilities?
A o kile wa etela dikolo di ngwe kgotsa mafelo mangwe a thuto mo malatsing a masome a mararo a fetileng

- YES..... 1
- NO 2 → **SKIP TO E25**
- DON'T KNOW..... 7 → **SKIP TO E25**
- REFUSED..... 9 → **SKIP TO E25**

E20. Did anyone smoke inside of any schools or educational facilities that you visited in the past 30 days?
A go na le mongwe yo o kileng a gogela motsoko mo dingweng tsa dikolo kgotsa mafelo mangwe a thuto a o kileng wa a etela mo malatsing a masome a mararo a fetileng?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

E25. During the past 30 days, did you visit any bars or night clubs?
A o kile wa etela marekisetso a bojalwa kgotsa mafelo a maitiso mo malatsing a a masome a mararo a fetileng

- YES..... 1
- NO 2 → **SKIP TO E27**
- DON'T KNOW..... 7 → **SKIP TO E27**
- REFUSED..... 9 → **SKIP TO E27**

E26. Did anyone smoke inside of any bars or night clubs that you visited in the past 30 days?
A go na le mongwe yo o kileng a gogela motsoko mo marekisetso a bojalwa kgotsa mafelo a maitiso a o kileng wa a etela mo malatsing a masome a mararo a fetileng?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

Appendix A continued

E27. During the past 30 days, did you visit any cafes, coffee shops, or tea houses?
 A o kile wa etela marekisetso a kofi le tee mo malatsing a a masome a mararo a a fetileng?

- YES..... 1
- NO 2 → **SKIP TO E17**
- DON'T KNOW..... 7 → **SKIP TO E17**
- REFUSED..... 9 → **SKIP TO E17**

E28. Did anyone smoke inside of any cafes, coffee shops, or tea houses that you visited in the past 30 days?
 A go na le mongwe yo o kileng a gogela motsoko mo lengweng la marekisetso a mabotlana a rekisang kofi le tee a o kileng wa a etela mo malatsing a masome a mararo a fetileng?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

E17. Based on what you know or believe, does breathing other people's smoke cause serious illness in non-smokers?
 Go ya ka kitso kgotsa tumelo ya gago, a go hema mosi wa motsoko o o tswang mo leganong la motho go ka baka malwetsi a diphatsa mo go ba ba sa gogeng motsoko?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

E29. For each of the following public places, please tell me if you think smoking should or should not be allowed in indoor areas.
 A o bona go goga motsoko go tshwanetse go letlelelwa mo mafelong a botlhe a tswetsweng a tse di latelang?

	SHOULD BE ALLOWED	SHOULD NOT BE ALLOWED	DON'T KNOW	REFUSED
a. Hospitals? Dikokelo?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
b. Workplaces? Madirelo?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
c. Restaurants? Marekisetso a dijo?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
d. Bars? Marekisetso a bojalwa?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
e. Public transportation vehicles? Dipalamo tsa setshaba?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
f. Schools? Dikolo?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
g. Universities? Dikolo tsa dithuto tse dikgolo?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9
h. Places of worship? Dikereke/Mafelo a dithapelo?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 7	<input type="checkbox"/> 9

Section F. Economics – Manufactured Cigarettes

**IF [B01=1 OR 2 (RESPONDENT CURRENTLY SMOKES DAILY OR LESS THAN DAILY)]
AND
[(B06a OR B10a) > 0 AND <= 888 (RESPONDENT SMOKES MANUFACTURED CIGARETTES)],
THEN CONTINUE WITH THIS SECTION.
OTHERWISE, SKIP TO NEXT SECTION.**

F01a. The next few questions are about the last time you purchased cigarettes for yourself to smoke.
Dipotso tse di latelang ke mabapi le go inthekela motsoko ga gago mo nakong e fetileng go ya go goga.

The last time you bought cigarettes for yourself, how many cigarettes did you buy?
Mo nakong e fetileng e o neng o ithekela motsoko, o rekile disekelese tse kae?

[ENTER UNIT ON THIS SCREEN AND NUMBER ON NEXT SCREEN]

CIGARETTES 1
 PACKS 2
 CARTONS 3
 OTHER (SPECIFY) 4 → F01c. [SPECIFY THE UNIT]: _____
 NEVER BOUGHT CIGARETTES 5 → **SKIP TO NEXT SECTION**
 REFUSED 9 → **SKIP TO F03**

F01b. [ENTER NUMBER OF (CIGARETTES/PACKS/CARTONS/OTHER)]

--	--	--

**[IF F01a=CIGARETTES, GO TO F02]
 [IF F01a=PACKS, GO TO F01dPack]
 [IF F01a=CARTONS, GO TO F01dCart]
 [IF F01a=OTHER, GO TO F01dOther]**

F01dPack. Did each pack contain 10 cigarettes, 20 cigarettes, or another amount?
A mophuthelwana mongwe le mongwe o ne o na le disekelese tse di lesome, masome a mabedi kgotsa palo nngwe e sele?

10 1
 20 2
 OTHER AMOUNT .. 7 → F01dPackA. How many cigarettes were in each pack?
 REFUSED 9 Disekelese di ne di le kae mo mophuthelwaneng mongwe le mongwe?

[GO TO F02]

F01dCart. Did each carton contain 100 cigarettes, 200 cigarettes, or another amount?
A mophuthelwana mongwe le mongwe o ne o na le disekelese tse di lekgolo, makgolo a mabedi kgotsa palo nngwe e sele?

Appendix A continued

- 100 1
 200 2
 OTHER AMOUNT .. 7 → F01dCartA. How many cigarettes were in each carton?
 REFUSED 9 Disekerese di ne di le kae mo mophuthelwaneng mongwe le mongwe?

[GO TO F02]

F01dOther. How many cigarettes were in each {F01c)?
 Go ne go na le disekerese tse kae mo go nngwe le nngwe ya {F01c)?

[IF REFUSED, ENTER 999]

--	--	--

F02. In total, how much money did you pay for this purchase?
 Ka kakaretso, o dirisitse madi a selekanyo se se kae go reka mophuthelwana o?

[IF DON'T KNOW OR REFUSED, ENTER 999]

	RANGE: 1 - 500
--	----------------

F03. What brand did you buy the last time you purchased cigarettes for yourself?
 Mo nakong ya bofelo fa o reka sekerese, o itheketse mofuta ofe wa sekerese?

- PETER STUYVERSANT 1
 ROTHMANS 2
 CRAVEN A 3
 DUNNHILL 4
 OTHER 6 → F03a. [SPECIFY BRAND]: _____
 REFUSED 99

F04. The last time you purchased cigarettes for yourself, where did you buy them?
 Mo nako e fetileng fa o ithekela disekerese, o di rekile kae?

- VENDING MACHINE 1
 STORE 2
 STREET VENDOR 3
 MILITARY STORE 4
 DUTY-FREE SHOP 5
 OUTSIDE THE COUNTRY 6
 KIOSKS 7
 INTERNET 8
 FROM ANOTHER PERSON 9
 OTHER 10 → F04a. [SPECIFY LOCATION]: _____
 DON'T REMEMBER 77
 REFUSED 99

F06. Were these cigarettes labeled as light, mild, or low tar?

Appendix A continued

A disekerese tse di ne di na le matshwao aa supang gore selekanyo sa bothole jo bo dirisitsweng mo sekereseng bo motlhofo, bo fa gare kgotsa bo ko tlase?

- LIGHT 1
- MILD 2
- LOW TAR 3
- NONE OF THE ABOVE.. 4
- DON'T KNOW..... 7
- REFUSED..... 9

Section G. Media

Structure #2 – Asking about two or more products (e.g., cigarettes, smokeless tobacco)

G201intro. The next few questions ask about your exposure to the media and advertisements in the last 30 days. For each item, I am going to ask about cigarettes and smokeless tobacco.

Potso tse di latelang di botsa ka go amana gago le bobegadikgang le boanamisi ba melaetsa le ipapatso mo malatsing a a masome mararo a a fetileng. Mo go e nngwe le e nngwe ya tsone ke ya go go botsa ka motsoko wa sekerese le motsoko o o sa tsweng mosi.

G201a. In the last 30 days, have you noticed any information in newspapers or in magazines about the dangers of use or that encourages quitting of the following tobacco products?

A o kile wa bona kitsiso nngwe mo dipampiring le dibukana tsa dikgang mabapi le bodiphatsa jwa go dirisa motsoko, kgotsa kitsiso e e neng e rotloetsa go emisa go dirisa mehuta e e latelang ya metsoko, mo malatsing aa masome mararo a fetileng?

1. Cigarettes?

Sekerese?

- YES..... 1
 NO 2
 NOT APPLICABLE 7 → **SKIP TO G201b**
 REFUSED..... 9

2. Smokeless tobacco?

Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

G201b. In the last 30 days, have you seen any information on television about the dangers of use or that encourages quitting of the following tobacco products?

A o kile wa bona kitsiso nngwe mo ditshwantshong tsa motshikinyego mabapi le bodiphatsa jwa go dirisa motsoko kgotsa kitsiso e e neng e rotloetsa go emisa go dirisa mehuta e e latelang ya metsoko mo malatsing a a masome mararo a a fetileng?

1. Cigarettes?

Sekerese?

- YES..... 1
 NO 2
 NOT APPLICABLE 7 → **SKIP TO G201c**
 REFUSED..... 9

2. Smokeless tobacco?

Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

G201c. In the last 30 days, have you heard any information on the radio about the dangers of use or that encourages quitting of the following tobacco products?

Mo malatsing a a masome mararo a a fetileng a o kile wa utlwa molaetsa mongwe mo seromamoweng mabapi le bodiphatsa jwa go dirisa motsoko kgotsa molaetsa o o neng o rotloetsa go emisa go dirisa mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
 NO 2
 NOT APPLICABLE 7 → **SKIP TO G201d**
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

G201d. In the last 30 days, have you noticed any information on billboards about the dangers of use or that encourages quitting of the following tobacco products?

Mo malatsing a a masome mararo a a fetileng a o kile wa bona molaetsa mongwe mo dibotong tsa kanamiso molaetsa le bodiphatsa jwa go dirisa motsoko kgotsa molaetsa o o neng o rotloetsa go emisa go dirisa mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
 NO 2
 NOT APPLICABLE 7 → **SKIP TO G201e**
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

G201e. In the last 30 days, have you noticed any information somewhere else about the dangers of use or that encourages quitting of the following tobacco products?

Mo malatsing a a masome mararo a a fetileng a o kile wa bona molaetsa mongwe golo gongwe mabapi le bodiphatsa jwa go dirisa motsoko kgotsa molaetsa o o neng o rotloetsa go emisa go dirisa mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekerese?

[DO NOT INCLUDE HEALTH WARNINGS ON CIGARETTE PACKAGES]

- YES..... 1 → a. Please specify where: _____
 NO 2 **Tswee-tswee tlhalosa gore ko kae:**
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

[DO NOT INCLUDE HEALTH WARNINGS ON SMOKELESS PACKAGES]

YES..... 1 → a. Please specify where: _____
 NO 2 Tswee-tswee tthalosa gore ko kae:
 REFUSED..... 9

G202. In the last 30 days, did you notice any health warnings on cigarette packages?
Mo malatsing a a masome mararo a a fetileng a o kile wa bona matshwao a botsogo a tthagiso mo mephuthelwaneng ya disekelese?

YES..... 1
 NO 2 → **SKIP TO G202a**
 DID NOT SEE ANY CIGARETTE PACKAGES... 3 → **SKIP TO G202a**
 REFUSED..... 9 → **SKIP TO G202a**

G203. [ADMINISTER IF B01 = 1 OR 2. ELSE GO TO G202a]

In the last 30 days, have warning labels on cigarette packages led you to think about quitting?
Mo malatsing a a masome mararo a a fetileng, a matshwao a tthagiso a a mo mephuthelwaneng ya disekelese a ne a go dira gore o akanye go tlogela go dirisa motsoko?

YES..... 1
 NO 2
 DON'T KNOW..... 7
 REFUSED..... 9

G202a. In the last 30 days, did you notice any health warnings on smokeless tobacco products?
Mo malatsing a a masome mararo a a fetileng a o kile wa bona matshwao a botsogo a tthagiso mo mephuthelwaneng ya motsoko o o sa tsweng mosi?

YES..... 1
 NO 2 → **SKIP TO G204a**
 DID NOT SEE ANY SMOKELESS PRODUCTS. 3 → **SKIP TO G204a**
 REFUSED..... 9 → **SKIP TO G204a**

G203a. [ADMINISTER IF C01 = 1 OR 2. ELSE GO TO G204a]

In the last 30 days, have warning labels on smokeless tobacco products led you to think about quitting?
Mo malatsing a masome mararo a a fetileng, a matshwao a tthagiso a a mo mephuthelwaneng ya motsoko o sa tsweng mosi a ne a go dira gore o akanye go tlogela go dirisa motsoko?

YES..... 1
 NO 2
 DON'T KNOW..... 7
 REFUSED..... 9

G204a. In the last 30 days, have you noticed any advertisements or signs promoting the following tobacco products in stores where the products are sold?

Mo malatsing a masome mararo a a fetileng a o kile wa bona molaetsa mongwe wa ipapatso kgotsa matshwao a a bapatsang mehuta e e latelang ya metsoko mo marekisetong a a rekisang metsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
 NO 2
 NOT APPLICABLE 7 → **SKIP TO G204b**
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

G204b. In the last 30 days, have you seen any advertisements or signs promoting the following tobacco products on television?

Mo malatsing a a masome mararo a a fetileng a o kile wa bona molaetsa mongwe wa ipapatso kgotsa matshwao mangwe mo ditshwantshong tsa motshikinwego a a bapatsang mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
 NO 2
 NOT APPLICABLE 7 → **SKIP TO G204c**
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

G204c. In the last 30 days, have you heard any advertisements promoting the following tobacco products on the radio?

Mo malatsing a a masome mararo a a fetileng a o kile wa utlwa molaetsa mongwe mo seromamoeng o o neng o roloetsa kgotsa o bapatsa tiriso ya mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
 NO 2
 NOT APPLICABLE 7 → **SKIP TO G204d**
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

Appendix A continued

G204d. In the last 30 days, have you noticed any advertisements promoting the following tobacco products on billboards?

Mo malatsing a a masome mararo a a fetileng a o kile wa bona molaetsa mongwe mo dibotong tsa kanamiso molaetsa o o neng o rotloetsa kgotsa o bapatsa tiriso ya mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekereese?

- YES..... 1
NO 2
NOT APPLICABLE 7 → **SKIP TO G204e**
REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
NO 2
REFUSED..... 9

G204e. In the last 30 days, have you noticed any advertisements or signs promoting the following tobacco products on posters?

Mo malatsing a a masome mararo aa fetileng a o kile wa bona molaetsa mongwe kgotsa matshwao mangwe mo dipampiring/ditshwantshong tsa kanamiso molaetsa o o neng o rotloetsa kgotsa o bapatsa tiriso ya mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekereese?

- YES..... 1
NO 2
NOT APPLICABLE 7 → **SKIP TO G204f**
REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
NO 2
REFUSED..... 9

G204f. In the last 30 days, have you noticed any advertisements or signs promoting the following tobacco products in newspapers or magazines?

Mo malatsing a a masome mararo a a fetileng a o kile wa bona molaetsa mongwe kgotsa matshwao mangwe mo dipampiring tsa dikgang o o neng o rotloetsa kgotsa o bapatsa tiriso ya mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekereese?

- YES..... 1
NO 2
NOT APPLICABLE 7 → **SKIP TO G204g**
REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

G204g. In the last 30 days, have you noticed any advertisements or signs promoting the following tobacco products in cinemas?

Mo matsatsing a a masome mararo a a fetileng a o kile wa bona molaetsa mongwe kgotsa matshwao mangwe mo mafelong a itloso bodutu a ditshwantsho tsa motshikinyego o o neng o rotloetsa kgotsa o bapatsa tiriso ya mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
 NO 2
 NOT APPLICABLE 7 → **SKIP TO G204h**
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

G204h. In the last 30 days, have you noticed any advertisements or signs promoting the following tobacco products on the internet?

Mo malatsing a a masome mararo a a fetileng a o kile wa bona molaetsa mongwe kgotsa matshwao mangwe mo maranyaneng a inthanete a dikhomputara o o neng o rotloetsa kgotsa o bapatsa tiriso ya mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
 NO 2
 NOT APPLICABLE 7 → **SKIP TO G204i**
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

G204i. In the last 30 days, have you noticed any advertisements or signs promoting the following tobacco products on public transportation vehicles or stations?

Mo malatsing a a masome mararo a a fetileng a o kile wa bona molaetsa mongwe kgotsa matshwao mangwe mo mafelong a dipalamo tsa setshaba kgotsa tsone dipalamo tsa setshaba o o neng o rotloetsa kgotsa o bapatsa tiriso ya mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
 NO 2
 NOT APPLICABLE 7 → **SKIP TO G204j**
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

G204j. In the last 30 days, have you noticed any advertisements or signs promoting the following tobacco products on public walls?

Mo malatsing a a masome mararo a a fetileng a o kile wa bona molaetsa mongwe kgotsa matshwao mangwe kgotsa ditshwantsho dingwe mo maboteng a dikago tsa setshaba o o neng o rotloetsa kgotsa o bapatsa tiriso ya mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
 NO 2
 NOT APPLICABLE 7 → **SKIP TO G204k**
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 REFUSED..... 9

G204k. In the last 30 days, have you noticed any advertisements or signs promoting the following tobacco products anywhere else?

Mo malatsing a a masome mararo a fetileng a o kile wa bona molaetsa mongwe kgotsa matshwao mangwe golo gongwe o o neng o rotloetsa kgotsa o bapatsa tiriso ya mehuta e e latelang ya metsoko?

1. Cigarettes?
Sekerese?

- YES..... 1 → a. Please specify where: _____
 NO 2 **Tswee-tswee tlhalosa gore ko kae**
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1 → a. Please specify where: _____
 NO 2 **Tswee-tswee tlhalosa gore ko kae**
 REFUSED..... 9

G205. In the last 30 days, have you noticed any sport or sporting event that is associated with cigarette brands or cigarette companies?

Mo malatsing a a masome a mararo a a fetileng a o kile wa bona motshameko mongwe kgotsa tiragatso nngwe ya metshameko e e neng e ikamantse le mofuta mongwe wa sekerese kgotsa kompone nngwe e e dirang motsoko wa sekerese?

- YES..... 1
 NO 2
 DON'T KNOW..... 7
 REFUSED..... 9

G205a. In the last 30 days, have you noticed any sport or sporting event that is associated with smokeless tobacco brands or smokeless tobacco companies?

Mo malatsing a a masome a mararo a a fetileng a o kile wa bona motshameko mongwe kgotsa tiragatso nngwe ya metshameko e e neng e ikamantse le mofuta mongwe wa motsoko o o sa tsweng mosi kgotsa kompone nngwe e e dirang motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 DON'T KNOW..... 7
 REFUSED..... 9

G206a. In the last 30 days, have you noticed any free samples of the following tobacco products?

Mo malatsing a a masome a mararo a a fetileng a o kile wa bona mefuta e e latelang ya motsoko e fiwa batho mahala/ba sa reke?

1. Cigarettes?
Sekerese?

- YES..... 1
 NO 2
 DON'T KNOW..... 7
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
 NO 2
 DON'T KNOW..... 7
 REFUSED..... 9

G206b. In the last 30 days, have you noticed any of the following tobacco products sold at sale prices?

Mo malatsing a a masome a mararo a a fetileng a o kile wa bona mefuta e e latelang ya motsoko e rekisiwa ka ditlhwatlhwa tse di ko tlase kgotsa tse di fokoditsweng?

1. Cigarettes?
Sekerese?

- YES..... 1
 NO 2
 DON'T KNOW..... 7
 REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

G206c. In the last 30 days, have you noticed any coupons for the following tobacco products?
Mo matsatsing a a masome a mararo a a fetileng a o kile wa bona di rasiti tse di dueleletsweng ruri tsa mefuta e e latelang ya motsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

G206d. In the last 30 days, have you noticed any free gifts or special discount offers on other products when buying any of the following tobacco products?
Mo malatsing a a masome mararo a a fetileng a o kile wa bona go abiwa dimpho tsa mahala kgotsa go rekisiwa dilwana dingwe ka dithlwathwa tse di ko tlase ga o reka mengwe ya mefuta e e latelang ya motsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

G206e. In the last 30 days, have you noticed any clothing or other items with a brand name or logo of the following tobacco products?
Mo malatsing a a masome mararo a a fetileng a o kile wa bona diaparo kgotsa dilwana dingwe di na le leina kgotsa sekano sa mefuta e e latelang ya motsoko?

1. Cigarettes?
Sekerese?

Appendix A continued

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

G206f. In the last 30 days, have you noticed any promotions in the mail for the following tobacco products?
Mo malatsing a a masome mararo a a fetileng a o kile wa bona melaetsa mo makwalong e e rotloetsang tiriso ya mefuta e e latelang ya motsoko?

1. Cigarettes?
Sekerese?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

2. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
- NO 2
- DON'T KNOW..... 7
- REFUSED..... 9

GG1. In the last 30 days, have you seen people consuming the following tobacco products on television?
Mo malatsing a a masome mararo a a fetileng a o kile wa bona batho ba dirisa mehuta e latelang ya metsoko mo ditshwantshong thelevisheneng?

a. Cigarettes?
Sekerese?

- YES..... 1
- NO 2
- REFUSED..... 9

b. Smokeless tobacco?
Motsoko o o sa tsweng mosi?

- YES..... 1
- NO 2
- REFUSED..... 9

Section H. Knowledge, Attitudes & Perceptions

H01. The next question is asking about smoking tobacco.
Potso e e latelang e botsa ka go goga motsoko.

Based on what you know or believe, does smoking tobacco cause serious illness?
Go ya ka kitso kgotsa tumelo ya gago, a go goga motsoko go ka lwatsa kgotsa ga koafatsa botsogo mo go bonalang?

- YES..... 1
NO 2
DON'T KNOW..... 7
REFUSED..... 9

H02. Based on what you know or believe, does smoking tobacco cause the following...
Go ya ka kitso kgotsa tumelo ya gago, a go goga motsoko go ka baka tse di latelang?

YES	NO	DON'T KNOW	REFUSED
▼	▼	▼	▼

- a. Stroke (blood clots in the brain that may cause paralysis)? 1..... 2..... 7..... 9
Go swa nhama (madi a a ipopileng mo bobokong a a ka bakang go swa ga dikarolo dingwe tsa mmele)?
- b. Heart attack? 1..... 2..... 7..... 9
Go ema ga pelo ga tshoganyetso?
- c. Lung cancer? 1..... 2..... 7..... 9
Kankere ya makgwafo?
- d. Bladder cancer? 1..... 2..... 7..... 9
Kankere ya setlha?

H02_1. [ONLY ADMINISTERED TO CURRENT MANUFACTURED CIGARETTE SMOKERS]

Based on your experience of smoking, do you think that your current brand might be a little less harmful, is no different, or might be a little more harmful, compared to other cigarettes?
Go ya ka kitso ya gago ya go goga motsoko, a o akanya gore mofuta o o o gogang, o ka tswa o le diphatsa go le go nnye, o sa farologane le e mengwe, kgotsa o le diphatsa go gaisa mefuta e mengwe ya disekerese?

- A LITTLE LESS HARMFUL 1 → **SKIP TO H02_3**
NO DIFFERENT 2
A LITTLE MORE HARMFUL 3 → **SKIP TO H02_3**
DON'T KNOW..... 7
REFUSED..... 9

H02_2. Do you think that some types of cigarettes could be less harmful than other types, or are all cigarettes equally harmful?
A o akanya gore mefuta mengwe ya disekerese e ka tswa e le diphatsa go gaisa e mengwe, kgotsa disekerese tsoitlhe di lekana ka bodiphatsa?

- COULD BE LESS HARMFUL.... 1
ALL EQUALLY HARMFUL 2
DON'T KNOW..... 7

Appendix A continued

REFUSED..... 9

H02_3. Do you believe cigarettes are addictive?
A o dumela gore motsoko o a tshwakgola/o tsena motho mo mading?

YES..... 1
NO 2
DON'T KNOW..... 7
REFUSED..... 9

H03. Based on what you know or believe, does using smokeless tobacco cause serious illness?
Go ya ka kitso kgotsa tumelo ya gago, a go dirisa motsoko o o sa tsweng mosi go ka baka malwetse a diphatsa?

YES..... 1
NO 2
DON'T KNOW..... 7
REFUSED..... 9

H04. Would you favor or oppose a law that would prohibit smoking in all indoor workplaces and public places, such as restaurants and bars or coffee shops?
A o ka rotloetsa kgotsa wa ema kgatlhanong le molao o o sa letleleleng tiriso ya motsoko mo madirelong a tswetsweng le mo mafelong a setshaba jaaka marekisetso a dijo, marekisetso a dinotagi kgotsa marekisetso a tee/kofi?

FAVOR 1
OPPOSE..... 2
DON'T KNOW.. 7
REFUSED..... 9

H05. Would you favor or oppose increasing taxes on tobacco products?
A o ka rotloetsa kgotsa wa ema kgatlhanong le go okediwa ga makgetho a motsoko?

FAVOR 1
OPPOSE..... 2
DON'T KNOW.. 7
REFUSED..... 9

H06. Would you favor or oppose a law prohibiting all advertisements for tobacco products?
A o ka rotloetsa kgotsa wa ema kgatlhanong le molao o o sa letleleleng ipapatso ya mofuta ope fela ya motsoko?

FAVOR 1
OPPOSE..... 2
DON'T KNOW.. 7
REFUSED..... 9

End Individual Questionnaire

100. Those are all of the questions I have. Thank you very much for participating in this important survey.
Potsolotso ya rona e felela fa. Nte ke tsee sebaka se go go leboga thata go bo o tserere karolo mo
patlisisong e ya bothokwa. Le ka moso.

102. [RECORD ANY NOTES ABOUT INTERVIEW:]

APPENDIX B: SAMPLE DESIGN

Introduction

The Global Adult Tobacco Survey (GATS) is the global standard for systematically monitoring adult tobacco use and tracking key tobacco control indicators. It is a nationally representative adult household survey using a consistent and standard protocol, questionnaire, sample design, data collection and management procedures across countries including Botswana. GATS Botswana targeted all non-institutionalized adult men and women aged 15 years and above who considered Botswana as their usual place of residence. All members of the target population were sampled from the households they considered their usual place of residence. A usual member of a sampled household was any otherwise-eligible resident who has no other residence or has multiple residences but has been living in the selected household for at least half of the time during the past 12 months. The target population included individuals who resided in Botswana even if they were not citizens of Botswana. Non-citizens were eligible to participate in this survey provided they had been residing in Botswana for at least 6 months of the 12 months before the administration of the GATS questionnaire, as recommended by the GATS Sample Design Manual. This therefore excludes individuals visiting the country as tourists and those who were institutionalised (i.e. those in military camps, boarding schools, hospitals, prisons, nursing homes and others).

Furthermore, Botswana was conducting GATS for the first time and therefore a smaller stand-alone sample design was chosen to produce national estimates separately by urbanicity. The sampling frame for GATS Botswana was delineated from the 2011 Population and Housing Census. During the 2011 Population and Housing census, Botswana was divided into census districts. Therefore, stratified random sampling was used and the sampling units were stratified by census districts. The 26 census districts in Botswana thus served as the strata. However, during the analysis, the separate domains of estimation were urban and rural areas where semi-urban areas in the country were split into either urban or rural depending on ratio of urban EAs to rural EAs in a district. Districts which were mostly urban (i.e. they have $\geq 50\%$ of urban EAs) fell

within the urban stratum and the same logic with the rural stratum. Thus, the urban stratum was made up of 10 urban districts whereas the rural stratum was comprised of 16 rural districts as illustrated by **Table 1** below. The Primary Sampling Units (PSUs) were the Enumeration Areas (EAs) whereas Secondary Sampling Units (SSUs) and Tertiary Sampling Units (TSUs) were households and GATS-eligible household residents respectively.

The 2011 Population and Housing census defined the Enumeration Area (EA) as the smallest geographic unit, which represents an average workload for an enumerator over a specified period. The EA was therefore, established using the average number of dwelling units because a dwelling unit in Botswana has identifiable boundaries. A dwelling unit in its traditional sense consists of one or more structures or buildings, permanent or temporary, usually surrounded by a fence/wall or something to mark its boundaries. In some areas the huts and/or other structures may not be fenced, but they are usually in very close proximity. Dwelling units in Botswana are target addresses, which provide access to household(s).

Furthermore, a household was defined as any unit, family or group of people having the same cooking arrangements and/or "living under the same roof" in the same dwelling unit and making common provision for food or other living arrangements. Although some dwelling units in Botswana contain more than one household, it is common practice that the group of people living in a dwelling unit with more than one household will be found to be making common provision for food or other essentials for those living together hence meeting the definition of a household.

Survey Design Specifications

The formula used to determine the sample size for GATS Botswana was:

$$n = \frac{z_{\alpha}^2 * p * (1 - p)}{e^2} = \frac{4 * p * (1 - p)}{e^2} * D$$

Where:

- i. n = is the required sample size for the KEY indicator,
- ii. 4 = is a factor to achieve the 95 percent level of confidence, ($z_{\alpha} = 1.96$ at 5% level of significance, so approximately $z^2_{\alpha} \approx 4$ is taken).
- iii. $p = 0.15$ is the predicted or anticipated prevalence (coverage rate) for the key indicator, which is based upon the smallest target group (in terms of its proportion of the total population), therefore it is the proportion of people who smoked tobacco to adult population (15 years and over) from the Botswana Core Welfare Indicator Survey (BCWIS) 2009/10.
- iv. p = is the margin of error to be tolerated (in general 5% but in this survey the allowable error was 3%),
- v. $D = \text{Design effect}$; The Survey Design Effect (*Deff*) is defined as the ratio of sample variances from the survey to that of a simple random sample of the same size. It is a measure of how much “worse” the survey variance is compared to a simple random sample, in terms of its reliability. The *Deff* from the previous surveys with similar objectives that has been carried out in the country may be assumed to be equal, otherwise an acceptable range of *Deff* should be between 1.5 and 2.5. Generally *Deff* = 2 is used. It is also important to note that failure to take account of the survey design effect in the estimates of standard errors can lead to invalid interpretation of the survey results.
- vi. As this was a standard survey and conducted for the first time in Botswana, GATS Botswana was designed to estimate tobacco use at national level by urbanicity only, thus aimed to attain a minimum of 4,000

respondents nationally and this was allocated 50:50 to urban and rural areas. The domains of estimation at the analysis stage were therefore urban and rural areas where urban areas comprised of Cities/Towns and some semi-urban areas whereas rural areas were made up of all rural villages and the other semi-urban areas. The 2011 Population and Housing census had however, grouped census districts into 3 areas being urban, semi-urban and rural areas. As such, it was recommended that for each reporting domain, the overall sample size be increased substantially for the results to be acceptably reliable hence the recommended multiplying factor of $D^{0.65}$ where D is the number of stratification domains (in this survey, $D=3$)¹. The factor $3^{0.65} = 2.04$, therefore, implied that the calculated sample size n was increased by 2.04 for this GATS to produce reliable sub-national estimates. The sample size was further adjusted by 15 percent for individual non-response and 2 percent for individual ineligibility. The sample was also adjusted by 10 percent, 5 percent, and 2 percent for household ineligibility, non-screened and non-responses respectively.

- vii. Hence the target sample size was **6,000**

However, because of heterogeneity of the districts and lack of up-to-date information on the magnitude of tobacco use in the country, a decision was made to have all the districts in Botswana represented in the sample.

Thus a minimum requirement of 2 EAs per census district was set and this increased the sample size to 6,015 households as illustrated by columns 6 and 7 in **Table 1** below).

Table 1. Domains of estimation, proportional allocation of EAs and households

District Name	Total # of EAs	% Urban	Total # of Households	Proportion to Total Households	Sampled Households	Final Sampled EAs	Final Sampled Households
	1	2	3	4	5	6	7
Urban Areas							
Gaborone	597	100	74,957	0.29281	878	58	870
Francistown	211	100	31,297	0.12226	367	24	360
Lobatse	81	100	9,214	0.03599	108	7	105
Selibe Phikwe	148	100	16,058	0.06273	188	13	195
Orapa	30	100	3,292	0.01286	39	3	45
Jwaneng	45	100	5,940	0.02320	70	5	75
Sowa	15	100	1,191	0.00465	14	2	30
South East	204	78	23,990	0.09371	281	19	285
Kweneng East	601	72	68,317	0.26687	801	53	795
Ngamiland East	210	58	21,736	0.08491	255	17	255
Total Urban	2,142		255,992		3,000	201	3,015
Rural Areas							
Ngwaketse	307	48	31,480	0.106983	321	21	315
Borolong	125	18	13,758	0.046756	140	9	135
Ngwaketse West	38	0	3,556	0.012085	36	3	45
Kweneng West	127	13	12,231	0.041567	125	8	120
Kgatleng	228	46	24,915	0.084673	254	17	255
Serowe/Palapye	531	45	46,188	0.156968	471	31	465
Mahalapye	337	38	29,795	0.101257	304	20	300
Bobonong	210	48	19,155	0.065097	195	13	195
Central Boteti	138	32	14,110	0.047952	144	10	150
Tutume	432	38	38,352	0.130338	391	26	390
North East	144	22	15,865	0.053917	162	11	165
Ngamiland West	131	22	13,164	0.044737	134	9	135
Chobe	55	33	6,830	0.023211	70	5	75
Ghanzi	110	30	11,354	0.038586	116	8	120
Kgalagadi South	93	28	7,956	0.027038	81	5	75
Kgalagadi North	55	29	5,542	0.018834	57	4	60
Total Rural	3,061		294,251		3,000	200	3,000
Grand Total	5,203		550,243		6,000	401	6,015

A stratified three-stage probability sampling design was used to select the sample for this survey. The sample was first allocated proportionately across the census districts as shown by **Table 1** above and the first stage was the selection of EAs as PSUs. In this survey, the measure of size was the number of households in a district as per the 2011 Population and Housing Census. PPS systematic sampling method with a random start was then applied to select the EAs and fifteen (15) households per EA. Although the EAs were established using the average number of dwelling units and the average size of an EA was approximately 120-150 dwelling units, a list of all EAs in Botswana with corresponding sizes (i.e. number of households) were created during the mapping and listing exercise. The cumulative population sizes of the EAs were also established and this was divided by the calculated sample size to determine the SI. A random number between 1 and SI was then selected and subsequent sampling numbers were calculated. Sampling numbers were then compared with the cumulated sizes and the PSUs selected were the first whose cumulated sizes were greater or equal to the sampling numbers.

Botswana GATS teams were then provided with the list of sampled EAs and their respective maps. An EA was either a whole locality (this is the case of a small village which is an EA by itself), a part of a locality (this is the case of a bigger village which has been divided into more than one EA) or a group of localities (this is the case of cattle posts, lands areas or freehold farms). For an EA which consisted of smaller localities, Botswana GATS teams were given a map showing the location of the localities in the EA and the approximate number of dwelling units in each locality. Furthermore, the EA that formed part of a big village was identified by using the map that showed the location of the EA relative to adjacent areas in the village. The boundaries of an EA in a city/town were identifiable through landmarks like roads and streets, which had names and plots with plot numbers. In most cases the road/street names and plot numbers were marked on signboards and on the map. EA boundaries were marked by a visible colour line on the map. Therefore, to identify the EA, the field interviewers and supervisors depended on the EA map and the census/

dwelling unit numbers usually pinned to one of the household doors within a dwelling unit.

The second stage of sampling was selection of households, which served as SSUs. Fresh lists of households within the selected EAs were prepared by Botswana GATS team (more specifically the supervisors and IT staff) during households mapping and listing. Mapping and listing was conducted prior to deployment of the interviewers and this helped in the preparation of case files. Statistics Botswana also provided technical support during mapping and listing of households. New household listing was used to update the household information in selected enumeration areas and to take care of the expected variation in both the average size and differential growth of the EAs since the last mapping of EAs in Botswana was done during the 2011 Population and Housing census. Both occupied and non-occupied households were listed in this survey and the listing followed the GATS Household Listing manual. Households within a dwelling unit were listed independently provided that people living in those households do not make common provision for food or other essentials for living together. Otherwise, a dwelling unit with more than one household in which people living in it make common provision for food or other essentials for living together was considered as one household. Systematic random sampling with a random start was then applied to select households from the roster of households prepared. The systematic selection interval was determined as the number of occupied households on the EA listing form divided by the number of households to be selected per EA, and rounded to the nearest integer.

The third stage of sampling was selection of eligible individuals residing in the selected households as Tertiary Sampling Units (TSUs) for GATS –Botswana. A roster of individuals aged 15 years and above within the selected household was created and one individual aged 15 years or older within the selected household was then randomly selected from the roster to administer the questionnaire. A summary of sample design features is illustrated by **Table 2** below.

Table 2. Summary of sample design features

Stage	Sampling Unit	Stratification	Sample Selection	Overall Sample Size
1.	<p>Primary Sampling Unit (PSU)</p> <p>Enumeration Areas (EAs) were taken as PSUs. According to the 2011 Population and Housing Census, there were 5203 Enumeration Areas (EAs) and 550,243 households in Botswana. The EAs were established using the average number of dwelling units and the average size of an EA was approximately 120-150 dwelling units.</p> <p>GATS Sampling Frame:</p> <p>401 PSUs (Enumeration Area) were selected from the 2011 Population and Housing Census list of EAs.</p>	<p>Selection of Enumeration Areas was stratified by census districts. The 26 census districts in Botswana served as the strata. However, during the analysis the domains of estimation were urban and rural areas where semi-urban areas were split into either urban or rural areas. The urban stratum was therefore made up of 10 urban districts whereas the rural stratum comprised of 16 rural districts.</p>	<p>Probability Proportional to Size (PPS) sampling technique was used to select EAs.</p>	<p>401 EAs were selected throughout Botswana.</p>
2.	<p>Secondary Sampling Unit (SSU)</p> <p>The list of households within each of the 401 selected EAs (PSUs) was taken as the sampling frame.</p>		<p>Systematic random sampling with a random start was then used to select households. In this survey equal number of households in each EA was selected. That is, 15 households in each EA were sampled irrespective of whether the EA was in urban area or rural area.</p>	<p>Total number of households targeted was 6,015 after adjustment for both individual and household non-responses and ineligibility, factoring in the proportion of adults 15 years and above who smoke tobacco as well as applying the set requirement of a minimum of 2 EAs per each census district.</p>
3.	<p>Tertiary Sampling Unit</p> <p>A roster of all individuals aged 15 years and above was prepared for each and every selected household.</p>		<p>One individual aged 15 years or older within the selected household was then randomly selected to administer the questionnaire.</p>	<p>The survey targeted total number of 6,015 individuals as well.</p>

APPENDIX C: ESTIMATION OF SAMPLING ERRORS



The estimates from a sample survey are affected by two types of error: (1) non-sampling errors, and (2) sampling errors. Non-sampling errors are the result of errors or mistakes that cannot be attributable to sampling and were made in implementing data collection or in data processing, such as errors in coverage, response errors, non-response errors, faulty questionnaires, interviewer recording errors, data processing errors, etc. Although numerous efforts were made during the implementation of GATS Botswana to minimize those errors, non-sampling errors are impossible to avoid and difficult to evaluate statistically.

The sample of respondents selected in the GATS Botswana was only one of the samples that could have been selected from the same population, using the same design and sample size. Each of these samples would yield results that differed somewhat from the results of the actual sample selected. Sampling errors are a measure of the variability between all possible samples. The extent of variability is not known exactly, but can be estimated statistically from the survey results.

The following sampling error measures are presented for each of the selected indicators:

Standard error (SE): Sampling errors are usually measured in terms of standard errors for particular estimate or indicator(R). Standard error of an estimate is thus simply the square root of the variance of that estimate, and is computed in the same units as the estimate.

Relative standard error (SE/R) is the ratio of the standard error to the value of the indicator.

Confidence limits ($R \pm 1.96SE$) are calculated to show the interval within which the true value for the population can be reasonably assumed to fall. For any given statistic calculated from the survey, the value of that statistics will fall within a range of plus or minus two times the standard error of the statistic in 95 percent of all possible samples of identical size and design. Calculation of standard error

If the sample of respondents had been selected as a simple random sample, it would have been possible to use straightforward formulas for calculating sampling errors. However, GATS Botswana sample is a result multi-stage stratified design and consequently, it was necessary to use more complex formulae. For the calculation of sampling errors from GATS Botswana data, SPSS Version 25 module was used.

Appendix Table C1. List of indicators for sampling errors – GATS Botswana, 2017

Indicator	Estimates	Base Population
Current tobacco use	Proportion	Adults ≥ 15 years older
Current tobacco smokers	Proportion	Adults ≥ 15 years older
Current cigarette smokers	Proportion	Adults ≥ 15 years older
Current users of smokeless tobacco	Proportion	Adults ≥ 15 years older
Daily tobacco smoker	Proportion	Adults ≥ 15 years older
Daily cigarette smokers	Proportion	Adults ≥ 15 years older
Former daily tobacco smokers among all adults	Proportion	Ever daily tobacco smokers ≥ 15 years old
Former tobacco smokers among ever daily smokers	Proportion	Daily tobacco smokers ≥ 15 years old
Smoking quit attempt in the past 12 months	Proportion	Current smokers and former smokers who have been abstinent for less than 12 months
Health care provider asked about smoking	Proportion	Current smokers and former smokers who have been abstinent for less than 12 months and who visited a HCP during the past 12 months
Health care provider advised quitting smoking	Proportion	Current smokers and former smokers who have been abstinent for less than 12 months and who visited a HCP during the past 12 months
Use of pharmacotherapy for smoking cessation	Proportion	Current smokers who made a quit attempt in the past 12 months and former smokers who have been abstinent for less than 12 months.
Use of counseling/advice or quit lines for smoking cessation	Proportion	Current smokers who made a quit attempt in the past 12 months and former smokers who have been abstinent for less than 12 months.
Exposure to SHS at home	Proportion	Adults ≥ 15 years older
Exposure to SHS at workplace	Proportion	Adults who work indoors
Exposure to SHS in government buildings/offices	Proportion	Adults ≥ 15 years older who visited in past 30 days
Exposure to SHS in health care facilities	Proportion	Adults ≥ 15 years older who visited in past 30 days
Exposure to SHS in restaurants	Proportion	Adults ≥ 15 years older who visited in past 30 days
Exposure to SHS on public transportation	Proportion	Adults ≥ 15 years older who used public transport in past 30 days
Noticed anti-tobacco information on radio or television	Proportion	Adults ≥ 15 years older
Noticed health warning labels on cigarette packages	Proportion	Current smokers Adults ≥ 15 years older
Thinking of quitting because of health warning labels on cigarette package	Proportion	Current smokers Adults ≥ 15 years older
Believes that tobacco smoking causes serious illness	Proportion	Adults ≥ 15 years older
Believes that tobacco smoking causes strokes	Proportion	Adults ≥ 15 years older
Believes that tobacco smoking causes heart attacks	Proportion	Adults ≥ 15 years older
Believes that tobacco smoking causes lung cancer	Proportion	Adults ≥ 15 years older
Believes that SHS causes serious illness in nonsmokers	Proportion	Adults ≥ 15 years older
Number of cigarettes smoked per day (by daily smokers)	Mean	Current daily smokers ≥ 15 years old
Time since quitting smoking	Mean	Former smokers ≥ 15 years old
Monthly expenditures on manufactured cigarettes	Mean	Current manufactured cigarettes smokers ≥ 15 years old
Age at daily smoking initiation	Mean	Ever daily smokers ≥ 15 years old

Appendix Table C2. Sampling errors, overall – GATS Botswana, 2017

Indicator	Estimate (R)	Standard Error (SE)	Sample Size (n)	Weighted Size	Design Effect (DEFF)	Relative Error (SE/R)	Margin of Error (MOE)	Lower Limit (R-1.96SE)	Upper Limit (R+1.96SE)
Current tobacco use	0.176	0.008	4,643	1,365,134	2.176	0.047	0.016	0.159	0.192
Current tobacco smokers	0.142	0.008	4,643	1,365,134	2.187	0.053	0.015	0.127	0.157
Current cigarette smokers	0.129	0.008	4,643	1,365,134	2.367	0.059	0.015	0.115	0.144
Current users of smokeless tobacco	0.043	0.004	4,643	1,365,134	1.803	0.094	0.008	0.035	0.050
Daily tobacco smoker	0.099	0.006	4,643	1,365,134	2.179	0.065	0.013	0.086	0.112
Daily cigarette smokers	0.089	0.006	4,643	1,365,134	2.367	0.072	0.013	0.076	0.101
Former daily tobacco smokers among all adults	0.038	0.003	4,643	1,365,134	1.462	0.089	0.007	0.032	0.045
Former tobacco smokers among ever daily smokers	0.246	0.020	738	211,988	1.622	0.082	0.040	0.207	0.286
Smoking quit attempt in the past 12 months	0.578	0.026	667	208,692	1.823	0.045	0.051	0.528	0.629
Health care provider asked about smoking	0.518	0.041	287	82,697	1.958	0.080	0.081	0.437	0.600
Health care provider advised quitting smoking	0.437	0.041	287	82,697	1.919	0.093	0.080	0.357	0.517
Use of pharmacotherapy for smoking cessation	0.139	0.025	376	120,498	2.034	0.183	0.050	0.089	0.189
Use of counseling/advice or quit lines for smoking cessation	0.110	0.026	376	120,498	2.568	0.235	0.051	0.059	0.161
Exposure to SHS at home	0.138	0.009	4,576	1,344,064	2.993	0.064	0.017	0.120	0.155
Exposure to SHS at workplace	0.122	0.015	1,299	344,794	2.617	0.120	0.029	0.093	0.151
Exposure to SHS in government buildings/offices	0.085	0.012	1,850	526,250	3.145	0.135	0.023	0.063	0.108
Exposure to SHS in health care facilities	0.065	0.007	2,688	778,347	2.334	0.112	0.014	0.050	0.079
Exposure to SHS in restaurants	0.169	0.012	2,434	720,112	2.584	0.072	0.024	0.145	0.192
Exposure to SHS on public transportation	0.075	0.007	2,937	875,277	2.328	0.099	0.015	0.060	0.089
Noticed anti-tobacco information on radio or television	0.656	0.011	4,642	1,364,874	2.717	0.018	0.023	0.633	0.678
Noticed health warning labels on cigarette packages	0.613	0.030	629	193,830	2.315	0.048	0.058	0.555	0.671
Thinking of quitting because of health warning labels on cigarette package	0.425	0.028	629	193,830	2.056	0.067	0.055	0.369	0.480
Believes that tobacco smoking causes serious illness	0.953	0.005	4,643	1,365,134	2.541	0.005	0.010	0.943	0.962
Believes that tobacco smoking causes strokes	0.713	0.011	4,643	1,365,134	2.766	0.015	0.022	0.691	0.735
Believes that tobacco smoking causes heart attacks	0.800	0.009	4,643	1,365,134	2.149	0.011	0.017	0.783	0.817
Believes that tobacco smoking causes lung cancer	0.965	0.003	4,643	1,365,134	1.678	0.004	0.007	0.958	0.972
Believes that SHS causes serious illness in nonsmokers	0.914	0.007	4,643	1,365,134	3.174	0.008	0.014	0.900	0.929
Number of cigarettes smoked per day (by daily smokers)	7.796	0.462	408	120,956	1.413	0.059	0.905	6.891	8.700
Time since quitting smoking	9.942	0.918	187	50,940	1.414	0.092	1.799	8.143	11.742
Monthly expenditures on manufactured cigarettes	789.126	153.843	452	142,411	2.186	0.195	301.531	487.595	1090.658
Age at daily smoking initiation	19.395	0.314	269	90,114	1.534	0.016	0.615	18.780	20.011

Appendix Table C3. Sampling errors, males – GATS Botswana, 2017

Indicator	Estimate (R)	Standard Error (SE)	Sample Size (n)	Weighted Size	Design Effect (DEFF)	Relative Error (SE/R)	Margin of Error (MOE)	Lower Limit (R-1.96SE)	Upper Limit (R+1.96SE)
Current tobacco use	0.270	0.014	1,915	655,995	1.831	0.051	0.027	0.243	0.297
Current tobacco smokers	0.257	0.014	1,915	655,995	1.849	0.053	0.027	0.230	0.283
Current cigarette smokers	0.239	0.014	1,915	655,995	2.149	0.060	0.028	0.211	0.267
Current users of smokeless tobacco	0.021	0.004	1,915	655,995	1.773	0.210	0.008	0.012	0.029
Daily tobacco smoker	0.182	0.012	1,915	655,995	1.869	0.066	0.024	0.159	0.206
Daily cigarette smokers	0.168	0.012	1,915	655,995	2.041	0.073	0.024	0.144	0.192
Former daily tobacco smokers among all adults	0.069	0.007	1,915	655,995	1.356	0.098	0.013	0.055	0.082
Former tobacco smokers among ever daily smokers	0.243	0.022	617	184,903	1.633	0.091	0.043	0.200	0.286
Smoking quit attempt in the past 12 months	0.594	0.027	556	181,364	1.708	0.046	0.053	0.540	0.647
Health care provider asked about smoking	0.497	0.045	231	69,204	1.879	0.091	0.089	0.408	0.585
Health care provider advised quitting smoking	0.418	0.044	231	69,204	1.841	0.106	0.086	0.332	0.505
Use of pharmacotherapy for smoking cessation	0.125	0.027	323	107,431	2.226	0.220	0.054	0.071	0.178
Use of counseling/advice or quit lines for smoking cessation	0.101	0.028	323	107,431	2.706	0.274	0.054	0.047	0.155
Exposure to SHS at home	0.171	0.014	1,889	650,128	2.682	0.083	0.028	0.143	0.199
Exposure to SHS at workplace	0.140	0.020	586	174,082	2.037	0.146	0.040	0.100	0.180
Exposure to SHS in government buildings/offices	0.092	0.017	790	260,894	2.728	0.185	0.033	0.058	0.125
Exposure to SHS in health care facilities	0.074	0.012	936	329,821	1.872	0.158	0.023	0.051	0.097
Exposure to SHS in restaurants	0.169	0.019	1,052	357,703	2.657	0.112	0.037	0.132	0.205
Exposure to SHS on public transportation	0.068	0.011	1,164	398,627	2.165	0.160	0.021	0.047	0.089
Noticed anti-tobacco information on radio or television	0.652	0.018	1,915	655,995	2.767	0.028	0.035	0.617	0.688
Noticed health warning labels on cigarette packages	0.631	0.032	525	168,041	2.330	0.051	0.063	0.568	0.694
Thinking of quitting because of health warning labels on cigarette package	0.435	0.031	525	168,041	2.070	0.072	0.061	0.374	0.496
Believes that tobacco smoking causes serious illness	0.947	0.008	1,915	655,995	2.463	0.008	0.016	0.931	0.963
Believes that tobacco smoking causes strokes	0.707	0.016	1,915	655,995	2.254	0.022	0.031	0.677	0.738
Believes that tobacco smoking causes heart attacks	0.805	0.013	1,915	655,995	2.007	0.016	0.025	0.780	0.830
Believes that tobacco smoking causes lung cancer	0.960	0.006	1,915	655,995	1.589	0.006	0.011	0.949	0.971
Believes that SHS causes serious illness in nonsmokers	0.907	0.012	1,915	655,995	3.229	0.013	0.023	0.884	0.930
Number of cigarettes smoked per day (by daily smokers)	7.875	0.507	363	110,167	1.455	0.064	0.993	6.882	8.869
Time since quitting smoking	10.429	1.041	151	44,014	1.434	0.100	2.040	8.388	12.469
Monthly expenditures on manufactured cigarettes	754.184	152.568	404	128,683	1.998	0.202	299.033	455.151	1053.218
Age at daily smoking initiation	19.341	0.344	236	80,298	1.518	0.018	0.674	18.667	20.015

Appendix Table C4. Sampling errors, females – GATS Botswana, 2017

Indicator	Estimate (R)	Standard Error (SE)	Sample Size (n)	Weighted Size	Design Effect (DEFF)	Relative Error (SE/R)	Margin of Error (MOE)	Lower Limit (R-1.96SE)	Upper Limit (R+1.96SE)
Current tobacco use	0.088	0.007	2,728	709,139	1.558	0.077	0.013	0.075	0.102
Current tobacco smokers	0.036	0.005	2,728	709,139	1.647	0.126	0.009	0.027	0.045
Current cigarette smokers	0.028	0.004	2,728	709,139	1.621	0.144	0.008	0.020	0.036
Current users of smokeless tobacco	0.063	0.006	2,728	709,139	1.639	0.095	0.012	0.051	0.074
Daily tobacco smoker	0.022	0.004	2,728	709,139	1.658	0.165	0.007	0.015	0.029
Daily cigarette smokers	0.015	0.003	2,728	709,139	1.552	0.192	0.006	0.009	0.021
Former daily tobacco smokers among all adults	0.010	0.002	2,728	709,139	1.233	0.209	0.004	0.006	0.014
Former tobacco smokers among ever daily smokers	0.268	0.048	121	27,085	1.406	0.179	0.094	0.174	0.362
Smoking quit attempt in the past 12 months	0.478	0.066	111	27,328	1.927	0.138	0.130	0.349	0.608
Health care provider asked about smoking	0.631	0.078	56	13,493	1.444	0.124	0.153	0.478	0.784
Health care provider advised quitting smoking	0.533	0.088	56	13,493	1.693	0.164	0.172	0.362	0.705
Use of pharmacotherapy for smoking cessation	0.256	0.093	53	13,067	2.380	0.365	0.183	0.073	0.439
Use of counseling/advice or quit lines for smoking cessation	0.189	0.091	53	13,067	2.814	0.482	0.179	0.010	0.367
Exposure to SHS at home	0.107	0.009	2,687	693,936	2.051	0.080	0.017	0.090	0.123
Exposure to SHS at workplace	0.103	0.017	713	170,713	2.154	0.162	0.033	0.071	0.136
Exposure to SHS in government buildings/offices	0.080	0.012	1,060	265,357	2.040	0.149	0.023	0.056	0.103
Exposure to SHS in health care facilities	0.058	0.007	1,752	448,525	1.616	0.123	0.014	0.044	0.072
Exposure to SHS in restaurants	0.169	0.017	1,382	362,409	2.788	0.100	0.033	0.136	0.201
Exposure to SHS on public transportation	0.081	0.009	1,773	476,650	1.880	0.110	0.017	0.063	0.098
Noticed anti-tobacco information on radio or television	0.659	0.012	2,727	708,879	1.765	0.018	0.024	0.636	0.683
Noticed health warning labels on cigarette packages	0.493	0.069	104	25,788	1.962	0.140	0.135	0.358	0.628
Thinking of quitting because of health warning labels on cigarette package	0.361	0.064	104	25,788	1.849	0.178	0.126	0.235	0.487
Believes that tobacco smoking causes serious illness	0.958	0.005	2,728	709,139	1.764	0.005	0.010	0.948	0.968
Believes that tobacco smoking causes strokes	0.718	0.013	2,728	709,139	2.276	0.018	0.025	0.693	0.744
Believes that tobacco smoking causes heart attacks	0.796	0.011	2,728	709,139	1.964	0.014	0.021	0.775	0.817
Believes that tobacco smoking causes lung cancer	0.970	0.004	2,728	709,139	1.437	0.004	0.008	0.963	0.978
Believes that SHS causes serious illness in nonsmokers	0.921	0.007	2,728	709,139	2.056	0.008	0.015	0.906	0.935
Number of cigarettes smoked per day (by daily smokers)	6.983	0.996	45	10,789	1.244	0.143	1.952	5.031	8.934
Time since quitting smoking	6.851	1.454	36	6,927	0.879	0.212	2.849	4.002	9.700
Monthly expenditures on manufactured cigarettes	1116.658	678.328	48	13,728	3.313	0.607	1329.523	-212.865	2446.182
Age at daily smoking initiation	19.843	0.516	33	9,816	1.072	0.026	1.012	18.831	20.855

Appendix Table C5. Sampling errors, urban – GATS Botswana, 2017

Indicator	Estimate (R)	Standard Error (SE)	Sample Size (n)	Weighted Size	Design Effect (DEFF)	Relative Error (SE/R)	Margin of Error (MOE)	Lower Limit (R-1.96SE)	Upper Limit (R+1.96SE)
Current tobacco use	0.143	0.010	2,355	630,652	1.777	0.067	0.019	0.124	0.162
Current tobacco smokers	0.120	0.009	2,355	630,652	1.938	0.078	0.018	0.102	0.138
Current cigarette smokers	0.110	0.010	2,355	630,652	2.244	0.088	0.019	0.091	0.129
Current users of smokeless tobacco	0.026	0.004	2,355	630,652	1.615	0.160	0.008	0.018	0.034
Daily tobacco smoker	0.082	0.008	2,355	630,652	2.192	0.102	0.016	0.066	0.099
Daily cigarette smokers	0.077	0.008	2,355	630,652	2.344	0.109	0.016	0.060	0.093
Former daily tobacco smokers among all adults	0.041	0.005	2,355	630,652	1.645	0.128	0.010	0.031	0.051
Former tobacco smokers among ever daily smokers	0.295	0.031	325	87,187	1.476	0.104	0.060	0.235	0.355
Smoking quit attempt in the past 12 months	0.600	0.037	297	84,351	1.698	0.062	0.073	0.527	0.673
Health care provider asked about smoking	0.396	0.056	136	36,875	1.763	0.141	0.110	0.286	0.505
Health care provider advised quitting smoking	0.341	0.054	136	36,875	1.746	0.158	0.106	0.235	0.446
Use of pharmacotherapy for smoking cessation	0.114	0.027	177	50,600	1.283	0.239	0.053	0.060	0.167
Use of counseling/advice or quit lines for smoking cessation	0.056	0.020	177	50,600	1.281	0.350	0.038	0.018	0.095
Exposure to SHS at home	0.114	0.010	2,328	622,104	2.268	0.087	0.019	0.094	0.133
Exposure to SHS at workplace	0.100	0.016	833	213,056	2.283	0.157	0.031	0.069	0.131
Exposure to SHS in government buildings/offices	0.054	0.009	962	253,944	1.496	0.165	0.017	0.037	0.071
Exposure to SHS in health care facilities	0.058	0.009	1,291	338,238	1.910	0.156	0.018	0.040	0.075
Exposure to SHS in restaurants	0.177	0.014	1,356	359,458	1.749	0.078	0.027	0.150	0.204
Exposure to SHS on public transportation	0.068	0.009	1,573	429,758	1.856	0.127	0.017	0.051	0.085
Noticed anti-tobacco information on radio or television	0.658	0.015	2,355	630,652	2.239	0.022	0.029	0.629	0.687
Noticed health warning labels on cigarette packages	0.776	0.033	276	75,803	1.717	0.042	0.065	0.712	0.841
Thinking of quitting because of health warning labels on cigarette package	0.557	0.040	276	75,803	1.787	0.072	0.078	0.479	0.636
Believes that tobacco smoking causes serious illness	0.961	0.005	2,355	630,652	1.437	0.005	0.009	0.952	0.971
Believes that tobacco smoking causes strokes	0.704	0.017	2,355	630,652	3.167	0.024	0.033	0.671	0.737
Believes that tobacco smoking causes heart attacks	0.800	0.013	2,355	630,652	2.434	0.016	0.025	0.775	0.825
Believes that tobacco smoking causes lung cancer	0.975	0.004	2,355	630,652	1.904	0.005	0.009	0.966	0.983
Believes that SHS causes serious illness in nonsmokers	0.917	0.008	2,355	630,652	2.220	0.009	0.017	0.900	0.933
Number of cigarettes smoked per day (by daily smokers)	7.297	0.691	184	48,533	1.354	0.095	1.355	5.942	8.652
Time since quitting smoking	8.401	1.271	87	25,724	1.463	0.151	2.492	5.910	10.893
Monthly expenditures on manufactured cigarettes	558.524	129.085	236	65,095	1.305	0.231	253.006	305.518	811.529
Age at daily smoking initiation	19.571	0.312	153	42,655	1.260	0.016	0.612	18.959	20.182

Appendix Table C6. Sampling errors, rural – GATS Botswana, 2017

Indicator	Estimate (R)	Standard Error (SE)	Sample Size (n)	Weighted Size	Design Effect (DEFF)	Relative Error (SE/R)	Margin of Error (MOE)	Lower Limit (R-1.96SE)	Upper Limit (R+1.96SE)
Current tobacco use	0.203	0.013	2,288	734,482	2.304	0.063	0.025	0.178	0.229
Current tobacco smokers	0.161	0.012	2,288	734,482	2.252	0.072	0.023	0.139	0.184
Current cigarette smokers	0.147	0.011	2,288	734,482	2.301	0.077	0.022	0.125	0.169
Current users of smokeless tobacco	0.057	0.006	2,288	734,482	1.755	0.113	0.013	0.044	0.069
Daily tobacco smoker	0.113	0.009	2,288	734,482	2.050	0.084	0.019	0.095	0.132
Daily cigarette smokers	0.099	0.009	2,288	734,482	2.277	0.095	0.018	0.080	0.117
Former daily tobacco smokers among all adults	0.036	0.004	2,288	734,482	1.307	0.124	0.009	0.027	0.045
Former tobacco smokers among ever daily smokers	0.212	0.026	413	124,801	1.659	0.122	0.051	0.161	0.263
Smoking quit attempt in the past 12 months	0.564	0.035	370	124,341	1.880	0.063	0.069	0.494	0.633
Health care provider asked about smoking	0.617	0.058	151	45,822	2.121	0.094	0.113	0.504	0.731
Health care provider advised quitting smoking	0.514	0.057	151	45,822	1.962	0.111	0.112	0.402	0.627
Use of pharmacotherapy for smoking cessation	0.157	0.039	199	69,898	2.282	0.249	0.077	0.081	0.234
Use of counseling/advice or quit lines for smoking cessation	0.149	0.041	199	69,898	2.663	0.277	0.081	0.068	0.230
Exposure to SHS at home	0.158	0.014	2,248	721,961	3.232	0.087	0.027	0.131	0.185
Exposure to SHS at workplace	0.157	0.028	466	131,738	2.770	0.179	0.055	0.102	0.212
Exposure to SHS in government buildings/offices	0.115	0.020	888	272,307	3.651	0.178	0.040	0.075	0.155
Exposure to SHS in health care facilities	0.070	0.011	1,397	440,108	2.469	0.153	0.021	0.049	0.091
Exposure to SHS in restaurants	0.160	0.020	1,078	360,654	3.237	0.125	0.039	0.121	0.200
Exposure to SHS on public transportation	0.082	0.012	1,364	445,519	2.585	0.146	0.023	0.058	0.105
Noticed anti-tobacco information on radio or television	0.654	0.017	2,287	734,222	3.022	0.026	0.034	0.620	0.688
Noticed health warning labels on cigarette packages	0.508	0.040	353	118,027	2.237	0.078	0.078	0.430	0.586
Thinking of quitting because of health warning labels on cigarette package	0.340	0.035	353	118,027	1.962	0.104	0.069	0.271	0.409
Believes that tobacco smoking causes serious illness	0.945	0.008	2,288	734,482	2.983	0.009	0.016	0.929	0.961
Believes that tobacco smoking causes strokes	0.721	0.015	2,288	734,482	2.479	0.020	0.029	0.692	0.750
Believes that tobacco smoking causes heart attacks	0.800	0.012	2,288	734,482	1.914	0.014	0.023	0.777	0.823
Believes that tobacco smoking causes lung cancer	0.957	0.005	2,288	734,482	1.501	0.005	0.010	0.947	0.967
Believes that SHS causes serious illness in nonsmokers	0.912	0.012	2,288	734,482	3.785	0.013	0.023	0.890	0.935
Number of cigarettes smoked per day (by daily smokers)	8.130	0.608	224	72,423	1.398	0.075	1.191	6.939	9.321
Time since quitting smoking	11.514	1.283	100	25,216	1.334	0.111	2.515	8.999	14.029
Monthly expenditures on manufactured cigarettes	983.280	260.405	216	77,316	2.283	0.265	510.395	472.885	1493.674
Age at daily smoking initiation	19.238	0.525	116	47,459	1.436	0.027	1.028	18.210	20.266

APPENDIX D: SAMPLE DESIGN

Technical and Survey Staff

The following personnel played a critical role in the implementation of GATS in Botswana:

D1. GATS technical team

Name	Organization
Mr. Lemphi Moremi	Ministry of Health & Wellness
Mr. Ephraim Rapalai	Ministry of Health & Wellness
Mr. Moagi Gaborone	World Health Organization
Mr. Modise Ramaretlwa	Statistics Botswana
Ms. Kebotsemang M. Ditsela	Statistics Botswana
Mr. Lazarous Mbulo	CDC
Mr. David Plotner	RTI

D2. GATS fieldwork supervisors and IT team

Names	Organization
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Barnabas Morake	Ministry of Health & Wellness
Moses Modise	Ministry of Health & Wellness
Malebogo Mathothora	Ministry of Health & Wellness
Kgomotso Motlhanka	Ministry of Health & Wellness
Lame Seema	Ministry of Health & Wellness
Farnwell Bojase	Ministry of Health & Wellness
Lucy Rankhubu	Ministry of Health & Wellness
Israel Mohibidu	Ministry of Health & Wellness (IT)
Thomas Lere	Ministry of Health & Wellness (IT)

D3. GATS enumerators

Names	Organization
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Maatla Kenosi	Ministry of Youth Empowerment, Sport and Culture Development
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Mpho Motlogelwa	Ministry of Youth Empowerment, Sport and Culture Development

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Names	Organization
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Glorious Selemogwe	Ministry of Youth Empowerment, Sport and Culture Development
John Maruapula	Ministry of Youth Empowerment, Sport and Culture Development
Letsile Regoeng	Ministry of Youth Empowerment, Sport and Culture Development
Joy Tlhale	Ministry of Youth Empowerment, Sport and Culture Development
Lesego Selepeng	Ministry of Youth Empowerment, Sport and Culture Development
Kgotsofalo Mothemele	Ministry of Youth Empowerment, Sport and Culture Development
Kagiso Moesi	Ministry of Youth Empowerment, Sport and Culture Development
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Larona Pearl Sekgwa	Ministry of Youth Empowerment, Sport and Culture Development
Emmanuel Poniso	Ministry of Youth Empowerment, Sport and Culture Development
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Jane Omphitlhetse	Ministry of Youth Empowerment, Sport and Culture Development
Orebotse B. Rampart	Ministry of Youth Empowerment, Sport and Culture Development

APPENDIX E: GLOSSARY OF TERMS



ATN	Anti Tobacco Network
BCWIS	Botswana Core Welfare Indicator Survey
BOSASNET	Botswana Substance Abuse Network
CAB	Cancer Association of Botswana
CDC	Centres for Disease Control and Prevention
EA	Enumeration Area
FCTC	Framework Convention on Tobacco Control
GATS	Global Adult Tobacco Survey
GDP	Gross Domestic Product
GYTS	Global Youth Tobacco Survey
MOHW	Ministry of Health & Wellness
MPOWER	<ul style="list-style-type: none"> • Monitor tobacco use and prevention policies • Protect people from tobacco smoke • Offer help to quit tobacco use • Warn about the dangers of tobacco • Enforce bans on tobacco advertising, promotion and sponsorship • Raise taxes on tobacco
NGO	Non Governmental Organisation
PPS	Probability Proportional to Size
PSU	Primary Sampling Unit
RTI	RTI International
SI	Sampling Interval
SSSG	Stop Smoking Support Group
SSU	Secondary Sampling Unit
STEPS	STEPwise Approach to Surveillance
TSU	Tertiary Sampling Unit
WHO	World Health Organization

APPENDIX F: MPOWER SUMMARY INDICATORS

MPOWER summary indicators – GATS Botswana, 2017

Indicator	Overall (%)	Gender		Residence	
		Male	Female	Urban	Rural
M: Monitor Tobacco Use and Prevention Policies					
Current tobacco use	17.6	27.0	8.8	14.3	20.3
Current tobacco smokers	14.2	25.7	3.6	12.0	16.1
Current cigarette smokers	12.9	23.9	2.8	11.0	14.7
Current manufactured cigarette smokers	11.7	22.0	2.2	10.8	12.6
Current smokeless tobacco use	4.3	2.1	6.3	2.6	5.7
Average number of cigarettes smoked per day ¹	7.8	7.9	7.0	7.3	8.1
Average age at daily smoking initiation ²	19.4	19.3	19.8	19.6	19.2
Former smokers among ever daily smokers	24.6	24.3	26.8	29.5	21.2
P: Protect People from Tobacco Smoke					
Exposure to secondhand smoke at home at least monthly	13.8	17.1	10.7	11.4	15.8
Exposure to secondhand smoke at work*	12.2	14.0	10.3	10.0	15.7
Exposure to secondhand smoke in public places [†] :					
Government building/offices	8.5	9.2	8.0	5.4	11.5
Health care facilities	6.5	7.4	5.8	5.8	7.0
Restaurants	16.9	16.9	16.9	17.7	16.0
Public transportation	7.5	6.8	8.1	6.8	8.2
Bars/Nightclubs	67.4	66.0	70.5	63.7	71.2
O: Offer Help to Quit Tobacco Use					
Made a quit attempt in the past 12 months ³	57.8	59.4	47.8	60.0	56.4
Advised to quit smoking by a health care provider ^{3,4}	43.7	41.8	53.3	34.1	51.4
Attempted to quit smoking using a specific cessation method ³ :					
Pharmacotherapy	13.9	12.5	25.6	11.4	15.7
Counseling/advice	11.0	10.1	18.9	5.6	14.9
Interest in quitting smoking ⁵	83.9	84.0	82.8	86.5	82.2
Smokers who quit in past 12 months ⁶	7.0	7.2	5.6	10.3	4.7

continued ►

Indicator	Overall (%)	Gender		Residence	
		Male	Female	Urban	Rural
W: Warn About the Dangers of Tobacco					
Belief that tobacco smoking causes serious illness	95.3	94.7	95.8	96.1	94.5
Belief that breathing other peoples' smoke causes serious illness	91.4	90.7	92.1	91.7	91.2
Noticed anti-cigarette smoking information at any location*	80.4	79.9	80.9	79.9	80.9
Thinking of quitting because of health warnings on cigarette packages ⁵	42.5	43.5	36.1	55.7	34.0
E: Enforce Bans on Tobacco Advertising, Promotion and Sponsorship					
Noticed any cigarette advertisement, sponsorship or promotion*	27.8	31.1	24.6	29.8	26.0
R: Raise Taxes on Tobacco					
Average cigarette expenditure per month (Botswana Pula) ⁷	789.1	754.2	1116.7	558.5	983.3
Average cost of a pack of manufactured cigarettes (Botswana Pula) ⁷	105.5	98.2	197.2	74.2	132.0
Last cigarette purchase was from a street vendor	48.3	48.3	48.2	51.4	46
Last cigarette purchase was from a store ⁷	30.5	30.4	31.0	27.3	32.8

Notes:

¹ Among current daily smokers

² Among ever daily smokers

³ Among past-year smokers (includes current smokers and those who quit in the past 12 months)

⁴ Among those who visited a health care provider in past 12 months

⁵ Among current smokers

⁶ Percentage of smokers who quit in the past 12 months among current smokers and former smokers who quit in the past 12 months.

⁷ Among current smokers of manufactured cigarettes

* In the last 30 days

† Among those who visited the place in the last 30 days.



Republic of Botswana



**World Health
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