



Health Worker Guide

More than 2,200 Indians die every day due to tobacco use . . .

Health workers
can help people
quit tobacco.



Helping tobacco users quit is the single most important thing you can do to improve their health.





स्वास्थ्य सेवा महानिदेशालय

निर्माण भवन, नई दिल्ली - 110108

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FOREWARD

Tobacco use is the leading preventable cause of death in the world. The increased use of tobacco is one of the greatest public health threats. The growing prevalence of tobacco consumption in India is a matter of serious concern. India has enacted a comprehensive legislation "Cigarettes and Other tobacco products (prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003 to protect the public from ill effects of tobacco use, especially youth and children. India has also played a leading role in the development of WHO Framework Convention on Tobacco Control (FCTC) and is among the first few countries to ratify it.

The Government of India launched National Tobacco Control Programme (NTCP) with a multi-pronged approach for effective tobacco control in the community. The programme is supporting building state and district capacity to effectively implement programme strategies and Anti Tobacco legislation.

The public education is an important component of the programme and needs to be disseminated to the community level. The health workers play an important role in creating public awareness on various issues concerning the health of the community. The health workers play an important role in changing the behavior of individuals and the community at large as they have the access to people at grass root level through the primary health care system.

This Health Worker Guide provides basic knowledge to sensitize the health workers on tobacco problems in India, health effects of tobacco and second hand smoke; provisions under anti tobacco law and their role in educating the communities to bring down the prevalence of tobacco use and protecting people's health by helping them quit tobacco use. The guide is written in simple language with focused messages to be used by the health care workers at primary level of health care delivery system in the country.

It is hoped that the guide will prove as a useful tool in achieving the objective of reducing the prevalence of tobacco use and diseases related to use of tobacco in India.

Dr. Dinesh Bhatnagar



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Date: 05-04-2010

Acknowledgements

Tobacco use is a major risk factors associated with Non-Communicable Diseases. To address this issue, the Government of India launched the National Tobacco Control Programme (NTCP) as a new initiative in 2007-08. One of the components of programme is training of health care workers on harmful effects of tobacco and second hand smoke, provisions under the Cigarettes and Other Tobacco Products Act (COTPA), 2003, and providing help to tobacco users for quitting tobacco use. To train a large number of health care workers systematically, the need for a training module for has been long felt.

This training module has been developed under the esteemed leadership and guidance of Dr. R. K. Srivastava, Director General of Health Services. I am deeply indebted to him for his wholehearted guidance and support in bringing out this module.

I wish to thank Dr. Dinesh Bhatnagar, Additional Director General of Health Services for his guidance and taking a keen interest in the development of this module.

I extend my sincere thanks to Ms. Kelly Larson, Dr. Nevin Wilson and Dr. Rana J Singh of the International Union against Tuberculosis and Lung diseases and Dr. Jagdish Kaur, Chief Medical Officer in the Directorate General of Health Services for their significant contribution and also Dr. Mira Aghi and her team for field testing this module.

I acknowledge with thanks Ms. Vani Kurup who supported in layout and design of this module.

In the end, I record my great appreciation for all those who have provided their inputs and suggestions to finalize this module.


Dr. D.C. Jain

Health Workers Can Help People Quit Tobacco

Health workers have access to communities. Community members will listen to you and value your advice on areas concerning their health.

You can help your community by making interventions to promote healthy behaviour and prevent diseases.

- **Do not use any form of tobacco, at home or outside.**
- **Educate community members on the harmful effects of tobacco use:**

All tobacco products are harmful.

No tobacco product is safe in any quantity.

Bidis are as harmful as cigarettes.

Secondhand tobacco smoke causes many life threatening diseases.

Chewing tobacco also causes disease, including mouth cancer.

- **Spread awareness about the harmful effects of tobacco on health and on the economy of the family and highlight the benefits of quitting tobacco use and smoking.**
- **Support people who want to quit tobacco use.**
- **Set an example to others by not smoking or chewing tobacco.**
- **Ensure that your health facility and public places in your area of work are smokefree.**
- **Prevent youth from starting tobacco use.**
- **Discuss the matter with personnel in schools in the vicinity of your health facility and involve them in your efforts to control tobacco.**

Tobacco Facts

- Tobacco use is the single largest cause of preventable death and illness worldwide.
- More than 55 lakh people worldwide die each year from tobacco use.
 - Nearly 8 lakh Indians die from tobacco use every year, which is more than those killed by AIDS, tuberculosis, and malaria combined.
 - More than 2,200 Indians die every day due to tobacco use.
 - 40 out of 100 cancer cases in India are tobacco-related. Nearly 95% of all oral cancers occur among tobacco users.
 - Tobacco use also causes stroke, heart attack, lung disease, blindness and other illnesses.



Tobacco users feel ten years older and die ten years younger than people who do not use tobacco.

Tobacco Products in India

There are several kinds of smoked tobacco:



Bidi

Bidis are as harmful as cigarettes.



Cigarette



Hookah

Cigarettes contain more than 4,000 chemical compounds, 200 known poisons, and 60 cancer causing agents

There are several kinds of smokeless tobacco, mainly chewing tobacco like Zarda, Khaini, Gutka, Pan Masala with tobacco, mawa, misri and gul:



Khaini



Gutka



Zarda

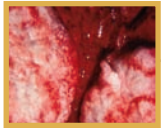
Major Illnesses Caused by Tobacco

CANCERS

CHRONIC DISEASES



Mouth cancer



Lung cancer

Diseases at highest risk:

- Chronic respiratory symptoms, asthma, tuberculosis and recurrent chest infections
- Coronary heart disease
- Lung cancers



Smoker's Gangrene (Buerger's disease)

Larynx
Oropharynx

Trachea,
bronchus or lung

Stroke

Coronary heart disease

Pneumonia/tuberculosis

Chronic obstructive pulmonary disease (COPD), asthma and other respiratory effects

Impotence

Health effects specific to women:

- Reduced fertility
- Spontaneous abortion
- Low-birthweight babies, still births
- Cancer of the cervix

Source: US Department of Health and Human Services. *The health consequences of smoking: a report of the Surgeon General*. Atlanta, US Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, Atlanta, 2004. (http://www.cdc.gov/tobacco/data_statistics/sgr/sgr_2004/chapters.htm, accessed 5 December 2007).

Tobacco Spares No One — Secondhand Tobacco Smoke Kills



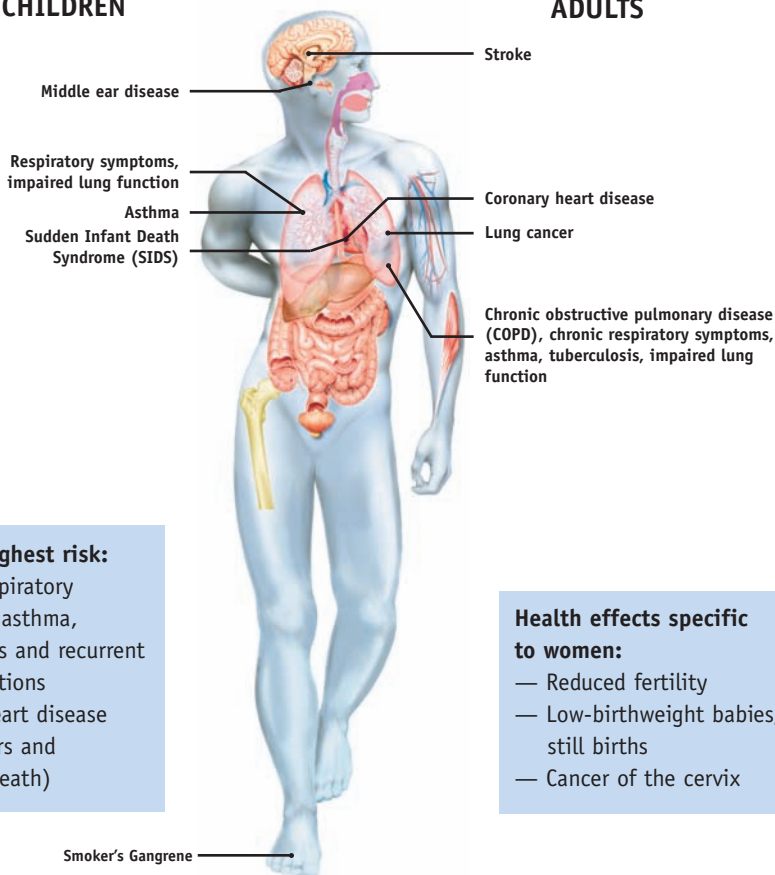
Smoke from someone else's bidi or cigarette is called **secondhand tobacco smoke**.

Secondhand tobacco smoke harms everyone — adult non-smokers, young children and babies.

Illnesses Caused by Secondhand Tobacco Smoke

CHILDREN

ADULTS



Diseases at highest risk:

- Chronic respiratory symptoms, asthma, tuberculosis and recurrent chest infections
- Coronary heart disease
- Lung cancers and
- SIDS (Cot death)

Health effects specific to women:

- Reduced fertility
- Low-birthweight babies, still births
- Cancer of the cervix

Quitting Tobacco



Health workers should not use any form of tobacco, even in private.

Health workers should ask everyone in the community if they smoke and/or chew tobacco and urge every tobacco user to quit by providing clear, strong and personalised advice.

For those not ready to quit, the health worker should educate them on the health consequences of continuing to use tobacco and its effects on the family's economy, e.g. tell them of all the essential things (better food, clothes, education of children, etc.) that could be bought if the money was not spent on buying tobacco products.

“As your health worker and as someone who cares about you and your health, I would like to help you QUIT tobacco because quitting tobacco use is vital to your health and those around you.”

“As your health worker, I want you to know that quitting will help you live a longer, healthier life. You’ll also protect those around you.”

“As your health worker, I want you to quit as soon as you can — the sooner you quit, the better you’ll feel. Your health starts improving immediately after quitting.”

“As your health worker, I want you to know that it is never too late to quit — quitting at any age will improve your health.”

“As your health worker, I want to know when you are ready to quit so that I can help you”

Benefits of Quitting Smoking

Quitting makes you feel better and you start tasting food better.

2 hours after quitting: nicotine is out of the system.

12 hours: carbon monoxide is out of the system and lung function begins to improve.

2 days: sense of smell improves; physical activity becomes easier and more air gets into the lungs.

2 months: lungs work more efficiently and are able to remove mucous; blood flow to the limbs improves.

12 months: risk of heart disease is half that of a continuing smoker.

10 years: risk of lung cancer is less than half that of a continuing smoker.

15 years: risk of heart attack and stroke is almost the same as a person who has never smoked.

Tips for Quitting

- Be determined.
- Set a quit date, and stick to it.
- Discard any tobacco products, lighters, matches and ashtrays. You won't need them.
- Tell your family you are quitting. Ask them to help by encouraging you.
- Identify situations that make you want to smoke, and avoid them. For example, seeing a bidi shop or people smoking/using tobacco.

Protecting the Young



Many young people are starting to use tobacco products.

Boys use tobacco products much more than girls but use among girls is increasing.

50 out of 100 teenagers who smoke today will eventually die of tobacco-related disease unless they quit.

Health workers should provide clear, strong and personalised advice to young people and inform them of problems with tobacco use.

When young people smoke or chew tobacco they:

- experience loss of stamina during and after exercise
- face difficulty in breathing, running and sporting activities
- get tired easily

“As your health worker I want to tell you that:

- you may believe smoking makes you look trendy and cool, but you can become impotent/infertile.”
- smoking and tobacco use causes teeth stains and bad breath.”
- smoking and tobacco use dries out your skin and hair. It is likely to cause wrinkles.”

Tobacco Control Law in India

To protect people from the dangerous health effects of tobacco, the Government of India enacted a national tobacco control act named Cigarette and Other Tobacco Products Act 2003 (COTPA).

It is against the law to:

- Smoke in public places, including work places.
- Advertise tobacco products.
- Sell tobacco products to children under 18 years.
- Sell tobacco products within a radius of 100 yards of schools and colleges.
- Sell tobacco products without pictorial warnings.



Every public place must display this warning sign.



Post office



Government office



Clinic



Restaurant

Tobacco Control Law in India

Section of Act (COTPA) Provisions of the Act

Section 4	Prohibition on smoking in a public place
Section 5	Prohibition on advertisements of cigarettes and other tobacco products
Section 6	Prohibition on the sale of cigarettes or other tobacco products to a person below the age of 18 years and in an area within a radius of one hundred yards of any educational institution
Sections 7,8 and 9	Prohibition on the sale of cigarettes and other tobacco products without specified health warnings

Violations may be reported to:

Dr/Mr/Ms _____
(Name of Designated Nodal Officer – Tobacco Control)

Name of Place/Institution/Premises:

Phone No. : _____



Violations can also be reported to:

National Helpline: 1800-110-456

Penalties for Violations of COTPA

Sections of COTPA

Penalties (Fine or imprisonment or both)

Section 4: Prohibition on smoking in a public place

a) To the individual offender: Up to Rs. 200/-
b) To owner, manager or authorised officer: Fine equivalent to number of offences in public place

Section 5: Prohibition on advertisements of cigarettes and other tobacco products

a) 1st Offence: 2 years/ Rs. 1000/-
b) 2nd Offence: 5 years/ Rs. 5000/-

Section 6: Prohibition on the sale to minors and around educational institutes

Up to Rs. 200/-

Sections 7,8 and 9: Prohibition on the sale of cigarettes and other tobacco products without specified health warnings

a) Manufacturer:
1st Offence: 2 years/ Rs. 5000/-
2nd Offence: 5 years/ Rs. 10,000/-
b) Selling/Retailing:
1st Offence: 1 year/ Rs. 1000/-
2nd Offence: 2 years/ Rs. 3000/-

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Government of India
Ministry of Health & Family Welfare

Sources:

The Cigarettes And Other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act 2003 (COTPA) and the Smoke Free Public Place Rules notified vide GSR 417(E) dated 30 May 2008. Government of India.

Gupta PC, Asma S (eds.). Bidi Smoking and Public Health, New Delhi: Ministry of Health & Family Welfare, Government of India, 2008.

Reddy KS, Gupta PC (eds.). Report on Tobacco Control in India. New Delhi: Ministry of Health & Family Welfare, Government of India, 2004.

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