



Compliance Assessment of Cigarettes and Other Tobacco Products Act (COTPA) At Point Of Sale in Ahmedabad

Radhika S Sharma¹, Bhagyalaxmi Aroor², Nirali Patel¹, Narendrakumar R¹, Archi Dave¹

Financial Support: None declared

Conflict of Interest: None declared

Copy Right: The Journal retains the copyrights of this article. However, reproduction is permissible with due acknowledgement of the source.

How to cite this article:

Sharma RS, Aroor B, Patel N, Narendrakumar R, Dave A. Compliance Assessment of Cigarettes and Other Tobacco Products Act (COTPA) At Point Of Sale in Ahmedabad. *Natl J Community Med* 2020;11(8):335-338

Author's Affiliation:

¹Resident doctor; ²Associate Professor, Dept. of Community medicine, B J Medical College, Ahmedabad

Correspondence

Dr. Radhika Sharma
radhikassharma82@gmail.com

Date of Submission: 16-07-2020

Date of Acceptance: 20-08-2020

Date of Publication: 31-08-2020

ABSTRACT

Background: "Cigarettes and Other Tobacco Products Act (COTPA)" has been formulated to control tobacco epidemic. This study was conducted to assess level of awareness of COTPA among vendors and compliance at point of sale.

Methods: In cross-sectional study, one of the areas of central zone was selected randomly. Vendors selling tobacco were interviewed and all point of sales observed for practice of COTPA.

Results: Out of 117 vendors, 71 (60.68%) were aware of only two components of COTPA such as tobacco should not be sold to/by minor and there is a pictorial health warning label. Only 6 (5.13%) shops displayed board regarding "No sell of tobacco to minor." 24 (20.51%) shops were located within 100 yards of educational institute. Implementation of section 5 (Prohibition of brand promotion of all tobacco products) of COTPA act has been observed in all. For the non-compliance, only 19 (16.23%) vendors were fined.

Conclusion: There is need for creating awareness about COTPA among vendors. Strict implementation by authority for non-compliance needed as study observed poor level of awareness and action.

Keywords: COTPA, point of sale, compliance and tobacco.

BACKGROUND

WHO says, "Tobacco epidemic is one of the biggest public health threats the world has ever faced." Tobacco use is one of the leading preventable causes of death Globally.¹⁻²

After independence, tobacco industry has flourished in a way that now India is the second largest consumer and the third largest producer of tobacco products. Global Adult Tobacco Survey (GATS-2) India 2016-17 revealed that 28.6% of all adults are using tobacco currently. But it is also killing 6 million people every year.^{1,3} It contributes to different illnesses like Cardiovascular diseases (CVD), Bronchitis, Stroke, various Cancers, Chronic Obstructive Pulmonary Disease (COPD), Tuberculosis (TB) and many more. Besides health, tobacco use has a huge impact on economy and environment. Despite knowledge of all its ill effects and health hazards, people continue to use it.¹

Hence, the strategy MPOWER has been initiated by WHO Framework Convention on Tobacco Control (FCTC) for the control of tobacco use. It assists country-level implementation of effective interventions to reduce demand of tobacco.^{4,5} Government of India enacted a comprehensive legislation Cigarettes and other Tobacco products (Prohibition of advertisement and regulation of Trade and commerce, Production, Supply and Distribution) Act, (COTPA) 2003 as per guidelines of FCTC. It addresses the growing menace of tobacco use.⁶

Tobacco vendors are making Smoking and smokeless forms of tobacco products easily available throughout the country.^{3,7,8} As tobacco vendors influence tobacco use, point of sale comprises an important component of COTPA i.e. production, advertisement and selling.⁶

Hence in the current study, efforts have been made with the objectives to know the awareness of ven-

dors regarding COTPA and to determine the compliance of COTPA at point of sale.

MATERIAL AND METHODS

COTPA is “Cigarettes and Other Tobacco Products Act” formulated in 2003 May. Out of different sections of act Section 5, 6, 7 and 8 are related to point of sale. The sections are described as following-⁶

Compliance of above mentioned sections of COTPA were studied in the present study. Ahmedabad has total 6 zones, out of that one i.e. central zone was selected randomly. A cross sectional study was conducted in one of the randomly selected areas of central zone of Ahmedabad city.

Point of sale (POS), a critical piece of a point for purchase, refers to the place where a customer executes the payment for goods or services and where sales taxes may become payable.⁹ 117 point of sales (POS) functioning in this area whether permanent or temporary, were observed and vendors selling tobacco products were interviewed over a period of Sept to October 2018.

Approval from Institutional Ethical Committee was obtained. Verbal Consent was taken before. Pre-tested questionnaire was used (Google forms) for the interview. Descriptive Data analysis was done by using Microsoft excel.

Distance of shop from school measured using google maps Minor is defined as age <18 years.⁶

SECTION	Component
5: Prohibition of brand promotion of all tobacco products	No handbills/hoardings/advertisement No brand promotion in exchange of gift/prize/scholarship
6: Prohibition on sale to and by minors	No sale to/ by minor Sale around educational institute is prohibited
7&8 : Pictorial health warning	Pictorial health warning on each tobacco product No misleading term on pack such as mild/low/light tar No messages (direct/indirect) to promote a brand or tobacco use No sale of single bidi/cigarette

RESULTS

In this study, out of 117 POS, 101(86.32%) had male as vendor with mean age of 44.57 years (+1.46). 72 (61.54%) were educated upto secondary level. Average duration of running shop was found to be 15.37 (+1.25) years. 81 (69.23%) of the POS were temporary/ movable while 106 (90.60%) of them were selling exclusively tobacco products. (Table 1)

Around 14 (11.97%) stores had tobacco advertisements.103 (%) stores were not had tobacco advertisements. 114 (97.44%) of the stores selling tobacco products had openly displayed tobacco. 8(6.84%) shops were promoting tobacco brand in one or the other way. Around 30 (25.64%) stores employed minors (aged <18 years) in the stores and 74 (63.25%) of shopkeepers were aware that they cannot sell tobacco products to minors. But 113 (96.58%) vendors admitted that they were selling.

6 (5.13%) had mandatory signage telling “selling tobacco to minor is illegal” by section 6 and only 3 (2.56%) stores displayed the mandatory signage prominently and 23 (19.66%) were not aware of requirement of such signage. 24 (20.51%) stores were located within 100 yards of educational institute. Public smoking was observed around 74 (63.25%) stores. 71 (60.68%) of the respondents were aware about the law related to tobacco. Out of different provisions of law “no sell to /by minor i.e. <18 years of age and there is a pictorial health warning label on tobacco products” was known to majority of the vendors.

Table 1: Sociodemographic profile of vendors

Sociodemographic factor	Vendors (%)
Sex	
Male	101 (86.32)
Female	16 (13.68)
Age	
18-20	9 (7.69)
21-30	14 (11.97)
31-40	31 (26.5)
41-50	24 (20.51)
51-60	23 (19.66)
61-70	12 (10.26)
71-80	4 (3.42)
Mean	44.572+1.46 years
Education	
Illiterate	12 (10.26)
Primary	10 (8.55)
Secondary	72 (61.54)
Higher secondary	12 (10.26)
Graduate	11 (9.4)
Duration since running shop(in years)	
<1	7 (5.98)
1-10	41 (35.04)
11-20	33 (28.21)
21-30	17 (14.53)
31-40	9 (7.69)
41-50	6 (5.13)
>50	4 (3.42)
Mean	15.37+ 1.25 years
Type of point of sale (POS)	
Temporary/Movable	81 (69.23)
Permanent/Fixed	36 (30.77)
Type of sell	
Main tobacco sell	106 (90.6)
Main sell is other than tobacco	11 (9.4)

Table 2: Compliance of vendors to different provisions of COTPA

Provision	Compliant n=117 (%)	Non-compliant n=117 (%)
All provisions	0 (0%)	117 (100%)
Tobacco advertisement (Section 5)	103 (88.03%)	14 (11.97%)
Open display of tobacco products (Section 5)	3 (2.56%)	114 (97.44%)
No brand promotion in exchange of gift/prize/scholarship (Section 5)	106(90.60%)	11 (9.40%)
Selling tobacco to minor (Section 6)	113 (96.58%)	4 (3.42%)
Employing minor to sell tobacco (Section 6)	87 (74.36%)	30 (25.64%)
Store within 100 yards of educational institute (Section 6)	93 (79.49%)	24 (20.51%)
Display of signage telling 'selling tobacco to minor is illegal' (Section 6)	6 (5.13%)	111 (94.87%)
Compulsory pictorial health warning label on tobacco products (Section 7)	117 (100%)	0 (0%)
No sell of single cigarette/bidi (Section 7)	4 (3.42%)	113 (96.58%)

All vendors i.e. 117 (100%) were compliant for Pictorial Health warning labels. Main source of this information is newspaper and advertisements. 113 (96.58%) were selling loose cigarette /bidi.

No store was found to be fully compliant to the COTPA. The compliance of the stores to different provisions of COTPA Act is shown in Table 2.

Regarding implementation of the COTPA only 19 (16.23%) shopkeepers paid fine for violation of law. 17 (14.53%) were warned to replace the shop.

DISCUSSION

In 2003, India enacted the "Cigarette and Other Tobacco Products Act," known as COTPA. The National Tobacco Control Program, from 2007 to 2008 onward, looking towards the implementation of all tobacco control laws. While a legislative route to behaviour change has been advocated for many health issues, tobacco has taken a lead in this aspect. However, the real success of this approach depends on how well the law is implemented. This problem is more in tobacco, due to its social acceptability.⁷ Implementation of law has two components: first creating awareness about the law and second checking whether the law is being followed or not.

Tobacco selling vendors are making both smoke and smokeless forms of tobacco easily available. Vendors has huge influence on tobacco use mainly among adolescents. Hence in COTPA some of the sections are focusing at point of sale like sale of tobacco, promotion of tobacco brands at point of sale, minimum age for selling and buying tobacco, etc.

Although many studies were conducted to find the compliance of tobacco vendors to COTPA, all these studies found poor compliance of tobacco at point of sale to section 4,5,6 of COTPA.^{8,10-11} Majority of the studies lack the awareness part. One of the known methods to control behaviour of population is Legislative route. Cigarette and Other Tobacco Products Act is one of the laws enacted to control

the use of tobacco in India lunched in the year 2003. But enforcement of legislation in India has been suboptimal.¹²⁻¹⁵

Section 5 in COTPA is about Prohibition of advertisement of tobacco and other tobacco products.⁶ Present study observed that almost all vendors displayed tobacco products openly which shows poor compliance than a study conducted at a block of Haryana where about 50% of the shops selling tobacco products displayed tobacco products openly.¹⁶ A study by Doubeni et al revealed that the perceived accessibility of tobacco products increases the risk for smoking initiation and progression among youths.¹⁷ This variation may be due to geographical and cultural differences. Nearly one tenth shops had displayed advertisements for tobacco products which was similar to study conducted at a block of Haryana.¹⁶

Easy availability and accessibility of tobacco to youngsters results in high probability of initiation of tobacco use. A study at Mumbai demonstrated association between tobacco sale near educational institute with increased risk of current tobacco use.⁷ Hence, in COTPA Section 6 (a) tells about Prohibition of sale of tobacco products to and by minors and Section 6 (b) specifies about Prohibition of sale of tobacco product within radius of 100 yards of any educational institute.⁶ Nearly one fifth shops in the present study were located within 100 yards of educational institute similar to both study conducted at a block of Haryana and subnational survey of four districts in India by S. Goel et al^{12,16} but it was contrast to previous study done at Ahmedabad in 2013 where more than 80% of educational institute violated this law.¹⁸ This shows increased level of implementation of law over time.

It was observed in the present study that nearly one fourth of the vendors were minors which was very high as compared to study conducted at a block of Haryana and subnational survey of four districts in India by S. Goel et al where very few vendors were minors.^{8,10} Nearly one third of the vendors admitted that they were selling tobacco product to minors which was in contrast to study

conducted at a block of Haryana where around half of the vendors were selling tobacco product to minors.¹⁰ This may be due to duration gap between two study and different level of implementation of law. Good knowledge among participants about ban on sale of tobacco products to minors was seen which was in contrast to study conducted at a block of Haryana and also been reported by Jayakrishnan *et al.*^{16,19}

There should be mandatory signage to be displayed at shops mentioning "selling tobacco to minor is illegal." Very few of the shops were complaint for this, similar observations were made in both study conducted at a block of Haryana and subnational survey of four districts in India by S. Goel *et al.*^{12,16}

About 60% of the vendors told that they knew about the law while a study from block of Haryana observed only 45% vendors were aware.¹⁶ This difference is because present study was conducted after a time and with progression of duration awareness was increased. In both, present and Haryana study no vendor was found completely compliant for COTPA.¹⁶

CONCLUSION

In tobacco control legislation, point of sale plays a major role. But the present study observed low compliance of vendors for COTPA. Main reason for the non-compliance was unawareness about the law and paucity of action taken on violation of the law. Very few vendors have been fined for non-compliance and none of the vendors had relocated their shops after warning. There is a need for creating awareness about COTPA among vendors. Periodic Monitoring for compliance of policies for ensuring proper enforcement and for assessing impact on tobacco use over time is needed. An effective enforcement and compliance with the law is needed to ensure public health impact.

Study had been done in only one area of a zone of Ahmedabad so a large scale study is required to generalise the results.

REFERENCE

- WHO Tobacco key facts [Internet]. [Cited 2020 Jan 18]. Available from <https://www.who.int/news-room/factsheets/detail/tobacco>
- Non communicable disease and tobacco use [Internet]. [Cited 2020 September 04]. Available from <http://www.emro.who.int/noncommunicable-diseases/causes/tobacco-use.html>
- Global adult tobacco survey factsheet India;2016-17 [Internet]. [Cited 2020 Jan 20]. Available from https://www.who.int/tobacco/surveillance/survey/gats/GATS_India_2016-17_FactSheet.pdf
- MPOWER [Internet]. [cited 2019 Dec 10]. Available from <https://www.who.int/tobacco/mpower/en/>
- The WHO Framework Convention on Tobacco Control: an overview; 2015 [Internet]. [cited 2019 Dec 18]. Available from <https://www.who.int/fctc/about/en/>
- COTPA 2003 and rules made thereunder; 2015 [Internet]. [cited 2019 Dec 01]. Available from <https://nhm.gov.in/index4.php?lang=1&level=0&linkid=459&lid=692>
- Arora M, Madhu R. Banning smokeless tobacco in India: policy analysis. *Indian journal of cancer.* 2012;49(4):336.
- Chaudhry S, Chaudhry K. Point of sale tobacco advertisements in India. *Indian journal of cancer.* 2007;44(4):131.
- Point of sale (POS) [Internet]. [cited 2020 September 04]. Available from <https://www.investopedia.com/terms/p/point-of-sale.asp>
- Mistry R, Pednekar MS, McCarthy WJ, Resnicow K, Pimple SA, Hsieh HF, Mishra GA, Gupta PC. Compliance with point-of-sale tobacco control policies and student tobacco use in Mumbai, India. *Tobacco control.* 2019;28(2):220-6.
- Pimple S, Gunjal S, Mishra GA, Pednekar MS, Majmudar P, Shastri SS. Compliance to Gutka ban and other provisions of COTPA in Mumbai. *Indian journal of cancer.* 2014;51(5):60.
- Goel S, Kumar R, Lal P, Singh RJ. How effective is tobacco control enforcement to protect minors: Results from subnational surveys across four districts in India. *International Journal of Noncommunicable Diseases.* 2016;1(3):116.
- Kumar R, Goel S, Harries AD, Lal P, Singh RJ, Kumar AM, Wilson NC. How good is compliance with smoke-free legislation in India? Results of 38 subnational surveys. *International health.* 2014 Sep 1;6(3):189-95.
- Goel S, Kumar R, Lal P, Tripathi JP, Singh RJ, Rathinam A, Christian A. How compliant are tobacco vendors to india's tobacco control legislation on ban of advertisements at point of sale? a three jurisdictions review. *Asian Pac J Cancer Prev.* 2014 Jan 1;15(24):10637-42.
- Tripathy JP, Goel S, Patro BK. Compliance monitoring of prohibition of smoking (under section-4 of COTPA) at a tertiary health-care institution in a smoke-free city of India. *Lung India: Official Organ of Indian Chest Society.* 2013 Oct;30(4):312.
- Rath R, Krishnan A, Nongkynrih B, Misra P. Assessment of implementation status of Cigarettes and Other Tobacco Products Act (COTPA) and its awareness among residents in a block of Haryana. *Indian Journal of Public Health.* 2018;62(2):100.
- Doubeni CA, Li W, Fouayzi H, DiFranza JR. Perceived accessibility as a predictor of youth smoking. *The Annals of Family Medicine.* 2008 Jul 1;6(4):323-30.
- Elf JL, Modi B, Stillman F, Dave P, Apelberg B. Tobacco sales and marketing within 100 yards of schools in Ahmedabad City, India. *Public Health.* 2013;127(5):442-
- Jayakrishnan R, Geetha S, Binukumar B, Lekshmi K. Self-reported tobacco use, knowledge on tobacco legislation and tobacco hazards among adolescents in rural Kerala State. *Indian Journal of Dental Research.* 2011 Mar 1;22(2):195.