



Monitoring of Tobacco Control Ordinance LXXIV (2002)

Tobacco Control Cell
Ministry of Health
Government of Pakistan

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Date of visit: _____ Date of report: _____

Province/Area: Punjab Sindh NWFP Balochistan Federal

District EMIS Code: _____ District Name: _____

Name of Monitoring Officer: _____ Designation: _____

Phone #: _____ Email: _____

Monitoring Information

Section 5: Prohibition of smoking and other tobacco use in public places / restaurants / cinema/ government offices/health facilities / educational institutes (please use separate sheet for each public place):

S. No.	Name of Public Place Visited:				
1	"No Smoking Zone" boards can be seen	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>
2	Staff smoking in "No Smoking Zone"	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>
3	People smoking in "No Smoking Zone"	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>
4	Staff aware of the ban on smoking in Public Places	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>

Section 6. Prohibition of smoking in public service vehicles (please use separate sheet for each public service vehicle):

S. No.	Number of Vehicle Checked:				
1	People smoking in vehicle	<input type="checkbox"/> No One	<input type="checkbox"/> Driver	<input type="checkbox"/> Conductor	<input type="checkbox"/> Passengers, write number: <input type="text"/>
2	People are aware of the ban on smoking in public service vehicle	<input type="checkbox"/> No One	<input type="checkbox"/> Driver	<input type="checkbox"/> Conductor	<input type="checkbox"/> Passengers, write number: <input type="text"/>

Section 7. Prohibition on advertisement of cigarette etc.

S. No.	Name of the Area surveyed:				
1	Billboard(s) seen in the area	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>
2	Placement of billboard (e.g. near or in the educational institution, shopping area, main road etc.)	_____			
3	Size of billboard	<input type="checkbox"/> ≤(1x1) meter	If ticked, write number: <input type="text"/>	<input type="checkbox"/> > (1x1) meter	If ticked, write number: <input type="text"/>
4	Message on billboard	_____			
5	Brand Name written on the billboard	_____			
6	Health warning present	<input type="checkbox"/> Readable	<input type="checkbox"/> Unreadable		
7	Language of health warning	<input type="checkbox"/> English	<input type="checkbox"/> Urdu		
8	Indirect promotion by the tobacco industry	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>
9	Methods observed for indirect promotion	<input type="checkbox"/> Sports Sponsorship	<input type="checkbox"/> Promotional Items (Logos on T-Shirts etc.)	<input type="checkbox"/> Brand Stretching (shared logo with other companies)	
		<input type="checkbox"/> Samples/Gifts	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Others (Please specify):	_____

Section 8. Prohibition of sale of cigarettes and other tobacco products to Children under 18 years of age:

S. No. Name of the Outlet: _____
Address of the Outlet: _____

1	Sale to minors (under 18 years) taking place	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2	Cigarette pack(s) without warning	<input type="checkbox"/> No	<input type="checkbox"/> Yes
3	Availability of smuggled cigarettes	<input type="checkbox"/> No	<input type="checkbox"/> Yes

If yes, remarks: _____

Section 9. Prohibition of storage, sale and distribution of cigarettes, etc., in the immediate vicinity of educational institutions (within 50 meter of educational institution):

S. No. Name of the Outlet: _____

1	Cigarette sales outlet(s)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>
2	Presence of cigarette in educational institute canteen	<input type="checkbox"/> No	<input type="checkbox"/> Yes		

Section 10. Display and exhibition of board:

S. No. Name of Public Place Visited: _____

1	Placement of "Smoking is an Offence" or health warnings boards	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>
2	Boards with other health education messages	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>
3	Health warning readable?	<input type="checkbox"/> No	<input type="checkbox"/> Yes		
4	Placement of board				
	i. Inside premises	<input type="checkbox"/> No	<input type="checkbox"/> Yes		
	ii. Outside premises	<input type="checkbox"/> No	<input type="checkbox"/> Yes		
5	Staff smoking inside the public place	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>
6	People smoking inside the public place	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>
7	Staff aware of the ban on smoking in Public Places	<input type="checkbox"/> No	<input type="checkbox"/> Yes	If yes, write number:	<input type="text"/>

11. Use of Tobacco in Other Forms

S. No. Name of the area visited _____

1	Use of sheesha	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2	Use of Gutka	<input type="checkbox"/> No	<input type="checkbox"/> Yes
3	Use of Paan	<input type="checkbox"/> No	<input type="checkbox"/> Yes

12. Comments (if any)

On trends:

1	Youth (Male/Female)	_____
2	Gender	_____
3	Attitude	_____

Sign of Monitoring Officer