

POLICY GAPS IN TOBACCO ADDICTION AMONG TRIBAL GROUPS

Closing the Gap- Crafting Culturally Informed Solutions for Tobacco control in tribal communities

Submitted by: Megha Goswami – 2K22/MAE/16 Under- Dr. Sanghita Mondal

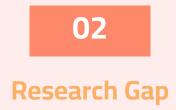
INTRODUCTION

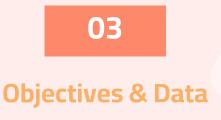
Tobacco is a big health concern. Amid global efforts to curb tobacco addiction, tribal communities use it in a traditional form(i.e. marijuana) like pipe smoking and often less recognized. This analysis explores policy gaps in tobacco control within tribal groups, aiming for culturally responsive strategies.

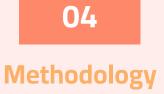


TABLE OF CONTENTS

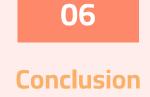












LITERATURE REVIEW

 World Health Organization. Ministry of Health & Family Welfare Government of India. Global Adult Tobacco Survey: GATS-2 India 2016–17. 2018-

India is a diversified land of many cultures and ethnic groups with one of the **largest tribal populations in the world.** The scheduled tribes (STs) comprised around 8.6% of the national population. Approximately **90% of the country's tribal population lives in rural areas**.

• Narain JP. Health of tribal populations in India: How long can we afford to neglect? *The Indian journal of medical research*. 2019-

Their culture and traditions broadly vary, which invariably leading to their lower education (41% with no formal education) and socio-economic attainment (41% below the poverty line). Among the indigenous community's mortality, morbidity, and malnutrition rates are still higher than the average Indian population due to various barriers such as language, education, and infrastructural advancements.

 Social determinants of tobacco use among tribal communities in India: Evidence from the first wave of Longitudinal Ageing Study in India-

Tobacco uses among the general population is widely studied based on the Global Youth Tobacco Survey (GYTS) and Global Adult Tobacco Survey (GATS). However, it is **scarce in the context of the tribal population.**

RESEARCH GAP

POLICY GAP IN TRIBAL GROUPS









Social Exclusion

STUDY OBJECTIVES



Identifying Existing Policies

Identifying existing policies by conducting a survey



Assess Effectiveness

Assessing effectiveness through regression analysis



Understanding the factors & Problems

Limited awareness, limited economic opportunities and easy availability

THEORETICAL FRAMEWORK

Framework

SURVEY

- Collecting data of sample of 500+ Gond & Bhil Tribal Population in Madhya Pradesh
- Primary data : Questionnaire
- Questions related to Demographic information, Awareness, Tobacco use behavior & open- ended questions.

REGRESSION ANALYSIS

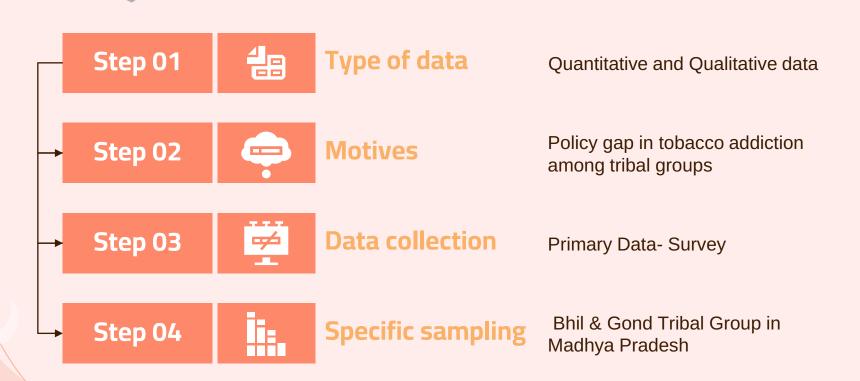
Dependent Variable

Behavioural changes
Proxy- Frequency of
Quitting attempts

Independent Variable

Demographic Variables
Proxy- Age, Gender,
Education, employment &
other Binary variable





POLICY RECOMMENDATION



Amendments in COTPA Act



Providing
Alternative Option in
Crop Production



Capacity Building













CONCLUSION

The existence of a policy gap in addressing tobacco addiction among tribal groups highlights the need for targeted and culturally sensitive interventions. Key elements include enhancing awareness, community engagement, and the development of policies that integrate cultural practices. Policymakers should collaborate closely with tribal leaders, healthcare providers, and community members to design effective strategies. By closing the policy gap and implementing evidence-based interventions, we can work towards reducing tobacco addiction and promoting better health outcomes within tribal populations.

