



Republic of the Philippines

Philippine Statistics Authority

STATISTICAL SURVEY NOTIFICATION FORM

PLEASE READ ATTACHED INSTRUCTIONS BEFORE COMPLETING THIS FORM

I. GENERAL INFORMATION

1 Title of the statistical survey 2015 GLOBAL ADULT TOBACCO SURVEY					
2 Legal basis REPUBLIC ACT 10625					
3.1 Proponent agency <i>Name</i> DEPARTMENT OF HEALTH <i>Address</i> SAN LAZARO COMPOUND STA. CRUZ, MANILA	3.2 Conducting agency <i>Name</i> PHILIPPINE STATISTICS AUTHORITY <i>Address</i> 16TH FLR. ETON CENTRIS 3, COR. QUEZON AVENUE, EDSA, DILIMAN QUEZON CITY				
3.3 Other cooperating agencies <ul style="list-style-type: none"> • WORLD HEALTH ORGANIZATION-PHILIPPINES • US CENTER FOR DISEASE AND CONTROL • CENTER FOR DISEASE AND CONTROL FOUNDATION • RESEARCH TRIANGLE INTERNATIONAL 	3.4 Funding source/s (Specify) a <input checked="" type="checkbox"/> Gov't of the Phils. (GOP) DOH b <input type="checkbox"/> Local private _____ c <input type="checkbox"/> Foreign _____				
3.5 Consultants <table border="0"> <tr> <td><i>Name of organization/person</i></td> <td><i>Nature of consultancy service</i></td> </tr> <tr> <td>NA</td> <td>NA</td> </tr> </table>		<i>Name of organization/person</i>	<i>Nature of consultancy service</i>	NA	NA
<i>Name of organization/person</i>	<i>Nature of consultancy service</i>				
NA	NA				
4 Objectives and relevance of the survey (Cite specific use of the data to be collected, or programs/issues to be addressed.) GATS is a nationally-representative household survey developed to systematically monitor adult tobacco use (smoking and smokeless) and track key tobacco control interventions					
5.1 Status of survey a <input checked="" type="checkbox"/> Existing (Proceed to 5.2) b <input type="checkbox"/> New (Proceed to 5.3)	5.2 Status of survey form/questionnaire a <input type="checkbox"/> Existing statistical survey form being reported for the first time. What year was this first used? _____ b <input type="checkbox"/> Existing form for clearance renewal with revision. c <input checked="" type="checkbox"/> Existing form for clearance renewal without revision. If b or c, give previous clearance no. _____				
5.3 Is this survey a rider to another survey? a <input type="checkbox"/> Yes (Specify) _____ b <input checked="" type="checkbox"/> No	5.4 Is this survey a component of a national or international program? a <input checked="" type="checkbox"/> Yes (Specify) GLOBAL TOBACCO SURVEILLANCE SYSTEM b <input type="checkbox"/> No				

II. TECHNICAL DESCRIPTION			
1 Type and number of respondents			
<i>Type of respondent</i>	<i>Size of universe</i>	<i>Size of sample</i>	<i>Expected response rate</i>
a <input checked="" type="checkbox"/> Individual	69,000,000	13500 individuals	95%
b <input checked="" type="checkbox"/> Household	20,000,000	13500 households	95%
c <input type="checkbox"/> Establishment			
d <input type="checkbox"/> Enterprise			
e <input type="checkbox"/> Government agency			
f <input type="checkbox"/> Others (Specify)			
2 Reference period of the survey PAST 30 DAYS	3 Geographical area covered by the survey, e.g., Phils., Region IV, etc. NATIONAL	4 Geographic disaggregation of the data to be produced a <input checked="" type="checkbox"/> National b <input type="checkbox"/> Regional c <input type="checkbox"/> Provincial d <input type="checkbox"/> Others (Specify)	
5 Frequency of data collection a <input type="checkbox"/> One-shot d <input type="checkbox"/> Annually b <input type="checkbox"/> Monthly e <input checked="" type="checkbox"/> Others (Specify) c <input type="checkbox"/> Quarterly FIVE YEARS		6 Method of data collection (Check as many as applicable) a <input checked="" type="checkbox"/> Personal interview c <input type="checkbox"/> Telephone b <input type="checkbox"/> Mail d <input checked="" type="checkbox"/> Others (Specify) using handheld computer	
7 Survey questionnaire titles			
<i>Form No.</i>	<i>Form Title</i>		
GATS Form 1	Household Questionnaire		
GATS Form 2	Individual Questionnaire		
8 Major data items to be collected (e.g., family income and expenditures, employment, compensation, prices)			
Roster of all household members age 15 and over		Secondhand Smoke	
Age		Smokeless Tobacco Smoking Status	
Sex		Cessation-Tobacco Smoking	
Background Characteristics		Cigarette Promotions in Media	
Tobacco Smoking Status		Knowledge, Attitudes and Perception	
Health Warnings on Cigarette Packs			
9 List of tables and other outputs to be generated (attach table formats)			
ATTACHMENT A			

<p>10 Type of data processing (Check as many as applicable)</p> <p>a <input type="checkbox"/> Manual</p> <p>b <input checked="" type="checkbox"/> Microcomputer</p> <p>c <input type="checkbox"/> Minicomputer</p> <p>d <input type="checkbox"/> Mainframe computer</p>	<p>11 Statistical classification systems used (Check as many as applicable)</p> <p>a <input type="checkbox"/> Phil. Standard Commodity Classification (PSCC)</p> <p>b <input checked="" type="checkbox"/> Phil. Standard Geographic Code (PSGC)</p> <p>c <input type="checkbox"/> Phil. Standard Industry Classification (PSIC)</p> <p>d <input type="checkbox"/> Phil. Standard Occupational Classification (PSOC)</p> <p>e <input type="checkbox"/> Phil. Standard Classification of Education (PSCED)</p> <p>f <input type="checkbox"/> Others (Specify)</p> <p>_____</p> <p>_____</p>
<p>12 Brief description of the sampling design and estimation procedure.</p> <p style="text-align: center;">ATTACHMENT B</p> <p style="text-align: center;">(The details should be attached in separate sheet. If complete information is available in survey proposal, attach copy instead.)</p>	
<p>a) <i>Desired level of reliability and the proposed statistical measure to be used for assessing such reliability (e.g., standard errors of means)</i></p> <p style="text-align: center;">95%</p>	
<p>b) <i>Type of sampling design (The details should be attached in separate sheet.)</i></p> <p style="text-align: center;">MULTI-STAGE SAMPLING</p>	
<p>c) <i>Sampling unit (per stage if applicable)</i></p> <p style="text-align: center;">FIRST STAGE- PSU SECOND STAGE- BARANGAY/EA THIRD STAGE-HOUSING UNITS</p>	
<p>d) <i>Domain</i></p> <p style="text-align: center;">REGION</p>	
<p>e) <i>Sampling frame</i></p> <p style="text-align: center;">UPDATED LIST OF HOUSEHOLDS BASED ON CENSUS OF AGRICULTURE AND FISHERIES</p>	
<p>f) <i>Sample size (total, per stratum/cluster/stage)</i></p> <p style="text-align: center;">AROUND 13500 HOUSEHOLDS</p>	
<p>g) <i>Method of determining sample size</i></p> <p style="text-align: center;">ATTACHMENT B</p>	
<p>h) <i>Estimation procedure (The details and formulas should be attached in separate sheet.)</i></p> <p style="text-align: center;">ATTACHMENT B</p>	
<p>i) <i>Imputation procedure for non-response</i></p> <p style="text-align: center;">NO IMPUTATION</p>	
<p>13 Statistical analysis of results (e.g., descriptive, multivariate)</p> <p style="text-align: center;">DESCRIPTIVE ANALYSIS WILL BE DONE BY DOH</p>	

III. ESTIMATED DIRECT COST OF SURVEY (in pesos)			
1	Personal Services	2,000,000	Printing Expenses 500,000
2	Maintenance and Other Operating Expenses		Others (Specify) 12,000,000
	Travelling Expenses	11,500,000	3 Capital Outlay 1,000,000
	Supplies	2,000,000	TOTAL COST 29,000,000

IV. TIMETABLE OF ACTIVITIES		
Stage	Schedule	Agency Responsible
A. Planning and preparation		
1. Formulation of survey design (to include formulation of objectives, scope and coverage; development of methodology; formulation of sampling design and frame; design of table formats; preparation of questionnaire and manuals)	Feb 2 - May 2015	PSA, DOH, WHO
2. Pre-test of the questionnaire	Jul 6 - Aug 14, 2015	PSA, DOH, WHO
3. Revision based on pre-test of the questionnaire	Sept 16 - 29, 2015	PSA, DOH, WHO
4. Submission to PSA for review of survey design (allow 15 days after submission of all required documents)	Sept 16 - Sep 30, 2015	PSA
5. Finalization of questionnaires and manuals	Sept 22 - Oct 6, 2015	PSA
6. Printing of questionnaires and manuals	Oct 7 - 17, 2015	PSA
B. Field operations		
1. Training of personnel	Oct 26 - Nov 21, 2015	PSA, DOH
2. Distribution and collection of questionnaires	Nov 23 - Dec 23, 2015	PSA, DOH
3. Field editing	-	
C. Data processing		
1. Office editing	Nov 26, 2015 - Feb 19, 2016	PSA
2. Data encoding	Nov 26, 2015 - Feb 19, 2016	PSA
3. Verification	Feb 22 - Apr 23, 2016	PSA
4. Tabulation	Feb 22 - Apr 23, 2016	PSA
D. Report preparation		
1. Analysis and interpretation of data	March - April 2016	PSA, DOH
2. Report writing	March - April 2016	PSA, DOH
E. Release of survey results	April 2016	DOH

PREPARED BY (Contact Person)		APPROVING OFFICIAL FOR REQUESTING AGENCY	
Signature		Signature	
Printed Name ROMEO S. RECIDE		Printed Name LISA GRACE S. BERSALES, Ph.D.	
Designation OIC-DNS, SSO	Tel. No. 376-1995	Designation NATIONAL STATISTICIAN	
Date Prepared September 17, 2015		Date Approved	