

FINAL END OF PROJECT COMPLETION REPORT

Section 1: PROJECT DATA

Project Title	Advancing tobacco control in Mizoram through Capacity Building, strengthening National Tobacco Control Programme and effective enforcement of tobacco control laws		
Country	INDIA		
Project ID	INDIA-RI4-18		
Organisation	Mizoram State Tobacco Control Society, Department of Health & Family Welfare, Government of Mizoram, INDIA		
Contractually Agreed Budget	USD 290,000/-		
Project Start Date (dd/mm/yyyy)	01/07/11		
Project Planned End Date (dd/mm/yyyy)	30/06/13		
Total Spending on the Project	USD 259,630/-		
	Staffing Levels for the Grant		
	Number of Full-time staff (100% FTE)		
Sl.No.	Name	Title	Position
1.	Jane R.Ralte	Dr.	State Nodal Officer cum Project Officer w.e.f July 2011 – June 2013
2.	(a) Maria Lalnunmawii (b) C. Lalfakzuali (c) R. Lalremruata	Ms. Ms. Mr.	Project Coordinator w.e.f July 2011 – 16 th March 2012 Project Coordinator w.e.f 19 th March 2012– July 2012 Project Coordinator w.e.f Aug 2012 – June 2013
4.	T.Lalbiaksanga	Mr.	Project Assistant w.e.f July 2011 –June 2013
5.	(a) Mary Lalthansangi (b) Eloy Zonunpari	Ms.	District Coordinator (North Mizoram – No. 1) w.e.f July 2011 – Sept 2012 District Coordinator (North Mizoram – No. 1) w.e.f Oct 2012 – June 2013
6.	Vanlalzari	Ms.	District Coordinator (North Mizoram – No.2) w.e.f July 2011 – June2013
7.	Z.T.Vawra Hmar	Mr.	District Coordinator (South Mizoram) w.e.f July 2011 – June 2013
8.	(a) K.Laldingliani (b) K. Joseph	Ms. Mr.	Accountant w.e.f July 2011 – July 2012 Accountant w.e.f Aug 2012 – June 2013

Section 2: EXECUTIVE SUMMARY OF OVERALL PROGRESS

2.1 Summary of progress made towards achievement of grant objectives during the entire life of the grant.

The Re-investment Project under the Bloomberg Initiative to Reduce Tobacco Use was implemented in Mizoram through the Mizoram State Tobacco Control Society with effect from 1st July, 2011 to 30th June, 2013 for the

purpose of continuing the Smoke Free Mizoram project (which had been undertaken from April 2009 till June 2011) and to undertake all necessary activities towards advancing tobacco control in the State of Mizoram. We have tried our utmost to achieve the objectives of the project '*Advancing tobacco control in Mizoram through Capacity Building, strengthening National Tobacco Control Programme and effective enforcement of tobacco control laws*'. During the two years project period we have taken up a variety of activities in accordance with the work plan in the grant agreement in all districts of the state. Under this project numerous activities like strengthening of National Tobacco Control Programme, capacity building of different target groups, effective enforcement of tobacco control laws, consultative meeting with working partners, compliance study etc. have been taken up. During this period we have also undertaken some additional activities that have added value to the project, e.g. successful Mizoram state launch as part of the Campaign for Tobacco Free North East which had been initiated in Assam, declaration of the very first Tobacco Free Village in the state etc.

We have focused our activities mainly on capacity building of important stakeholders in different departments along with effective enforcement of key provisions of the Cigarettes and Other Tobacco Products Act (COTPA). Enforcement of Smoke Free Rules has remained our top priority and we are proud to report that compliance has gone up tremendously in all districts of the state, with the number of offenders drastically reduced. Implementation of Section 5 of COTPA, which deals with TAPS, has been very successful in the state and has resulted in removal of all POS Boards and no POS boards are visible in any district now. The tobacco industry has introduced other forms of tobacco advertisements and promotion in the form of poster, exchange programmes but we have been very vigilant in monitoring Tobacco Industry interference and have acted immediately on such offences. Compliance to other sections like sale to minors and within 100 yards of educational institutions as well as mandatory pictorial health warnings has also gone up throughout the state.

Sensitization programmes, awareness campaigns, training workshops etc. have been undertaken for different stakeholders and target groups like legislators, bureaucrats, police and other enforcement officials, doctors and other health care workers, transport department officials, education department officials and teachers etc. Every possible opportunity to reach into the rural areas of the state has been taken up and we have capitalized on our networking linkages with key departments and organizations. These have resulted in creating awareness about tobacco, enforcement, health effects etc. in many remote areas of the state, making tobacco control an important issue not only in the urban areas but also in the rural parts of the state and we can see the results in improved compliance even in very small and isolated villages.

One of our strength has been the strong and effective partnership that we have forged and maintained with numerous NGO's of the state like Indian Society on Tobacco and Health, Mizoram Chapter (ISTH-M), Mizo Hmeichhe Insuihkhawm Pawl (MHIP), Mizo Zirlai Pawl (MZP), Mizoram Journalist Association (MJA), Mizoram Kohhran Hruaitu Committee (MKHC) etc. These partnerships have enabled us to reach out more effectively to different target groups throughout the state. Collaboration with relevant government departments and these key NGO's has contributed significantly in the successful implementation of the project. During these two years, Anti Tobacco Squad Drives have been regularly conducted in all the eight districts. Important meetings of Anti Tobacco Squad, State and District Level Task Force, State and District Level Anti Tobacco Cell have been held regularly. We have scaled up engagement with important officials so as to get tobacco control institutionalized into the system of all relevant departments. Towards the end of the project as part of the regional Campaign For Tobacco Free North East initiative, Mizoram became the first state from the region to undertake the state launch and affirm its commitment to be Tobacco Free Mizoram i.e. strictly compliant to Sections 4, 5, 6 & 7 of COTPA, 2003 on 24th May, 2013.

In order to evaluate the project implementation and impact, Baseline and Endline Compliance Studies have been

conducted, which has shown that there has been measurable improvement in the compliance throughout the state.

Summary of Activities Undertaken from 1st July 2011 to June 2013

Sl.No.	Activity	Details
1.	Training and Sensitization Workshop	75
2.	Anti Tobacco Awareness Campaigns and programmes	104
3.	Anti Tobacco Squad activities	170
4.	Others (Meetings, Talk show etc.)	75
TOTAL		425

We are proud to report that all the grant objectives have been achieved during the stipulated 2 years project period and there are no pending activities remaining.

Section 3: PROJECT ACHIEVEMENTS

3.1 This section asks that you **share the success of the project.**

Please enter project objectives and the planned activities under each objective. Compare and explain the planned versus actual delivery.

PLANNED VERSUS ACTUAL		
ACTIVITIES under each Objective	ACTUAL AT COMPLETION	EXPLANATION OF VARIANCE/CHANGES
Objective 1. Strengthen and expand National Tobacco Control Programme (NTCP) in all eight districts of the state by the end of the two year period		
Activity 1.1.- <i>Set up necessary institutional framework and coordination mechanisms to ensure that all processes are established so that relevant governmental departments and health programmes work together</i>	1.1.1. <i>Identify district nodal officer in remaining 6 non NTCP districts –</i> District Nodal Officers have been identified in all remaining 6 non NTCP districts	No Variance/Changes
	1.1.2. <i>All 8 districts to have a strengthened district task force (include section 4, 6 and 7 in addition to section 5) and to have quarterly review meetings.-</i> All Districts now have a strengthened Task Force since	No Variance/Changes

to implement NTCP in all the districts of the state	revised notification was issued in the 2 nd Qtr on 21 st Dec. 2011. Meetings have been held at State level and in all 8 districts	
	1.1.3. All sub-divisions, all 9 CHCs & all 57 PHCs of the state are visited by the project staff and first meetings held with the government and civil society stakeholders. Follow up visit every six month – All Sub – Divisions, CHC's and PHC's have been visited and meetings have been held	No Variance/Changes
	1.1.4. Letters sent to all 719 village councils and 23 municipalities/town council presidents requesting support for enforcement of COTPA in their jurisdiction- Undertaken	No Variance/Changes
Activity 1.2.- To Conduct trainings and workshops for personnel in relevant departments and other health programmes to develop plan of action and mechanism for implementing various objectives elaborated by the Government of India under NTCP. Involve Village Health and Sanitation Committees (VHSC) under National Rural Health Mission (NRHM) and Anganwadi Workers under Integrated Child Development Scheme (ICDS) by providing necessary sensitization and training	1.2.1. Conduct training workshops for personnel from NRHM, ICDS and other relevant departments- one in each district (35 participants)– All scheduled activities completed	No Variance/Changes. Additional activities have been conducted at no extra cost to the project
	1.2.2. Conduct training of all health workers and supervisor in the state using MOH Guide on harms of tobacco and basic tips for quitting (40 participants per batch x 25 batches – All 25 batches for training of health workers and supervisors conducted	No Variance/Changes. Additional activities have been conducted at no extra cost to the project
Activity 1.3.- Pre-test and develop specific media and communication strategies for different target groups, which will be pre-tested for maximum effectiveness	1.3.1. Develop specific media and communication strategies and pre-test IEC materials – Specific media and communication strategies have been developed	No Variance/Changes. Additional activities have been conducted at no extra cost to the project
	1.3.2. Dissemination of messages in all 8 districts – Dissemination of messages being undertaken regularly and systematically	No Variance/Changes
Activity 1.4.- Assist in	1.4.1. Establish state supported cessation	No Variance/Changes

<p>setting up of state supported cessation centers in all district hospitals and health Centres to help tobacco users quit the habit so as to make cessation services more accessible throughout the state</p>	<p>centres and make them functional in the remaining 6 districts – Cessation centres are now functional in all the remaining districts</p>	
	<p>1.4.2. Cessation activities along with strict follow-up schedule provided by- Health Care Workers, Anganwadi Workers, Various church organizations, patient referral from OPDs– Being undertaken throughout the state by all categories of workers and different organizations. Various church bodies are actively taking up this activity within their respective jurisdiction.</p>	No Variance/Changes
	<p>1.4.3. Scale up cessation activities in the state through health care institutions referrals, community involvement, NGOs and Church organisations.- Cessation activities have been scaled up</p>	No Variance/Changes
<p>Activity 1.5.- Conduct awareness and sensitization trainings for various target groups at sub divisional level-24 (Government officials, NGOs, Church Organisations, Hotels & Restaurant Associations, Transport Unions, PRIs etc) 30 participants per batch</p>	<p>1.5.1. Dissemination of awareness by the various groups trained earlier to their respective organization/group (monitoring by DCs) – Undertaken by the various groups in their respective areas of jurisdiction by ISTH(M), MHIP, MJA and various church denominations.</p>	No Variance/Changes
<p>Activity 1.6.-Develop action plan to reduce prevalence, consumption, demand and availability of tobacco in the state in a comprehensive manner covering short term, medium and long term period</p>	<p>1.6.1. Action plan developed with the help of the Union and other national and international expertise – Undertaken</p>	No Variance/Changes
	<p>1.6.2. Components of the action plan which are applicable are implemented during the duration of the reinvestment project - Undertaken</p>	No Variance/Changes
	<p>1.6.3. Medium and long term action plans put in place in order to be sustained for implementation – Undertaken</p>	No Variance/Changes
<p>Objective 2; Build capacity in tobacco control to ensure the necessary organizational development, work force development to promote the knowledge and skills for effective implementation of tobacco control strategies</p>		
<p>Activity 2.1.- Establish linkages with various health care professionals training programmes to enable them to carry out tobacco control activities in their respective settings- Undertaken in all districts</p>	<p>2.1.1. Establish linkages at state and district levels with-NRHM, RNTCP, MSCCP, NCD programme, MSACS, RCH and RCC. To have quarterly meetings with various programme officials at state and district levels to review the success of linkages, identify gaps and take corrective actions.- Undertaken in all Districts</p>	No Variance/Changes

<p><u>Activity 2.2.-</u> Scale up establishment of Anti-Tobacco Clubs and "Spot the Smoker Activities"- 90% educational institutions to have a Anti-Tobacco Clubs.</p>	<p>2.2.1. Sensitize and establish linkages in all districts with District Education Officer, SSA & RMSA District Project Officers on sections 4 and 6 – Undertaken at State as well as district level as well as at sub divisional level</p>	<p>No Variance/Changes</p>
<p><u>Activity 2.3.-</u> Capacity building of church organizations to support public education and awareness; implementation of smoke free policies at home, behaviour change and support quitting</p>	<p>2.3.1. Conduct training workshop of different church denominations under the aegis of MKHC (2 batches of 40 participants each at Aizawl) - 2 batches conducted</p>	<p>No Variance/Changes</p>
	<p>2.3.2. Church denominations to disseminate messages to all their institutions in all the districts – Process of disseminating messages has been initiated by the following denominations: Presbyterian Church of India, Baptist Church of Mizoram, United Pentecostal Church , The Salvation Army, Seventh Day Adventist etc.</p>	<p>No Variance/Changes</p>
<p><u>Activity 2.4.-</u> Undertake regular tobacco control and monitoring activities at state and district levels</p>	<p>2.4.1.To conduct quarterly review meetings of the State Tobacco Control Cell and monthly meetings at the district level (District Tobacco Control Cells, District Steering Committee) - Quarterly review meetings have been held at state level and in all districts</p>	<p>No Variance/Changes</p>
	<p>2.4.2. Conduct half yearly meetings of the MSFG, SFMC etc – Meetings conducted</p>	<p>No Variance/Changes</p>
<p><u>Activity 2.5.-</u> Develop appropriate materials on harmful effects of tobacco and enforcement of COTPA</p>	<p>2.5.1. Disseminate materials through the H&FW department, I&PR department, MJA etc to all district HQ - Undertaken</p>	<p>No Variance/Changes</p>
	<p>2.5.2. Disseminate materials to all 719 villages (in collaboration with the department of Rural development) of the state along with the letter from Hon'ble Chief Minister to address tobacco issue in their village – Letter issued on 15/5/13</p>	<p>No Variance/Changes</p>
<p>Objective 3- Effectively implement and enforce the provisions of Section 4, 5, 6 & 7 of COTPA, 2003 by the end of the two years period</p>		
<p><u>Activity 3.1-</u> Develop training modalities and</p>	<p>3.1.1. conduct training of district collectors, CMOs, District Nodal Officers of all districts</p>	<p>No Variance/Changes</p>

training schedules for training of enforcement officials	at state level (1 batch of 24 participants) – Training conducted	
	3.1.2. Develop enforcement mechanism for section 5,6 and 7 of COTPA and disseminate to all the enforcers in the state - Undertaken	No Variance/Changes
<u>Activity 3.2-</u> Conduct trainings to scale-up enforcement	3.2.1. Training of enforcement officials from various departments like police, transport, tourism, health, education, excise, food and drugs, custom, Rural development, municipal council and district administration (one in each districts x 30 participants) – Training for Enforcement Officials conducted in all 8 districts	No Variance/Changes. Additional activities have been conducted at no extra cost to the project
	3.2.2. Conduct sensitization workshop for media personnel on Tobacco problem in Mizoram and need to enforce COTPA (1 workshop per district x 20 participants) – Sensitization Workshop for media personnel conducted in all 8 districts	No Variance/Changes. Additional activities have been conducted at no extra cost to the project
	3.2.3. Ensure regular earned media coverage, follow up and prepare earned media data base – We have received good support from Media Personnel in all districts and they continue to provide regular earned media coverage, both print and electronic.	No Variance/Changes. Separate report on earned media received during the project is enclosed separately.
<u>Activity 3.3.-</u> Sensitize Inter Media Publicity Coordination group (Association of PROs from different government departments), so as to develop most effective media tools for enforcement of sections 4, 5, 6 and 7 of COTPA	Conduct meetings and consultations with IMPCC and disseminate key messages through this body- We have received very good cooperation and support from IMPCC as a result of which tobacco control messages has been disseminated very effectively throughout the state. We have been able to participate in “Bharat Nirman Publicity Information Campaigns” in different parts of the state.	No Variance/Changes. Additional activities have been conducted at no extra cost to the project
<u>Activity 3.4.-</u> Strictly implement enforcement mechanism and monitoring implementation of the Act, collection of the fine and record of offences and violations of COTPA	3.4.1. Ensure receipt of monthly reports from district nodal officers and all other concerned departments - Undertaken	
	3.4.2. Develop and implement a strategy to control tobacco contraband from Myanmar and Bangladesh – Undertaken	

	and on going activity	
<u>Activity 3.5.-</u> Work with STCC at all administrative levels to support strict enforcement of tobacco control legislation	3.5.1. Organize quarterly review meetings with state level and Aizawl, Lunglei, Mamit and Kolasib districts of tobacco control cells - Undertaken	
	3.5.2. Organize quarterly review meetings Lawngtlai, Saiha, Champhai and Serchhip districts of tobacco control cells - Undertaken	
<u>Activity 3.6-</u> Conduct baseline and end line compliance survey to assess level of compliance to section 4, 5, 6 and 7	Baseline compliance study was conducted in the 2 nd Quarter in all 8 districts Endline Compliance Survey to assess level of compliance to Section 4,5,6 & 7 was conducted during May – June, 2013	No Variance/Changes
Objective 4. To sustain smoke free status of Mizoram and further improve compliance in rural and semi – urban areas of the state		
<u>Activity 4.1-</u> Continue work with existing set up in the government machinery, i.e with different departments in the state government, the District Collector of all districts, the Anti - Tobacco Squad etc.	4.1.1. Conduct regular meetings with Secretary (Health), DHS, DHME, MD (NRHM) and regular meetings with District collector, SPs etc – Regular meetings have been held with various important functionaries in all districts	No Variance/Changes. In order to sustain smoke free status of Mizoram and further improve compliance in rural and semi-urban areas of the state, Mizoram was declared as Smoke Free Mizoram i.e. strictly compliant to Section - 4 of COTPA, 2003 by Mr. Lal Thanhawla, the Hon'ble Chief Minister of Mizoram at the fag end of the previous project on the 29 th June, 2011. For ensuring strict compliance to Sections - 4, 5, 6, & 7 of COTPA, Tobacco Free Mizoram has also been launched on 26 th April 2013 by Mr. Lalrinliana Sailo, Hon'ble Health Minister of Mizoram.
<u>Activity 4.2-</u> Scale up engagement with the departments of School Education, Higher & Technical Education, Sport & Youth Services etc of the state by focusing on establishing more smoke-free educational institutions, prohibition of sale of tobacco product to minors (6a) and within 100 yards of educational	4.2.1. Issue necessary guidelines and reminders to concerned departments and have regular meetings to review the progress – Necessary orders/notifications have been issued by different departments like the Directorate of School Education, Higher & Technical Education, SSA etc. regarding Section 4 and Section 6 (b) of COTPA. Sports & Youth Services are actively involved through Scouts & Guides, Sports Authority of India, Mizoram Amateur Taekwondo Association etc.	No Variance/Changes

<i>institutions (6b)</i>	Reminders have also been sent to different departments. Meetings have also been held regularly with different departments and organizations.	
<u>Activity 4.3.-</u> <i>Continue to work with the existing working partners, namely ISTHM, YMA, MHIP and MKHC to sustain the activities taken up with them and new partners like MZP, MJA. In addition to smoke free, these partners will support the government in awareness campaigns, cessation support, focus on youth and women tobacco use and enforcement of section 5, 6 and 7 of COTPA</i>	Undertaken. This has remained an important activity and is very useful in reaching out to different categories of people throughout the state. Partnership continues with different working partners and each partner has been contributing to separate tobacco control issues during the entire grant. These partnerships have enabled us to have reach and access to the grass-root level in the community.	No Variance/Changes
<u>Activity 4.4.-</u> <i>Continue and strengthen enforcement of Section 4 drive through increased visits by enforcement teams and focus on hospitality and public transport sector. The focus will be to improve compliance in rural and semi-urban areas through groups like YMA, MHIP and church members</i>	Undertaken and is also on-going activity, with many departments and organizations taking up enforcement in their respective jurisdictions.	No Variance/Changes
<u>Activity 4.5.-</u> <i>To conduct quarterly awareness drive among various youth groups like National Cadet Corps, National Students Scheme, and the Scouts and Guides in all the districts</i>	Undertaken and is also on-going activity, with many departments and organizations taking up tobacco control activities as part of their own duties.	No Variance/Changes
<u>Activity 4.6.-</u> <i>Continue to spread awareness among members of the media so that the focus is not removed from the smoke free rules(quarterly update to the media, press release on important developments and TV and radio talk shows in all 8 districts</i>	Continuous activity has been carried on during the entire project. The project has been receiving very good earned media in both print and electronic media (TV and Radio)	No Variance/Changes

To prepare and submit end project report to tobacco control grants department.	Undertaken	No Variance/Changes
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3.2 Describe the key achievements of the project.

During the last two years of the project we have completed all the goals and objectives enunciated in the project. It is a matter of great pride that we have completed all scheduled activities and do not have any pending activity left under the project. We have seen many achievements during this time, some directly related and resulting from the project and some have been unexpected positive fallouts during the course of implementation of the project. Some of the key achievements are given below-

- 1. Effective enforcement of tobacco control law-** Steady and regular monitoring of enforcement of COTPA has resulted in very good compliance throughout the state with very low offense rate now. Anti Tobacco Squads (ATS) which are functioning in all district headquarters have been very active which has resulted in applying pressure on enforcement officials as well as educational institutions, shop keepers and the general public. The ATS while undertaking enforcement and penalizing offenders has always undertaken awareness generation about COTPA and spent much time and effort in educating the public and key stakeholders about the law, so as to get people to understand the need for enforcement. These activities have slowly started the process of *“self-enforcement”* and the *“de-normalization of tobacco use”* is also being witnessed which is a big achievement for a society where there has been absolutely no taboo whatsoever till now.

Enforcement of COTPA has been carried out in a sustained manner, without losing momentum in all the districts of the state. The District Collectors of all eight districts have given importance to implementation of various legislations concerned with tobacco control like COTPA and Food Safety Standards Act (under which Gutkha- a smokeless form of tobacco has been banned in the country and in Mizoram).

- 2. Compliance Study findings-**The effective enforcement is validated by the findings of various Compliance Studies carried out during the project period. There is visible decrease in public smoking in all districts, which is supported by the Compliance Studies conducted twice during the 1st project (in Oct-Nov. 2009 and May-June 2011) and once during the current project (May 2013). We are very proud to report that active smoking in all public places in the state has dramatically gone down to **4.2%** in 2013 from 18.18% in 2011 and a very high **61.65%** in 2009. Another achievement is that point of sale boards cannot be seen anywhere in the state, there is 100% compliance to Section 5 regarding POS Boards. Visibility of different signages has also improved remarkably throughout the state. Compliance to other key provisions of COTPA has shown very good improvement.
- 3. Inter-district competition and Inter-Departmental competition-** Various tobacco control initiatives undertaken during the course of the project have had a positive result in creating a healthy competition between the districts as well as between different departments.

To this end, we had instituted the “Zamzo Award” as well as the “Dirty Ashtray Award” in recognition of the efforts made by different offices and organizations to create smoke free public places based on Air Quality Monitoring (AQM) findings. These awards were distributed in individual districts in well-publicized events so as to acknowledge the good performers and to also motivate poor performers to improve. One incident we witnessed is how the office of the Superintendent of Police, Lunglei which had received the Dirty Ashtray Award in 2009-10 took steps to strictly enforce and to be compliant to smoke free rules, as a result of which

they ultimately received the Zamzo Award in 2011.

Further, we also instituted inter-district competitions based on the AQM and Compliance Study findings. Various awards like the Best Performing District, Most Improved District, Most Compliant District, Cleanest Public Place etc. were given out by the Chief Secretary to the Government of Mizoram to respective District Collectors in a well publicized event. It has been observed that these events have further motivated district heads as well heads of various offices, educational institutions etc. to undertake tobacco control in their respective jurisdiction in various innovative and effective ways. We are proud to report that tobacco control is now considered a part of their duties by many officials and organizations, with them taking ownership of this initiative the movement now has a firm foothold in the state. This scenario was unthinkable before 2009 when we started implementing BI grant as tobacco control was not on the priority list of most people and officials. Therefore, accordance of high priority to tobacco control and feeling of ownership of the programme by different officials and organizations has been one of our biggest achievements, as we know this will be sustainable.

- 4. De-normalization of tobacco use-** There has been no taboo associated with tobacco use among the Mizo people, with many children being initiated to using tobacco use by their parents, grandparents and other elder members of the family. The society has a long history of tobacco use while farming in order to keep mosquitoes and other insects at bay. Tobacco use was also an accepted societal behaviour and norm. A local rolled form of smoked tobacco called “Zozial” has been commonly used by the men folk. “Tuibur” which is a liquid form to tobacco was very common among the women. Changing times introduced more varieties of both smoke and smokeless forms of tobacco in the state which became very popular and was used extensively by both men and women to such an extent that we became the biggest user of tobacco products in India. GATS 2009-10 report highlights that tobacco use prevalence is highest in Mizoram at an alarming figure of 67.2%.

During the project we have taken up actions to educate different target groups in various aspects of tobacco control especially enforcement of COTPA and health effects. We can say with certainty that the process of de-normalization of tobacco use has started in the state and is gaining momentum. Self-enforcement is now evident, which was not common earlier. The knowledge gained by the people has resulted in change of attitude and positive behavioural change and practices.

- 5. Engagement and good working relationship with various important Policy Makers and other Officials -** We have been able to interact closely with key government officials and Politicians during the project. One of our closest allies is the President of the Indian Society on Tobacco and Health (Mizoram Chapter) who also is the First Lady of the state, Mrs Lal Riliani. We have been able to work with and through her and engaged with many officials and department heads up to the Hon’ble Chief Minister and this can be one of the factors that has attributed to the successful implementation of our project and enforcement of the law.

One example we would like to cite is regarding the District Collector of Aizawl, Dr Franklin Laltinkhuma who contributed significantly to raising compliance to pictorial health warnings on local tobacco products. He convened a meeting of different stakeholders to start with, which was followed by public notice in both print and electronic media, and enforcement drive in which he participated himself. He has also helped in raising ensuring compliance to Section 5, COTPA about POS boards by issuing letters to the main wholesalers of tobacco in the state, followed by strict enforcement drive.

- 6. Effective networking with various Government organizations and NGOs-** During the course of implementation of the project we have had to work with different organizations both GOs and NGOs. Since effective tobacco control requires involvement of many departments and individuals we have developed

different platforms and bodies for this purpose. The Mizoram Smoke Free Group (MSFG) and Smoke Free Mizoram Coalition (SFMC) chaired by the Hon'ble Chief Minister and Hon'ble Health Minister respectively have provided platforms for all Cabinet Ministers, representatives of key NGOs, FBOs and other important organizations to participate in tobacco control. The Task Forces on tobacco control have been constituted at state and district levels under the chairmanship of Health Secretary and District Collectors in every district respectively which take up important issues for effective enforcement of COTPA. Task Force has also ensured that telephone numbers for reporting COTPA violations have also been identified and publicized in every district. Anti Tobacco Cells have also been constituted at the state as well as at district level under the chairmanship of the Health Secretary and Chief Medical Officers in every district, which deals mainly with tobacco control issues related to the health department including training and cessation.

- 7. Strong partnership with our working partners and their contributions:** We have four (4) official working partners under the current project. They are all very committed to the cause of tobacco control and have given very strong support, which has contributed towards achievement of our objectives. The **Indian Society on Tobacco & Health (Mizoram Chapter)** is our strongest and most active working partner. They are very useful in advocacy, creating awareness among the general public at large and have contributed significantly towards raising compliance to section 7 of COTPA, dealing with pack warnings. The contributions made by the **Mizo Hmeichhe Insuihkhawm Pawl** (Women's Federation) in banning the sale of Gutkha products in our state and in reducing its consumption rate among the youths are also highly commendable. They have sustained their activities by creating awareness about health effects of tobacco throughout the state and have been instrumental in enforcing the Gutkha Ban. The **Mizoram Journalist Association** has been a very effective partner and has ensured that tobacco related news, activities and important information are widely disseminated to the public through the print and electronic media. This has contributed significantly in raising awareness on different aspects of tobacco control. The contributions rendered by **Mizo Zirlai Pawl** (students body) are very significant. They have enabled us in reaching out to students all over the State and in raising compliance to Sections 4 and 6 in Educational Institutions. All our partners have been very strong advocates and spokespersons on the issue of tobacco control and we appreciate their support.
- 8. Tobacco Cessation-** Different organizations, both governmental and non-governmental, have taken up various initiatives to encourage current users to quit. Some churches have conducted camps for tobacco users to quit. Many departments have also taken steps to encourage tobacco users to quit. The Department of Social Welfare while observing World No Tobacco Day, 2013 had conducted tobacco awareness programme and had come up with an incentive to felicitate tobacco quitters during Advance Christmas celebrations to be held in December 2013. They are also preparing a diary of all tobacco users in order to encourage them personally to quit. The Police Department has also been felicitating tobacco quitters in different functions in recognition of their efforts and also to motivate others to quit.

3.3 Were there any unexpected results (positive or negative)?

There have been a number of unexpected results, mostly positive and even the negative ones have resulted because of our interventions making it an achievement. Some of the significant achievements are given below-

- 1. Declaration of Tobacco Free Mizoram:** On 26th April 2013 the Hon'ble Health Minister of Mizoram, Mr Lalrinliana Sailo launched the Tobacco Free Mizoram campaign in Aizawl, as part of Campaign for Tobacco Free North East that had been launched earlier in Guwahati, Assam. This campaign was launched to ensure that Mizoram becomes strictly compliant to Sections 4 , 5, 6, & 7 of the Cigarettes and Other Tobacco

Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003. This event was partly supported under the grant. All efforts have also gone into making this a reality so that the state becomes 100% compliant.

- 2. Declaration of Thingsul Tlangnuam as Tobacco Free Village:** Thingsul Tlangnuam Village was declared as Tobacco Free Village, the first in Mizoram i.e. strictly compliant to Sections 4, 5, 6, & 7 of COTPA, 2003, on 24th May, 2013 by Mrs. Lal Riliani, First Lady in the presence of Mrs. Esther Lalruatkimi, Secretary to the Government of Mizoram, Health & Family Welfare Dept. This joint venture and initiative was undertaken by the Mizoram State Tobacco Control Society, Indian Society on Tobacco & Health (Mizoram Chapter) and Anti Tobacco Committee, Thingsul Tlangnuam. Prior to the event we took up all necessary actions to ensure that the relevant sections of COTPA were complied with; in addition Aizawl District Anti Tobacco Squad checked the status of the village to verify whether it was truly compliant. Following the declaration, we have continued to work with the village authorities to ensure that they remain tobacco free by undertaking many activities involving school education programmes, teachers training, community awareness programme, medical and dental check up, mobile medical unit outreach programmes etc.
- 3. Involvement of the Church-** Mizoram is a Christian state with the Church having a lot of influence and say in the lives of the people. The Church has been singularly effective in making Mizoram a “dry state” with total prohibition of alcohol in force. However, the Church has not given all that much importance to tobacco use till very recently. We have tried our utmost to engage with different church denominations since the first project in 2009 and over time we have made some significant headway with some patient interactions, communication, workshops, seminars etc. held with them. The biggest denomination, Presbyterian Church of Mizoram which has the largest number of members has started addressing this important issue by prohibiting tobacco users from becoming Pastors, including tobacco awareness in Sunday school curriculum of children, anti-tobacco awareness generation, booklet on health effects of tobacco etc. The second biggest denomination, Baptist Church of Mizoram, has also become sensitized to tobacco related issues. They have prepared a very good booklet on various topics on tobacco like health effects, cessation and COTPA that was taught in every Baptist Church in Mizoram. We have also been given opportunities to teach students about tobacco control at two of the biggest Theological (Bible) Colleges in the state. We have been able to train Church Elders, Lay Leaders, Youth and Women’s ministries. We are also having many programmes at individual churches throughout the state. We have started seeing the positive impact in the people due to the voice of the Church and are optimistic that with the various churches actively involved now tobacco control will reach into every home and hearth and influence the youth to prevent initiation, promote quitting among users etc.
- 4. Blue Ribbon Campaign-** In order to highlight the health consequences of second hand smoke and the need to provide healthy smoke free environment Blue Ribbon Campaign was launched by the Hon’ble Chief Minister, Mr Lal Thanhawla on 31st May 2012. He also started the signature campaign to garner support for the cause. This event was also to provide a show of solidarity to the Blue Ribbon Campaign showcased during the 15th World Conference on Tobacco or Health at Singapore in March 2012.
- 5. Live It UP Without Lighting Up-** The “Live It Up Without Lighting Up” movement was launched successfully in Aizawl on 26th May 2012 in the footsteps of the “Live It Up Without Lighting Up” global movement launched on 21st March 2012 at Singapore during the 15th World Conference on Tobacco Or Health. This youth-centric activity attracted school children and youth from all over the state and did much to promote a tobacco-free lifestyle. Similar events were conducted in all district headquarters and were well publicized. This type of youth targeted activities is observed to attract the Mizo youth and is expected to have a positive effect among them by channelizing their attention and energy towards healthy habits and safe

pastimes; and further encourage them to enjoy life without using tobacco.

- 6. Tobacco Free Mizoram Brand Ambassador-** In order to promote and glamorize a tobacco free lifestyle we have identified and requested Mr. Vanlalsailova, who is one of the most popular celebrity singers in the state, to be the Brand Ambassador for Tobacco Free Mizoram. He is an iconic figure for the youth of the state and his support is expected to be influential.
- 7. Mass Media-** We have taken up many initiatives to spread the anti-tobacco message through mass media in the form of songs, short films, TV Ads etc. We have managed to do this without any available separate funding as we have received the support in many forms. Tobacco-Free Celebrities have composed and sung Anti Tobacco songs due their personal commitment and charitable nature. TV Personalities have shown their support by showcasing tobacco control issues in TV Talk shows, Health Programmes, Short Films, People's Opinion/surveys, Panel Discussion etc. We have always received very good and extensive news coverage in both the print and electronic media. An analysis of the print media coverage is enclosed separately.
- 8. Pack warnings-** Enforcement drives undertaken and confiscation of foreign cigarettes without the pack warnings has resulted in creation of awareness to such an extent that one particular cigarette brand "Farstar" manufactured in Myanmar got the health warnings printed on their packs as mandated by COTPA.
- 9. Tobacco Industry Interference-** Soon after Mizoram notified the ban of Gutkha on 22nd August 2012, we were visited by representative from the Smokeless Tobacco Federation Of India who threatened us with a law suit and other dire consequences because of the ban, which he said was unconstitutional. This might appear like a negative outcome of our work and efforts, but it actually reflects the impact that our activities are having on the tobacco industry.

Section 4: PROJECT IMPACT

4.1 How has the grant assisted in furthering Tobacco Control in the targeted country/region/district/city?

With the grant received from Bloomberg Initiative to Reduce Tobacco Use various initiatives have been undertaken within the state. The grant has contributed towards better enforcement of COTPA resulting in improved compliance to various provisions of the act. The grant has enabled us in carrying out various programmes and activities towards creating not only a smoke free state but also a tobacco free state. This has resulted in creating a positive impact in the state as a result of which the attitude of the Mizo society towards tobacco is changing surely but gradually. We have initiated and put into place the process of imparting knowledge that has led to and is continuing to change the attitude of people towards tobacco use and has put in place the process of "de-normalizing" the use of tobacco in the society at large. We are currently seeing change in the tobacco use practice of people in the state, e.g. smoking in community programmes have become very rare to see now though this was a common practice just a few years back, the smell of tobacco smoke which was present in almost every office is now a thing of the past etc.

Funding received from other sources is extremely limited. The state has put in a token amount of fund. Under the National Tobacco Control Programme funds have been received for only two districts. The funds received under the grant have supplemented the limited funding received from other sources as a result of which we have been able to put in place a systematic tobacco control programme in all the eight (8) districts of the state. The technical guidance, feedback and advice received from Dr. Rana J. Singh, Mr. Balasubramanian Gopalan, Dr. Nevin Wilson and other staff of the Union has been invaluable while implementing our grant.

4.2 What impact did the grant have on your organization's capacity? (I.e. Staff, infrastructure, process, technical expertise, etc.)

With the grant received the Health and Family Welfare Department, Government of Mizoram through the Mizoram State Tobacco Control Society has implemented the project. We have been able to recruit requisite staff to work on tobacco control throughout the state. Though the number of staff was limited, with one staff looking after 2-3 districts, we have been able to make significant headway in all districts. The technical expertise offered by the project through the Union has been vital for the success of the project. The handholding and constant guidance we have received throughout the project is much appreciated. Our Technical Adviser and Contract Administrator have been just a phone call or email away for us. We have gained much from the inputs received from them especially during monitoring visits. Prior to the BI grants the state had very limited resources, infrastructure and technical expertise in tobacco control. All this changed when we received the BI grant and were able to take up tobacco control in a systematic and scientific manner. We will not be wrong in saying that the BI grant has helped in reversing the tobacco epidemic in the state and saved innumerable lives.

Section 5: MATERIALS PRODUCED AND WEBSITE DEVELOPMENT

5.1 Please list all the materials and documents (and number of copies) produced during the life of the Grant. Please also submit electronic copies of any public recognition, press releases, awards, or other types of acknowledgement of your program published in local media, community newsletters, organization bulletins, or news articles.

*If only hardcopies of the document or booklet exists, please send a copy by mail to **The Union Grants Programme, 8 Randolph Crescent, Edinburgh EH3 7TH, United Kingdom***

List of materials and documents (and number of copies) produced during the life of the Grant are as follows:

1. COTPA Pamphlets – 17, 000 copies
2. Signages – 9, 300 copies
3. Stickers – 10, 000 copies
4. Banners – 41 Nos.
5. COTPA Booklets – 3350 copies
6. Hoardings – 12 Nos. (from other sources)
7. Vinyl Printing – 25 Nos. (from other sources)
8. Flip Charts – 3 Nos. (from other sources)

(Hard copies of documents, booklets, some press release, media releases, news articles are enclosed separately)

5.2 If a website was developed as part of the grant, please provide the website address. Explain how the website has helped to achieve the objectives of the grant.

A website had been developed during the previous grant period in collaboration with the National Informatics Centre (NIC) Mizoram. The Hon'ble Health Minister, Mr.Lalrinliana Sailo, had successfully launched it on the 23rd

June 2010.

Address of website - www.smokefreemizoram.nic.in

The website has helped by making various materials like COTPA guidelines, cessation tips, articles, TV spots, short films, songs etc easily accessible to people and has increased our span of reach. It is learnt that the website has been particularly useful for the youth and educated people throughout the state.

Section 6: Administration and Budget

6.1 Were any changes made to the budget during this project?

None

6.2 If you received funding from other donors for tobacco control work during this project, how did it complement the work under your grant?

Funding has been received from other donors for tobacco control work during the last two years as follows-

1. From Government of India for implementation of National Tobacco Control Programme in two districts of Aizawl West and Lunglei
2. From World Health Organization for Global Adult Tobacco Survey 2009-10 Dissemination Workshop
3. From Campaign For Tobacco Free Kids for undertaking Voice Of Tobacco Victims
4. From the Government of Mizoram for carrying put tobacco awareness campaign

All these other tobacco control activities have complemented the BI grant very effectively as the overall objective of all these programmes is tobacco control.

6.3 Throughout this grant project, were any funds spend to support or oppose candidates for elected office? If yes, what amount of grant funds was used?

None

Section 7: SUSTAINABILITY

7.1 How do you intend to sustain and build upon the outcomes of this project? Describe follow up envisioned, and whether the work will continue after the support has ended.

As a result of the present grant we have witnessed many positive outcomes. In order to sustain tobacco control activities we are moving the state government for more budgetary allocation for tobacco control. The central government is in the process of scaling up the National Tobacco Control Programme in terms of increasing funding for every district and also increasing the number of districts to be covered, which will definitely have a positive impact on the programme in the state.

Under the new re-investment grant, that we have been fortunate and blessed to receive, we will further consolidate and strengthen tobacco control activities in the state. We will work towards improving tobacco control indicators under GATS.

In the long run, the vision that we have for sustaining the work carried out under this project is to empower and get all educational institutions, departments, offices, public transportations, shops, markets etc. implementing relevant provisions of COTPA within their respective jurisdiction. We have put in place necessary institutional arrangements and issued requisite notifications and government orders required for enforcement. We will ensure that the appropriate authority will issue notifications and orders as considered necessary from time to time. We are already seeing many offices, departments, district heads etc. taking up tobacco control as part of their own official duty and we will be mobilizing other offices to also do the same. We feel that ultimately, only this will lead to viable sustainability of tobacco control in the state. An example would be the Department of School Education ensuring that all schools in the state strictly enforce sections 4 and 6(b). Another example we would like to share is the fortnightly reporting mechanism for enforcement of COTPA that has been mandated by the Director General of Police (DGP) to be strictly followed by all police stations in the state; further tobacco control including COTPA is now a regular feature in all trainings conducted by the Police. The ultimate goal is for everyone in their official capacity to undertake tobacco control in their respective jurisdiction and in their capacity as a concerned citizen to push for self-enforcement of COTPA and thus get a strong movement going in every nook and corner of the state so that tobacco control becomes an integral part of the system.

Section 8: PARTNERS AND OTHER CO-OPERATION

8.1 How did you assess the relationship between the formal partners of this Grant (ie those partners which have signed a partnership statement)? Please list the partners, and provide specific information for each partner organisation.

We have four (4) working partners for this grant, each having their own areas of expertise and reach. They have all been very useful in implementing the project and have added value to the project.

- 1) Indian Society on Tobacco and Health (Mizoram Chapter):** ISTH (M) has been our most active working partner since the very first BI grant. This NGO has been working in the field of tobacco control since 1989 and they are very committed to the cause. We have been able to gain access to the highest political and bureaucratic powers through their President, Mrs. Lal Riliani who is also the wife of the current Chief Minister. We have been able to personally visit and request the support of key Ministers and other important officials, e.g. Secretaries, Directors etc. that has yielded rich dividends. Following such visits, it has been seen that there has always been immediate follow-up actions taken by the concerned departments. The very presence of the First Lady ensures that tobacco control is accorded high priority and

that actions are taken and also reported. Thingsul Tlangnuam village became the very first “Tobacco Free Village” in the state on 24th May 2013 as part of the initiative taken by ISTH(M). They have a wide area of work and are involved in various campaigns taken up in many rural and far-flung villages throughout the state. They will continue to be our working partner in the new re-investment grant.

- 2) Mizo Hmeichhe Insuihkhawm Pawl (Women’s Federation):** MHIP have been an active Working Partner since the first grant was implemented in 2009. They have taken up various initiatives towards tobacco control in the state, of which the most prominent action taken has been the ban of Gutkha products (a smokeless form of tobacco also containing betal nut, lime, catechu, magnesium carbonate etc which is very popular among the youth). They have worked diligently and with determination towards banning the sale of the product in the state and we witnessed the ban in the state even before the supporting legislation in the form of the Food Safety Standards Act was enforced. This has very clearly brought home the lesson about the effectiveness of a civil society movement. MHIP has been very supportive and their participation has had a great impact in the state. With the initiative taken by them awareness campaign have been jointly organized among youth and children and workshops have been organized for office bearers and committee members in all Districts. They are also active members of the Anti Tobacco Squad in all districts. They will continue to be our working partner in the new re-investment grant.
- 3) Mizo Zirlai Pawl (Student’s Union):** The MZP being a student’s body with presence in all districts was identified as a working partner for this grant and have been found to be a very useful working partner in reaching out to students all over the state. They have been very effective in creating awareness about health effects of tobacco as well as COTPA among students and the general population as well. MZP has contributed toward establishing tobacco free educational institutions and in ensuring strict and effective enforcement of COTPA sections 4 and 6. They have been active participants in all the Districts and also play an important role as members of Anti Tobacco Squad in various districts. They will continue to be our working partner in the new re-investment grant so we can continue to capitalize on their reach and influence.
- 4) Mizoram Journalist Association (MJA):** The MJA has been an extremely useful working partner during the current grant. They had extended very good cooperation and support during the first grant even though they were not our official working partner, which is the reason why we identified them as one of our partners in the subsequent grant. They will continue to be our working partner in the new re-investment grant. They have been very effective in disseminating important information on tobacco control, reporting various activities undertaken and also creating awareness about health effect of tobacco, second hand smoke, cessation etc. among public through both print and electronic media. Reports about anti tobacco squad drives conducted have been covered very extensively which has created awareness about COTPA, enforcement mechanism, fines levied etc. Different activities have been taken up in collaboration with MJA and with their support we have been able to disseminate information about Tobacco and its related issues throughout the state to the remotest areas.

8.2 How did non-formal partners participate or support the work covered by the grant? Please include the name of those partners.

Various organizations have given wholehearted support to the project in different ways. Some of the non-formal partners who have supported our project are-

- 1. Mizoram Kohhran Hruaitu Committee (Mizoram Church Leaders Committee)-** MKHC is a broad based body comprising of members from different church denominations. Mizoram being a Christian state is very strongly influenced by the Church. The Church is very vocal in its fight against alcohol and drugs. However, most of the denominations have not taken up the fight against tobacco till very recently. We have engaged

with MKHC since 2009 when we implemented the first BI project. During the course of the present project we have taken up different types of programmes with them and have started seeing many positive developments in the form of various anti-tobacco activities by different denominations. These developments reflect the changing attitude of the church and its members. We are very happy with these developments since the Church is all-powerful and all pervasive and is able to make or break any endeavour. We will continue to work with MKHC and individual churches and denominations in the future.

- 2. Brand Ambassador for Tobacco Free Mizoram-** A very popular celebrity singer, Mr. Vanlalsailova, has been identified as the face of the Tobacco Free Initiative in Mizoram. Music is a popular and very powerful medium in Mizoram and influences many children and the youth. We are trying through this intervention to attract the Mizo youth to a healthy and tobacco free lifestyle. Our Brand Ambassador has been a very vocal crusader for the cause of a tobacco free Mizoram and has reached out to many people, both young and old.
- 3. Central Young Mizo Association-** This is the biggest Community Based Organization in the state, with presence and influence in every town and village. YMA branches in different towns and localities have taken different initiatives to combat the menace of tobacco, e.g. tobacco awareness campaigns, cleanliness and sanitation campaigns etc. As a result of the YMA initiative there has been reduction of smoking in social gatherings like funeral, weddings etc. and smokers now have to go away from the crowd in order to smoke. This has started the process of de-normalization of smoking in public places. This development has taken place in the scenario where just a few years back smoking was rampant in all YMA events and activities, where smokers would just light up even during official meetings and committees.
- 4. Cable TV Networks-** We have been able to utilize the electronic media very effectively for creating awareness about different tobacco control issues. The two biggest cable networks in Mizoram with the largest viewership are LPS and Zonet. We have been fortunate to forge very good relations with both as a result of which various tobacco control issues have been featured at regular intervals. LPS has a weekly "Health Tips" programme every monday and we have had various programmes on this showcasing different aspects like cessation, health effects, Voice of tobacco victims, enforcement, Blue ribbon campaign, WNTD etc. Some programmes have been sponsored, but mostly we have been able to get these programmes at no cost to the project; which speaks volumes about the commitment about these networks social work endeavour.
- 5. Mizoram Amateur Taekwondo Association-** MATA has been a very staunch supporter of tobacco control cause and has contributed to spreading awareness through their tobacco free sports persons. They usually participate in most of our public functions and present their taekwondo show while advocating a tobacco free lifestyle. They have won over a lot of hearts with their shows.
- 6. Tobacco Quitters of Mizoram-** Tobacco quitters have been some of our strongest supporters. They have been very vocal and effective in reaching out to tobacco users. Some of the quitters are also cancer survivors and have been able to share powerful testimonies that have influenced and motivated many users to quit. They have participated in LPS Health Tips programme, media advocacy and various other campaigns.

8.3 Will these formal and informal partnerships continue? If so, how? If not, why?

We will definitely continue with all our partnerships, both formal and informal, during the next re-investment grant. We have identified ISTH(M), MJA, MHIP and MZP as our working partners for the new grant so that we can continue

to capitalize on their different reach and influence. We have identified areas of work with each partner. Our informal partnership with all 6 partners will be taken forward even further in the future through activities which involve them. Their contribution has been very useful and we had seen significant development in different aspects of tobacco control in different groups, so we will plan out more activities to involve them even further.

Section 9: MONITORING AND EVALUATION

9.1 Monitoring – Outline the strengths and weaknesses of the Monitoring Process.

The present monitoring process being followed under the project is very good and comprehensive. There are no weaknesses that we have observed while implementing our project.

1. **Reports**- The monthly and quarterly reports submitted by us are an effective monitoring tool and keeps us on our toes and ensures that the project activities are completed as scheduled. The monthly report gives us opportunity to schedule activities for the quarter and to take corrective actions in case the need arises.
2. **Visits**- The monitoring visits by our Technical Advisor and Contract Administrator has enabled them to monitor our activities and at the same time it has given us opportunities to clear our doubts during face to face discussions during their visits and have a better vision about the project. They have also given us very good technical advice during their visits that have helped in effective implementation of the project.

9.2 Evaluation – What were the results of the evaluation?

One of the key evaluations done by us to evaluate our performance has been to assess the number of activities undertaken and completed in comparison to the scheduled activities that are given in the grant agreement. This evaluation has shown that we have completed all scheduled activities with no pending activities. We have also undertaken additional activities to complement the project activities.

In order to evaluate the project implementation and outcome of the grant we have conducted the following studies-

1. **Compliance Studies**- Various studies have been conducted to evaluate compliance to different sections of COTPA and have been compared to previous studies conducted during the previous grant. Details of the Compliance Studies are given separately and only salient points are highlighted below-
 - (a) **Section 4 of COTPA (Ban of smoking in public places)**:- Three compliance studies on section 4 have been undertaken- the 1st one in Oct-Nov 2009 at the beginning of the 1st project, 2nd one in May-June 2011 at the end of the 1st project period and the last one in May 2013 at the end of the reinvestment project. Active smoking has declined dramatically in the state from 61.65% in 2009 to 18.18% in 2011 and in 2013 it has gone down even further to 4.2 %. The presence of signages has increased from 47.67% in 2009 to 83.96 % in 2011 and in 2013 it increased even further to 89.4 %. 97% of all signages were found to comply with the specifications of COTPA in 2013. The districts observed to have maximum number of active smoking in the 3 studies are as follows- Kolasib District at 75% (2009), Lawngtlai District at 50.9 % (2011), Saiha District at 21.5 % (2013). The districts observed as having the least active smoking are as follows- Lawngtlai Distric at 50 % (2009), Mamit District at 5.4 % (2011) and Aizawl, Champhai, Kolasib, Mamit and Serchhip at 0% (2013). Three more variables were added in 2011 and 2013 which highlighted that only 8.34 % location were observed to have

ashtray in 2011 and in 2013 it has further gone down to 4.2%. 24.78 % locations had cigarette butts present in 2011 and only 9.8 % in 2013.

- (b) **Section 5 of COTPA (TAPS ban)*:-** Compliance studies have highlighted that the total number of Point of Sale Boards in shops has dramatically gone down to 0% in 2013 as compared to 9.37% of 2011 compliance survey. The total number of shops with some form of tobacco advertisements (POS Boards, Posters etc.) has decreased from 39% in 2011 to 9% in 2013, of which Aizawl district shows the maximum improvement. Most of these advertisements are in the form of posters
- (c) **Section 6-a (Sale to minors)*:** The total number of shops with signage prohibiting sale of tobacco to minors has shown improvement and increased by 31.53% from 42% in 2011 to 73.53% in 2013 with Serchhip district showing the most improvement at 100%
- (d) **Section 6-b (Sale within 100 yards of educational institutions)*:** The total number of schools displaying Signage prohibiting sale of any tobacco product in an area within a radius of 100 yards of any educational institutions has shown improvement by 41.3% from 28.6% in 2011 to 69.9% in 2013. The total number of shops still selling tobacco products within 100 yards of educational institutions has shown a remarkable decline by 30.34% from 46.8% in 2011 to 16.46% in 2013. All the districts has shown equal improvement in this section
- (e) **Section 7 of COTPA (Pictorial health warnings)*:-** The total number of shops selling tobacco product without health warnings has declined by 26.4% from 92% in 2011 to 65.6% in 2013. Serchhip district has shown 100% compliance.

(*Compliance Survey has been done twice to assess compliance to Section 5, 6, and 7 of COTPA in December, 2011 and June, 2013)

2. **Earned media analysis report-** Analysis of coverage received in seven of the popular daily newspapers, out of a total of 31 dailies, on tobacco control issues during the two years project period highlights that we have received very good earned media. Some of the main points are highlighted below-

(a)	Average earned media received in a month	26.9 times
(b)	Maximum earned media received in a month	62 times
(c)	Minimum earned media received in a month	7 times
(d)	Month during which maximum earned media received	May 2013
(e)	Topics which received maximum earned media during the grant (in decreasing order)	1. News coverage & report of programmes/events conducted 2. Anti Tobacco Squad report 3. Articles

Section 10: LESSONS LEARNED

This section allows you to share any knowledge you have gained over the life of the grant.

10.1 Describe any lessons learned during the Project **Negotiation and Design** process (by your organization and in response to assistance from the technical and financial teams)

Lessons learnt will include consideration and incorporation of local data, existing practices, types of tobacco used, cultural norms, geographical terrain etc. while designing the project, as these factors will impact project implementation and outcome. Limitation of staff, difficulty in transportation and communication, bad roads and difficult terrain, heavy monsoon, frequent landslides, inaccessibility of some towns and villages etc. are some of the constraints we face in Mizoram making it difficult for us to effectively reach all parts of the state. Therefore, the factors mentioned above should be considered and factored in while planning the design of the project and finances should be planned accordingly. An example would be to have more number of staff available at district level so that each staff is able to give more attention to their district, travel to more places within their respective districts as against looking after 2 or more districts and travelling from one district to another over long distances requiring travel time of between 4-10 hours. This eventually hinders their capacity to give good attention and to effectively carry out interventions and activities in any one district. Further, monsoon season lasts for very long in Mizoram stretching for almost six months, from April to September, which makes travelling a big challenge. It is suggested that the funding agency as well as the negotiating team be open to these local peculiarities and challenges.

10.2 Describe any lessons learned during the grant **implementation** process (by your organization and in response to assistance from the technical and financial teams)

Lessons learnt during grant implementation process-

1. It is sometimes not possible to conduct activities as scheduled due to reasons that are beyond our control, e.g. unavailability of key stakeholders, landslides, roadblocks, bad internet connectivity etc. Therefore, we need to be able to undertake situational analysis; adapt and adjust our activities according to the situation.
2. Availability of funds for smooth implementation of project is essential. During our grant implementation the funding agency has not released money on a regular and timely basis, which has created numerous problems for us. At the same time, we have also had delays at our end due slow to slow processing of transactions by our bank. As a result of unavailability of funds we have had to face many challenges in completing scheduled activities in accordance with our grant agreement.
3. Staff turnover has created its challenges as new and inexperienced staff replaces trained and experienced staffs. Some solutions are suggested below-
 - (a) Staff turnover may be reversed to some extent if the remuneration is raised so that they do not have to look out for better paid jobs
 - (b) Staff may be given opportunity to undergo various trainings like the IMDP trainings or other appropriate trainings so as to sharpen their knowledge and skill, e.g. Accountant may undergo Financial Management training.

10.3 Lessons Learned - **Positive** aspects that may be replicable.

Some lessons learnt which may be replicated are given below-

- 1. Partnering with Journalists-** The partnership we have made with the Mizoram Journalist Association has been very beneficial for the project and for the cause of tobacco control. Most of the journalists have given us full-hearted support and have regularly featured tobacco related issues in both the print and electronic media. This has enabled us to reach out to people in all parts of the state, including very far-flung, isolated and inaccessible villages and generated awareness.
- 2. Political commitment-** Political commitment is essential for the success of any programme/project. We have been blessed with the full support of the Chief Minister, the Health Minister as well as other senior ministers in the state. Formation of two important bodies, namely the Mizoram Smoke Free Group and the Smoke Free Mizoram Coalition has garnered the support of the politicians as well as key NGOs.
- 3. Involvement of Faith Based Organizations-** We feel that winning the hearts of people is very effective especially for tobacco control and the best way to do this is through the church. We have made strong negative association between Christianity and health versus tobacco use, and how it is inappropriate for a good Christian to use tobacco in any form. The economics of tobacco use is also another point that we stress on. These campaigns now appear to be working in the minds and hearts of people and is making tobacco use an unaccepted social and Christian behaviour.
- 4. Multi-sectoral and inter-departmental cooperation and coordination-** Tobacco control being a very complex issue requires inputs and assistance from various governmental departments as well as civil society. One of the reasons for the successful implementation of the project has been the active and wholehearted support and involvement of many people from different organizations who have all contributed in their own ways ranging from conducting awareness campaigns, trainings etc. to singing anti tobacco songs and producing anti tobacco films to enforcement and issuing important notifications and orders. Tobacco control cannot remain just a Health Department initiative or Police activity or an Administrative work, it needs active involvement of many players and the trick is in getting all these people together to work towards the common goal of tobacco control.
- 5. Tobacco Free Village:** Creation and identification of a Tobacco Free Village is found to be having a very positive effect not only in the village concerned but also in other villages in the state. It has been reported that the news about this initiative had created awareness about tobacco use, health effects etc. and has acted as simulation to other villages and towns in the surrounding area to replicate this venture. We hope to see many other places become tobacco free.
- 6. Launching of Tobacco Free North East-Mizoram Campaign:** After the launch of Campaign for Tobacco Free North East at Guwahati, Mizoram became the first to launch the State Level Campaign. This launch has put pressure on the government as well as the public to scale up all aspects of tobacco control. We are looking forward to 100% compliance to key provisions of COTPA.
- 7. Involvement of Sports persons and other celebrities-** We have found that active involvement of tobacco free sports persons from different sporting fields have proved to be very effective in motivating young children and youth to stay away from tobacco use. Mizoram Amateur Taekwondo Association members frequently put up shows during our programmes, which have been found to be very popular, and go a long way in glamorizing a tobacco free lifestyle. Similarly, we have involved many other tobacco free celebrities who strongly advocate for tobacco free youth and life. These have added not only glamour value to our

cause but also shown by example how tobacco free life can be successful. Examples of some of the celebrities we have been closely associated with are Mr. Vanlalsailova (also Tobacco Free Brand Ambassador), Mr. Joy Zairemmawia (Celebrity Singer and TV Anchor), Mr. TBC Zaithanpuia (Celebrity Singer and Idol) etc.

10.4 Lessons Learned- Negative aspects which may be avoided in future.

1. Fund release needs to be on a regular and timely basis. This was a challenge for us during the current grant
2. Bank transactions have been very slow with our bank, namely ICICI. The services provided by them have been limited, procedural and very inefficient in their operations. Fund transfers, change of authorized signatories, issue of cheque books etc. have all taken very long (as compared to other banks) and have resulted in slowing down our activities. We will not be using them for the new grant.
3. Media campaign component is essential in tobacco control as there is need to create awareness about and to publicize information about many different issues. In order to have good cooperation from key stakeholders and the public we have tried to first undertake intensive media campaign so as to inform them about the new legal requirement, new notification etc. and only after this do we undertaken enforcement. Therefore, in the absence of a separate budget for this component we have felt the constraint while implementing the grant.

10.5 Lessons Learned – Financial management lessons learned that will benefit your next budgeting process.

One of the lessons learnt has been that while implementing the project the allocated budget is found to be inadequate for some activities, e.g. funds allocated for various meetings like the Quarterly Review meeting for State Level Tobacco Control Cell and Monthly meeting for District Level, Half Yearly MSFG, SFMC meeting. Budgetary allocation for Compliance Survey was also found to be limited and insufficient as travel cost was very high in actual. Further, release of instalment irregularly is another major problem faced by us.

10.6 Lessons Learned - Other general comments.

While implementing the BI grants, I have learnt not only about tobacco control issues but also overall managerial skill, project management etc. and am still learning. I have learnt a lot from Dr. Rana J. Singh and Mr. Balasubramanian Gopalan and other staff under the Union, which has helped me in implementation of the project and also overall tobacco control on the whole. The whole experience of working towards tobacco control has been an enriching and enjoyable experience. It has given me a feeling of achievement to know that I am working on a very important public health issue.

Section 11: ADDITIONAL COMMENTS AND RECOMMENDATIONS

If you have any additional comments about the grant, and its overall management, please use the space below:

Mizoram is a small state situated in the far north-east corner of India, with not much revenue earning capability and

mostly dependant on the central government for funding. Though tobacco is a big public health problem and this problem has been acknowledged by doctors, bureaucrats and politicians alike it is almost next to impossible to get funding from the state. Therefore, we have been most fortunate to get funding under the Bloomberg Initiative to Reduce Tobacco Use and even more fortunate to be provided the opportunity for re-investment twice. The BI grants have done a lot for tobacco control in Mizoram. As we move into another re-investment grant we put on record our commitment to do our very best and to make our funding and monitoring agencies proud. We also commit to making Mizoram a model state for effective and good implementation of project, which will be proven with improvement in all our tobacco control indicators in the next GATS.

Name of the primary contact person for the Grant:

Email:

Report Prepared By...

Position:

Signature:

Location:

Date report due:

Date report sent: