

Policy-Relevant Research

Linda Waverley, MSc, PhD

Research for International Tobacco Control (RITC)

International Development Research Centre (IDRC)



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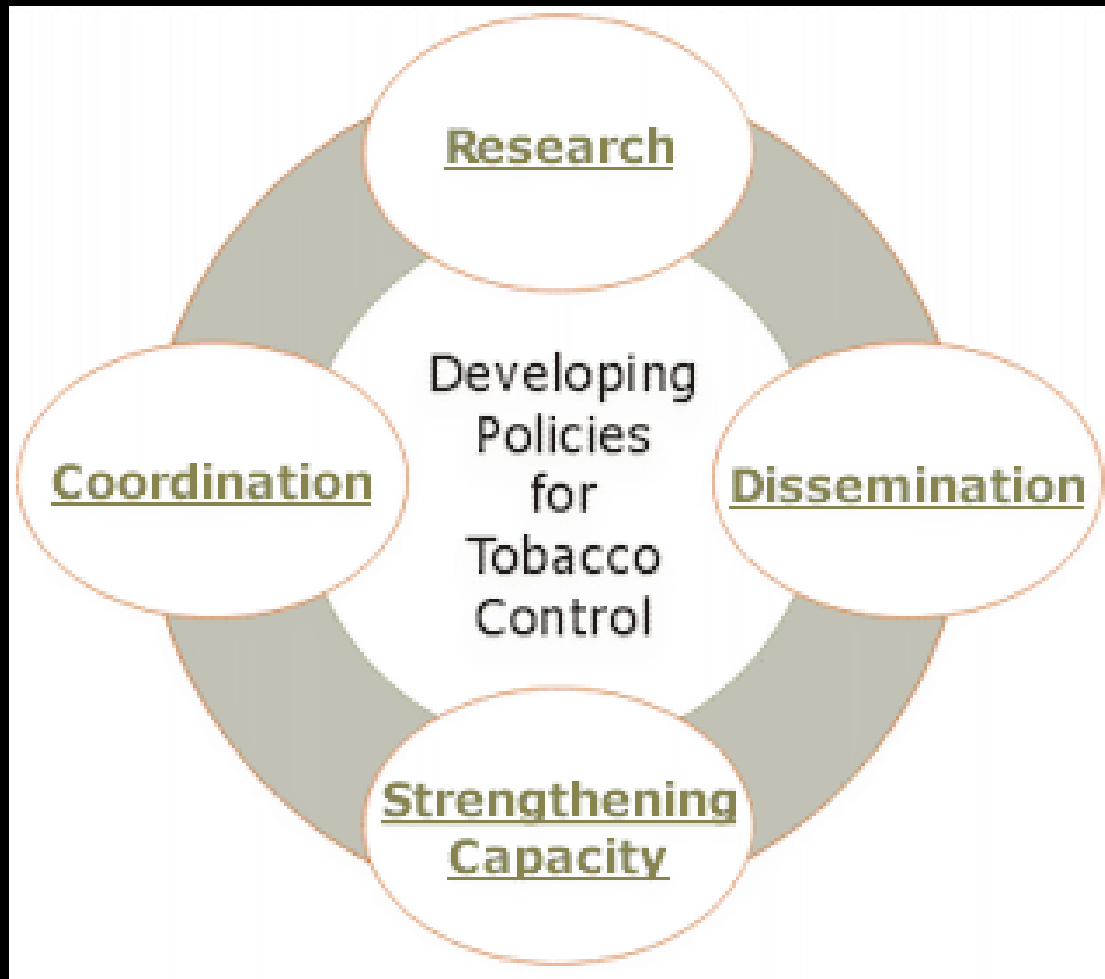
What is it? How does it work?

- ▶ Research for International Tobacco Control (RITC)
- ▶ Tobacco as a risk factor
- ▶ What lessons have been learned in tobacco control
- ▶ Lessons from 6 country studies
- ▶ Example from South Africa

RITC's Mission

To create a strong research, knowledge and funding base for the development of effective tobacco control policies that will minimize the threat of tobacco production and consumption to health and human development in developing countries.

RITC's Strategic Priorities



RITC Focused Research Priority Topics

- ▶ Poverty and Tobacco
- ▶ Tobacco Farming: Health, Livelihoods, Economics and the Environment
- ▶ Health Systems Interventions
- ▶ Globalization, Trade and Tobacco
- ▶ Alternate Forms of Tobacco Use

Tobacco as a Risk Factor

- ▶ Tobacco is an addictive product that is available legally
- ▶ Tobacco products are very inexpensive in many countries
- ▶ Social acceptance of tobacco use in many cultures
- ▶ Perceived by many to contribute to social and psychological well-being
- ▶ Vigorously marketed by powerful multinational corporations
- ▶ Major cause of preventable death and disability globally

What have we learned from tobacco?

Lesson # 1

There is no “magic bullet”

Lesson #1

- ▶ A comprehensive strategy is needed to change social norms and support individual behaviour change
- ▶ This consists of:
 - ▶ Programming
 - ▶ Policy
 - ▶ Mass media
 - ▶ Research
 - ▶ Community development
 - ▶ Industry “denormalization”

Programming

- ▶ Primary and secondary prevention
- ▶ Multi-site (e.g., schools, workplaces, sports facilities, health centres, community based)
- ▶ Appropriate balance between:
 - ▶ Population strategies
 - ▶ High-risk strategies

Policy

- ▶ Policy changes both reflect and institutionalize changing social norms (e.g., smoke-free public places)
- ▶ Must be in sync with public knowledge, and awareness or implementation/enforcement will be difficult
- ▶ Must be evidence based
- ▶ Need to incorporate economic policies as well as health policies (e.g., tobacco taxes)
- ▶ Need to understand the policy process and recognize “policy windows”

Mass Media

- ▶ Used effectively by the multinational industries to create a desire for a product
- ▶ Can be effective in prevention activities (e.g., the Heather Crowe Campaign)
- ▶ Important tool to reach a broad audience and change knowledge and attitudes
- ▶ Advocacy groups are often skilled in the use of mass media

Research

- ▶ Policy-relevant research needed to convince policy-makers and inform programs
- ▶ Some research can be generalized; some must be specific to the country/province/city
- ▶ Need to look at data other than health data; (e.g., economic figures may sway the Minister of Finance; data on poverty and tobacco may be consistent with social agendas)
- ▶ Need to think about how this research can be effectively communicated to policy-makers, as well as the public and scientific community.

Community Development

- ▶ Programming and education at the community level creates awareness, changes social norms at the local level (which, in turn, support behaviour changes) and builds a groundswell of support for social changes at the provincial or national level
- ▶ May promote voluntary compliance with policies rather than requiring costly enforcement mechanisms

What have we learned from tobacco?

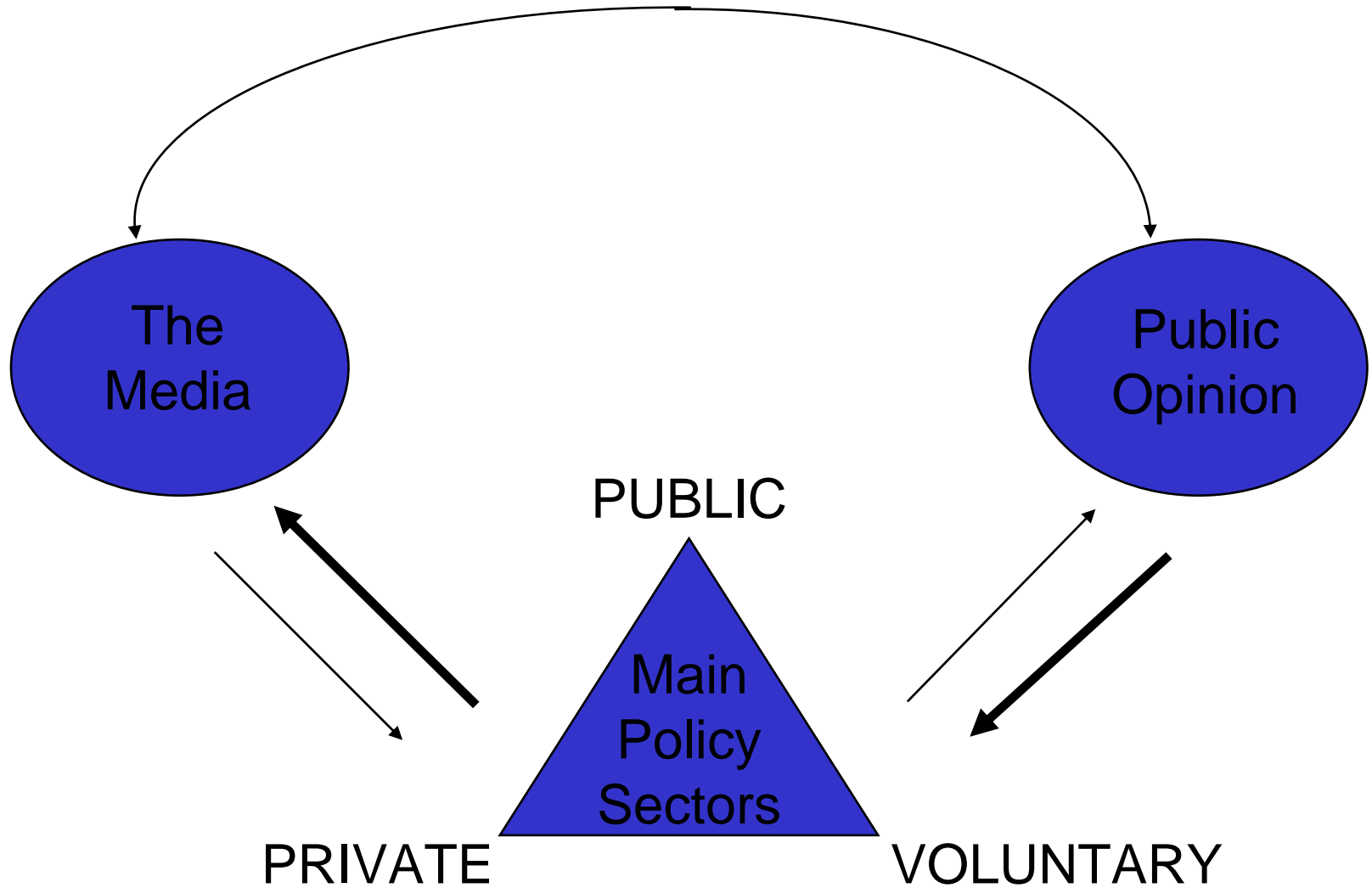
Lesson # 2

All sectors must work together

Coordination of All Sectors

- ▶ Researchers
- ▶ Policy-makers
- ▶ Advocates
- ▶ Practitioners
- ▶ The media
- ▶ Private sector
- ▶ Public

Policy Sectors in Tobacco Control



Source: Waverley Brigden, L. (1997) after Spicker, P. (1995) & Kingdon, J.W. (1995)

What have we learned from tobacco?

Lesson # 3

Understand the politics

Politics

- ▶ Multinational industries have enormous resources and the ability to influence policy-makers
- ▶ They can argue on economic grounds as well as from a health standpoint (e.g. loss of jobs)
- ▶ Ability to provide jobs and manufacturing
- ▶ A problem “solved” in the developed world may emerge in developing countries
- ▶ They are always several steps ahead of us (e.g., waterpipe, harm-reduction tobacco products)
- ▶ Industries will often challenge “health” research

Lessons Learned: 6 Case Studies

- ▶ Legislative successes won in the face of vigorous opposition from an industry striving to protect its profits and market
- ▶ Key role played by NGOs and charismatic individuals with commitment and dedication; through their knowledge and perseverance they became credible spokespersons for their cause and won the ear of policy-makers

Lessons Learned: 6 Case Studies

- ▶ Effective advocacy has to be learned
 - ▶ change is a slow evolutionary process;
 - ▶ Learn to expect setbacks and make use of them to turn defeat into victories
 - ▶ Take advantage of favourable opportunities as they arise
 - ▶ Develop rapid-response, short-term strategies as well as long-term goals
 - ▶ Be creative in seeking allies
 - ▶ Need for optimism and a continuous sustained effort.

Lessons Learned: 6 Case Studies

- ▶ Coalitions brought new skills and perspectives:
 - ▶ Broad-based groups including consumers' rights groups, development agencies, women's rights activists, lawyers, and religious organizations
 - ▶ Personal and institutional objectives and prestige must be set aside for the sake of achieving common goals
 - ▶ Groups have to grapple with organizational and relationship issues that are part of maintaining a smoothly functioning coalition
 - ▶ Not all coalitions survived

Lessons Learned: 6 Case Studies

- ▶ Lack of an organizational home and minimal level of funding make it hard to operate effectively
- ▶ Strong political support and political champions are crucial to success
 - ▶ Political champions may need to win over their own colleagues
 - ▶ Public opinion polls may be effective in demonstrating to politicians clear support for tobacco control policies to protect children and adults

Lessons Learned: 6 Case Studies

- ▶ Significant transformations in social norms can occur
- ▶ The media can have a powerful role in influencing popular opinion
- ▶ Understand the political framework and legislative timetable of the country
- ▶ Legislation must be coupled with attention to implementation and enforcement

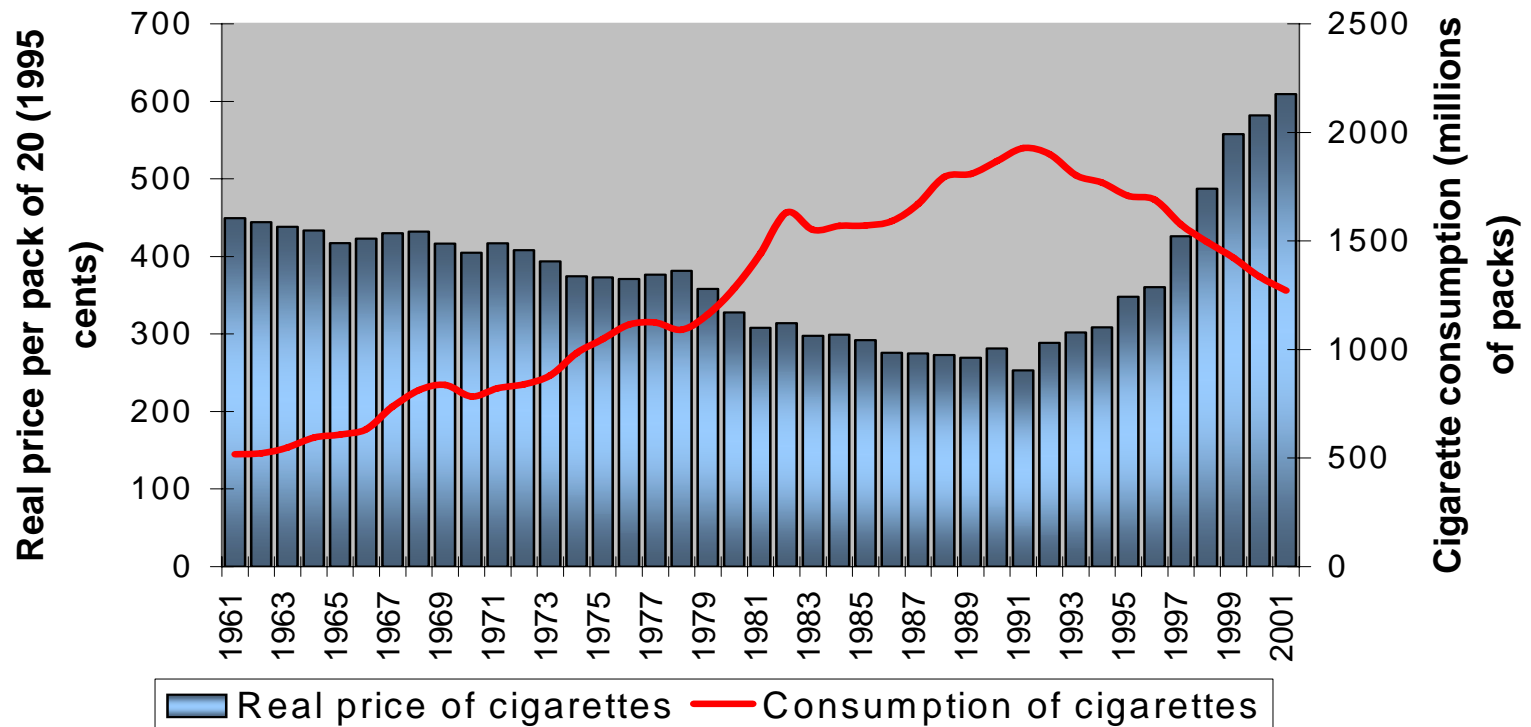
Lessons Learned: 6 Case Studies

- ▶ Sound research is needed for good policy decisions
- ▶ Policies and strategies must be comprehensive
- ▶ It may be necessary to bring together diverse interest groups (e.g., Ministries of Health and Finance)
- ▶ Even when the situation has seemed hopeless, progress has been made
- ▶ Persistence is essential

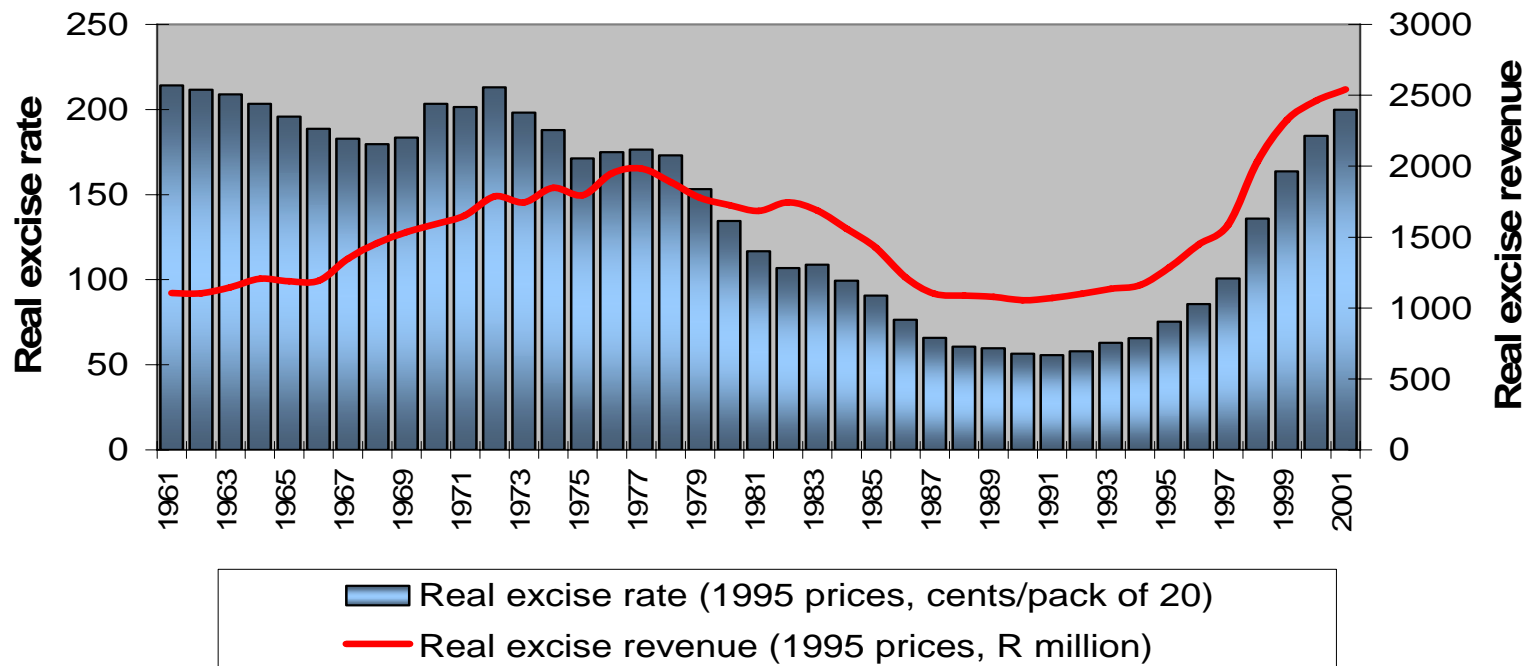
South Africa

- ▶ A “policy window”
- ▶ A “champion” in the Minister of Health
- ▶ Strong advocacy
- ▶ A sound research base
- ▶ “Framing” as both a health and economic issue

Cigarette Prices and Consumption



Cigarette Excise Taxes and Government Revenue



Trends in Cigarette Consumption and Smoking Prevalence

	Year	
	1993	2000
Cigarette consumption (millions of packs)	1,802	1,333
Per capita consumption (packs p.a. aged 15+)	72.6	45.7
Smoking prevalence percentage (15+)	32.6	27.1
Avg. consumption per smoker (packs p.a.)	223	169

Changes in Smoking Prevalence by Gender and Age Group

	1993	2000	Change
Male	51.4	43.8	-7.6
Female	12.9	11.7	-1.2
Aged 16–24	24.0	18.7	-5.3
Aged 25–34	38.7	31.9	-6.8
Aged 35–49	38.5	35.2	-3.3
Aged 50+	23.4	22.5	-0.9

Thank You

Research for International Tobacco Control (RITC)

<http://www.idrc.ca/ritc>

