

Policy Briefing: Draft guidelines for implementation of Article 12 (Education, communication, training and public awareness)

Fourth session of the Conference of the Parties to the WHO Framework Convention on Tobacco Control 15-20 November 2010, Punta del Este, Uruguay

Recommendations

The fourth session of the Conference of the Parties to the WHO Framework Convention on Tobacco Control should decide to:

- adopt the draft guidelines for implementation of Article 12 (Education, communication, training and public awareness);
- request the Convention Secretariat to make accessible, via a website or other appropriate means, national, regional and international resources for tobacco control training and education, communications and public awareness campaigns;
- encourage each Party to provide information and materials to be shared via the website; and
- consider at its sixth session whether to initiate a review of the guidelines for implementation of Article 12.

Background

Article 12 of the WHO Framework Convention on Tobacco Control (FCTC) creates a broad and open-ended obligation on Parties:

“Each Party shall promote and strengthen public awareness of tobacco control issues, using all available communications tools, as appropriate.”

Towards this end, Parties are required to adopt and implement effective measures to promote particular aspects of public awareness, including: broad access to educational and public awareness programmes; public access to certain kinds of information; awareness and participation of agencies and organisations not affiliated with the tobacco industry in developing and implementing tobacco control programmes and strategies; and training or sensitisation and awareness programmes for persons such as health workers, community workers, social workers, media professionals, educators, decision-makers and administrators.

Parties' obligations under Article 12 reflect a core guiding principle of the FCTC: 'Every person should be informed of the health consequences, addictive nature and mortal threat posed by tobacco consumption and exposure to tobacco smoke' (Article 4.1). Recognising the importance of effective implementation of Article 12, the Conference of the Parties (COP) at its second session (COP-2) established a working group to begin the elaboration of guidelines for implementation of Article 12 and to present a progress report to the third session (COP-3).¹ The progress report included an incomplete but substantial first draft, which COP-3 requested the working group complete for consideration by the fourth session of the COP (COP-4).²

¹ 'Elaboration of guidelines for implementation of Articles 5.3, 9 and 10, 11, 12 and 14' (World Health Organization, Conference of the Parties to the WHO Framework Convention on Tobacco Control, second session, decision FCTC/COP2(14)).

² 'Elaboration of guidelines for implementation of Article 12 of the Convention (decision FCTC/COP2(14))' (document FCTC/COP3/8); 'Elaboration of guidelines for implementation of Article 12 (Education, communication, training and

The task given to the working group was a difficult one. Practices with respect to tobacco control communications vary widely between Parties. In part this reflects differences in the media and communications landscapes between countries and regions. It also reflects significant differences in the resources that Parties have at their disposal for training, education and mass media campaigns. These disparities make it difficult to formulate generally applicable recommendations for the implementation of Article 12.

To add to the complexity of the task, the quite considerable evidence base on effective tobacco control communications and awareness-building interventions is heavily skewed towards high-resource countries. Over the last few years, particularly as a result of the availability of international donor funding for mass media campaigns in some low- and middle-income countries, the evidence base has expanded. But we are still far from having sufficient studies on tobacco control communications in the low-resource settings in which much of the world's population lives.

It should be noted that Article 12 covers not only mass media communications, but also many other means of communication, including the education system, training of health workers (including grassroots health workers, and all those responsible for the implementation of smoke-free measures), and unpaid or low-cost communications such as warning labels on tobacco products, or press conferences or other events that generate media coverage (known as 'earned media'). As such, it touches a substantial part of tobacco control programming and interventions.

The Article 12 working group was set up by decision FCTC/COP2(14), which mandated the working group to begin preparing guidelines for implementation of the article and asked for a progress report at COP-3. This progress report was duly submitted at COP-3 (FCTC/COP/3/8) and included an incomplete but substantial first draft, which was then completed for the fourth meeting of the Conference of the Parties.

The draft guidelines

FCA congratulates the working group for its hard work and efforts to synthesise a wide and fluid area of tobacco control in the draft guidelines it has presented to COP-4 (document FCTC/COP/4/7). FCA supports the adoption of the draft guidelines, and would like to highlight a few of their important points, which are firmly grounded in the Parties' obligations under Article 12 and various other provisions of the FCTC:

- 1) **The emphasis on human rights.** Health communications efforts are sometimes evaluated purely instrumentally, on the basis of their short-term impact on behaviour. This is a restrictive view, and the working group is to be commended for taking a broader view emphasising the exercise of fundamental human rights and freedoms. Citizens have the right to full and complete information about significant threats to their health and what can be done about them. (See, in particular, the guiding principles in para 3.)
- 2) **Involving civil society.** Non-governmental organisations frequently have considerable experience in effective communications on health issues. Moreover, as non-governmental actors, they may find it easier to engage in high-impact, low-cost media advocacy, which can play a key role in tobacco control, particularly in low-resource settings. (See paras 49-57.)
- 3) **Protection of public health policies from the tobacco industry.** Governments that seek to implement evidence-based tobacco control measures are regularly approached by the tobacco industry, which offers its "cooperation" in developing and running so-called youth smoking prevention campaigns. Industry-sponsored campaigns of this type have a very poor track record³ and should be avoided. Parties also need to ensure that their citizens are properly informed of the tobacco industry's central role in propagating and prolonging the tobacco epidemic. (See in particular paras 58-65.)
- 4) **Sharing resources and experiences.** High-impact communications materials can be expensive to develop. However, experience has shown that re-using or adapting materials

public awareness)' (World Health Organization, Conference of the Parties to the WHO Framework Convention on Tobacco Control, third session, decision FCTC/COP3(11)).

³ See, for example, Chaloupka FJ, Szczytko G, Flay B, O'Malley PM, Johnston LD. Effect of televised, tobacco company-funded smoking prevention advertising on youth smoking-related beliefs, intentions, and behaviour. *Am J Public Health.* 2006 Dec;96(12):2154-60.

from other countries or regions can be a very effective way of reducing costs and accelerating communications efforts once they have been pre-tested. (See paras 66-70.)

- 5) **The crucial role of research and evaluation.** Formative research and evaluation is crucial, particularly in low-resource settings, to ensure that materials communicate as desired and have a high likelihood of affecting awareness, knowledge, attitudes, behaviours and social norms. It is also critical to evaluate outcomes. (See the guiding principle in para (3)(v) and paras 34-40.)

Suggested supplementary action

It is essential for Parties to have access to concrete resources, including mass media campaign materials that may be re-used or adapted cost-efficiently; how-to guides on ways to stretch limited resources and ways to develop and implement effective campaigns; and resources for training on tobacco control. Particularly for low- and middle-income Parties, international cooperation is essential to ensure access to such resources.

Taking into account Parties' obligations in respect of international cooperation, particularly under Article 22 (Cooperation in the scientific, technical and legal fields and provision of related expertise), FCA recommends a mechanism be established to make national, regional and international resources for tobacco control training and education, communications and awareness campaigns, including earned media campaigns, accessible to Parties. COP-4 should request the Secretariat to establish a web page or site, or some other appropriate mechanism, and should strongly encourage Parties, WHO's Tobacco-Free Initiative and civil society not affiliated with the tobacco industry to provide materials and information.

Because Article 12 implementation efforts are in their infancy in many places and the evidence base is underdeveloped in low-resource Parties, FCA also recommends that the COP decide to revisit the guidelines for implementation of Article 12 at a subsequent session. FCA considers that the sixth session of the COP (COP-6), which may be expected to be held four years after COP-4, should consider whether there is a need to initiate a review of the guidelines.