

Livable Cities Newsletter



December 2013 Issue 9

Focusing on NCDs and the lessons learned from tobacco control

This newsletter is used to provide updates and information to the Livable Cities Network. The theme for this edition is how the lessons learned from tobacco control can be applied to the work many Livable Cities partners are doing on Noncommunicable Diseases (NCDs). The information in this newsletter has been taken from the document *Broadening the Focus from Tobacco Control to NCD Prevention: Enabling Environments for Better Health*. Please share this newsletter with your partner groups and anyone who might be interested.

Why is working on NCDs important?

The four most common NCDs are cardiovascular diseases (such as heart attacks and stroke), cancers, chronic respiratory diseases, and diabetes. NCDs have gained global attention in recent years because of their dramatic increase around the world and because of their growing burden in low- and middle-income countries. For decades, the international health community has been working to address NCDs through its focus on tobacco control. However, to reduce the burden of NCDs and prevent them from becoming an even greater burden worldwide, it is important to focus on *all* of the modifiable risk factors: tobacco use, physical inactivity, unhealthy diets, and alcohol abuse.

Key messages for Livable Cities partners to remember about NCDs include:

- ✧ NCDs account for a large portion of death and illness in the world
- ✧ NCDs are thwarting poverty reduction and economic development efforts
- ✧ NCDs have major economic costs and can devastate low-income families
- ✧ NCDs have four shared modifiable risk factors: physical inactivity, unhealthy diets, tobacco use, and excessive use of alcohol
- ✧ Many NCDs can be prevented or dramatically reduced by addressing the risk factors
- ✧ Expenditures to reduce NCD risk factors will result in reduced morbidity and will save the economy in both healthcare costs and productivity loss.

Many of the deaths related to NCDs are preventable. Lots of groups have been working on NCDs for many years through their tobacco control programs. The tobacco control experience has demonstrated that, to be effective, prevention efforts must be comprehensive and focus on policies that create more health-promoting environments.

Lessons learned from tobacco control

As a result of the efforts of tobacco control advocates from around the world we have a much greater understanding of the factors that influence behaviour. Behaviour is influenced at multiple levels. One way to explain these different levels is to look at the Social-Ecological Model. What this model explains is that the choices and decisions made by smokers and non-smokers are influenced by:

- **Societal Factors:** the influence of national level policies and broader social norms. For example, taxation makes tobacco more expensive, which reduces its desirability, especially among young and low- income people.
- **Community Factors:** the influence of the physical environment. For example, having smoke-free restaurants makes it easier for people not to smoke.
- **Social Factors:** the influence of friends and peers. For example, if their friends or family members smoke, people are more likely to smoke.
- **Individual Factors:** the influence of an individual's attitudes, knowledge, and beliefs. For example, if a person believes that smoking is cool, he is more likely to smoke.

What was learned in tobacco control was that no single intervention on its own was sufficient to reduce tobacco use within the population. It is important to change the societal and community factors **first** before trying to change social and individual factors. Making sure that the places where people live, work and play support healthy behaviour is more likely to lead to success in changing attitudes and behaviours than is focusing on individual factors alone.

There are various policy measures tobacco control advocates have used to reduce tobacco use. These measures include banning all forms of advertising and sponsorship, making more places smoke-free, improving package warnings, raising taxes on tobacco products, and creating smoke free public places. These efforts make tobacco less affordable and available, and are all society or community factors that contribute to an enabling environment.

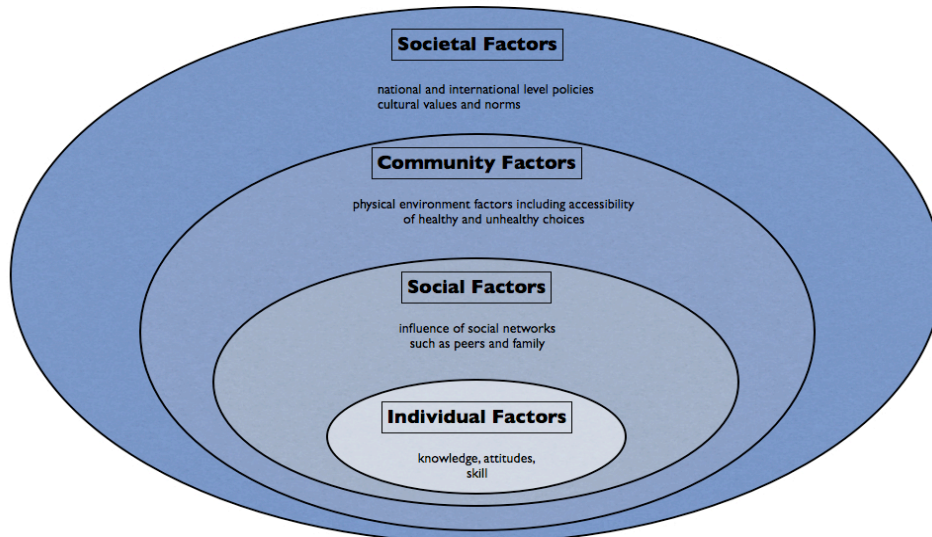


Figure 1: Social-Ecological Model. Source: CDC (2007). *CDC's State-Based Nutrition and Physical Activity Program to Prevent Obesity and Other Chronic Diseases: Social-Ecological Model*. HHS/CDC/NPAO. 2007.

Applying the lessons from tobacco control to NCDs

An important lesson from tobacco control is that there are proven, effective policies that can reduce the harms caused by tobacco. By focusing on policies related to the physical environment, the fiscal environment, and the information environment, similar policy changes can be used to impact behaviour related to other risk factors: diet, physical activity, and alcohol use. Working on policies will be critical if we want to see lasting behaviour change. Examples of relevant policies include:

Physical Environment Policies

The physical environment has an enormous influence on people's daily behaviour. Tobacco control advocates focus on creating smoke-free-spaces as a way of creating a physical environment that changes social norms, supports people who wanted to quit smoking, and protects people from the harms of second-hand smoke. Policy measures that aim to improve the physical environment for physical activity include improving the way that communities are designed so that people are able to reach their destinations by foot or bicycle in a safe, convenient, and enjoyable manner. Policies that positively affect community access and availability of healthy foods include restricting the sale of unhealthy foods, ensuring that local fresh fruit and vegetable markets are widely available, and supporting the establishment and maintenance of community gardens.



Fiscal Environment Policies

The most effective method in tobacco control has been raising the cost of tobacco products through taxation and other fiscal measures. This has, in turn, reduced the appeal and affordability of smoking. There are many examples that could be applied to other NCD risk factors. Raising taxes on unhealthy foods and providing subsidies to make healthy foods more available and more affordable would create supportive environments for healthy diets. Increasing the costs associated with driving a motor vehicle, such as raising taxes on automobiles and their usage, while reducing the tax on bicycles and increasing subsidies for public transport, would create supportive environments for physical activity.

Information Environment Policies

The information environment includes all of the information that is presented to the public about a particular product or issue. Tobacco control advocates have successfully stopped misleading messages about tobacco use through bans on cigarette promotion and the use of mandatory product labelling that explains the risks of using tobacco. Advertising bans and regulations, as well as labelling, specifically address the information environment and can be adapted to other risk factors. Ensuring appropriate food labelling and banning advertising for alcohol are two such examples. Likewise, safe walking and cycling routes can be supported by well-marked signage and advertising programmes.

While the specific details are important, the key issue is that what has worked with tobacco control will also work with NCDs: a focus on changing policies will lead to changes in the physical, fiscal, and information environment and will, in turn, lead to positive behaviour change.

Helpful Resources

There are a number of helpful resources on the HealthBridge website (www.healthbridge.ca) that might be of interest to those Livable Cities partners working on NCDs and interested in the lessons from Tobacco control. Check out the following resources:

Broadening the Focus from Tobacco Control to NCD Prevention: Enabling Environments for Better Health.

This guide is full of information you can use to start working on physical activity, healthy diets, and alcohol control.

From the Field: Building and maintaining strong networks to address tobacco, poverty, and development.

This document might be of interest to those groups interested in building networks and making the links between NCDs and poverty.

Using Media and Research for Advocacy: Low Cost Ways to Increase Success.

This document provides some ways that the media could support Livable Cities programs.

Next issue...

In the next issue we will highlight issues related to gender and transportation.

Interested in becoming a Livable Cities Network member?

To become part of the Livable Cities Network, e-mail Kristie Daniel, Program Director, Livable Cities at kdaniel@healthbridge.ca.



HealthBridge's Livable Cities program aims to improve health, gender equity, poverty reduction, and the environment in developing countries by focusing on how cities are planned, designed, built, and adapted.

HealthBridge's Livable Cities program works in partnership with local NGOs, academic institutions and governments in developing countries. We help local partners identify needs, develop and implement appropriate solutions, apply innovative and sustainable practices, and promote effective policies through research and action.

1 Nicholas Street, Suite 1004
Ottawa, ON K1N 7B7 CANADA
www.healthbridge.ca
Tel. +1.613.241.3927
Fax. +1.613.241.7899