Global Tobacco Control and NCD Prevention: Learning and advancing

February 5, 2014 Ottawa, Canada Meeting Report



Acknowledgements

This report was prepared by the Global Tobacco Control Forum (the Forum), an informal network of Canadian organizations with a shared interest in global tobacco control.

Special thanks goes to the leadership and staff of the HealthBridge Foundation of Canada and Physicians for Smoke-free Canada who organized the meeting and all Forum members who joined the meeting: Canadian Cancer Society, Canadian Public Health Association, Heart and Stroke Foundation of Canada, The Lung Association, and Non-Smokers' Rights Association.

The Forum would like to also extend its thanks to organizations that accepted the invitation to the meeting and shared their views, knowledge, and perspectives, namely: Canadian Diabetes Association, Canadian Hypertension Advisory Committee, Red Cross Canada, and the World Federation of Public Health Associations.

The Forum meeting was made possible with the aid of a grant from the International Development Research Center, Ottawa, Canada.

Contents

Introduction	∠
Meeting Objectives	
Meeting Format, Presentations and Discussions	
Meeting Outcomes	
Annex 1: Meeting Agenda	
Annex 2: List of participants	

Introduction

Non-communicable diseases (NCDs) represent one of the major threats to sustainable development in this century; affecting developed and developing countries alike. Addressing NCD risk factors – tobacco, alcohol, unhealthy diet, and physical inactivity – is by far more cost-effective than treatment of diseases such as cancer or heart diseases. Yet no consensus on effective interventions on NCD risk factors exists; the only exception being for tobacco control. The experience accumulated in tobacco control shows what policy and advocacy strategies have worked well and which ones less so. These lessons learned should benefit the work on other NCD risk factors.

In February 2014, the Global Tobacco Control Forum (the Forum), an informal network of Canadian organizations with a shared interest in global tobacco control, with financial support from the International Development and Resource Center (IDRC), organized a 1-day meeting to share experiences on NCD prevention and to exchange knowledge about what is being done – and can be done – to enhance Canada's global contribution in this area.

The meeting was attended by the members of the Forum who work both in tobacco control and in NCD prevention and by organizations working on NCDs and international development. The meeting was designed to allow for an exchange of learning and experiences among the participants and to highlight the value of sharing experiences.

Meeting Objectives

The overall purpose of the meeting was knowledge exchange between tobacco control and other areas of NCD prevention, both among the Canadian participants and between Canadians and advocates from Asia. The meeting had the following objectives:

- Exchange knowledge on lessons learned from Tobacco Control (TC) and prevention of NCDs, with a focus on policy-based solutions.
- Review strategic vision of the Forum and possibly expand its mandate & membership to include NCD prevention.

Meeting Format, Presentations and Discussions

The format of the meeting allowed for participants to exchange experiences on NCD prevention, either through individual presentations or moderated discussions, in the morning. The afternoon session was dedicated to reviewing the mandate of the Forum, its membership and future work.

Morning session

Following general introductions, Yvona Tous on behalf of HealthBridge provided an overview of global discussions on NCD prevention and control. Her presentation focused on international commitments agreed at the United Nations High-level Meeting on NCDs in 2011 and their fulfillment to date. She noted that while progress has been made in agreeing and creating a global infrastructure to address NCDs, the resources to take sustained action, particularly in developing countries, are still missing.

Following Yvona's presentation, Melodie Tilson, Policy Director for Non-Smokers Rights Association, described potential benefits and threats for tobacco control as a result of greater global attention on NCDs. She made the case that the opportunities in attracting broader commitments and increased resources for tobacco control are greater than potential threats (such as diluting tobacco control efforts or

tobacco and other industries undermining health policy).

A brief discussion on the position of tobacco control within the NCD movement followed. Most participants highlighted the importance of tobacco control as a key intervention to address NCDs. All participants agreed that the experience of tobacco control should be applied to actions on other NCD risk factors. Two aspects of tobacco control experience were highlighted: legal (rather than voluntary) obligations, and focus on the root cause of the problem, e.g., the tobacco industry.

After a short break, Melodie delivered her second presentation, this time on specific experiences of the Canadian tobacco control movement. The civil society movement around tobacco taxation was introduced as a case study to demonstrate the complexities of campaigns on public health policies which do not necessarily fall under the responsibilities of ministry of health.

The presentation was followed by an exchange of views on whether similar campaigning strategies can be used to promote healthy diets, increased physical activity, or reduced consumption of alcohol. The following points were made:

- Action on NCD risk factors can greatly benefit from advances in tobacco control, but it is important to
 keep in mind that the NCD movement and momentum is only just beginning; obesity is probably the
 only issue for which there is enough public support to take strong policy measures.
- Tobacco products have a unique status, they are 100% harmful which is not the case for most food or alcohol products; the only exception might be sweet and sugar beverages (SSB).
- The framing and messaging of NCD campaigns will be extremely important, the health aspects need to be highlighted and arguments related to the "nanny state" addressed.

With regard to the policies to reduce harmful use of alcohol, participants agreed that a strong lobby of the industry and state-owned monopolies is likely to slow progress on introducing effective public policy measures.

In terms of transportation and urban design, it has been recognized that the situation of developed (highly urbanized) countries and low- and middle-income countries (currently going through a rapid urbanization) is different and hence different policy and advocacy strategies might be needed. In the case of developing countries, many shortcomings in urban design currently experienced in the global North can be easily prevented.

Kristie Daniel, HealthBridge Program Director for Livable Cities, provided a brief snapshot of the realities of Asian countries, the burden of NCDs in the region, and the alarming exposure to risk factors. Kristie also introduced the work of HealthBridge and its partners in Bangladesh, Nepal, and Vietnam. The experience of HealthBridge partners in India was introduced through a short video on civil society efforts to promote physical activity and recreational spaces in Nagpur.

Participants presented introductions on current efforts to address NCDs in Canada:

- Jane Tsai and Jake Reid from the Canadian Diabetes Association introduced their work on smoking cessation in the context of diabetes prevention and treatment;
- Tara Duhaney, Policy Director at Hypertension Advisory Committee, who joined the meeting via a telecom from Calgary, presented on the current work of the Committee and its focus to restrict food

and beverage advertising to children;

- Joel Walker, representing Canadian Cancer Society (CCS), introduced the various streams of CCS'
 work such as the work to reduce exposure to occupational carcinogens, radon or UV and indoor
 tanning; she also introduced the objectives and ongoing activities of the Chronic Disease Prevention
 Alliance of Canada (CDPAC);
- Lesley James, speaking on behalf of Heart and Stroke Foundation of Canada, provided a brief
 overview of ongoing campaigns on reducing consumption of trans fats and sodium and alerted the
 audience to an upcoming campaign on child obesity which will be launched in the fall/winter of 2014.

Afternoon session

In the afternoon, Francis Thompson, Tobacco Control Advisor at HealthBridge, provided a brief summary of the presentations and discussions in the morning. He focused on the importance of policy measures, and pointed out some existing difficulties – lack of political will and resources – to introduce strong measures on risk factors other than tobacco. He invited participants to share initial comments and observations.

The group discussion addressed the following topics: strength/fragmentation of the NCD movement, work on prevention versus treatment, recent work (and failure) to introduce regulatory measures on advertising standards on marketing for kids, and the benefits of sharing experience and best practices of tobacco control. The group recognized the benefits of learning from past experiences of tobacco control, as well as differences in today's policy making process, the influence of social media, and the NGO funding situation.

Joelle Walker presented on Canada's contributions to global efforts to fight NCDs and to address key NCD risk factors. The rationale for action of Canadian NGOs at the global level was that the internationally agreed commitments on NCDs would eventually trickle down to the federal and provincial level. This is yet to be seen in the Canadian context.

Joelle's presentation stimulated a discussion on Canadian development and funding priorities. Several participants noted the current focus is on maternal and child health and public-private partnerships. New development priorities will likely be introduced after the current Millennium Development Goals expire in 2015. A number of people also raised a point that Canada's role in leading on actions to address NCDs will depend on whether Canada has experience and expertise in the field, such as it had in tobacco control in the late 1990s.

The Future of the Forum

The last segment of the meeting focused on the role of the Forum in advancing global tobacco control and potentially NCD prevention more broadly. Neil Collishaw, Research Director at Physicians for a Smoke-Free Canada, introduced the history of the Forum and highlighted its collaborative, action-oriented, and efficient approach which contributed to advance tobacco control globally. As a result of the Forum's involvement and mobilization of Canadian government resources, many tobacco control advocates in developing countries could dedicate their time and efforts to support negotiations of the global tobacco control treaty, the Framework Convention on Tobacco Control (FCTC), and work on its implementation. Rob Cunningham, Senior Policy Analyst at the Canadian Cancer Society, also highlighted the Forum's specific function to monitor FCTC implementation in Canada by issuing regular Shadow Reports.

Participants discussed the Forum's potential future mandate and membership. All participants agreed

that tobacco control needs to stay at the heart of Forum's work and that broadening its mandate should serve specific purposes, such as attracting new stakeholders or funding diversification.

Meeting Outcomes

Lessons learned from tobacco control in Canada:

The following five key aspects of tobacco control work and campaigns were identified as instrumental to achieving successes of the movement in Canada:

- **Act together; think big =** success of tobacco control movement can be linked to broad-based support united behind a common goal which is far-reaching and inspiring
- Adopt a comprehensive, multi-sectoral approach = policy interventions must be implemented across all levels of government and by its various branches which work hand-in-hand with civil society
- **Use mass media/public education to prepare the ground =** mass media counter-advertising on television, radio and billboards generate public support for policy change
- **Prioritize policy measures** = 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
- Focus on the industry = public needs to become aware of industry's motives (sales/profit); tactics (lie, delay, confuse/obfuscate); for these reasons, voluntary agreements/codes of practice by the industry should be rejected

Key lessons learned from Asian partners:

It was recognized that developing countries face similar challenges when it comes to exposure to NCD risk factors (such as tobacco use or unhealthy food), but that in certain cases their situation is fundamentally different from the Canadian context (public spaces and related physical (in)activity). **Urban planning** can immensely contribute to physical activity or lack of thereof and hence influence the NCD epidemic in developing countries.

Canadian involvement in global NCD control

The group agreed that currently NCDs are not perceived as a development priority, be it in Canada or globally. **Negotiations on future global development priorities** (the post-2015 development agenda), as well as **federal elections** in 2015, provide opportunities to shape Canadian development objectives. Participants noted that, while they are willing to advocate for Canadian commitments to the prevention of NCDs globally, as their work is highly focused on domestic initiatives, they would need simple messages to deliver to their constituents.

The future of the Forum

The group agreed that while expanding the Forum's mandate and membership has its value, tobacco control should stay central to the Forum's work. Furthermore, the group acknowledged that their mandates are very focused on domestic initiatives, making it difficult for them to invest time and resources in international actions. A number of participants volunteered to discuss the next topic of the Shadow report, which should be released in the fall of 2014. All participants were requested to share ideas on which organizations or individuals from the NCD or development community should be invited to join the Forum.

Key priority areas for action on NCD risk factors in Canada:

In addition, based on the lessons learned from tobacco control, participants of the meeting agreed that policy measures to address **obesity** are likely to receive broad-based public support in Canada. As a first step, action on **sweet and sugar beverages** may generate initial campaign victories. The broader focus of the campaign should be to introduce **regulatory measures on advertising standards on marketing for kids**.

Conclusions

Overall the meeting provided a great opportunity to learn from tobacco control experience and exchange views on how other NCD risk factors should and could be addressed in Canada and globally. Many participants recognized that this meeting was a first opportunity to discuss exclusively policy interventions on NCD risk factors and exchange views on best practices.

Annex 1: Meeting Agenda

Global Tobacco Control and NCD Prevention: learning and advancing

Wednesday 5 February, 2014 9:00 am – 4:45 pm, Residence Inn by Marriott, 161 Laurier Ave W, Ottawa Lady Carleton Room, 2nd floor

Time	Topic	
9:00 – 9:30	Arrival of participants	
9:30 - 9:40	Welcoming remarks + introductions	
Part I: international scene and knowledge exchange		
9:40 – 9:55	NCD Summit and the follow-up – where are we heading	
9:55 – 10:10	Opportunities and threats for tobacco control within the NCD universe	
10:10 – 10:30	Successful policy-based approaches to TC	
10:30 – 10:45	Snack	
10:45 – 11:30	HealthBridge experience in Asia (presentation and videos)	
11:30 – 12:00	Successful policy-based approaches to NCD prevention	
12:00 – 12:30	Lessons learned for NCD prevention: discussion	
12:30 – 13:30	Lunch	
Part II: Strategic reflections on the current opportunities for the Forum to promote effective		
TC/NCD interventions in developing countries		
13:30 – 13:40	Where do we go from here?	
13:40 – 14:00	The NCD wave and the Canadian response – NGO perspectives	
14:00 – 14:30	The political horizon & what it means for TC and NCDs: discussion	
14:30 – 14:45	Snack	
Part III: Forum's mission and future activities		
15:00 – 15:30	The origins of the Forum and what we learned along the way	
15: 45 – 16:30	Forum's future: • Mandate and membership – expand to NCD prevention? • How can we be positioned to act within a year? • Define next steps	
16:30 – 16:45	Closing of the meeting	

Annex 2: List of participants

NAME	ORGANIZATION
Melodie Tilson,	Non-Smokers' Rights Association
Rob Cunningham	Canadian Cancer Society
Manny Arango	Heart and Stroke Foundation of Canada
Joelle Walker	Canadian Cancer Society
Lesley James	Heart and Stroke Foundation of Canada
Jane Tsai	Canadian Diabetes Association
Jake Reid	Canadian Diabetes Association
Connie Côté	The Lung Association - National Office
Jim Chauvin	WFPHA
Cynthia Callard	Physicians for a Smoke-Free Canada
Neil Collishaw	Physicians for a Smoke-Free Canada
Sian FitzGerald	HealthBridge
Francis Thompson	HealthBridge
Kristie Daniel	HealthBridge
Yvona Tous	HealthBridge
Luis Caceres	СРНА
Tara Duhaney	Canadian Hypertension Advisory Committee
Salim Sohani	Red Cross Canada