



SFP Position Paper on Tobacco Control Research

(Submission to the European Commission on the Role of EU Research Programmes in Promoting the Obligations under FCTC Article 20)

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Key messages

1. **Effective, rapidly implemented policies have a great potential to reduce the burden and the number of deaths caused by tobacco.** Policy-relevant research needs to identify whether policies have an impact on the attractiveness, consumption and mortality and morbidity from tobacco and, if so, how large the impact is. Strong evidence-based measures that reduce tobacco-caused death and harm have to be identified and then implemented as quickly as possible.
2. **While some excellent tobacco research exists, current tobacco research is unevenly distributed across the EU and rarely evaluates policy interventions.** The EU lacks robust methodologies for measuring the projection of likely changes in smoking prevalence and for analysing and evaluating the health, social, economic and environmental impacts of different policy initiatives related to tobacco control. The analysis and evaluation of EU tobacco control initiatives is currently failing to meet policy needs.
3. **EU action is needed on FCTC Article 20 to improve research, surveillance, collaboration, and information exchange on tobacco.** This will help to improve the development of evidence-based policy, reduce inequalities in tobacco control policy and research across Europe and assist the EU to fulfil its obligations under international treaties and agreements.

Policy asks:

- **Enforce FCTC Article 20 by dedicating a budget line to tobacco research** and setting up a Centre of Excellence to promote multi-disciplinary collaboration and help fill the gaps in tobacco research
- **Establish a designated FCTC Article 20 tobacco research committee based on the provisions of the Horizon 2020 Specific Programme** to provide an adequate infrastructure to foster and coordinate tobacco control research across the EU.

Background

The burden of tobacco consumption

Tobacco consumption is the single largest avoidable health risk in the European Union and globally. It is the **most significant cause of premature death and ill health**, responsible for nearly 700,000 deaths in the EU and over 6 million worldwide every year¹. Many forms of cancer, cardiovascular and respiratory diseases are linked to tobacco use, and every other smoker dies prematurely because of smoking. In addition, smokers experience more life years in poor health, impacting productivity and healthcare costs.

Despite considerable progress made in recent years, **more than one in four Europeans smokes**². Large inequalities exist within the EU with regard to tobacco prevalence and the level of tobacco control policy. More action is needed to implement effective policies, improve existing initiatives, and share practice across the EU and beyond.

How can tobacco policy research advance policy and practice?

By helping to prevent and alleviate the harms caused by tobacco, research can make a strong contribution to the development and implementation of effective tobacco policies. In order to exploit this potential, policies have to be monitored and their impact has to be assessed regularly. **Research which involves citizens, smokers and patients suffering from tobacco-related disease can help to tailor interventions and policies to the needs of Europeans**, particularly those that are most affected by the tobacco epidemic.

Tobacco policy research is irreplaceable in policymaking: It provides baseline data and helps to assess the health, social, and economic impact of policies. It also helps to identify potential unintended consequences of public health interventions and policies and can support the adaptation of policies after they are introduced. Drawing on tobacco research, practitioners and policymakers can understand which measures work to reduce tobacco consumption, why, where, and under what circumstances. This allows them to distinguish between interventions that are worth implementing and those which are not, based on time, culture and context. Research helps policymakers to judge which policies are most effective in reaching vulnerable populations, modify policies which have proven to lack effectiveness, and prioritise effective policies which help to reach the anticipated goals. Robust arguments are needed, for example, in rebutting transnational tobacco corporations that increasingly question tobacco policies for lacking an evidence base.

Evidence from other countries and examples of best practice are particularly valuable in developing interventions for, and transferring/adapting policies to, local legislatures. Comparative research helps to monitor progress across EU Member States and to compare and benchmark own results.

Framework Convention on Tobacco Control (FCTC) obligations

The FCTC is the world's first global health treaty and, at 181 Parties, one of the most widely-embraced. **The EU and all EU Member States have signed and ratified the FCTC** and undertook a legal obligation to implement its provisions which outline the "gold standard" for tobacco control and helps countries to adopt and implement the policies that are most effective in protecting people from the scourge of

¹ http://ec.europa.eu/health/tobacco/policy/index_en.htm

² http://ec.europa.eu/public_opinion/flash/fl_253_en.pdf

tobacco. The EU has a legal obligation to coordinate research at EU level, to facilitate Member States to work together, to reduce research inequalities and to provide assistance to developing countries to advance tobacco control.

FCTC Article 20 states:

1. The Parties undertake to develop and promote national research and to coordinate research programmes at the regional and international levels in the field of tobacco control.

Towards this end, each Party shall:

(a) initiate and cooperate in, directly or through competent international and regional intergovernmental organizations and other bodies, the conduct of research and scientific assessments, and in so doing promote and encourage research that addresses the determinants and consequences of tobacco consumption and exposure to tobacco smoke as well as research for identification of alternative crops; and

(b) promote and strengthen, with the support of competent international and regional intergovernmental organizations and other bodies, training and support for all those engaged in tobacco control activities, including research, implementation and evaluation.

2. The Parties shall establish, as appropriate, programmes for national, regional and global surveillance of the magnitude, patterns, determinants and consequences of tobacco consumption and exposure to tobacco smoke. Towards this end, the Parties should integrate tobacco surveillance programmes into national, regional and global health surveillance programmes so that data are comparable and can be analysed at the regional and international levels, as appropriate.

3. Parties recognize the importance of financial and technical assistance from international and regional intergovernmental organizations and other bodies. Each Party shall endeavour to:

(a) establish progressively a national system for the epidemiological surveillance of tobacco consumption and related social, economic and health indicators;

(b) cooperate with competent international and regional intergovernmental organizations and other bodies, including governmental and nongovernmental agencies, in regional and global tobacco surveillance and exchange of information on the indicators specified in paragraph 3(a) of this Article; and

(c) cooperate with the World Health Organization in the development of general guidelines or procedures for defining the collection, analysis and dissemination of tobacco-related surveillance data.

4. The Parties shall, subject to national law, promote and facilitate the exchange of publicly available scientific, technical, socioeconomic, commercial and legal information, as well as information regarding practices of the tobacco industry and the cultivation of tobacco, which is relevant to this Convention, and in so doing shall take into account and address the special needs of developing country Parties and Parties with economies in transition.

Each Party shall endeavour to:

(a) progressively establish and maintain an updated database of laws and regulations on tobacco control and, as appropriate, information about their enforcement, as well as pertinent jurisprudence, and cooperate in the development of programmes for regional and global tobacco control;

(b) progressively establish and maintain updated data from national surveillance programmes in accordance with paragraph 3(a) of this Article; and

(c) cooperate with competent international organizations to progressively establish and maintain a global system to regularly collect and disseminate information on tobacco production, manufacture and the activities of the tobacco industry which have an impact on the Convention or national tobacco control activities.

5. Parties should cooperate in regional and international intergovernmental organizations and financial and development institutions of which they are members, to promote and encourage provision of technical and financial resources to the Secretariat to assist developing country Parties and Parties with economies in transition to meet their commitments on research, surveillance and exchange of information.

The FCTC constitutes a science-based approach to tobacco control and public health policy. It has considerably helped to advance tobacco control across the globe in the past and is continuing to do so. As the FCTC enters its second decade, many Parties still face high rates of tobacco use and high mortality from tobacco-related diseases. It is also clear however, that **those Parties that comprehensively implement the FCTC are seeing the great health gains envisaged in the Treaty.**

Article 20 of the FCTC calls the Parties to the Treaty to develop and promote national research on tobacco, and coordinate research programmes at the regional and international levels. **FCTC Article 20 stresses that Member States should base their public health policies on scientific evidence as well as on accurate and comprehensive data** and outlines how evidence-based tobacco control policy and practice can be advanced. In order to maximize the success of the FCTC and ensure its implementation and impact tobacco control research, surveillance and monitoring have to be strengthened.

The EU as an international body plays a key role in developing national and international expertise in tobacco research. It is called to promote tobacco research, surveillance and exchange of information at national and international levels. As Parties to the FCTC, the EU and its Member States have a legal obligation to establish national systems for the epidemiological surveillance of tobacco consumption and for related social, economic and health indicators, coordinate tobacco research at EU level, and work together to reduce research inequalities within Europe and between Europe and other regions of the world. The direct link between FCTC Article 20 and the SDGs will help to jointly address the EU's obligations in terms of tobacco control and global development. By taking account of development discrepancies, FCTC Article 20 can support development assistance.

[Current gaps in EU action to improve research on tobacco](#)

Most existing EU action to improve research on tobacco is medically oriented and disease-specific. Research focused on policies and interventions needs to be strengthened. Existing EU efforts on tobacco research and future opportunities within Horizon 2020 range from tobacco as a risk factor to legislation and include research on tobacco as a risk factor, the impact of tobacco consumption and the effectiveness of tobacco control policy on populations, and the specific impact on vulnerable populations as key areas of research. While in the context of Horizon 2020 and in comparison to FP7, increasing funds are being dedicated to policy-oriented and intervention-focused research, there is potential to increase the area of applied research.

Research topics are currently identified and defined by an advisory group of experts from different disciplines, who suggest topics for the next funding round. These are then discussed and reviewed and further developed.

Europe has a good record of tobacco research. Between 2000 and 2012, the volume of scientific publications in the field had almost doubled. Excellent research is conducted at several academic institutions, and interdisciplinary collaboration thrives between researchers in Europe and beyond. Most research funding is currently held by UK, Dutch and Swedish institutions, whereas comparatively little funding goes to other European countries. This suggests that **research efforts are inverse to the burden imposed by tobacco on EU countries.** A systematic review of research outputs of 31 European countries³ shows uneven distribution of tobacco control research across Europe and lack of country-specific research in some European countries, which is a matter of concern as local and national

³ To access the full academic review, see: <https://www.karger.com/Article/Abstract/381674>



evidence is crucial in order to develop and implement policies that are tailored to the local context. Most of the existing research focuses on the association between smoking and diseases, for example between nicotine and addiction. Most policy research focuses on smoke-free policies, whereas other policy areas receive relatively little research attention.

Major barriers to advancing tobacco research

Inadequate research infrastructure: Currently, the EU is lacking a suitable infrastructure for tobacco research which facilitates collaboration across countries, disciplines and areas of tobacco research. Research is still frequently conducted in isolation, efforts are not well coordinated, and knowledge is not exchanged to the degree that is necessary and beneficial. A critical mass of researchers, brought together in a coordinated way, is missing. This decreases opportunities to respond to individual country and cross-European needs for evidence to inform effective policy development and implementation.

Lack and unequal distribution of expertise: Academic expertise on specific areas of tobacco research is currently lacking, and this is particularly true for some parts of the EU. Especially methodological expertise to evaluate complex interventions and policies at regional and national level and to conduct natural experiments needs to be strengthened. While crucial in exploiting synergies, research which identifies common ground between cessation and prevention is limited. In many EU Member States, health professionals' training does not sufficiently include training on tobacco related issues. Health professionals and academics need to improve their abilities to work across disciplines, subject areas and academic institutions. Young researchers need to be supported to develop the expertise and skills needed to conduct research of the highest quality and collaborate internationally. Experienced academics need to be trained in leadership, intercultural communication, and project management to enable them to become partners in successful large-scale, collaborative European projects.

Limited links between researchers, practitioners and policymakers: In the European Union and many EU Member States, the links between tobacco researchers, practitioners and policymakers are insufficient. Therefore, the potential for knowledge exchange, application of best practice and evidence-based policy is not fully exploited. Generating evidence for evidence's sake is not a good use of public money. Instead, research needs to contribute to the improvement of tobacco policy and practice. To achieve this goal, increased interaction between experts which can jointly advance tobacco policy and practice is needed.

Insufficient funding: Appropriate funding to support a cross-European research infrastructure, build academic expertise and enhance the links between experts from academia, policy and practice is lacking. Currently, funding sources and the way in which funding priorities are set lack transparency. Funding to build international collaboration, build capacity, and facilitate public involvement, policy engagement and knowledge transfer is largely missing. One reason for this is that such funding often requires a medium to long term commitment. The lack of dedicated funding for tobacco research is juxtaposed by the fact that smoking continues to be the main preventable cause of death and disease in most EU countries.

Best practice models in tobacco research

The International Tobacco Control Policy Evaluation Project (the ITC Project⁴) proves the synergistic relationship between research and policy. The ITC Project is the first international research programme that assess key policies of the FCTC. It leads surveys across 28 countries (10 of which are within the EU) on health warning labels and pack descriptors, pricing and taxation of tobacco products, tobacco advertising and promotion, smoke-free legislation, and education and support for cessation.

⁴ <http://www.itcproject.org/>



It is the first ever international cohort study of tobacco use and covers policies which regulate half of the world's population. The main objective of the ITC Project is to promote evidence-based policies and the rapid spread the most efficient policies. ITC researchers have strong links to policymakers, civil society organisations, and national governments. This helps to facilitate information exchange and knowledge transfer. A good example of translating research into policy has been the evaluation of smoke-free laws. The ITC project allowed cross-country comparisons and benchmarking. It also allowed the analysis of a dose-response relationship as the effect of legislation providing different levels of protection from second-hand smoke (e.g. comprehensive smoking bans with no exemptions, regulation that allow designated smoking rooms, voluntary measures) could be compared and contrasted. Similar regular benchmarking and exchange of information could enable European countries to get information from other European and non-European countries and help them to endorse effective tobacco control policies. Cooperation between international researchers highly contributes to providing comprehensive data that is up to date and to assessing performance. It thus facilitates the spread of best practices so that each country can enforce adequate tobacco control policies.

The UK Centre for Tobacco and Alcohol Studies provides a model of building collaboration between researchers to produce the evidence needed and improve knowledge transfer. It started in 2006, when a number of funders joined forces to fund National Centres for Public Health Excellence. The funding included salaries, capacity building, collaboration and the establishment of an infrastructure which provided a solid foundation of researchers who understand tobacco both from a policy and medical perspective and cover the breadth of tobacco research. Key ideas of the endeavour are facilitate collaboration between researchers of different disciplines across the country, create a strategic consortium with critical mass to become a global leader in tobacco research, increase teaching and capacity building, and facilitate public involvement, policy engagement and knowledge transfer. The establishment of an infrastructure further helped researchers to collaboratively tap into other funding sources. The UK model has been very successful so far. It has been valuable in improving dialogue between academics, the public, policymakers, and the health sector. The UK Centre is recognised nationally and internationally as a centre of excellence with expertise on tobacco

The Dutch National Network for Tobacco Research was established in 2013. It provides funding for basic tobacco control research infrastructure, including for an annual conference, a website, capacity building and a small amount of financial support to participating partners. However, no specific funding exists for tobacco at national level, but tobacco has to compete with other topic areas.

Policy recommendations to implement FCTC Article 20

We recommend the EU to implement FCTC Article 20 in its future Research Framework Programme and improve research, surveillance and knowledge exchange on tobacco between European member states and non-European countries. The following recommendations can constitute first steps into this direction.

[1. Create a budget line for tobacco control & applied research based on FCTC Art 20 in the next Research Framework Programme](#)

We call on the EU to establish an infrastructure for research on tobacco and a budget line for tobacco control research based on FCTC Art 20. The UK model of partnership building offers a blueprint for a European Centre of Excellence on Tobacco Control that promotes collaboration between researchers from public health, medicine, political sciences, epidemiology, psychology, social sciences, economics, and other disciplines. Such an infrastructure could provide a contact point for policymakers, civil society organisations, the health sector, the media and citizens to get evidence-based information on



tobacco. A Europe-wide Centre would help fill the gap of tobacco research in some parts of the EU and help to provide research on all aspects of tobacco control, and would be instrumental in:

- providing evidence on all aspects of tobacco control;
- providing guidelines and promoting best practice;
- facilitating cross-border collaboration as well as locally relevant research;
- filling the gap of tobacco research in some parts of the EU; and
- facilitating information exchange.

A European research hub would provide the EU and its Member States with a factual overview of tobacco problems and a solid evidence base to support tobacco policy and practice, offer policymakers the data they need for drawing up informed tobacco policies and strategies, and help professionals and practitioners working in the field to pinpoint best practice. A European Centre of Excellence on Tobacco Control would crucially improve Member States' tobacco policies and practice and help Europe to become a global leader in tobacco research, policy and practice.

2. Establish a committee on Tobacco and applied research within the next Research Framework Programme

DG Research & Innovation should establish a committee within Horizon 2020 which is composed of members of different backgrounds (academics, policymakers from the EC, members of the Regulatory Scrutiny Board and the EP, civil society representatives) and has designated power to decide on the tobacco specific budget line. The committee needs to identify research that is needed, and prioritize, commission and coordinate relevant research. A designated FCTC Article 20 tobacco research committee, i.e. a science-led expert group based on the provisions of the Horizon 2020 Specific Programme would provide an adequate infrastructure to foster and coordinate tobacco control research across the EU. An authoritative one-stop shop for EU research on tobacco control is urgently needed to streamline research funding. Implementing FCTC Article 20 can help the European Commission to improve tobacco control while fulfilling their obligations in terms of the careful use of European finances and improving the health of European citizens⁵.

3. Tobacco research priority areas

Future research should be able to answer questions about the effectiveness of interventions in reducing smoking in Europe, and the aspects of interventions which are crucial in increasing effectiveness. The EU provides an ideal setting to conduct comparative research to explore tobacco policy development and implementation. The differences in the level of tobacco control in different EU Member States offers unique opportunities to understand the reasons for policy success and failure. Research funding should specifically support research in countries where tobacco expertise is missing, foster research collaboration across Europe, and aim to reduce inequalities between EU Member States.

- Research to evaluate tobacco policies and interventions
 - Evaluation of tobacco policies, including standardised packaging, point of sales bans, graphic health warning labels, tobacco tax, and illicit trade

⁵ http://ec.europa.eu/health/ph_determinants/life_style/Tobacco/Documents/tobacco_exs_en.pdf See Executive Summary - I. Organisational and structural recommendations: Investment and regulatory capacity & I.I. The need for greater research capacity

- Cross-country, comparative research to explore the differential effect of tobacco control in different countries, inform policy and practice decisions and allow countries to learn from each other
- Modelling studies to illustrate the impact that FCTC recommended policies could have in countries where they are not yet in place
- Evaluation of the cost-effectiveness of tobacco control
- Research on the aspects which increase the effectiveness of policies in terms of reducing smoking and smoking inequalities in Europe
- Research into policies that could help to advance the tobacco end game
- Research on the social, economic and political determinants of the tobacco epidemic
 - Research into the social determinants of smoking and quitting, e.g. gateways to smoking initiation and triggers for quitting
 - Research into the role of commercial actors in tobacco policy, their marketing and business strategies and practices
- Research to explore the relationship between tobacco control and inequalities
 - Research into the impact of policies and interventions on health inequalities between and within EU Member States
 - Research on tobacco use among vulnerable groups, e.g. socially disadvantaged populations, children and young people, migrants, and people with mental health issues
- Research which advances clinical practice
 - Randomised controlled trials in health care settings to investigate interventions that help people quit and prevent smoking uptake
 - Studies investigating the effectiveness of electronic cigarettes in helping smokers quit tobacco
 - Research on capacity building for clinicians to support smoking cessation and prevention