

**Developing a global framework for  
Public Health Communication:  
The Tobacco Example**  
Article 12 FCTC

Nick Schneider, MD

German Cancer Research Center  
Unit Cancer Prevention  
WHO Collaborating Centre for Tobacco Control

[nick.schneider@dkfz.de](mailto:nick.schneider@dkfz.de)  
[www.tabakkontrolle.de](http://www.tabakkontrolle.de)



**dkfz.**

DEUTSCHES  
KREBSFORSCHUNGSZENTRUM  
IN DER HELMHOLTZ-GEMEINSCHAFT



## Questions to answer:

**dkfz.**

- **Why the „Tobacco Example“?**
- **Where are we at the moment?**
- **Why is Art.12 FCTC relevant to other fields?**



# Contents

**dkfz.**

- **Introduction**
  - Health communication
  - Health as a human right
- **The Tobacco Example**
  - Why Tobacco?
  - Framework Convention on Tobacco Control
  - Work of the Art.12 Working Group
- **Proposed Structure & Principles under Art. 12**
- **Conclusions and Recommendations**



# Health Communication?

**dkfz.**

## **On population level:**

- How communication techniques can be used to improve the public's understanding of health issues.

## **On individual level:**

- How health care professionals, such as doctors, can communicate more effectively with patients.



**dkfz.**

**Do we have a right to health?**



# Health as a Human Right

dkfz.

⇒ **Rights to life and health have a central role in HR!!**

- UN Charter (1945): Purposes of the UN
  - *"promoting and encouraging respect for human rights and for fundamental freedoms for all without distinction..." (Art. 1 (3))*
- Universal Declaration of Human Rights (1948)
  - *"Everyone has the **right to life**, liberty and security of person." (Art.3)*
  - *„Everyone has the right to a standard of living adequate for the **health and well-being** of himself and of his family“ (Art. 25)*
- WHO's Constitution (1946)
  - WHO Member States recognize *"the enjoyment of the highest attainable standard of **health**" as "one of the fundamental rights of every human beings..." (Preamble)*
- More than 46 WHA Resolutions (1948-2007)
  - Identify *"the right to **health** as fundamental human right,"* and/or state *"that the health aspects of human rights"*



# UN Human Rights Treaties

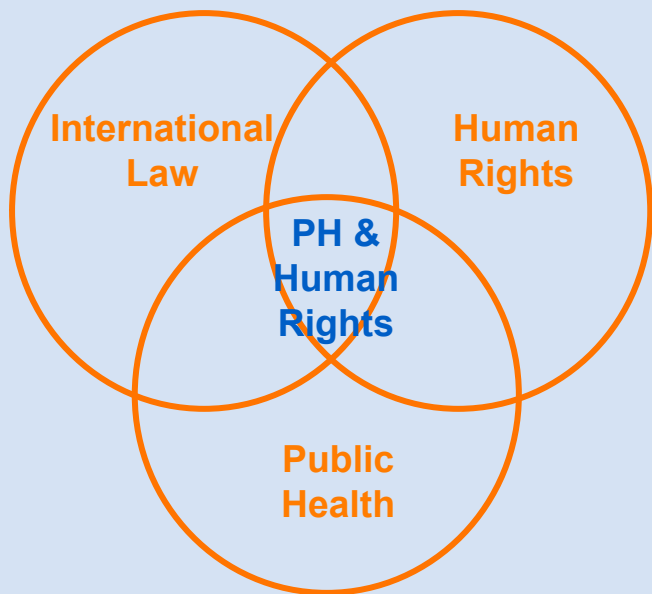
dkfz.

- **International system for the promotion and protection of HR**
  - 158,000 treaties and related subsequent actions
- **9 major HR Treaties**
  - Apply to virtually any child, woman or man
- **Problem:**
  - All mention life and/or health, but none focuses on it!!
  - Information and accessibility – Communication!
    - Familiarity with standards
    - Access to remedial mechanisms



## Human Rights Affected by tobacco

dkfz.



- **Right to life** - tobacco kills
- **Right to health** - tobacco is a risk factor for 6 of the 8 leading causes of death
- **Freedom from discrimination** - discriminatory advertising, marketing and sponsorship
- **Right to information** - reliable information about harmful effects





**dkfz.**

**Why follow the „Tobacco Example“?**



**dkfz.**

**Because we CAN!**



- **Established field in public health**
- **Strong research basis**
  - Health risks
  - Economic impact
  - Environmental effects
- **Effective evidence-based measures**
  - Including health communication



# WHO Framework Convention on Tobacco Control

**dkfz.**

- **First and only WHO Treaty**
  - Ratified 2003
  - Entered into force on 27 February 2005
- ⇒ **Evidence based**
- ⇒ **Widely supported**
  - ⇒ **Ratified by 160 Parties, signed by 168**





# Contents

dkfz.



- Key areas addressed:
  - Protection from tobacco industry influence (Art. 5.3)
  - Price and tax measure (Art. 6)
  - Protection from exposure to tobacco smoke (Art. 8)
  - Packaging and labeling of tobacco products (Art. 11)
  - Advertising, sponsorship, and promotion (Art. 13)
  - Illicit trade in tobacco products (Art. 15)
  - ...



**dkfz.**

**What does it say about health communication?**



## Article 12

### *Education, communication, training and public awareness*

Each Party shall promote and strengthen public awareness of tobacco control issues using all available communication tools, as appropriate. Towards this end, each Party shall adopt and implement effective legislative, executive, administrative or other measures to promote:

- (a) broad access to effective and comprehensive educational and public awareness programmes on the health risks including the addictive characteristics of tobacco consumption and exposure to tobacco smoke;
- (b) public awareness about the health risks of tobacco consumption and exposure to tobacco smoke, and about the benefits of the cessation of tobacco use and tobacco-free lifestyles as specified in Article 14.2;
- (c) public access, in accordance with national law, to a wide range of information on the tobacco industry as relevant to the objective of this Convention;
- (d) effective and appropriate training or sensitization and awareness programmes on tobacco control addressed to persons such as health workers, community workers, social workers, media professionals, educators, decision-makers, administrators and other concerned persons;
- (e) awareness and participation of public and private agencies and nongovernmental organizations not affiliated with the tobacco industry in developing and implementing intersectoral programmes and strategies for tobacco control; and
- (f) public awareness of and access to information regarding the adverse health, economic, and environmental consequences of tobacco production and consumption.

1,200 MUEREN  
AL DIA POR FUMAR

DILE ¡BASTA!  
A LA INDUSTRIA DEL TABACO



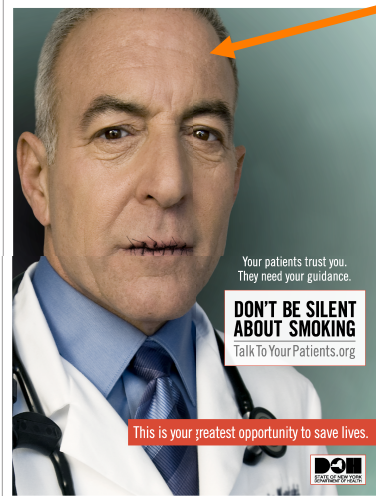
THIS IS A TYPICAL

MONTHLY  
PAYCHECK

TOBACCO EXECUTIVES ARE MAKING  
FROM SELLING CIGARETTES



HOW MUCH IS COMING OUT OF  
YOUR POCKET  
TO MAKE THEM RICH?





# Levels of Communication

dkfz.

The Nested Relationships among Advertising, Marketing Communications, Consumer Marketing, and Stakeholder Marketing in Tobacco Promotion



## • Use all levels:

- Mass Media Advertising
- Marketing Communication
- Consumer Marketing
- Stakeholder Marketing





**dkfz.**

**Where are we now?**



## Article 12 Working Group

**dkfz.**

- **Preparation of implementation guidelines (2008-2010)**
- **Develop a roadmap for guidelines that are**
  - universally applicable
  - cost-effective
  - affordable for everyone
  - based on best-practices
  - contain the right level of detail to assist all Parties
- **Present a progress report at COP3 (Nov 2009)**



# The Partners

dkfz.

- **Key Facilitators**

- Germany, Palau, Sweden, Turkey

- **Partners**

- Algeria, Bahrain, Barbados, Benin, Cameroon, Canada, Chad, Congo, Estonia, Guatemala, Honduras, Hungary, India, Ireland, Kenya, Malaysia, Mauritius, Namibia, Republic of Korea, Spain, Sri Lanka, Swaziland, Tanzania, Thailand, Togo, Uruguay

- **Experts**

- Gerard Hastings, UK
- Melanie Wakefield, Australia
- Edith Wellington, Ghana

- **Civil Society**

- Framework Convention Alliance
- Global Dialogue for Effective Stop Smoking Campaigns
- World Medical Association

- **WHO**

- FCTC Secretariat & Tobacco Free Initiative



## Purpose

**dkfz.**

- **Assist Parties in meeting their obligations under Art. 12**
- **Specify or clarify required elements**

## Objectives

- **Assist Parties in a manner consistent with evidence on**
  - Health, social, economic, environmental consequences of tobacco consumption and exposure to tobacco smoke
- **Identify key legislative, executive, administrative, fiscal and other measures, to**
  - Educate, communicate and train
  - Provide a tobacco control infrastructure

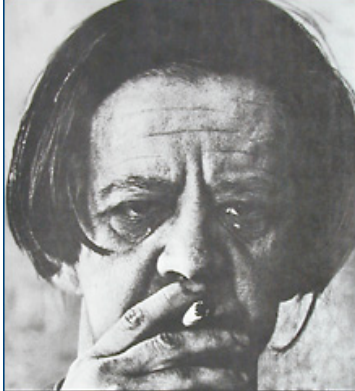


# Principles

dkfz.



When did smoking become part of us?



**SMOKING  
IS VERY  
GLAMOROUS**



**DYING FOR A  
MENTHOL?**

THEY TELL YOU THE TASTE IS COOL, BUT 45,000  
**AFRICAN AMERICANS DIE**  
EACH YEAR FROM SMOKING-RELATED DISEASES.  
MOST OF THEM SMOKE MENTHOL.

**HOW COOL IS THAT?**

Undo the death toll. call 1-800-NO-BUTTS

1. Denormalization
2. Comprehensive and sustainable tobacco control programmes
3. Communication to all people
4. Addressing key differences of populations groups
5. Effective state-of-the-art education and training
6. National coordinating mechanisms or focal points
7. Guidance by research, subject to pre-testing, monitoring and evaluation
8. Inclusion of civil society
9. Protection against tobacco industry
10. Information on the tobacco industry



**Social change**

**Denormalization**

**THE FOUR PILLARS OF ARTICLE 12**

**Education**

**Civil  
Society**

**Communication**

**National  
coordinating  
mechanism**

**Training**

**Information  
on Tobacco  
Industry**

**Public Awareness**

**Tobacco Control Infrastructure**



## Issues for discussion

### - Proposed items for the guidelines -

**dkfz.**

- Obligations under FCTC
  - Role and responsibility of government/national leadership
- Ethical considerations
  - Funding, responsibility, influence
- Needs assessment
  - Target groups
  - Contents/Messages
- Effective methods
  - Pretesting, monitoring and evaluation
  - Best practices
- Partners



## Next steps

**dkfz.**

- **Presentation of the Progress Report and outline for draft guidelines at COP 3 (Nov 2008)**
  - Decision if mandate is prolonged
- **Case studies on best-practices**
- **Session on Art. 12 at WCTOH**
- **Development of Draft Guidelines for COP4 (2010)**





**Why is it relevant?**



# Relevance of Article 12

dkfz.

- Calls for
  - Research-based guidelines
  - Gold-standards in Tobacco Control communication
  - Best-practices
- Adds health communication to the PH agenda
  - Legal and moral obligation of the Parties (including the EC):

***„Each Party shall promote and strengthen public awareness [...] shall adopt and implement effective [...] measures [...]“ (Art.12)***

- Supports the EU mandate to work on tobacco control communication
- Guidelines could easily be adaptable to other fields in PH



# Conclusions

dkfz.

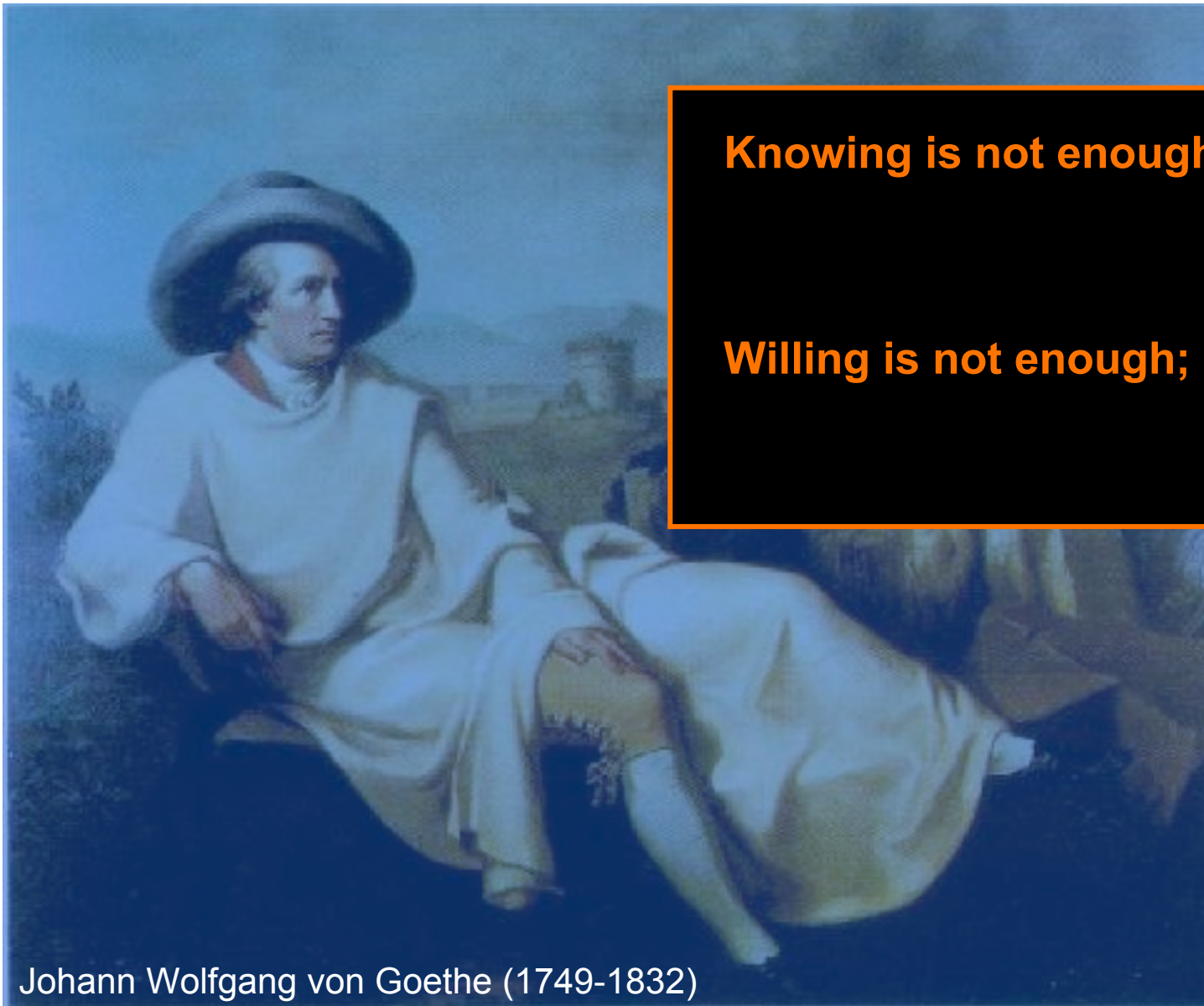
- **Why the „Tobacco Example“?**
  - Tobacco control pioneers global health developments
  - First public health treaty (FCTC)
- **Where is Tobacco Control at the moment?**
  - Developing implementation instruments (FCTC)
    - Guidelines & Protocols
- **Why is Art.12 relevant to other fields?**
  - Adds health communication to the agenda
  - Is adaptable to other fields in public health



## Recommendations

dkfz.

- Support and promote the ratification of FCTC and the adoption of strong draft guidelines
- Use the „Tobacco Example“ as a template for other fields
- Develop strong and concrete recommendations for health communication (working groups)



Johann Wolfgang von Goethe (1749-1832)

**Knowing is not enough;**

**we must apply.**

**Willing is not enough;**

**we must do.**

Nick Schneider, MD

German Cancer Research Center  
Unit Cancer Prevention & WHO  
Collaborating Centre for Tobacco Control

[nick.schneider@dkfz.de](mailto:nick.schneider@dkfz.de)

**dkfz.**

**DEUTSCHES  
KREBSFORSCHUNGSZENTRUM  
IN DER HELMHOLTZ-GEMEINSCHAFT**

**This paper was produced for a meeting organized by Health & Consumer Protection DG and represents the views of its author on the subject. These views have not been adopted or in any way approved by the Commission and should not be relied upon as a statement of the Commission's or Health & Consumer Protection DG's views. The European Commission does not guarantee the accuracy of the data included in this paper, nor does it accept responsibility for any use made thereof.**