

Research in support of tobacco control

Needs to study both country specific actions and global ones

Enough evidence exists already for all countries to implement a strong package of measures to **control tobacco** consumption and its harmful effects. These include banning advertising, restricting smoking in public, taxing **tobacco**, and establishing both governmental and non-governmental agencies to work against smoking. Yet more research still needs to be done to make **tobacco control** more effective. Many countries lack a research and data gathering infrastructure, and world wide there is an almost complete absence of funds for research directed at the global **control** of **tobacco**.

Last year's 10th world conference on **tobacco** or health, held in Beijing in August, took place at a time when the multinational **tobacco** corporations were increasing their marketing activities world wide.¹ Lacking skills in **tobacco control**, many developing countries are vulnerable to such aggressive marketing. During the conference **tobacco control** experts met to discuss research relevant to policy making. Their objectives were to identify the research evidence and public health data with the greatest potential to affect **tobacco control** policy and to set out the minimum research needed by each country. The full report of this group appears on the *BMJ*'s website (www.bmj.com), and here we highlight the key points.

Unlike previous recommendations,² our report emphasises the minimum country specific and international elements that are essential for **tobacco control**.

Clearly, **tobacco control** policies should be evidence based, drawing from data on the prevalence of smoking, the characteristics of smokers, and the adverse health effects of smoking and using interventions of proved efficacy. The full report offers recommendations to gather this evidence within the categories of policy related research, observational studies, and clinical trials. Country specific evidence needs, however, to be complemented by research on the transnational determinants of **tobacco** use and on transnational approaches to **control**.

Future research should identify the optimal policy mix for a particular country that acknowledges each country's capacity and readiness to implement specific

components of an overall **tobacco control** programme. Any research should be sensitive to the country's cultures and other environmental factors. The readiness of countries to act should be assessed through a mixture of qualitative and quantitative research among the general population, politicians, health professionals, media, and other influential groups.

Surveys of smoking and epidemiological studies of the health consequences of smoking have been the foundation of **tobacco control** initiatives. Smoking surveys are recommended for three groups: the general population, health care providers and others concerned with public health, and children. Although smoking is a well documented cause of disease and ill health, it may be necessary to reaffirm for a particular country the way in which smoking causes diseases in that population. Large cohort studies could characterise the adverse effects of smoking and show the evolution of **tobacco** related disease over decades. Case-**control** studies of specific diseases can be conducted through health care facilities and by using mortality from specific diseases as a starting point for identifying participants. Obtaining information on smoking on death certificates would facilitate low cost case-**control** approaches and make visible the current impact of **tobacco** use. **Tobacco control** is ultimately accomplished through programmes directed at individuals, communities, and entire countries. Experience in several developed countries provides substantial evidence on strategies for individual smokers, including nicotine replacement therapy. The relevance of these data for all countries, however, is uncertain and our report suggests ways of obtaining data to design intervention trials.

Action is needed now to implement the recommendations flowing from this working group and the 10th world conference. A major global investment is needed in **tobacco control** research. A forthcoming meeting on "the economics of **tobacco control**: towards an optimal policy mix" in Capetown in February 1998 offers an opportunity to further develop this framework for **tobacco control** policy research.

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