

Building on the foundation of ASSIST

Tobacco control activities continue to raise more questions than they answer.

- How high must a cigarette tax be to decrease consumption?
- Does strong emphasis on measures to reduce access by young people result in a “forbidden fruit” effect, which results in more, not less, smoking in the young?
- Can small amounts of counter-advertising impact cessation rates?
- Have the contents of cigarettes been altered recently to make them more addictive?
- Does reducing access to tobacco products have any effect on adult smokers?
- How should coalitions be structured to achieve maximum tobacco control policy change?

Tobacco control policy research in the United States remains limited even as the opportunities to apply the research results are increasing. Within the past two years, Oregon and Maine have earmarked cigarette tax dollars for tobacco control programmes, and Mississippi and Florida have received settlement funds counted in billions of dollars. Health professionals in these places found themselves putting together comprehensive statewide programmes in very short time frames.

As more funds become available, this situation will be repeated. Health professionals will be allocating new monies and launching interventions without the benefit of the best scientific information on the effectiveness of tobacco control strategies.

The tobacco industry, in contrast, uses up-to-the-minute research in every aspect of its comprehensive approach to designing, advertising, marketing, pricing, and selling tobacco products and reinforcing use through the policies it promotes and those it blocks. The Tobacco Institute studies, understands, and takes advantage of the political system in ways that health advocates find difficult to counter. Calculating how much the industry spends on all its research would be a herculean task. Even if we knew the final amount, we could not begin to match it. But when we see smoking rates in the young increase despite all our attention and efforts, it is clear we understand far less about how to reach the next generation than do the tobacco companies.

Certainly, the NCI has an obligation to the citizens of the United States to play a major role in reducing the epidemic of tobacco-caused cancers. We have entered a new era where prevention research by the NCI must involve large populations, diverse cultural and ethnic groups, policy interventions, and measurements of media impact. We need to know how to influence the outcome of reduced smoking prevalence by designing the best interventions possible. We need to understand culture change surrounding smoking and to do that requires entering the culture.

The American Cancer Society has been the NCI's partner of record for the eight years of the ASSIST project. During this time, we have seen the effects of the NCI's resources devoted to systematic and innovative approaches to

tobacco control. The laboratories for this great experiment are the states and local communities; the studies are being conducted by health advocates using tools of advocacy and media.

Now is the time to continue those studies. Now is the time for the National Cancer

Institute to build on the foundation of ASSIST and move to the next level of tobacco control research.

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