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# **Structured Abstract**

*Purpose:* To help Bolivian Government officials and healthcare opinion leaders, to assess the current situation related to the abandonment of tobacco smoking and develop a strategic plan to scale up tobacco dependence treatment.

**Scope:** beneficiaries of the project are institutions and healthcare National services that will be capable to provide support to leave tobacco smoking based in te guidelines of the article 14 of the Convention frame for the control of the tobacco with the current resources of the country. The main audience for this project are the opinion leaders in healthcare government and non- Government, relevant healthcare professionals and organizations or groups of health professionals.

*Methods:* The method that was used for the collection of qualitative data was the revision of the documents. Additional data were provided by experts in tobacco control which observe and monitor the implementation of policies and identify gaps at the national level.

**Results:** We helped government officials and opinion leaders in healthcare of the ceasefire group to work together in the assessment of the current situation in the country and promoted the development of a strategic plan. Groups of health professionals are also involved in the implementation of the strategic plan.

Key words: development of strategies national's implementation of the article 14 of the FCTC

# Purpose

To assist the Bolivian Government officials and key opinion healthcare leaders, evaluate the current situation in relation to the abandonment of tobacco consumption and develop a strategic plan to increase the treatment of smoking.

This goal is closely aligned to the RFP focus which is to increase the number of people who stop smoking by improving the frequency and effectiveness of treatment interventions provided by healthcare professionals. It is also closely aligned with goals of our organisation which are to prevent tobacco-related cardiovascular diseases and to support governments in implementing Framework Convention on Tobacco Control (FCTC) measures and guidelines such as Article 14 on cessation support.

The specific objectives were:

- > To assist government officials and healthcare opinion leaders, to work together to assess the current situation in the country and develop a strategic plan.
- > To involve key healthcare professional groups in the implementation of the strategic plan.



# Scope

Bolivia is in South America, listed among the middle- to low income countries. It has a current population of more than 10 million people with nearly 2,000,000 of smokers. Bolivia is part of the countries that have ratified the framework Convention on Tobacco Control since 2005, however still do not have a program for smoking cessation either infrastructure or guides to help quit smoking or even qualified professionals for the treatment of nicotine addiction.

Smoking is a disease and a risk factor for non-communicable diseases which in Bolivia currently represent 57% of all annual deaths (cardiovascular diseases, including hypertension, cancer, chronic respiratory diseases and diabetes). Tobacco use has a prevalence of 25% in the population in general (35% in males and 16.9% in women) (CONALTID 2014); the current prevalence in young people is 18.7% (20.9% in males and 16.4% in women), it has also observed that the age of onset of more frequent consumption is 14 to 15 years and there is an increase in the consumption of tobacco (cigarettes) by women in recent years (PAHO/WHO, 2012).

It is estimated that in Bolivia, smoking is responsible of 4.488 deaths in the year, it means that 12 people die every day, by cause or by diseases related to tobacco, more weight is given by the respiratory and cardiovascular diseases; smoking generates also a direct annual cost of more than Bs.1, 400 millions to treat health problems caused by tobacco, which is equivalent to 0.8% of all gross domestic product (GDP) of the country (Radiografía Del Tabaquismo En Bolivia, 2014)

Despite the high prevalence of smoking, the percentage of the smoking population who want help to quit smoking also is high (80%), and for all the Ministry of health has developed strategies to adequately address these patients at different levels of the health system

Within the framework of the provisions of the Law 3029 of ratification of the framework Convention on the Control of tobacco (FCTC) 2005 and D.S. 29376 (Chapter VIII commits the State to implement the measures of demand reduction relating to dependence and the abandonment of tobacco; (Article 14 ° "the Ministry of health must disclose appropriate guidelines based in scientific tests, taking in the national priorities to adopt politics and measures to promote the abandonment of the consumption of tobacco and the right treatment to the dependency of tobacco") developed an analysis of national situation.

# Methods

# Context

The societies of healthcare professionals are not working in the abandonment of the smoking. There is a need for coordination between the Government and civil society to implement article 14 of the FCTC guidelines. Despite the efforts of the Ministry of health, tobacco use is increasing, especially among young people, because of the tobacco industry's marketing strategies.



# Target population

The main goal public of this project are relevant governmental and non-governmental, opinion on healthcare professionals of health leaders and organizations or groups of healthcare professionals.

The beneficiaries of the project are institutions and healthcare services at the national level that will be able to provide support to quit smoking based on the guidelines of article 14 of the FCTC with current resources of the country.

#### Methods

The methodology to adopt policies and measures to promote the abandonment of the consumption of tobacco and the tobacco dependence treatment was as follows:

Mapping of key stakeholders was held. We contacted relevant government officials from the Ministry of health, leaders of academic societies, professional organizations, health and civil society to assess the support needs to quit smoking using an analysis of the national situation. This analysis will assess the available resources for the treatment of the dependency in the country, including the infrastructure and the resources available. The diagnostic instrument were a questionnaire and interviews; the analysis of data and results served as a baseline.

#### Interventions

- The gap was determined by the analysis of the information provided by the Ministry of health staff, workers of private and public health centers and civil society. The need of apply the article 14 of the Convention frame for the Control of the tobacco (FCTC) was discussed in several workshops related with the implementation of the FCTC in Bolivia, and daily work of the focal point of tobacco control of the Ministry of health.
- The commitment of key stakeholders was obtained to make a joint effort in the implementation of article 14 of the FCTC and its implementation by the Government and the associations of health professionals.
- The analysis documents of the national situation with local tobacco consumption statistics was developed and international evidence of smoking cessation was sought to be disseminated to stakeholders (Government and professional health groups) in order to design the next steps.
- A review of efficiency and affordability of treatments (EAR) (West 2016), to help prioritize appropriate interventions to our country through the estimation of their effectiveness and affordability, based on the level of income of the country and the resources available was subsequently conducted.
- Using this review of efficiency and affordability we worked with key government stakeholders to develop the "strategic guidelines for prevention and Control of the epidemic of tobacco use (2016-2020)", and the "national guide" to help people to quit smoking based on the country's needs and available resources, as recommended by the guidelines of article 14 of the FCTC.



- The strategic guidelines of prevention and Control to the epidemic of smoking (2016-2020), were elaborated in coordination with the focal point of Tobacco Control and at the express request of their part of having a strategy to contribute to the strengthening of measures of reduction of demand and supply of tobacco products, that prevent the begining of consumption and substantially decrease its prevalence and encourage its abandonment applying the principles of intersectorality and social participation, that allow to achieve a decrease in morbidity, mortality and other damage caused by the consumption of the products of tobacco and exposure to tobacco smoke. Subsequently we provided feedback from the suggestions of the departmental of health services, the academic societies and health professional schools.
- The guide was developed on the basis of a first draft based on the Uruguayan and New Zealand Guide, this draft was reviewed and analyzed independently by each of the members of the development group of the Guide (Ministry of health, civil society, health departmental services, directors of hospitals, academic societies and associations of professionals); is reassessed in joint and is reached by consensus to the elaboration of a preliminary version. This version includes all groups that could work on cessation of tobacco use in the country. After analyze and summarize those contributions is made the agreed version. This latest version underwent an assessment of applicability at the national level by the different scientific societies and medical specialities linked to smoking and its consequences. The version agreed upon for final approval was finally distributed.

# The intervention study

This main objective of the project is closely aligned with the approach RFP that is increase the number of people that leave of smoking through the frequency and the effectiveness of the therapeutic interventions improvements provided by health professionals. It is also closely aligned with the objectives of our organization that will prevent cardiovascular disease related to tobacco and to support Governments in the implementation of the framework Convention on Tobacco Control (FCTC) measures and guidelines such as article 14, concerning to smoking cessation aid.

The following shows us the success of the project:

- Progress reports detailing the meetings and the participation of all relevant stakeholders (including associations of professionals) in meetings to develop a National Plan for tobacco cessation.
- An analysis of national situation (NSA) completed with the identification of the situation of the country and current priority areas for the next steps;
- A document of national aid strategies to quit smoking made as a result of the process of the NSA made by the key stakeholders;
- A guide national's treatment of the addiction to the tobacco as result of the process of the NSA and the use of the AER (see more above).
- Evidence of the full participation of the recipients of the intervention in those broadcasting events of national consensus documents



# Results

As results of the objective 1. "To Assit the Government officials and healthcare opinion leaders of the cessation group to work together to assess the current situation in the country and develop a strategic plan", has the following products:

- 1. The analysis of the national situation, which presented the following conclusions:
  - > Bolivia is a country of medium to low incomes,
  - The epidemiological data of smokers in the population in general and of healthcare personnel was found, in both cases the data are elevated to being the third country with the highest prevalence of smoking in the region.
  - > The population who want help to quit smoking is high 80%
  - Bolivia has taken some steps towards the implementation of the framework Convention for Tobacco Control of the WHO (WHO FCTC), articles 6 (taxes), 8 (smoke-free environments), 11 (health warnings on cigarette packs of cigarettes), 12 (education) and 13 (prohibition of advertising, promotion and sponsorship of tobacco products), but still have not been fully implemented.
  - > Almost total lack of support for the treatment of smoking, facilities or services.
  - Lack of health services and other services, institutions, organizations and resources that may help in the development of programs of support abandonment of tobacco
  - The following institutions could provide broad access to cessation smoking if they had proper training and tools for intervention in nicotine addicts: the services of primary health care, pharmacies, dentists, second and third level hospitals.
  - Mobile phone coverage is high, 90%, which is favourable to implement the helplines phone lines for smoking cessation.
  - The lack of national strategies of smoking cessation, official national guidelines for smoking treatment and manual of implementation.
  - Groups without healthcare training professionals to support people with tobacco addiction.
  - Lack of a source of sustainable funding for support services to abandon
  - Lack of an official standard mandatory for the registration of tobacco in all the clinical histories and brief Council should be in all health care systems.
  - > There is a sub-registry of smoking of epidemiological monthly notification that reports to the national health information system.
  - Treatment drugs for addiction to the smoking are little available, accessible and affordable.
- 2. We developed some strategic guidelines for prevention and Control of the epidemic of tobacco use (2016-2020) with the overall objective of "contributing to the strengthening of measures of reduction of demand and supply of tobacco products that prevent the start of consumption and substantially decrease its prevalence and encourage its abandonment, applying the principles of intersectorality and social participation ", that allow to achieve a decrease of the morbidity, mortality and other damage caused by the



consumption of the products of tobacco and the exposure to the smoke of someone else's tobacco ". And with the specific objectives:

- To promote healthcare, through information and awareness-raising for the population in general about the consequences of tobacco use and tobacco smoke exposure, taking into account aspects such as gender equity, generational and intercultural relations. Will provide for the following activities:
  - Preparation and dissemination of a plan education and communication of the epidemic of tobacco use
  - Elaboration and implementation of a program of 100% free from tobacco smoke environments in public and private institutions, households, transportation and places of collective use.
  - ✓ Implementation of a program of advocacy in the fight against smoking
  - ✓ Preparation of material supports printed and audiovisual, with messages tailored to the characteristics of age, gender, and role, ensuring periodic distribution and accessibility: centers educational, healthcare, Government, entertainment, health, pharmacies, etc.
  - Promotion and incentive of the incorporation of values, habits and healthy life styles in all those population segments, through educational strategies, communicational and practices periodic healthy forms. (Campaigns, sport, recreation, family activities, etc.)
  - ✓ Design of a register of National Bank of images of graphic health warnings, which identified health, economic and environmental damage
- To provide access to prevention services, diagnosis and comprehensive treatment to quit smoking in any of its forms, based on the best available scientific evidence. Will provide for the following activities:
  - ✓ Strengthening the capacities (training and competitions) of healthcare personnel to provide treatment to quit smoking.
  - ✓ Development a program of support for the abandonment and the treatment of the dependence of the tobacco in the healthcare system.
  - ✓ Development for health personnel protocols in addressing smoking patients
  - ✓ Promoting the availability and accessibility of effective medications for the treatment of tobacco addiction
- Joint efforts with actors and strategic public and private sectors: short term social security, NGOs, civil society, academic and other entities involved in the fight against the epidemic of the smoking. Will provide for the following activities:
  - Realization of national and departmental meetings where a new frame legal national departmental and municipal get promoted
  - ✓ Establishment of strategy alliances to integrate and coordinate actions of promotion and prevention with different institutions, to address the thematic of the epidemic of smoking in Bolivia



- Promotion of the institutions support in the approval of a project of law of prevention and Control of tobacco according to CPE and the guidelines of the FCTC
- Promotion in the ETAs the adoption of laws on the prevention and control of tobacco.
- Manage, promote and carry out investigations, assessments and studies on the epidemic of smoking, for the elaboration of programmes and projects of prevention/treatment and management of public policies at national, departmental and local levels. Will provide for the following activities:
  - Establishment of strategic alliances with institutions of higher education and civil society to promote the realization of research and studies on issues of tobacco
  - ✓ Management and promotion of studies and socio-economic healthcare research in the production, distribution, marketing, consumption and processing of tobacco
  - ✓ Elaboration and incorporation of smoking on SNIS-VE variables
  - ✓ Training staff who carry out research and monitoring activities
  - ✓ Monitoring and evaluation of the projected activities
- 3. The National Guide was made to help people to quit smoking, that it aims, offer clear and precise recommendations about the problem of tobacco use, that are easily accessible to the medical community and to the staff of the health area, its content ranges from basic operational definitions, the ABCD of smoker, pharmacological and non-pharmacological treatment and the contributions of other disciplines in the task of smoking cessation. In order to provide information to health workers also developed algorithms of care and overview of national guide newsletters.

As a result of the objective 2 "involve major groups of healthcare professionals for the implementation of the strategic plan" should be the following:

- The full participation in the development of the strategic guidelines of prevention and Control to the epidemic of smoking (2016-2020) and development of national guide to help people to leave smoking, people of the Ministry of health, public and private entities and the civil society in the situational Diagnostics implementation of the article 14 of the FCTC.
- Participation in the socialization of national strategies of the high-level officials of the Ministry of health, the departmental services of health, health networks, hospitals of the health system public and safe social, civil society, academic societies and associations at the national level health professionals.



- Socializations were performed in departments of La Paz, Santa Cruz, Cochabamba and Oruro to the date, however the Ministry of health is committed to complete the socializations in the remaining departments.
- Massive media coverage was identified and activated the anti-tabacco committees so that they continue to work on the lines of the full participation of the "training of trainers" project to help people quit smoking of professionals committed to tobacco control. Training to provide support to quit smoking to health personnel of first level by professionals trained in the cities of La Paz and Santa Cruz.
- Promoted partnerships between health professionals groups and Ministry of health
- Commitment of qualified institutions to control the entire record of monthly epidemiological notification to identify smokers and timely intervention of the same control in addition to the monitoring in the national system of health information.

# Conclusions

Bolivia had significant progress in the implementation of article 14 with the project, it already has the strategies and tools that through the actions of different levels where the abandonment of smoking and give treatment for this addiction must be promoted. However when the analysis of the national situation has been observed to properly implement measures to promote the abandonment of tobacco and increase the demand for treatment of tobacco dependence and provided for in other articles of the WHO FCTC, notably, but not exclusively, articles 6, 8, 11, 12 and 13. The application of measures to promote the abandonment of the dependence of the tobacco, United to those political, will have an effect synergistic and, therefore, will contribute to maximize the impact in public healthcare. A civil society in Bolivia that promotes demand the Ministry's work on the topic to improve existing tobacco Control policies in accordance with the guidelines of the framework Convention on Tobacco Control was consolidated from the project.



- 1. CONALTID. Il Estudio Nacional de Prevalencia y Características del Consumo de Drogas en Hogares Bolivianos de nueve Ciudades Capitales de Departamento, más la ciudad de El Alto 2014. Primera Edición ed2014.
- 2. Decreto Supremo N° 29376, 29376, Gaceta Oficial de Bolivia, (2007).
- 3. FIC. Sondeo de opinión sobre el consumo, control y comercialización de Tabaco en Bolivia. 2016; 1.
- 4. Ley 3029, del 22 de abril de 2005, "Convenio marco para el Control de Tabaco", 3029, Gaceta Oficial de Bolivia, (2005).
- 5. OPS/OMS. The Tobacco Atlas. 2002.
- 6. Ministerio de Salud, Análisis de situación Nacional 2016
- 7. Ministerio de Salud, Guía Nacional para ayudar a las personas a dejar de fumar 2016.
- 8. Ministerio de Salud, Lineamientos estratégicos de Prevención y Control a la Epidemia del Tabaquismo (2016-2020)
- 9. OPS/OMS. Encuesta mundial de Tabaquismo en Jóvenes2012.
- 10. Organización Mundial de la Salud OMS. Convenio Marco para el Control del Tabaco CMCT. 2003. Artículo 14vo, 56ª Asamblea Mundial de la Salud.
- 11. Radiografía del tabaquismo en Bolivia. Muerte, enfermedad y costos atribuibles al tabaco para el año 2013. 2014.