Tapping the potential of research-based advocacy

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The value of both policy-relevant research and evidence-informed policy in public health and health promotion is well documented. Interestingly, research-based policy advocacy is one arena in which these approaches become very directly and immediately linked. Research-based advocacy for policy has been a powerful force in tobacco control and is building momentum in some aspects of alcohol policy. There is also a rising current of policy-directed advocacy to redress obesity-promoting social and environmental factors, including food marketing to children, food labelling and active living environments.

As one of health promotion’s most powerful tools, research-based advocacy encapsulates many of the strengths of health promotion. It draws upon specialised research skills and links them with public communication methods. Importantly, it is guided by clear goals and a vision of an environment and society that protects and values people’s well-being. Both the research and the communication activities that characterise advocacy seek to spotlight aspects of society that may be taken for granted, but which work against people’s interests; they can provide a focused and organised examination of what is going on and promote the alternatives as feasible policy options.

Food marketing, which predominantly promotes energy-dense, nutrient-poor foods illustrates this point. It is a ubiquitous factor in the lives of children and parents, and operates as a persuasive influence that contradicts and undermines parents’ desire to provide nutritional foods. The alternative, of restricting or banning children’s exposure to food marketing, appears obvious, but has not been supported by Australian governments to date.

Tactical mix

Health promotion needs a tactical mix of research and communication strategies to respond to such challenges. Through a strategic approach to research, with a series of studies that systematically address policy-relevant questions, we can genuinely develop well-reasoned ideas about the shape of effective policy solutions. The body of research on food marketing to date, while not complete, does tackle some key questions in this way. It encompasses:

- the nature and extent of food marketing to children in Australia and elsewhere;
- the effects of food marketing on children’s food preferences, requests and family purchases;
- evaluation of regulatory policy initiatives; and
- includes modelling of the cost-effectiveness of regulatory options.

Interestingly, the accumulated body of evidence regarding the potential effectiveness of restricting food marketing to children is now sufficient to indicate that this would be one of the most cost-effective approaches to child obesity prevention.

Policy advocacy can build on such evidence and understanding, but also requires a multi-faceted communication strategy, which may include grass roots community mobilisation, media debate, political lobbying and broad professional engagement and public statements. These communication strategies have been used to generate support for tobacco control policies, and are also evident in advocacy for food marketing (for example, the role of Parents Jury in grass roots support) and the broad engagement approach to advocacy for salt reduction in foods.

Strategic research and strategic communication each benefit from a mix of skills and approaches, role differentiation and strong partnerships. While research and advocacy will often be led by different agencies and champions, both can occur at local, state, national and international levels, and thus provide opportunities and roles for many stakeholders. On global issues such as tobacco control, food marketing and salt reduction in food, there are strong and direct links between global and local arenas, so that global ideas can be reflected in local actions and local actions can inform global policy. For example, substantial background work by WHO, involving expert synthesis of research and international consultations with consumer and industry groups, underpinned the World Health Assembly recommendations to member states to limit unhealthy food and drink marketing to children.

While we can point to some examples of research-based advocacy, there is limited systematic analysis of how extensively and effectively this approach is used for promoting health. Are we overlooking opportunities to apply this approach at local, state or national levels? Is there scope to refine policy-relevant research questions so they can better contribute to policy debate? Are there specific issues where we need to strengthen the links between research, policy, practice and community groups, in order to promote an integrated approach to healthy public policy? The HPJA is itself a valuable channel for such exchange and mixing of ideas between research and practice domains. HPJA authors comprise researchers, practitioners and, importantly, many people who are ‘boundary crossers’ and involved in research as well as policy, practice or advocacy. The opportunity for discussion of public policy issues, with reference to research evidence, values and population outcomes, is fundamental for achieving a sound, responsible approach to research-based policy advocacy.

References

Advocating for public health: for whom, and at whose behest? 1

Charles Livingstone

1. This is not to argue that evidence is not important. But in the absence of effective policy, the most important aspect of evidence is that it be not only available, but also accessible.

5. For a critique of such practices see Geissler, 2010. For a more general account of the wider literature on evidence production and the role of the publishing system see Notni et al., 2010. For an analysis of the publication of research on sugar see Eakin et al., 2010.


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