



Smoking out funds

THE European Smoking Prevention Framework Approach (ESFA) is a monumental research project with a budget of 4 million euros. How did you get involved?

Well, when I was in the last year of my studies I was offered a couple of research jobs. One was in Maastricht to develop a smoking prevention project. That job was a combination of fundamental and applied research, and I liked that combination. So I took off to the 'deep-south' of the Netherlands, where they speak a completely different and hardly understandable dialect! At the end of that job, I was given the opportunity to write a grant proposal to develop a centre for cancer prevention research. The competition was tough, but my proposal came out as the first. I directed that centre and we focused on primary prevention of cancer, mainly looking at smoking prevention, smoking cessation, exercise, nutrition and skin cancer prevention. Then in 1998 I became professor in cancer prevention, and we broadened the focus to secondary prevention as well.

How did the opportunity for such a massive project arise?

I am one of the founders of the European Network of Young People Against Tobacco (ENYPAT) (www.ktl.fi/enypat/). There, people expressed a need to develop and test a European smoking prevention project. When the Tobacco Information Fund was released, I contacted several people, and we decided to submit a grant proposal.

Did you already know your various European collaborators, or did you approach them with this specific purpose in mind?

I knew most of the people... I also knew some of them from the ENYPAT network and others from conferences. The point in this project was that many organisations have a public health function, but not always a health promotion research function. We tried to incorporate a mix of organisations with and without such a health promotion research tradition. For instance, the Finnish Public Health Institute is well known because of its health promotion community project in North Karelia and was approached on this basis.

CEDRIC E. GINESTET talked to **PROFESSOR HEIN DE VRIES** of the Maastricht Health Research Institute for Prevention and Care about international collaboration on smoking prevention.

What were the major obstacles that you had to overcome in order to complete this European project?

The most problematic issue was and still is the receipt of financial resources from the European Union. It is a sad thing to say, because the fund was initially created with the aim of developing stronger European research efforts. It is also quite hard to pinpoint where exactly things start to become complicated, given the time-scale of the project.

Another difficulty is that most National Project Managers (NPMs) – we had one per country – had to fulfil several tasks: project manager, researcher, budget controller, and so on. That was a lot of work for a single person. They also did not have a thorough training in health promotion, so we had to develop all sorts of training for them.

There were methodological issues too. Randomisation was not possible in the Netherlands and Spain. In the Netherlands

most schools use a national drug prevention programme, so we ended up by comparing the ESFA approach with the national one. In Spain the local government demanded that we had to work with specific communities that already used a smoking prevention programme, and so we did. However, the control group did not use that programme.

Another obstacle was that although we developed common aims for the different national prevention programmes, some countries wanted additional goals and objectives. In other words, some countries were much more ambitious than others. An interesting question would be whether the most ambitious countries were the most successful. Those differences render the situation much more complex. For instance, Danish teachers appeared relatively unmotivated to implement a smoking prevention programme. Don't ask me why. That was very frustrating for our NPMs, because the Danish NPM was



probably the most energetic person of the whole ESFA team and had very good ideas, very good communication skills. But despite that, he encountered major difficulties in getting the teachers to accept the the ESFA project.

At the end we encountered time problems, of course. We have now ended all data analysis for the project.

What did you find?

Overall the project it was effective after almost four years, particularly in Finland, Spain and Portugal. In Portugal we had the greatest effects, but they appeared only after three years. That illustrates the importance of having long-term follow-ups for these complicated projects!

We developed mutual goals and objectives, and the methods used to translate theory into practice varied from country to country: for example, using church leaders is not the most relevant strategy for all.

Was the language barrier a problem? Were you all communicating in English?

Yes, that was a problem, certainly in the beginning. We have introduced a new language: Euro-English. You are allowed to make as many mistakes as you want to, provided that people understand you, and we managed quite well. Sometimes we switched to Spanish when doing local visits and when speaking with the local government.

How did you channel the energies of all those collaborators in order to present a single coherent project to the European Union Fund?

Hmm, maybe you should ask the others! It took a lot of discussions, e-mailing, phoning. But overall people felt that it was good to develop a programme based on current best practice, given the previous results available in the scientific literature. I guess that I also had the advantage that we already developed two successful projects in the Netherlands (De Vries *et al.*, 1994; Dijkstra *et al.*, 1998a; Dijkstra *et al.*, 1998b) and recently one using computer tailoring (Ausems *et al.*, 2004) – a method of analysing questionnaire responses to give highly personalised feedback. That certainly helped a lot. But most importantly, overall we agreed pretty quickly on the main themes of the research

project. An unexpected but interesting outcome of the project was that you have to think very clearly about how best to integrate various social cognitive theories. This also led to our research model, that we refer to as the integrated model for explaining motivational and behavioural change, which we now also apply in other settings (e.g. De Vries *et al.*, in press).

What sort of advice would you give to researchers who want to be involved in projects of this type?

Well, it depends on whether or not you like wrinkles and grey hair! You have to find a balance between being very clear about your own objectives and remaining open to the needs of others. You also need to be aware of cultural differences. Sometimes these differences can be unexpected, for example finding out that the northern countries need their dinner

‘I do think that European collaboration can have a good future’

between 6pm and 7pm, and southern countries around 10pm. Countries have developed their own cultural values and needs. You have to remain aware of that.

Another crucial point is to develop a very good project management team. If this goes astray, then you do have a serious problem. Luckily, we did not encounter such a quagmire. Well, I have other experiences as well, but that is another story. Be prepared that you may have to prepay your expenses and that funds always come in later than expected. Be prepared for a lot of administrative work.

And finally, if I had to do this project again, I would be more in touch with the selection of the NPMs, but that is not always feasible. Make the theoretical model more explicit and be prepared for people from the field not always having direct understanding of such models. And be clear about who is responsible for the research. I am very glad that this was coordinated in one place, so we were able to propose the research methods and to do the analysis. This avoided further confusion.

What do you think is the future of

European collaboration?

Our project was very ambitious, perhaps too ambitious. Each country had a national project manager that had to fulfil different roles, research was just one part of it, and eventually became less important because developing intervention materials took a lot of time in each country.

I do think that European collaboration is important. You can run these projects quite efficiently, but it is highly dependent on the quality of your research staff. And you should not expect zero mistakes, because making errors is part of the process. I guess that smaller projects will often remain the best option though, because they are more manageable, and most research questions do not need such large projects. Therefore, it really depends on the research question.

Despite this, I do think that European collaboration can have a good future. I would also very much enjoy an initiative where we would be working as a consortium on theoretical development, which would avoid such a logistical nightmare. This could give birth to the elaboration of a theoretical model and further studies to test it. This is what I would recommend, and also what I would like to do.

References

- Ausems, M., Mesters, I., Van Breukelen, G. & De Vries, H. (2004). Effects in-school and tailored out-of-school smoking prevention among Dutch vocational school students. *Health Education Research*, 19, 51–63.
- De Vries, H., Backbier, E., Dijkstra, M. & Van Breukelen, G. (1994). A Dutch social influence smoking prevention approach for vocational school students. *Health Education Research*, 9, 365–374.
- De Vries, H., Mesters, I., Van der Steeg, H. & Honing, C. (in press). The general public's information needs and perceptions regarding hereditary cancer: An application of the integrated change model. *Patient Education and Counseling*.
- Dijkstra, A., De Vries, H. & Roijackers, J. (1998a). Computerized tailored feedback to change cognitive determinants of smoking: A Dutch field experiment. *Health Education Research*, 13, 197–206.
- Dijkstra, A., De Vries, H. & Roijackers, J. (1998b). Long-term effectiveness of computer-generated tailored feedback in smoking cessation. *Health Education Research*, 13, 207–214.

WEBLINKS

Care and Public Health Research Institute:

www.caphri.unimaas.nl

Hein de Vries's homepage:

www.personeel.unimaas.nl/Hein.deVries/