



Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011)

Efeitos das campanhas de advocacy nas políticas regulatórias: Análise da atuação da organização ACT Promoção da Saúde na legislação antifumo (12546/2011)

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DOI: 10.22478/ufpb.2525-5584.2025v10n2.70942

Received: 29/07/2024
Approved: 18/06/2025

Abstract: This is a case study of the work of the organization ACT-Health Promotion in relation to the public problem of smoking in Brazil. The aim of the study was to highlight the effects of the advocacy campaigns carried out by the organization on the implementation of anti-smoking legislation. Based on a review of the literature on health advocacy, we described the campaigns carried out by ACT-Health Promotion in order to understand the instruments used and which elements of the legislation they pointed out needed to be regulated. We then analyzed the institutionalization of the organization and the network it has built to work on the cause. Finally, we looked for actions in which the organization has engaged in strategic litigation. The analysis of legislation, advocacy campaigns and network analysis carried out using Gelphi 10.01 software showed that the organization ACT-Promoção da Saúde has, over the last twenty years, had an impact on the implementation of policies aimed at reducing smoking, especially in pressing for the implementation of regulations

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Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

approved by the government and promoting the resolutions of regulatory agencies.

Keywords: Advocacy, Civil Society Organization, Smoke-free legislation, regulatory policies.

Resumo: Trata-se de um estudo de caso da atuação da organização ACT-Promoção em Saúde em relação ao problema público do tabagismo no Brasil. O objetivo do estudo foi destacar os efeitos das campanhas de *advocacy* realizadas pela organização na implementação da regulação da legislação antifumo. A partir de uma revisão de literatura sobre *advocacy* em saúde descrevemos campanhas realizadas pela ACT- Promoção em Saúde com objetivo de compreender os instrumentos utilizados e quais elementos da legislação pontuaram que precisavam de regulamentação. Após, analisou-se a institucionalização da organização e a rede que construiu para atuação na causa. Por fim, buscamos as ações que a organização atuou com litigância estratégica. Com isso verificou-se que, através da análise da legislação, das campanhas de Advocacy e da análise de redes realizada com auxílio do software Gephi 10.01, que a organização ACT-Promoção da saúde tem, nos últimos vinte anos, impactado a implementação de políticas que visam a redução do tabagismo, em especial na pressão para a implementação das regulamentações aprovadas pelo poder público e na promoção das resoluções das agências regulamentadoras.

Palavras-chave: Advocacy, Organização da Sociedade Civil, Legislação antifumo, políticas regulatórias.

1. INTRODUCTION

This study is part of a broader research on “Effects of advocacy campaigns on the Public Policy cycle: Study on the performance of organizations in the field of Public Safety, Health and Environment”³ and analyzed the performance of the rights defense organization ACT- Health Promotion in the regulation of the anti-smoking law in Brazil. The objective of the study is to highlight the effects of the advocacy campaigns carried out by the ACT organization on the implementation of the regulation of anti-smoking legislation. The choice of this organization to reflect on the use of advocacy

³ Case study that is part of the research "Effects of advocacy campaigns on the Public Policy cycle: Study on the performance of organizations in the field of Public Safety, Health and Environment" carried out with financial support from Public Notice 03/2022 - Research Grant - Human Sciences; Social and Applied Sciences; Linguistics, Letters and Arts of the Foundation for Research Support of Alagoas (FAPEAL).

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

campaigns in regulatory policies was due to the fact that it has been operating in Brazil for more than 20 years pressuring both the legislative and the executive for the implementation of regulatory policies in the health area.

Advocacy campaigns are understood as the mobilization of causes, themes, and discourses on rights before the public authorities to influence and influence policies and the public agenda (Scherer-Warren, 2011; Monteiro & Melo, 2022). The organizations that defend rights that use expedients such as advocacy, according to international literature, work to ensure that the guarantees of the rights affirmed in the constitutions are effective, as well as in the expansion of rights. This action is related to the various stages of the public policy cycle, which influence both the formulation and the implementation of the agreed regulation in relation to a given public problem (Boris & Mosher-Williams, 1998; Hojnacki et al., 2012; Kim & Mason, 2018).

The case study was carried out based on four axes. Initially, a literature review on health advocacy was used to understand what the specialized literature points out about this type of advocacy in the field of health. Then we looked at the institutionalization of the organization and the network it built to act in the cause. In the third axis, we analyzed and described campaigns carried out by ACT in order to understand the instruments used and which elements of the legislation needed regulation, as well as the strategic litigation generated in the Federal Supreme Court (STF).

2. HEALTH ADVOCACY AND THE REGULATION OF PUBLIC POLICIES

The review of the literature on health advocacy, which is important to support the analysis of the advocacy actions carried out by the civil society organization ACT-Health Promotion in relation to the regulation of anti-smoking policies and legislation in Brazil, points to the same problem that the organization faced, which is the difficulty of implementing the regulation of strict anti-smoking laws against large companies in Brazil, and what is possible, in terms of action, to carry out from health advocacy.

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

Although health advocacy has multiple definitions (Cohen, Marshall, 2017), in general, it means the defense of a health policy on behalf of some group, conducting studies that aim to solve and disseminate obstacles and barriers related to the health field, and those dedicated to the promotion of health policies.

Christoffel (2000), Carlisle (2000), Farrer et al. (2015) and Kaplashrami (2016) reiterate the importance of health advocacy based on scientific evidence to be useful in reducing health inequalities and fighting for the expansion of rights. The ideal, according to Kaplashrami (2016), is to combine investigation of the health problem with public action. Christoffel (2000) highlights that qualified information is important to model or change the legislation of a given health matter.

Chapman (2004) in relation to the change in legislation and the regulation of legislation indicates that advocacy is important and strategic in the face of the harm caused to public and collective health by various industries, such as tobacco and sweetened beverages. Advocacy can, in this context, drive new laws, regulations, taxes, and public health policies. Dallari et al. (1996) point out that health advocacy can result in a public civil action, legislative awareness of the cause, popular initiative, public hearings and administrative advocacy related to government agencies. Neves et al. (2024) understand that health actions based on advocacy are important in promoting health as a broad and integral right.

Civil society organizations have influenced the public policy cycle in various ways, often through advocacy actions. According to Howlett (2013), the role of state and non-state actors is decisive in the development of public policies, regardless of the stage of the cycle, whether it is in the formulation, implementation or evaluation. In general, studies on social participation and control in public policies in Brazil focus on the relationship between social organizations and state institutions in the formulation of public policies (Marques, 2023; Dowbor, 2014). Studies related to the implementation of public policies have focused on street-level bureaucracy (Lotta, 2018).

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

Little has been problematized, within the implementation studies, the issue of the process of regulation of public policies approved in the legislative and executive branches. Faced with the omission of the legislature to debate and ratify the constitutionality of the laws it approves, as well as the executive to strengthen the decisions of its regulatory agencies, the judiciary has been called upon to respond to the control of constitutionality, which makes the regulation of certain legislations time-consuming.

Civil society organizations and social movements have acted, within this configuration, through legal mobilization. One sometimes as parties demanding answers from the judiciary, others as *Amicus Curiae*, informing the cause and bringing scientific evidence into the courts (Monteiro et al. 2024; Monteiro, L., & Teixeira Marques de Souza, V, 2025). The legal or legal mobilization in public policies presents itself as an important institutional fit in the effects of the actions of organizations and social movements (Carlos et al., 2017). In addition, legal mobilization, interactions with institutions, and the public policy agenda through health advocacy are added , which, according to Monteiro et al. (2023, p. 108), involve “[...] to indicate institutional failures of the SUS, in promoting educational and informative campaigns, such as social control of regulatory agencies and a means of social participation of health users, in addition to defending the right to health in Brazil”.

3. METHODOLOGICAL PATH

The first step presented in this case study consisted of the evaluation of the social communication campaigns promoted by ACT, based on the information available on the organization's own website. The objective was to understand the scope and chronology of advocacy actions related to anti-smoking legislation, as well as to add other relevant information for the analysis.

To classify the campaigns as advocacy or political incidence, the criterion of consideration of the organization itself was adopted as to the nature of its actions. In other words, if the ACT considered the campaign as advocacy or

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

political advocacy, this classification was sufficient for its inclusion in the analysis. No additional conceptual problematization of the topic was carried out, which resulted in the exclusion of other campaigns and initiatives that were not classified as advocacy by the organization.

The choice of the campaigns analyzed was concentrated on those related to the implementation of anti-smoking legislation in Brazil, promoted by the ACT. Along with these criteria, 14 social communication campaigns were selected. This selection was justified by the fact that the organization has been operating in the country for more than twenty years and that its advocacy campaigns have been carried out continuously for more than a decade, which makes it possible to evaluate their effects on the formulation and implementation of public policy instruments. In addition, the selected campaigns reflect the chronology of the regulation of anti-smoking legislation in Brazil.

Afterwards, during the analysis of the advocacy campaigns carried out by ACT, information was collected on the context, content, dates, actors involved, stakeholders, laws cited, forms of strategic litigation, direction of the campaigns, public policy instruments used, phases of the public policy cycle and partner organizations and institutions, recorded in an Excel spreadsheet. These data allowed us to ponder on the institutional and relational mechanisms (Lavalle et al., 2019) of the ACT-Health Promotion organization for advocacy in public policies. This database not only subsidized the analysis of the campaigns, but was also fundamental for the network analysis and to understand how the campaigns influenced the public policy cycle.

The analysis of these data was predominantly descriptive, with the objective of understanding the content, the context and the impact and effect of the campaigns. For the network analysis, the Gephi 10.01 software was used, which allowed the visualization of the connections between actors, stakeholders and institutions involved in the advocacy actions. After that, a documentary research was carried out on the website of the Federal Supreme Court (STF) to identify strategic litigation actions in which the organization participated, either as Amicus Curiae or plaintiff. Knowing which constitutionality control actions the

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

organization was involved in, we analyzed the content, the parties, and the decisions of the Court in relation to the actions analyzed.

This methodological approach allowed us to outline the procedures used in the analysis of strategic litigation actions and advocacy campaigns promoted by ACT - Health Promotion, related to the implementation of anti-smoking legislation in Brazil. The combination of desk research, network analysis, and content analysis provides a framework for understanding the strategies used and the actors involved in this process. The evidence that will be presented below will seek to contribute to a more detailed understanding of these dynamics, highlighting the relevant aspects of the actions carried out by ACT over time.

4. INSTITUTIONAL AND RELATIONAL MECHANISMS OF THE ACT-HEALTH PROMOTION ORGANIZATION

Looking at the characteristics of organizations is important to understand the effects of advocacy campaigns and legal mobilizations carried out. According to Child & Grønbjerg (2007), the complexity and size of the organization are important variables because the larger and more complex, the greater the institution's contribution of resources and funding, which facilitates the use of advocacy and influence on public policies, as they can hire scientific research for political advocacy (Child & Grønbjerg, 2007).

The relationship between organizations and agenda power in public policy subsystems is also an important model to be used in the comparison of the organizations analyzed. In order for them to have agency dominance in a given subsystem of public policies, it is necessary to align three causal mechanisms. The institutional mechanisms to generate state capacities and interaction with the State require that there be a party, legislative and executive configuration that is sensitive and open to the influence of issues arising from civil society, or that organizations are able to create these channels and institutional frameworks (Lavalle et al., 2019)

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

Relational mechanisms allude to activism networks, the potential that organizations have in articulating causes in a given policy sector that generate coalitions and interactions with political institutions. It refers, therefore, to the institutional transit built by organizations. Finally, there are the social mechanisms, translated into organizational forms and articulations with international organizations that generate, in addition to a stock of learning, repertoires of collective action in interaction with the State (Lavalle et al., 2019).

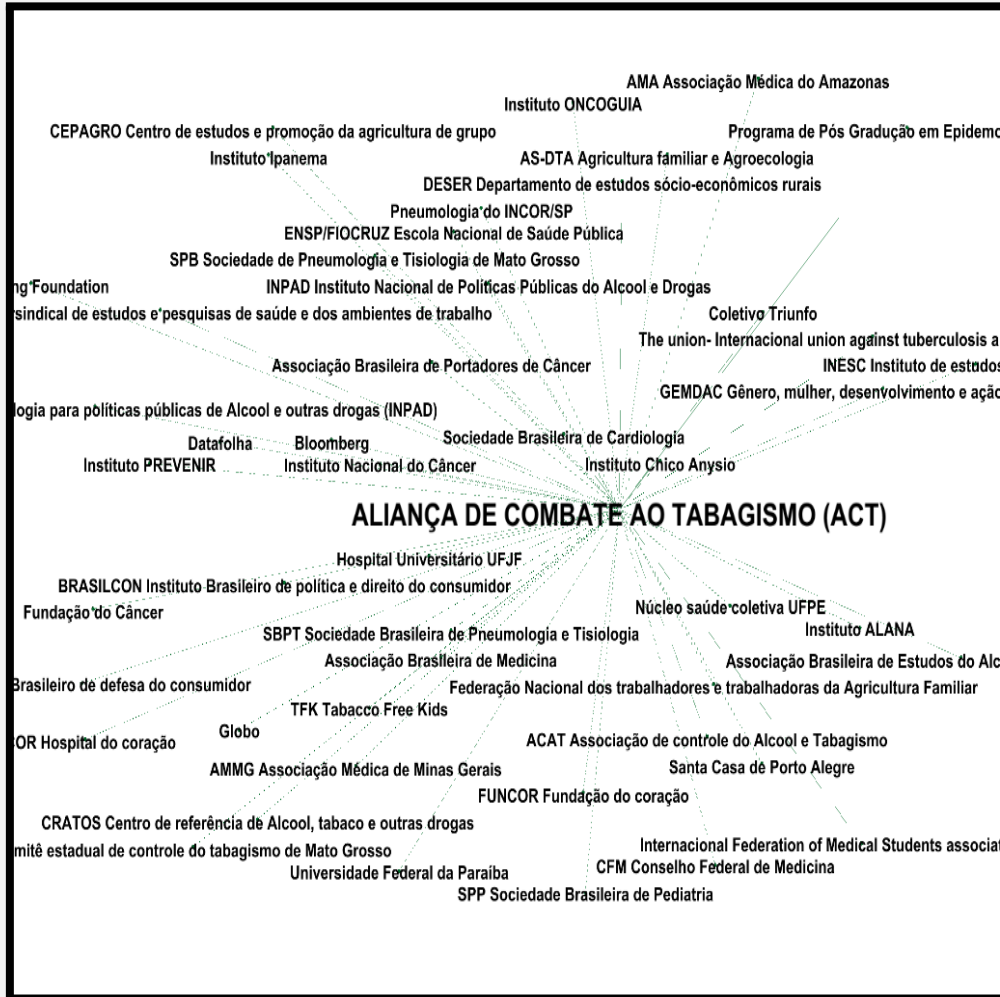
ACT- Health Promotion was created in 2006 dedicated to the area of tobacco control, and over time it expanded its field of action also to healthy eating and alcohol control. In the field of tobacco control, it coordinates and promotes the Tobacco Control Alliance. In the years of operation, it has won a series of international awards and recognition by government institutions in Brazil, such as state governments, city halls and executive secretariats. According to Monteiro et al. (2023, p. 65-66) the ACT- Health Promotion

[...]It is an NGO composed of technicians of different degrees of specialization, follows the UN's 2030 agenda for sustainable development and its activities are disconnected from the state. Regarding the trend towards multiplication and diversification, ACT coordinates the Health Promotion Network, integrates, as one of the founding organizations, the Alliance for Adequate and Healthy Food, in addition to participating in several national and international collectives and movements. He also acts in the Federal Supreme Court, as Amicus Curiae in constitutionality and unconstitutionality actions that question the effectiveness of public policies for tobacco control. Therefore, during this time in which it operates, especially in the field of tobacco control, the organization has become institutionalized, and is even considered one of the organizations with expertise in the subject to act as Amicus Curiae in the STF.

In addition, it acts by activating a series of relational mechanisms depending on the proposed advocacy campaign. It built a tobacco control network that includes international organizations, communities of expertise, professional organizations, medical associations, universities, collectives, study centers, institutes, societies, hospitals, among others, according to the network developed in the Gelphi 10.01 software, based on the mapping of the institutions that worked with the ACT in the campaigns carried out.

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

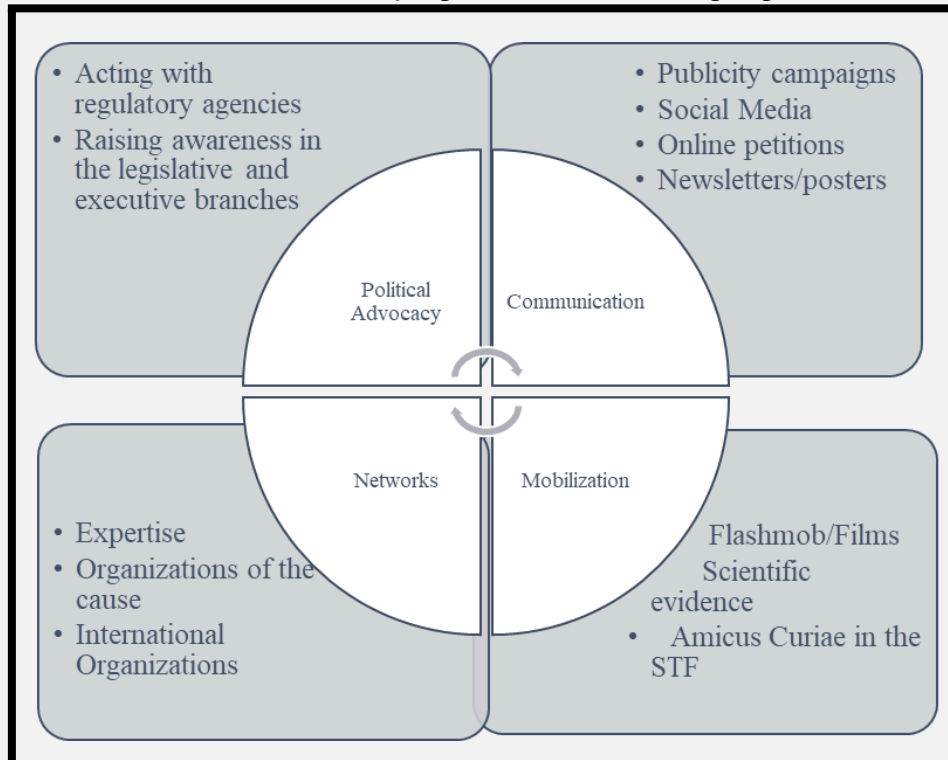
Figure 01: Anti-Smoking Alliance (ACT) Network



Source: Prepared by the authors in Gelphi 10.01

Therefore, the constitution of a significant network of organizations and the institution of their activities in the field of tobacco control may mean a greater power of agenda in the regulation of anti-smoking legislation. In general, in relation to the health advocacy carried out by the ACT, it reflects the way that the specialized literature describes it. The representation below includes the particularities of the organization in relation to its advocacy strategies.

Figure 02: Representation of the Advocacy carried out by ACT- Health Promotion in the campaigns for anti-smoking legislation



Source: Prepared by the authors based on research material.

Therefore, given the difficulty of regulating tobacco control legislation in Brazil, it is understandable that there are so many strategies adopted. Even organizations with institutional and relational mechanisms to influence the public agenda and promote a cause have difficulties in influencing the regulation of these proposals, such as ACT-Health Promotion. Other issues, even in the field of health, do not require strategic litigation in the STF.

4.1 Advocacy campaigns and mobilization for the regulation of smoke-free legislation

The construction of tobacco control as a public health problem is recent in the history of Brazil. From the Framework Convention to the granting of national legislation and its regulation is still an ongoing process, as we can see by analyzing the ACT's performance in guiding tobacco control in Brazil. The table below presents a chronology of the smoking issue.

Figure 03: Chronology

1950-51 – In the United States and the United Kingdom, studies are published that confirm the connection between smoking and lung cancer.
1965 – Congressman Ivan Luz presents, in the Federal Chamber, a bill that establishes the obligation to warn about the harm of smoking in cigarette packages.
1971 – Senator José Lindoso presents bills to institute a partial ban on tobacco advertising on television and radio, as well as its commercial regulation, and reiterates the obligation of warning on cigarette packs and the non-permission of sale to minors.
1973 – Accident caused by a cigarette thrown into the paper basket of one of the bathrooms of the Boeing 707, from Varig, kills 123 people.
1976 – The Medical Association of Rio Grande do Sul institutes the first State Program to Combat Smoking.
1979 – The topic of smoking is addressed in a seminar organized in Salvador by the Brazilian Institute of Thoracic Investigation. This encounter results in the Letter of Salvador, a historical document that expresses the concern of Brazilian doctors with the harm produced by tobacco. Under the sponsorship of the Brazilian Society of Cancerology, the Antônio Prudente Foundation and the School of Public Health of the University of São Paulo (USP), various medical-scientific, governmental and social entities come together and structure the first National Program Against Smoking.
1980 – Sponsored by the League against Tuberculosis of Espírito Santo, the First Brazilian Conference to Combat Smoking is held in Vitória (ES). On August 29, the Medical Society of Paraná launches the tobacco strike, led by Jayme Zlotnik.
1981 – With sponsorship from the Addiction Research Foundation of Toronto (Canada), the first determination of nicotine, tar and carbon monoxide levels per cigarette is carried out. Creation of a Commission for Studies on the Consequences of Smoking, at the Ministry of Health, in Brasília (DF).
1983 – State law prohibits smoking in public places in Rio Grande do Sul, the largest tobacco producer in Brazil.
1984 – Creation of the Coordinating Committee for Tobacco Control in Brazil.
1985 – Realization of the I No Smoking Race, in Ibirapuera Park (SP), coordinated by the Brazilian Medical Association. Russian actor Yul Brynner dies. A smoker and victim of lung cancer, he advertised against cigarettes for the American Cancer Society.
1986 – First federal tobacco control law (No. 7,488, of June 11), which establishes August 29 as the National Day to Combat Smoking, chosen in honor of the tobacco strike, held six years earlier, in Paraná. Creation of the National Program to Combat Smoking, a joint action of the National Divisions of Sanitary Pulmonology and Chronic-Degenerative Diseases of the Ministry of Health. Patrick Reynolds, heir to the world's second-largest tobacco company, leads an anti-smoking campaign in the United States. Main argument: at the age of 11 he saw his father, R.J. Reynolds Jr., an indomitable smoker, die of pulmonary emphysema. On the flights of the Rio-São Paulo air shuttle, the spatial division between smokers and non-smokers is established, an initiative already adopted on other routes of Brazilian commercial aviation.
1988 – The phrase "The Ministry of Health warns: smoking is harmful to health" becomes mandatory on the packaging of tobacco products. The World Health Organization (WHO) organizes its first tobacco-free day, celebrated on May 31.
1989 – Creation of the National Tobacco Control Program, coordinated by INCA.
1990 – Mandatory warning phrases related to the harm of tobacco in radio and television advertisements.
1993 – Brazil joins the WHO initiative and promotes World No Tobacco Day, whose motto is "Tobacco-Free Youth".
1994 – The First Brazilian Congress on Smoking is held in Rio de Janeiro.
1995 – Implementation of the National Tobacco Control Program, coordinated by INCA. David McLean, the "Marlboro Man", dies of lung cancer.

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

1996 – Commercials for tobacco products can only be aired between 9 pm and 6 am. Smoking in closed places is now prohibited (except in "fumódromos", areas intended exclusively for smoking, properly isolated and with convenient ventilation). Produced by a Canadian laboratory, research commissioned by INCA proves that the tobacco industry uses ammonia and other chemical substances to increase the smoker's dependence on nicotine.
1998 – Total ban on smoking on planes, on all trips, for any duration, in the national territory.
1999 – Creation of the National Commission for Tobacco Control (CNCT). The National Health Surveillance Agency (Anvisa) starts to regulate, control and inspect tobacco products. During the 52nd World Health Assembly, the proposal to create the first international public health treaty in history was approved.
2000 – Prohibition of cigarette advertisements on television, radio, newspapers, magazines, billboards and merchandising, limiting them to the interior of points of sale. Within two years, contracts in the tobacco sector for sports sponsorships should be terminated. Creation of the Management of Tobacco Products at Anvisa. Brazil is the first country in the world to have a regulatory agency that deals with the subject. Non-governmental organizations form the Framework Convention Alliance for the approval of the Framework Convention on Tobacco Control (FCTC), within the framework of the WHO.
2001 – Anvisa regulates the printing of images illustrating the warnings on cigarette packaging, which also start to stamp the number of the "Dial Stop Smoking". It determines maximum levels for tar, nicotine and carbon monoxide in cigarettes. It prohibits the use, in packaging or advertising material, of descriptors such as "ultra-low content", "low content", "mild", "light", "light", "moderate content", "high content" and others that may induce the consumer to misinterpret the content of cigarettes.
2002 – The National Tobacco Control Program, coordinated by INCA, is incorporated into the Unified Health System (SUS) network, in the low complexity line.
2003 – Creation of the National Commission for the Implementation of the Framework Convention on Tobacco Control (Conicq), replacing the CNTC. The use of the phrases "Sale prohibited to minors under 18 years of age" and "This product contains more than 4,700 toxic substances and nicotine, which causes physical or psychic dependence, is now mandatory. There are no safe levels for consumption of these substances". During the 56th World Health Assembly, the FCTC is unanimously approved by the 192 Member States of the WHO.
2004 – Access to the treatment and treatment of smoking is expanded for the primary and medium-complexity care network of the SUS. Judge in São Paulo sentences Souza Cruz and Philip Morris to indemnify smokers and former smokers for omitting information about the risks of smoking and for disseminating abusive and misleading advertising.
2005 – On February 27, the FCTC enters into force, reaching the mark of 40 ratifications (including Brazil). Release of the film Thank You for Smoking, which shows the strategies and actions of a tobacco lobbyist in the United States.
2006 – Brazilian presidential decree ratifying the FCTC is signed.
2007 – Brasília becomes the first city free of indoor tobacco consumption.
2008 – New, more aggressive warning images are introduced on the labels of tobacco products.
2009 – Brazilian states adopt legislation that regulates tobacco-free environments. Production of the national film Fumando espero, a documentary that exposes the hardships of people who try to quit smoking.
2010 – Anvisa publishes two public consultations on tobacco products: one provides for the end of the use of additives and the other regulates the advertising of these products, as well as the display at points of sale, and provides for a new warning phrase on packaging.
2011 – Federal Law 12546/2011 prohibits smoking in closed places. Doctor Drauzio Varella presents the painting Brazil without cigarettes, on the Fantástico program (Rede Globo). The program has a partnership with INCA and contributes to the smoking prevention campaign in the country.
2012 – Anvisa prohibits the use of additives that give flavor and aroma to cigarettes, an initiative aimed at containing the attraction exerted by the industry on young people.

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

2014 – Decree No. 8,262/2014 regulates the prohibition of smoking cigarillos, cigars, pipes, hookahs and other products in places of collective use, public or private, such as halls and corridors of condominiums, restaurants and clubs – even if the environment is partially enclosed by a wall, partition, ceiling or awning.
1950-51 – Studies in the United States and the United Kingdom confirm the connection between smoking and lung cancer.
1965 – Congressman Ivan Luz presents a bill in the Federal Chamber to include warnings about the harm of smoking on cigarette packages.
1971 – Senator José Lindoso proposes bills to partially prohibit tobacco advertising on television and radio, regulate its commercialization, include warnings on cigarette packs and prohibit the sale to minors.
1973 – An accident caused by a cigarette thrown into the paper basket of a bathroom of the Varig Boeing 707 kills 123 people.
1976 – The Medical Association of Rio Grande do Sul institutes the first State Program to Combat Smoking.
1979 – The topic of smoking is discussed in a seminar in Salvador, resulting in the Letter of Salvador, which expresses the concern of Brazilian physicians with the harm of tobacco. Several entities structured the first National Program Against Smoking.
1980 – The First Brazilian Conference to Combat Smoking is held in Vitória (ES). The Medical Society of Paraná launches the tobacco strike, led by Jayme Zlotnik.
1981 – The first determination of nicotine, tar and carbon monoxide levels per cigarette is carried out. The Commission for the Study of the Consequences of Smoking is created in the Ministry of Health.
1983 – State law prohibits smoking in public places in Rio Grande do Sul.
1984 – Creation of the Coordinating Committee for Tobacco Control in Brazil.
1985 – Realization of the I No Smoking Race in Ibirapuera Park (SP). Actor Yul Brynner, who advertised against smoking for the American Cancer Society, dies.
1986 – First federal law on tobacco control (No. 7,488), establishing the National Day to Combat Smoking on August 29. Creation of the National Program to Combat Smoking. Patrick Reynolds leads anti-smoking campaign in the USA.
1988 – The phrase "The Ministry of Health warns: smoking is harmful to health" on the packaging of tobacco products becomes mandatory. WHO organizes the first World No Tobacco Day.
1989 – Creation of the National Tobacco Control Program, coordinated by INCA.
1990 – Warning phrases about the harm of tobacco become mandatory in radio and television advertisements.
1993 – Brazil promotes World No Tobacco Day, with the motto "Tobacco-Free Youth".
1994 – The First Brazilian Congress on Smoking is held in Rio de Janeiro.
1995 – Implementation of the National Tobacco Control Program, coordinated by INCA. David McLean, the "Marlboro Man", dies of lung cancer.

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

1996 – Commercials for tobacco products can only be aired between 9 pm and 6 am. Smoking in closed places is now prohibited, except in areas intended exclusively for smoking. Research proves that the tobacco industry uses chemical substances to increase smoker dependence.
1998 – Total ban on smoking on planes on all trips within the national territory.
1999 – Creation of the National Commission for Tobacco Control (CNCT). Anvisa starts to regulate, control and inspect tobacco products. The creation of the first international public health treaty was approved.
2000 – Prohibition of cigarette advertisements in various media. Creation of the Management of Tobacco Products at Anvisa. Brazil is the first country to have a regulatory agency for the subject.
2001 – Anvisa regulates the printing of warning images on cigarette packages and prohibits descriptors that may induce the consumer to misinterpretations.
2002 – The National Tobacco Control Program is incorporated into the SUS network.
2003 – Creation of the National Commission for the Implementation of the Framework Convention on Tobacco Control (Conicq). Warning phrases become mandatory on the packaging of tobacco products.
2004 – Access to smoking treatment is expanded in the primary and medium complexity care network of the SUS. Judge condemns tobacco companies to compensate smokers for omitting information about the risks of smoking.
2005 – The Framework Convention on Tobacco Control (FCTC) enters into force. Release of the film "Thank you for smoking".
2006 – Brazilian presidential decree ratifying the FCTC is signed.
2007 – Brasília becomes the first city free of indoor tobacco consumption.
2008 – New warning images are introduced on the labels of tobacco products.
2009 – Brazilian states adopt legislation that regulates tobacco-free environments. Production of the documentary "Fumando espero".
2010 – Anvisa publishes public consultations on tobacco products, predicting the end of the use of additives and regulating the advertising of these products.
2011 – Federal law prohibits smoking in closed places. Drauzio Varella presents the painting "Brazil without cigarettes" on the Fantástico program.
2012 – Anvisa prohibits the use of additives that give flavor and aroma to cigarettes.
2014 – Decree regulates the prohibition of smoking in places of collective use, public or private.

Source: Adapted from Ministry of Health, José Alencar Gomes da Silva National Cancer Institute (INCA) & Oswaldo Cruz Foundation (Fiocruz) (2012).

Some studies, such as the one by Borges et al (2020), have highlighted the difficulty of countries, especially those with lower income, in implementing

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

and regulating the guidelines of the Framework Convention on Tobacco Control, especially some specific articles, such as the standardization of packaging

The adhesion of States to the Standardized Packaging model has been gradual and cautious, given the domestic obstacles and the resistance of the tobacco industry. The effects of regulatory inhibition in some of the FCTC participating states is a visible manifestation of the successful strategy of tobacco companies to prevent, deter or delay the adoption of domestic tobacco control measures. This strategy is more directly related to the imposition of economic costs on countries that intend to implement policies of this nature, and has the potential to produce effects in a shorter period, in addition to having a stronger impact on lower-income countries (Borges et al, 2020, p. 11)

The campaigns developed by ACT Health Promotion reflect the difficulty of implementing and regulating the Framework Convention described in the study by Borges et al (2020) and followed the logic described in the academic literature (Carlisle, 2000; Farrer et al., 2015; Kaplashrami, 2016; Chapman, 2004; Christoffel, 2000), and are presented as reagents to issues related to the problem of smoking in Brazil. In his actions, he added studies, scientific evidence, mobilization and strategic litigation in constitutionality and unconstitutionality actions in the STF, wide-ranging social communication campaigns, petitions, participation in public hearings promoted in particular by the government agency ANVISA, among others.

The first campaign analyzed was "Those who do not smoke are not forced to smoke". The complaint lies in passive smoking that has an impact on the health of Brazilians. Held in 2009, launched by ACT, in partnership with the National Cancer Institute, with funding from the Bloomberg initiative of the World Lung Foundation, it featured a 30-second film, radio spot, posters, brochures, billboard and busdoor. There was also a website just for the campaign. The broadcast was in prime time on TV Globo. The campaign used data from INCA, which also signed the content of the campaign. Pieces of the campaign can be found on the website www.brasil.livredefumo.org.br

The second campaign "Any closed environment is too small for cigarettes", was developed by the Neogama/BBH agency and launched in

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

2008. The target audience of the campaign was workers exposed to cigarette smoke in their workplaces, such as waiters. The piece prepared for distribution in bars and restaurants were matchboxes that reproduced data related to the poor quality of the air where cigarettes are released. There was no financing, but it was broadcast commercially in cinemas, TV, radio, magazines and newspapers, in addition to the distribution of explanatory materials in bars and nightclubs in São Paulo and Rio de Janeiro.

The "Say no to cigarette advertising" campaign was launched in 2010, in Brasília, and its objective was to alert the population and draw public attention to how the tobacco industry continued to promote its products at points of sale and private events, despite the fact that there have been restrictions on advertising in the mass media since the 2000s. The campaign used scientific evidence on points of sale and a legal opinion. It also included experts in advertising and advertising, together with young people, to explain how the perception of advertising can affect consumption. Several actors and actresses participated in the campaign, as well as promoted a petition to be sent to the public authorities. The campaign can be checked on the www.propagandasemcigarro.org.br.

The campaign "The tobacco industry needs a limit" had as a partnership the Brazilian Association of Alcohol and Drug Studies (ABEAD), the Cancer Foundation, the National Institute of Science and Technology for public policies on alcohol and drugs (Inpad). The linked message is that the tobacco industry has to be limited, regulated in promoting actions to attract adolescents to addiction. The Campaign denounces the addition of flavors to cigarettes to make addiction and the first puff more palatable and the advertising of cigarettes at points of sale, and the location of cigarettes, usually next to candies and sweets. They also denounce the adoption of attractive packaging for young people.

The campaign emerged to strengthen ANVISA's proposals, formulated through public consultations 112 and 117. The advertising of cigarettes at points of sale, at that time, was prohibited by law 12.546, but not yet regulated. The

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

prohibition of additives was approved at a collegiate meeting of ANVISA, in March 2012. In addition to advertisements, mobilization on social networks, he promoted a petition for the regulation of law 12.546 and for the validity of ANVISA's decisions. The campaign was based on a survey commissioned from the DATAFOLHA Institute in 2011. The Campaign is stored on the www.limitetabaco.org.br website. The previous campaign was carried out for World No Tobacco Day 2012, promoted by the World Health Organization (WHO). In Brazil, the campaign developed was "Smoking: it's bad for you, it's bad for the planet." ACT strengthened the Tobacco Limit campaign.

The campaign "Advertising cigarettes at the point of sale is illegal!" encouraged the public to denounce the establishments in their municipalities that ran cigarette advertisements. The campaign is part of the ACT's actions to regulate law 12.546/2011, in particular, the articles that deal with cigarette advertising. The tobacco limit campaign engaged more in the mobilization for the regulation of law 12.546/2011 that deals with smoke-free environments for the entire country and the prohibition of cigarette advertising. This law was sanctioned by then-President Dilma Rousseff in December 2011, but until 2013, the date of the mobilization, it had not been regulated. The campaign is based on an online petition, with wide dissemination. During 2012, tobacco control activist organizations signed an open letter for tobacco control measures delivered to the presidency of the republic, there were meetings with the Minister of Health, and at the Civil House to pressure the regulation of the law.

The campaign highlights that, since 2008, the states of São Paulo and Rio de Janeiro have passed anti-smoking laws with important social and health impacts as well. In the construction and dissemination of the Campaign, the Alliance Against Tobacco used research carried out by the Heart Institute (INCOR) and the one carried out by the Datafolha Institute, contracted by the Alliance for Tobacco Control. They use the Framework Convention on Tobacco Control, an International Treaty of public health ratified by Brazil, through decree 5658/2006 to substantiate the reasons for the importance of regulating the law in Brazil. They point out that, although Federal Law 12,546/2011 amended Law

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

9,294/196 by prohibiting cigarette advertising, it did not legislate in relation to advertising at points of sale through luminous displays, usually positioned near candies and sweets. Just as there is no legislation for packaging, which, at the time, continued to have modern and attractive designs. Therefore, these practices, adopted by tobacco companies and not punishable by law, encouraged tobacco consumption.

In the campaign alluding to World No Tobacco Day 2013, the strategy was to publicize the practices adopted in other countries to ban the advertising and exposure of cigarettes at points of sale. They cite that in Canada, Thailand, Ireland, Australia and England, cigarettes are sold outside the public's range of vision, often under the counter. Australia has adopted, since 2012, generic packaging for cigarette packs. The ITC (International Tobacco control) report was used, which measures the impact of tobacco control policies in countries.

The Campaign "Cancer Ad - With it everyone loses" was designed as a counterpoint to the advertising campaign of the company Souza Cruz "Free Competition. With it, everyone wins." Souza Cruz's campaign, aired in 2013, had the argument that retailers are free to install display pieces from any cigarette manufacturer. There was a prior agreement between the company and CADE in which the sale of its products and any other company at the points of sale was allowed. ACT, as a counterpoint, publicized the campaign "Cancer Ad - With it everyone loses", a piece by the Hamas Worldwide Agency, in its pro-bono policy. They pointed out that despite the existence of the law, and having been sanctioned by the then president of the republic Dilma Rousseff, the legislation without regulation had no effect in curbing the practices of tobacco companies.

On the 2013 National Day Against Smoking, ACT launched the campaign "Cigarettes and Candies, no!", through an advertising piece, a flasmob video, and sharing on social networks. The campaign is a defense of the resolution of the collegiate board (RDC 14/2012) of Anvisa that prohibits the use of additives in cigarettes, cigars, cigarillos and other tobacco products. This resolution was the result of discussions within the regulatory agency, and was based on Article

9 of the Framework Convention on Tobacco Control contemplated in Decree 5.658/2006. This resolution, which is within ANVISA's competences, has been challenged by tobacco companies before the legislative, judiciary and executive in Brazil. On trial, at that time, a lawsuit in the Federal Supreme Court, which questions this ANVISA resolution, on the prohibition of additives in cigarettes.

The Campaign "There is no maybe. Cigar kills" was elaborated as a counterpoint to the advertisement "Don't be a maybe. Be Marlboro" by Philip Morris. In it they build a narrative of cigarettes associated with a young, adventurous lifestyle. ACT and other organizations promoted the campaign with the slogan: There is no maybe. Cigarette Kills, in 2014. In allusion to National Cancer Day, November 27, the Alliance for Tobacco Control and Health – ACT+ launched, in 2014, the campaign "Cigarette, a damage to my health", created by Agência Camisa 10. They elaborated three pieces inflecting the word swallow: "From so much smoking, I swallowed my lungs"; "Cigarettes, a damage to my health"; "I'm ruining my life." In the same year, the national anti-smoking law was regulated, and came into force on December 3. ACT Health Promotion organized an information campaign, broadcast on social media, about the prohibition of smoking in closed environments, public and private, throughout the country.

Although the anti-smoking law came into force in December 2014, some prohibitions contained in the law, such as the advertising of tobacco products at points of sale, continued to be practiced, taking advantage of loopholes in national legislation. In view of this, ACT, together with other organizations in Latin America, launched a campaign on social media and in videos "End of cigarette marketing at points of sale", as well as proposed an online petition. The objective was to avoid advertising, especially for adolescents and children. In addition to this control exercised by the organization, the campaign also aimed to support Bill No. 8303/2014, which calls for the implementation of standardized cigarette packaging, according to the notification issued by ANVISA.

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

After coming out and entering the agenda several times in the Federal Supreme Court on the issue of banning flavored cigarettes with additives, ACT, together with organizations from Argentina, Bolivia, Chile and Peru, launched, in 2017, the campaign #Sabor that kills. The use of additives in cigarettes in Brazil has been prohibited since 2012, when RDC 14 was published by ANVISA. In 2013, before the rule came into force, the STF granted an injunction to suspend the effects of RDC 14, in a lawsuit filed by the National Confederation of Industry. The campaign ran videos on the social network and promoted an online petition.

The campaign "The Cigarette Bill", aired in 2019, denounces the expenses that the country has with medical and productivity expenses related to cigarette consumption. As well as the number of deaths that could have been avoided. The campaign is aimed at increasing taxes on tobacco companies, as a way to repay the state for these expenses, and to discourage the consumption of cigarettes in the country. Based on a series of scientific evidence and technical notes, the campaign defended a new tobacco tax in Brazil

When we look at the campaigns and what has actually been regulated so far as the legislation has been, it is clear that how it involves large companies is not an easy topic to put on the public agenda. Of all the campaigns, only three had some effect on their regulation, as shown in the table below:

Figure 04: the effects of ACT-Health Promotion advocacy campaigns on the regulation of Law 12546/2011

Campaign	Article	What has changed from law 9.294
<p>Say no to cigarette advertising</p> <p>The tobacco industry needs limits</p>	Art 49	<u>Art. 3</u> - The commercial advertising of cigarettes, cigarillos, cigars, pipes or any other smoking product, whether or not derived from tobacco, is prohibited throughout the national territory, with the sole exception of the display of such products in the places of sale, provided that it is accompanied by the warning clauses referred to in paragraphs 2, 3 and 4 of this article and the respective price list. which must include the minimum retail sale price of cigarettes classified under Tipi code 2402.20.00, in force at the time, as established by the Executive Branch.
<p>Any enclosed environment is too small for cigarettes</p>	Art 49	<u>Art. 2</u> The use of cigarettes, cigarillos, cigars, pipes or any other smoking product, whether or not derived from tobacco, in a closed collective space, private or public, is prohibited.

Looking at the judicialization of public policies becomes essential to understand the difficult regulation of tobacco control law in Brazil. Despite a series of scientific evidence presented, petitions, bills and technical notes recommending tobacco control measures, the progress of the legislation depends on the lawsuits that question its constitutionality or consider it unconstitutional in the STF.

4.2 *Strategic litigation in the Federal Supreme Court*

ACT acted as Amicus Curiae in a series of lawsuits in which tobacco companies, industry organizations and trade associations question the constitutionality of anti-smoking legislation in Brazil. The table below shows what these actions are.

Figure 05: Cases in the STF

PROCES S	REQTE(S)	INTDO	AMICUS CURIAE	MATTER	DECISION
ADI 4351/4353	National Confederation of Tourism - CNTR National Confederation of Trade in Goods, Services and Tourism	Legislative Assembly of the State of Paraná Government of the State of Paraná	Association for Tobacco Control, Health Promotion and Human Rights - ACT National Confederation of Tourism and Hospitality Workers Abresi - Brazilian Association of Gastronomy, Accommodation and Tourism Ary Frazzino Foundation for Cancer Research and Control	It deals with questioning the constitutionality of the Law. No. 16239/2009 of the State of Paraná, which "establishes the rules for health protection and liability for damage to the consumer, under the terms of items V, VIII and XII of article 24 of the Federal Constitution, for the creation of environments for collective use free of funigenous products"	The Court, unanimously, dismissed the request made in the ADI.
ARE 1348238	South American Tobacco Company National Health Surveillance Agency	Tobacco Control, Health Promotion and Human Rights Association ACT Union of the Tobacco Industry in the State of Bahia	Brazilian Association of the Tobacco Industry ABIFUMO Interstate Tobacco Industry Union Tobacco Industry Union of the State of Bahia World Anti-Smoking and Anti-Alcoholism Association AMATA UNION National Confederation of Industry	This is an appeal against the decision in which the Regional Court of the 1st Region recognized the validity of the Resolution of the Collegiate Board of Anvisa, No. 14/2012, on the norms and technical standards on the maximum limits of tar, nicotine and carbon	National suspension of the processing of all individual and collective lawsuits, which deal with topic n.1252 of general repercussion until the final judgment of this appeal.

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

			Ary Flauzino Foundation for Cancer Research and Control	monoxide in cigarettes and restricted the use of these active ingredients in tobacco-derived tobacco products.	
ADI 4874	National Confederation of Industry	President of the Republic National Congress	Union of the Tobacco Industry in the State of Bahia Interstate Tobacco Industry Union World Anti-Smoking and Anti-Alcoholism Association AMATA Association for Tobacco Control, Health Promotion and Human Rights – ACT National Federation of Tobacco and Related Industry Workers FENTIFUMO Brazilian Association of the Tobacco Industry ABIFUMO	It deals with the discussion of whether ANVISA has the competence to issue rules to restrict the import and sale of cigarettes with additives.	Court did not hear the motion for clarification. He dismissed the request.
ARE 692894	Municipality of Rio de Janeiro National Federation of Hotels and Restaurants	Association for Tobacco Control, Health Promotion and Human Rights ACT		It deals with the municipal law of Rio de Janeiro n. 29.284/2008 on the prohibition of smoking indoors. It is questioned whether it goes beyond the regulated norm (Law No. 9294/1996)	Appeal not granted

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

ADI 3311	National Confederation of Industry	President of the Republic National Congress	Brazilian Association of Gastronomy, Accommodation and Tourism ABRESI State of Sergipe Green Party National Confederation of Health Workers Brazilian Institute of Consumer Policy and Law BRASILCON Associação Brasileira de Propaganda National Association of ANER Journal Editors National Association of Newspapers National Federation of Hotels, Restaurants, Bars and Similar Brazilian Association of Gastronomy, Hospitality and Tourism Brazilian Institute of Consumer Protection Association for Tobacco Control, Health Promotion and Human Rights ACT	Questioning of excerpts from Law 9294/196, Law 10,167/2000 and Provisional Measure 2,190-34/2001 and Law 12,546/2011 in the articles that deal with the prohibition of cigarette advertising and warnings on packages.	The plenary of the STF considered valid the legal provisions that restrict the commercial advertising of cigarettes and tobacco products, as well as the health warnings on the packaging of these products.
ADI 4249	National Confederation	Governor of the	Tobacco Control, Health Promotion and	Questions the constitutionality of Law	Unfeasibility of the Direct Action of Unconstitutionality.

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

	n of Tourism CNTUR	State of São Paulo Legislative Assembly of the State of São Paulo	Human Rights Association ACT National Confederation of Tourism and Hospitality Workers Brazilian Association of Gastronomy, Accommodatio n and Tourism ABRESI World Anti-Smoking and Anti-Alcoholis m Association AMATA Ary Frauzino Foundation for Cancer Research and Control Federation of Hotels, Restaurants, Bars and Similar, State of Rio de Janeiro Brazilian Society of Pulmonology and Phthisiology	13.541/2009 that restricts smoking in closed places in the State of São Paulo	
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Source: Prepared by the authors based on the consultation of the cases on the STF website.

Since the enactment of the anti-smoking law, there has been a constant judicialization by companies affected by the tobacco control measures contained in the legislation. So far, only in 2018, the STF has considered ANVISA's recommendations in relation to the prohibition of flavor and aroma additives in tobacco products constitutional, and in relation to ADIs questioning state tobacco control laws, the Court understood that states can legislate and regulate the issue because it is in accordance with federal legislation. The lawsuits that plead that the ban on tobacco product advertising is unconstitutional were decided in 2022. In general, it is clear that tobacco

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

companies act through unconstitutionality processes to bar the implementation of the Framework Convention in Brazil, expressed in national legislation, in which they hinder the regulation of current legislation.

5. FINAL CONSIDERATIONS

The progress that Brazil has made in the field of tobacco control is undeniable, even though it is a major producer and exporter of tobacco leaves. However, the regulation and implementation of specific issues of the legislation, such as additives in tobacco products and the form of advertising, are still judicializable issues. The strength of tobacco companies and the tobacco market is revealed in their strategies, in which

They act in an articulated way seeking to explore individual vulnerabilities through activities aimed at inducing children and adolescents to start consumption, as well as exploring collective vulnerabilities through strategies to prevent the dissemination of scientific knowledge about the risks caused by smoking and to create and increase the social acceptance of their products, making them an object of collective desire. And, above all, they seek to exploit political vulnerabilities through strategies to create "political goodwill". To do this, they usually harass politicians, parliamentarians, government officials, seducing them with speeches disguised as politically correct, financing social actions, political campaigns, in exchange for voluntary agreements that benefit their businesses, even if it means putting into play effective measures to save lives by reducing smoking. (Cavalcante, 2005, p. 286)

The ACT's work for more than a decade in Brazil was an important factor in the regulation of tobacco control legislation in Brazil. Through advocacy that involved legal mobilization, working with regulatory agencies, such as ANVISA, legislative and executive awareness activities, social communication advertising campaigns, social media engagement, registration of online petitions and technical notes, constitution of a network of national and international organizations with expertise in the subject and production of scientific evidence, boosted the regulation of legislation in Brazil.

Despite the strength of the tobacco industry, ACT took advantage of the institutional mechanisms available and included the theme of its agenda in

Revista Brasileira de Políticas Públicas e Internacionais, v. 10, n. 2, jul/dec. 2025, pp. 123-150.

Monteiro & Areceippo. *Effects of advocacy campaigns on regulatory policies: Analysis of the performance of the organization ACT Promoção da Saúde in anti-smoking legislation (12546/2011).*

political decisions, especially those related to the regulation of tobacco control legislation, as well as using its relational resources, such as the coalition of the network of organizations that it built in the cause. All of this strengthened his political advocacy and advocacy to influence the regulation and implementation of Law 12546/2011 in Brazil.

The relevance of this study lies in its ability to offer insights into the role of civil society organizations in the formulation of public policies, highlighting how continuous and strategic actions can influence the policy cycle and promote significant social changes. In addition, by focusing on a specific case, this work contributes to the understanding of the dynamics of advocacy in the Brazilian context, and can serve as a reference for future research and similar actions in other areas of public policy.

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