

Victorian Tobacco Control Strategy 2008–2013

Consultation Submission Guide 2008



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2008–2013**

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Foreword

The Victorian Government is committed to reducing tobacco-related harm in Victoria. We have demonstrated this in a succession of legislative reforms, culminating on 1 July 2007 with the introduction of a ban on smoking in all licensed premises. These reforms have helped bring about a steady decline in the prevalence of smoking in Victoria.

Despite the progress we are making, tobacco use remains the leading preventable cause of illness and death in Victoria, costing around \$5 billion and 4,000 lives each year. Smoking rates remain disproportionately high among particular groups, causing avoidable hardship and ill health to some of the most disadvantaged and vulnerable communities in Victoria.

Tackling cancer and the epidemic of preventable chronic disease is one of the key strategic priorities of our Government. Smoking is the leading modifiable risk factor for many cancers, respiratory, cardiovascular and other diseases. In recognition of this fact, this year's state budget has delivered a new \$150 million cancer package aimed at increasing cancer survival rates for Victorians. The package includes an increased investment in cancer prevention initiatives.

Building upon previous successes, the *Victorian Tobacco Control Strategy 2008–2013* (the Strategy) will include a major new government drive to help smokers quit and stay quit. It will focus on disadvantaged groups and making sure that tobacco control policies and programs reach the people with the greatest need.

The Strategy will be driven by a set of ambitious targets to reduce the prevalence of smoking in Victoria. By 2013, we aim to:

- reduce smoking in the adult population by 20 per cent (from 17.3 per cent to 13.8 per cent);
- reduce current smoking among pregnant women by 50 per cent (from 9 per cent to 5 per cent); and
- reduce smoking among adult Aboriginal people and other high-prevalence groups by at least 20 per cent (from 29 per cent to 23 per cent in Aboriginal Victorians and from 20 per cent to 16 per cent in socio-economically disadvantaged groups).

One of the most important actions needed to achieve these targets will be anti-smoking social marketing campaigns. There is solid evidence that advertising deters people from starting to smoke, prompts smokers to quit and helps quitters to stay off cigarettes. In November 2007, we announced an extra \$5.6 million funding for anti-smoking social marketing campaigns to 2010.

It is proposed that the Strategy will also include a range of legislative and other actions that will help reduce the rates of smoking in Victoria:

1. Reform of tobacco point-of-sale displays in retail outlets—reducing the number of young people who start smoking and making it easier for quitters to remain non-smokers.
2. A review of the penalties prescribed in the *Tobacco Act 1987* and tougher enforcement of the Tobacco Act—enabling better control of the supply and use of tobacco, particularly cigarette sales to minors.
3. Helping families to adopt non-smoking attitudes and behaviours—reducing harm to smokers and to those who live with smokers, by:
 - banning smoking in cars carrying children in 2009;
 - helping pregnant smokers to quit;
 - banning the sale of tobacco at temporary outlets and providing a ministerial power to ban youth-orientated tobacco products and packages, such as fruit-flavoured cigarettes;
 - ensuring government school grounds are smoke-free; and
 - improving access to smoking cessation services for Aboriginal and other high-prevalence groups.

Furthermore, the Victorian Government will work closely with the Commonwealth Government to make sure that national policy maximises the impact of the actions we undertake in Victoria. This partnership will also be underpinned by strong collaboration with the health sector and organisations involved in tobacco control.

This Consultation Submission Guide has been released to seek the views of the public, health sector, business and other groups regarding the above strategic actions.

Following the consultation period, which ends 18 September 2008, the *Strategy* will be released later this year.

We commend this submission guide to all members of the public and stakeholders interested in commenting on the proposed actions.



HON JOHN BRUMBY MP
PREMIER OF VICTORIA



HON DANIEL ANDREWS MP
MINISTER FOR HEALTH

Introduction

This guide outlines legislative reforms and a range of initiatives that the Victorian Government will undertake to reduce the burden of tobacco-related harm in Victoria over the next five years. It contains a series of specific questions regarding these initiatives for which public opinion is sought.

Background

In 2004, the Commonwealth Government became a signatory to the World Health Organisation (WHO) Framework Convention on Tobacco Control. The National Tobacco Strategy 2004–2009 reflected this commitment. As a signatory to the national strategy, the Victorian Government aims to control the negative impact of tobacco use by:

- further use of regulation
- increasing promotion of *Quit* and *Smokefree* messages
- improving the quality of, and access to, services for the treatment of smokers
- providing more useful support for parents, carers and educators helping children to develop a healthy lifestyle
- advocating policies that reduce smoking in disadvantaged groups
- tailoring messages and services to ensure access by disadvantaged groups
- obtaining the information needed to fine-tune policies and programs
- fostering collaboration in program development and policy.

Tobacco—the leading cause of avoidable illness and death

Smoking remains the leading cause of avoidable disease and death in Victoria. Every year, smoking causes 4,000 unnecessarily early deaths. Smoking also causes the most significant proportion of avoidable chronic illness and hospitalisation from smoking-related conditions such as cancer, cardiovascular disease and chronic obstructive pulmonary disease (Victorian Government Department of Human Services, 2005a).

Tobacco—a leading cause of avoidable social inequalities in health

Smoking rates remain disproportionately high among particular social groups, some of which are among the most disadvantaged and vulnerable communities in Victoria. As a result, smoking causes health inequalities and compounds disadvantage by reducing available income and causing illness. For example, tobacco use is the leading modifiable risk factor causing poor Aboriginal health, accounting for ten per cent of the total health gap between Aboriginal and non-Aboriginal people, and 20 per cent of all Aboriginal deaths (Vos et al., 2007). Targeting smoking cessation activities towards disadvantaged groups is one of the best opportunities to reduce social inequalities in health in Victoria in the short- to medium-term.

Tobacco—an avoidable cost

Smoking costs Victorians over \$5 billion each year. Although individuals bear the majority of these costs, business losses associated with reduced workplace productivity amount to \$510 million. Tobacco use also costs a further \$190 million in healthcare expenditure. It has been estimated that better public policy could reduce the total costs of tobacco smoking by around 45 per cent (Collins and Lapsley, 2006).

Given the magnitude of these costs, investment in tobacco control is sound economic policy; every dollar spent on tobacco control would save two dollars in healthcare expenditure alone. A five per cent reduction in smoking rates would provide \$2,034 million in benefits over a 20-year period, representing \$10,291 for each person prevented from smoking by anti-smoking interventions (Collins and Lapsley, 2006).

Progress in Victoria

The Victorian Government has been a world leader in tobacco control. The Victorian *Tobacco Act 1987* set the pace for international efforts to control the epidemic of tobacco use. It did so by banning outdoor tobacco advertising and using cigarette taxes both to fund the world's first health promotion foundation, Victorian Health Promotion Foundation (VicHealth), and by buying out tobacco sponsorship of sport and the arts.

In the 20 years since the Tobacco Act commenced, there has been a continued drive by many dedicated individuals and organisations to eradicate the negative consequences of tobacco use across the state. The Cancer Council Victoria, VicHealth, Quit Victoria and many other organisations have worked closely with the government to achieve the shared objectives of tobacco control.

These efforts have been rewarded by a steady decline in the rate of tobacco smoking in the Victorian population. Since the current government came to power, regular smoking among Victorian adults has declined significantly from 22 per cent in 1999 to just over 17 per cent in 2007 (Germain et al., 2008), with much of this success having arisen from reductions in smoking among older adults (Germain et al., 2006).

Legislative reforms

Since 1999, the government has enacted a series of legislative reforms to better regulate tobacco use and protect public health, including:

- reforms addressing youth smoking, such as increasing the penalties for selling cigarettes to minors (November 2000)
- smoke-free dining laws (July 2001)
- smoke-free shopping centre laws (November 2001)
- further restrictions on tobacco advertising and displays within tobacco retail outlets (July 2001)
- further smoking restrictions in licensed premises, gaming and bingo venues and the casino (September 2002)
- smoking bans in enclosed workplaces, at underage music and dance events and in covered areas of train station platforms, tram shelters and bus shelters (March 2006)
- bans of 'buzz marketing' and non-branded tobacco advertising (March 2006)
- strengthened laws to enforce the ban on cigarette sales to young people (March 2006)
- smoking bans in enclosed licensed premises (July 2007).

Public communication

In support of legislative reform, the government has conducted several public communication campaigns to increase public awareness of the benefits of smoke-free environments. Furthermore, the government has funded mass media campaigns to raise public awareness of the links between smoking and ill health, promoting quitting and smoking cessation services.

Services to help smokers quit

Quit Victoria is a non-government organisation that provides services to the community to encourage quitting and raise awareness of tobacco-related issues. The Quitline is a confidential and free telephone information, advice and assistance service for people who want to quit smoking. The government has committed \$1.9 million over 2006–2010 to enhance existing Quitline services.

Research

VicHealth is an independent statutory authority funded by the Victorian Government. Annually, VicHealth provides \$3.5m for research and other activities to reduce harm from tobacco. Furthermore, the Department of Human Services provides direct funding to undertake research to develop tobacco policy and programs.

The challenge ahead

In the 20 years since the commencement of the landmark Tobacco Act, it remains the case that the control of tobacco is the single most cost-effective means of preventing chronic illness, hospitalisation and early death in Victoria.

Despite significant reductions in the numbers of smokers, smoking rates remain disproportionately high in some of the most disadvantaged communities in Victoria. Renewed effort is needed to ensure that tobacco control policies and programs reach those groups with the greatest capacity to benefit from them.

The *Victorian Tobacco Control Strategy 2008–2013* will build upon the foundation of achievements to date by aiming to reduce the illness, social and economic burden that tobacco use imposes upon individuals, families and wider society in Victoria during the five-year period 2008–2013.

This aim is underpinned by three strategic targets to be achieved by 2013. These are:

1. To reduce smoking in the adult population by 20 per cent (from 17.3 per cent to 13.8 per cent¹)
2. To reduce current smoking among pregnant women by 50 per cent (from 9 per cent to 5 per cent²)
3. To reduce smoking among adult Aboriginal people and other high-prevalence groups by at least 20 per cent (from 29 per cent to 23 per cent³ in Aboriginal Victorians and from 20 per cent to 16 per cent⁴ in socio-economically disadvantaged groups).

The third target seeks to address social inequalities in smoking, a gap that is known to lead to considerable poverty, ill health and death in some of the most disadvantaged communities in Victoria. The target to reduce smoking among Aboriginal people matches the

Victorian aspiration to close the health gap between Aboriginal and non-Aboriginal people within a generation.

The Victorian Government will undertake consultations with industry, health professionals and the wider community in regard to implementation of the above measures. This Consultation Submission Guide provides an outline of the proposed initiatives and the rationale for these initiatives, and provides an opportunity for interested members of the public, health professionals and industry to make comment to the government on the proposals.

Scope of the written submission process

The primary objective of the written submission process is to solicit comment on the proposed legislative reforms and smoking cessation initiatives and to influence the implementation of the Strategy.

It is not intended that this Submission Guide include a comprehensive review of the literature. Rather, brief summaries of the evidence are provided as a stimulus for submissions.

This Submission Guide comprises four parts as follows:

- Part A. Reforming tobacco point-of-sale displays in retail outlets
- Part B. Review of the penalties prescribed in the Tobacco Act and tougher legislative enforcement of the Tobacco Act
- Part C. Supporting families
- Part D. Submission Guide

At the end of Parts A to C, a number of issues for consideration have been identified. Interested parties are invited to make comments in relation to these issues in Part D, which provides guidance for completing submissions. Part D includes a front cover sheet for submissions, a compiled list of the issues found at the end of each of Parts A to C and the process for lodging submissions.

1 Based upon the prevalence rate of adult, regular smokers in 2007 published by the Centre for Behavioural Research in Cancer.

2 Based upon the prevalence rate of women reporting smoking in the month prior to delivery during the 2005/2006 financial year, obtained from the Victorian Admitted Episode Database.

3 Based upon the mean prevalence rate of adult, daily smoking during the period 2004 to 2006, obtained from the Victorian Population Health Survey.

4 Based upon the mean prevalence rate of adult, daily smoking in the 40 per cent most socio-economically disadvantaged areas (as measured by the Index of Relative Socio-Economic Disadvantage), obtained from the 2006 Victorian Population Health Survey.

Part A: Reforming tobacco point-of-sale displays in retail outlets



Background

Despite bans on tobacco advertising, cigarettes remain more visible and more widely available than any other consumer product in Australia, including milk and bread (Ministerial Council on Drug Strategy, 2005). Tobacco advertising is banned in Victoria, but tobacco displays of up to four square metres at the point-of-sale are still permitted under the Tobacco Act. As cigarettes are sold at approximately 11,000 retail outlets across Victoria, point-of-sale displays are an important site for the promotion of tobacco use (Lavack and Toth, 2006).

Point-of-sale displays raise the profile of tobacco and create the impression that cigarettes are far more popular than is actually the case. This increases the likelihood that young people will start smoking, encourages smokers to buy more tobacco products and makes it harder for quitters to stay quit (DiFranza et al., 2006; Lovato et al., 2003; Wakefield et al., 2006, 2007).

Children and young people are exposed to displays of tobacco products when they enter many milk bars, convenience stores, petrol stations, newsagencies and supermarkets. Observations made in 42 milk bars located near schools in Melbourne and Geelong found tobacco displays to have a highly visible presence, often being positioned alongside products attractive to children and adolescents (Germain et al., 2006).

Banning or restricting the size of the display will reduce the community's exposure to tobacco advertising. This reform will advance the aims of the Tobacco Act by further reducing the promotion and advertising of tobacco. This will help reduce youth smoking initiation and help smokers reduce their tobacco use or quit altogether.

Public opinion

The 2004 National Drug Strategy Household Survey found that 70 per cent of respondents supported bans on point-of-sale advertising and the display of tobacco products (Australian Institute of Health and Welfare, 2005).

Current legislation

Since 2001, the Victorian Government has implemented reforms to reduce tobacco advertising at the point-of-sale. These include:

- restricting retail tobacco displays to 4 square metres
- limiting the display of each product line to one front facing of one packet of a product line
- restricting tobacco displays to one per retail outlet
- prohibiting the display of cigarette cartons
- prohibiting free gifts or benefits with the sale of tobacco
- prohibiting non-branded tobacco advertising.

Action in other jurisdictions

Other states and territories have introduced a variety of controls on tobacco advertising in retail outlets, including recent announcements and applications of restrictions on the display of tobacco products. The table below outlines the point-of-sale restrictions in place or planned for each Australian state and territory.

Proposed reforms

The Victorian Government proposes to either completely ban tobacco retail displays or restrict them to 1 square metre, with appropriate exemptions for specialist tobacconists. This reform will reduce or remove opportunities to promote tobacco use, particularly to young people and to adults who smoke or are trying to quit.

Implementation of a total ban would require tobacco retail displays to be covered with a non-transparent material or removed from sight completely, for example by being placed under a counter.

Implementation of reduced tobacco point-of-sale displays to 1 square metre would require similar restrictions to those currently in place.

It is recognised that both these options will make it difficult for customers to know which tobacco products are available for sale at a retail outlet. It is proposed that retailers will be permitted to inform customers of the available products for sale by use of a price-board or similar tool.

It is recognised that there are a small number of retail businesses that derive their income solely or significantly from tobacco products. It will therefore be appropriate to provide an exemption for specialty tobacconists whose business would no longer be viable should a point-of-sale display ban or 1 square metre restriction come into effect.

It is recognised that there will be some impact on business at the time of implementation and therefore retailers will be given sufficient time to adapt their businesses to comply with new point-of-sale legislation.

Issues for discussion

Comments are invited to assist the Victorian Government to implement the proposed reforms. In particular, you may wish to respond to the following questions:

- Which of the following options do you support, and why?
 - a) a complete ban tobacco point-of-sale displays
 - b) restricting tobacco point-of-sale display to 1 square metre
- How much time would Victorian businesses require to adapt to these changes?
- How should ‘specialist tobacconist’ be defined?
- How could retailers advise customers of tobacco products that are not on display?

State	Current tobacco retailer point-of-sale display restrictions	Proposed display restriction
ACT	No size restriction	On 6 March 2008 a Bill was introduced into the ACT Legislative Assembly seeking a ban on tobacco point-of-sale displays. The Bill is currently awaiting debate.
TAS	A tobacco display of up to 1 square metre from 19 June 2008	Total ban on point-of-sale displays as of 1 February 2011. Specialist tobacconists may have a display of up to 4 square metres.
NSW	A tobacco display of up to 4 square metres, which may display two product lines	The NSW Government announced that parliament will consider a ban of tobacco point-of-sale displays in September 2008. It is proposed that the ban would be enacted by large retail outlets in six months, by smaller shops in one year, and by tobacconists in four years.
SA	A tobacco display of up to 3 square metres for tobacco retailers and 4 square metres for specialist tobacconists	No point-of-sale reforms proposed
QLD	A tobacco display of up to 1 square metre for retailers and 3 square metres for specialist tobacconists	No point-of-sale reforms proposed
WA	Only one point-of-sale display is permitted. Generally, displays are restricted to 1 square metre (total surface area of packaging) within a perimeter of 5 square metres, with some exceptions for those retailers that derive more than 50 per cent of their gross turnover from tobacco products	No point-of-sale reforms proposed
NT	A tobacco display of up to 4 square metres and at least 2 metres away from any display of confectionary, toys or other items marketed to children	On 18 July 2008 the NT Government announced that they would ban the display and promotion of tobacco products at point of sale.

Part B:

Review of the penalties prescribed in the Tobacco Act and tougher legislative enforcement of the Tobacco Act



Background

Control of the supply and use of tobacco is a key tool in mitigating tobacco-related harm. Due to the devastating effect tobacco has on the community, it is important that the government ensures that those who sell and distribute tobacco products do so in a responsible and safe manner.

There is clear evidence that many retailers continue to illegally sell tobacco to children and people under 18 years of age. A survey conducted in Victorian schools during 2005 found that 22 per cent of all underage smokers bought their own cigarettes from retail outlets, almost half of which were milk bars. Most alarmingly, 12 per cent of 12- to 13-year-olds who smoked purchased their last cigarette from a retail outlet. A further 40 per cent of all underage smokers obtained their cigarettes from their friends, who were likely to have purchased the cigarettes from a retail outlet (Victorian Government Department of Human Services, 2006).

Review of penalties and enforcement

Penalties for not complying with legislation should be commensurate with the harm that unrestricted tobacco use is known to cause. Education and information is the principal means by which retailers, licensees and others with responsibilities to control tobacco sales and use become aware of their obligations under the Tobacco Act. Penalties, however, are also a key element as they provide a clear and meaningful incentive to comply with legislation.

In light of relevant Victorian Government policies and reports, for example the Attorney-General's Guidelines to the *Infringement Act 2006*, the Victorian Government proposes to review enforcement mechanisms and the penalties prescribed in the Tobacco Act to improve legislative compliance and ensure that the gravity of penalties is consistent with other Victorian legislation.

Public opinion

The 2004 National Drug Strategy Household Survey found that 87 per cent of respondents supported stricter penalties for the sale or supply of tobacco products to minors and 90 per cent of respondents supported stricter enforcement of laws against supplying tobacco products to minors.

Current legislation

Victoria has a negative licensing system for tobacco, which was implemented in 2000. This system applies to all Victorian tobacco retailers with the purpose of excluding retailers which repeatedly break the law by selling cigarettes to minors from selling cigarettes. The negative licensing system stipulates that upon a first offence, a magistrate is empowered to suspend a retailer's ability to sell tobacco for up to three months. For a second offence, there is a mandatory suspension for a minimum of three months or up to 12 months at the discretion of the magistrate. For a third offence, there is an automatic cancellation of the privilege to sell tobacco for five years.

Proposed action

A review will be undertaken to identify opportunities to improve legislative compliance and determine whether the penalties prescribed in the Tobacco Act are at an appropriate level to deter non-compliance. The review will also compare penalties prescribed in Victoria's Tobacco Act with similar offences for selling controlled substances in Victoria and existing penalties for the same offences in the tobacco legislation of other Australian states and territories. Concurrently, enforcement of the Tobacco Act will be stepped up to improve legislative compliance.

Issues for discussion

Comments are invited to assist the Victorian Government to implement the proposed reforms. In particular, you may wish to respond to the following questions:

- What aspects of legislative compliance should be prioritised while reviewing enforcement of the Tobacco Act?
- Should the infringement and maximum penalties in the Tobacco Act be increased and to what extent?
- Which penalties should be increased and why?
- How can minors be further prevented from purchasing tobacco products?

Part C: Supporting families



Helping families adopt non-smoking attitudes and behaviours is important, not least because young people's decisions to smoke are strongly influenced by other family members. When parents quit, for example, the chance of their children starting to smoke is reduced (Bricker et al., 2003). Nine out of ten smokers start smoking in their teenage years and exposure to tobacco promotion and parental and peer smoking are highly influential in initiation (Ministerial Council on Drug Strategy, 2005). A substantial number of young Victorians experiment with and become regular users of tobacco—a recent survey of Victorian secondary schools found that almost 42,000 students under the legal age had smoked tobacco in the week before the survey (Victorian Government Department of Human Services, 2006).

The Government proposes to implement a number of legislative reforms and initiatives to reduce tobacco damage to children and young people and to help adults quit smoking.

C.1 Smoking in cars carrying children

Background

There is no risk-free level of second-hand smoke exposure in confined areas such as cars. Even brief periods of exposure can be harmful to children as they are especially vulnerable to these effects (U.S. Department of Health and Human Services, 2006). Small children who are subject to second-hand smoke have an increased risk of suffering lower respiratory tract infections (Strachan, 1997). Exposure to second-hand smoke has also been linked to an increase in the number and severity of asthma episodes in asthmatic children (California Environmental Protection Agency, 1997). Recent research confirms that children who are exposed to second-hand smoke are at an increased risk of premature death and disease, including reduced lung function, and supports the argument for strengthened interventions to protect children from exposure to second-hand smoke (Wipfli et al, 2008).

Recent studies show that air quality in a car with a window partially or wholly down while a person smokes can be similar to that found in a smoky pub. When smoking occurs with the windows closed, smoke is at least twice as concentrated as even the smokiest pub (Edwards et al., 2006).

Banning smoking in cars carrying children will reduce children's exposure to second-hand smoke in enclosed spaces.

There is no reliable data to say exactly how many adults smoke in cars when children are present. However, at least 20 per cent of Victorian parents who regularly smoke say that they do not change their smoking behaviour in the presence of children (Edwards et al., 2006). This implies that a significant number of Victorian children are exposed to environmental tobacco smoke in cars.

Public opinion

Research reported by the Cancer Council Victoria in December 2006 found that 90 per cent of the public support a ban on smoking in cars while children are present.

Current legislation

There is currently no legislation in Victoria that bans smoking in cars with children present.

Action in other jurisdictions

South Australia introduced legislation banning smoking in cars carrying children under the age of 16 years on 31 May 2007. Tasmania implemented a similar ban in cars carrying children under the age of 18 years on 1 January 2008. New South Wales recently announced a smoking ban in cars when children are present. The other states and territories have no restrictions on smoking in cars with children present.

Proposed reforms

To protect children from the harms of environmental tobacco smoke, the Victorian Government proposes to ban smoking in cars when children are present.

Issues for discussion

A number of issues have been identified in relation to banning smoking in cars with children present. Comments are sought to assist the Victorian Government to implement the proposed legislative reforms. In particular, you may wish to respond to the following questions:

- Should the ban on smoking in cars apply to children 16 years or younger or to children and young people under the age of 18 years?

C.2 Smoking cessation in pregnancy

Background

Smoking has been shown to be linked to many adverse pregnancy outcomes, including low birth weight, spontaneous abortion and infant death (U.S. Department of Health and Human Services, 2001). There is a well-established association between low birth weight and later development of major chronic diseases, such as type two diabetes, hypertension and coronary heart disease (Sallout and Walker, 2003). However, research shows that women who quit smoking in the first three to four months of pregnancy give birth to infants of similar birth weight to infants of women who have never smoked (Bernstein et al., 2005).

There is limited data on the prevalence of smoking during pregnancy in Victoria. Analysis of data held on the Victorian Admitted Episodes Dataset shows that, during the 2005–2006 financial year, nine per cent of all mothers were recorded as having smoked in the last month of their pregnancy. This rate was more than four times higher among Aboriginal mothers, reaching 38 per cent.

Proposed initiatives

To prevent adverse outcomes associated with smoking during pregnancy, the Victorian Government proposes to develop and deliver an integrated health promotion program to give every pregnant woman in Victoria information about the dangers of smoking while pregnant and to provide support for pregnant women to quit smoking and stay quit. This initiative will be developed in partnership with health professionals and other key stakeholders. Additional work will be undertaken to develop sustainable smoking cessation interventions matched to the needs of pregnant Aboriginal women and other groups with high rates of smoking during pregnancy.

Issues for discussion

To assist the Victorian Government, comments are sought on the proposed initiative. In particular, you may wish to respond to the following questions:

- How can the Victorian Government best deliver smoking cessation information and support to pregnant women?
- How should smoking cessation information and support be tailored to the needs of pregnant Aboriginal Victorians and other groups with high rates of smoking during pregnancy?

C.3 Young People

C.3.1 Banning sales of cigarettes from temporary outlets

Background

Tobacco companies market their products to the key age group of 18 to 25 year-olds by using temporary stands offering cigarettes for sale at major events such as the Big Day Out (Carter, 2003). It is important to prevent advertising to this age group as the majority of smokers make the transition from experimentation to regular smoking during their early twenties (Backinger et al., 2003).

Other jurisdictions

In New South Wales, the sale of cigarettes from any mobile structure, booth, tent or any other temporary enclosure is banned. In the Australian Capital Territory, South Australia, Tasmania and Western Australia there is no restriction, but an annual licence, costing between \$180 and \$208, must be obtained. There is no restriction on sales from temporary outlets in Queensland.

Current legislation

In 2001, the Victorian Government banned the mobile selling of tobacco products where tobacco is carried and sold from the seller's person.

Proposed reforms

The Victorian Government proposes to ban sales of cigarettes from temporary outlets and only allow cigarettes to be sold from permanent retail outlets.

Issues for discussion

To assist the Victorian Government to implement a ban on the sale of cigarettes from temporary outlets, comments are invited. In particular, you may wish to respond to the following questions:

- How should 'temporary outlet' be defined?

C.3.2 Provide the Minister for Health with the power to ban particular tobacco products and packaging

Background

There is a need to be able to act quickly to remove from sale new tobacco products or packaging that are designed as marketing tools to promote smoking, particularly those targeting young people. Examples of these types of products or packaging include fruit and confectionary-flavoured cigarettes, split packet cigarettes and cigarette tins.

The intent of the *Tobacco Act 1987* is to prohibit certain sales or promotion of tobacco products. As the Act is currently written, additional amendments would be required to ban specific products. However, the time required to amend legislation is not responsive enough to remove these products from sale before they have a negative influence on young people exposed to them.

Other jurisdictions

In April 2008, the Australian Health Minister's Conference agreed to ban the sale of fruit-flavoured cigarettes at state level. It was also agreed that the Commonwealth Government would investigate banning the importation of flavoured cigarettes into Australia.

South Australia, Tasmania and the Australian Capital Territory have banned the sale of fruit-flavoured cigarettes after being granted an exemption under Mutual Recognition Acts (Commonwealth). New South Wales banned the sale of fruit and confectionary-flavoured cigarettes in January 2008.

Current legislation

There is currently no mechanism in the Act to provide the Minister for Health with the power to ban the sale of a particular product or packaging therefore an amendment to the Tobacco Act would be required.

Proposed reforms

The Victorian Government proposes to amend the Tobacco Act to provide the Minister for Health with the ability to ban tobacco products or tobacco product packaging if it is deemed to be designed to be appealing and to promote a tobacco product to young people. It is proposed that a set of criteria will be required to be used by the Minister for Health when considering banning a particular tobacco product or packaging.

Issues for discussion

To assist the Victorian Government, comment is sought in relation to the proposal to provide the Minister for Health with the power to ban specific tobacco products or packaging. In particular, you may wish to respond to the following question:

- What criteria should be met before the Minister for Health can ban a tobacco product or packaging?

C.3.3 Banning smoking on school grounds

Background

The current policy of the Department of Education and Early Childhood Development is to encourage schools to become completely smoke-free environments. Smoking is not permitted in Victorian Government School buildings or outdoor enclosed spaces. However, smoking by adults on school grounds in unenclosed spaces and out-of-view of students is permitted.

The Department of Education and Early Childhood Development's existing tobacco initiatives include drug education resources and the Smoke Free Schools—Tobacco Prevention and Management Guidelines.

Despite these significant policy advances, the 2005 Australian Secondary Students' Alcohol and Drug Survey (ASSAD) found that 23 per cent of Victorian students did not believe that school-grounds smoking bans were strongly enforced, and a further three per cent thought that smoking was not banned at their school at all.

Banning smoking on Victorian Government schools grounds would provide children and young people with an environment that is smoke-free and a clear message that a healthy lifestyle does not include smoking. It would further reinforce the message that non-smoking is actively encouraged by the Victorian Government and contribute to the reduction of smoking behaviour among young people.

Other jurisdictions

Currently, Victoria and Tasmania are the only Australian jurisdictions which do not have smoking bans which apply to both the buildings and grounds of government schools.

Current legislation

The existing legislative ban on smoking in enclosed Victorian workplaces includes all school buildings, but does not include school grounds or non-enclosed outside areas.

Public Support

Ninety seven per cent of the general public and 95 per cent of smokers support a ban on smoking on primary and secondary school grounds (Centre for Behavioural Research in Cancer, 2006).

Proposed initiatives

It is proposed that the Minister for Education will exercise the power vested in the *Education and Training Reform Act 2006* Section 5.2.6(1) to issue an Order which would ban smoking on Victorian Government school grounds.

A ban on smoking on Victorian Government school grounds would include all activities which take place within the school boundaries, for example, pre-schools, kindergartens, out of school hours care, ovals used by community sport groups or school fetes.

The Department of Education and Early Childhood Development will support schools to implement the policy at a local level. A timeline for implementation will be developed and access to suitable resources provided to schools to ensure a smooth transition to a completely smoke-free environment.

Issues for discussion

To assist the Victorian Government comment is sought in relation to the proposal that the Minister for Education uses their power under the *Education and Training Reform Act 2006* Section 5.2.6(1) to ban smoking on Government school grounds. In particular, you may wish to respond to the following question:

- How can the Victorian Government better promote smoke-free schools?

C.4 Helping smokers to quit

Background

The benefits of quitting are felt not just by the smoker, but also by the children and other family members around them. When parents quit, the chances of their children starting to smoke is reduced. Reducing exposure to second-hand smoke also prevents some of the lifestyle choices of smokers from affecting those around them.

In line with the government's commitments in *A Fairer Victoria*, it is also important to ensure that support is given to smokers and families that have the greatest capacity to benefit from help. Targeting smoking cessation initiatives towards those groups with the highest prevalence of smoking will help reduce health and social inequalities.

Aboriginal and other high prevalence groups

National evidence shows that while smoking rates have decreased in the total Australian population over the decade to 2005, there has been no significant change in smoking rates for the Aboriginal population in this period. Two-thirds of Aboriginal and Torres Strait Islander children up to 14 years of age live in households with one or more regular smokers (Australian Bureau of Statistics, 2007).

Limited available Victorian data shows that smoking rates are much higher among members of the Aboriginal population than in the non-Aboriginal population. Analysis of data from the Victorian Population Health Survey over the 2004 to 2006 period shows that between 21 and 39 per cent of Aboriginal Victorians smoked on a daily basis; a rate approximately double that of the non-Aboriginal population.

The 2006 Victorian Population Health Survey showed that the daily smoking rate among adults living in the 40 per cent most socio-economically disadvantaged areas of Victoria was eight per cent higher than that of the 40 per cent most advantaged areas.

Proposed initiatives

The Victorian Government proposes to develop and implement smoking cessation initiatives tailored to Aboriginal Victorians and other high-prevalence groups, such as those living in socio-economically disadvantaged areas. The initiatives will be developed through small-scale action research, successful examples of which will be implemented on a broader scale.

Issues for discussion

To assist the Victorian Government, comments are sought on the proposed smoking cessation initiatives specific to Aboriginal and other high-prevalence groups. In particular, you may wish to respond to the following questions:

- What type of cessation initiatives are most likely to be effective in helping Aboriginal Victorians to quit and stay quit?
- What type of cessation initiatives are most likely to be effective in helping socio-economically disadvantaged smokers to quit and stay quit?

Part D: Submission Guide



To help the Victorian Government implement the proposed reforms, a number of issues have been identified throughout this guide. Comments are invited in relation to these issues as well as broader comments on the proposals and initiatives outlined in the Submission Guide.

The following section includes a front cover sheet as well as the complete list of issues for discussion that were highlighted at the end of each of Parts A to C.

Electronic copies of the Submission Guide can be accessed and completed at www.health.vic.gov.au/tobaccoreforms. Printed copies can be obtained by telephoning (03) 9096 0469, or by requesting them via email to: tobacco.policy@dhs.vic.gov.au. If you request a copy by email, please be sure to provide your full postal address.

Copies of the *Tobacco Act 1987* and the *Tobacco Regulations 2007* can be accessed at www.legislation.vic.gov.au.

Confidentiality

Any person who wishes their submission to be treated confidentially should indicate this by marking the appropriate box on the cover sheet of the submission. All persons making a submission should note the section below regarding freedom of information (FOI).

Freedom of information

Under the *Freedom of Information Act 1982* (FOI Act), any person can request access to submissions received by the Department (including those marked 'Confidential'). In the event that such a request is received, the Department will be required to assess the submissions that are the subject of the request to determine whether they are exempt from release. Those submissions will be exempt if they attract one or more of the exemptions in the FOI Act (for example, exemptions exist in relation to such matters as personal

privacy, information obtained in confidence and business, commercial or financial information). The Department will be required to provide access to any submissions requested under the FOI Act where no exemptions apply to those submissions. Further information about FOI can be accessed on the Department's website at www.dhs.vic.gov.au/pdpd/ciiru/html/foihome.htm.

How to lodge your submission

It is preferred that submissions are completed online. **All submissions** should include the cover sheet (page 16), clearly indicate a contact name and contact details, and note if the submission is to be treated confidentially. Anonymous submissions will not be accepted. Reference should be made to the relevant issue numbers and additional comments should be attached.

Submissions can be lodged online at:

www.health.vic.gov.au/tobaccoreforms

emailed to:

tobacco.policy@dhs.vic.gov.au

or posted to:

Victorian Tobacco Control Strategy Submission
c/o Tobacco Policy and Programs Section
Department of Human Services
GPO Box 4057
Melbourne Victoria 3001

**Submissions must be received by
18 September 2008.**

Further information

For further information about the written submission process please contact the Tobacco Policy and Programs Section, Department of Human Services on (03) 9096 0469.

Victorian Tobacco Control Strategy 2008–2013 Consultation Submission

Cover sheet

Name

Organisation

Mailing address

Confidential Yes No

Please indicate if you are:

- A person under the age of 18
 - A representative group or organisation of businesses that sell tobacco products
 - An owner or manager of a business that sells tobacco products
 - An employee of a business that sells tobacco products
 - A professional association or non-government organisation
 - Involved in the tobacco industry in an area other than retailing
 - A health group or organisation
 - A health or medical professional
 - A teacher, educator or youth worker
 - A representative of a union
 - Involved in the advertising industry
 - An interested member of the public (please indicate your smoking status below)
Current smoker Ex-smoker Never smoked
 - Other (please specify)
-

Additional comments included? Yes (please attach) No

Part A: Reforming tobacco point-of-sale displays in retail outlets

A number of issues have been identified in relation to reforming tobacco retailer point-of-sale displays. Comments are invited to assist the Victorian Government to implement the proposed reforms. In particular, you may wish to respond to the following questions:

1. Which of the following options do you support, and why?

a) a complete ban on tobacco point-of-sale displays

b) restricting tobacco point-of-sale display to 1 square metre

2. How much time would Victorian businesses require to adapt to these changes?

3. How should 'specialist tobacconist' be defined?

4. How could retailers advise customers of tobacco products that are not on display?

5. Any further comments

3. Which penalties should be increased and why?

4. How can minors be further prevented from purchasing tobacco products?

5. Any further comments

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