

# Canterbury

District Health Board

Te Poari Hauora o Waitaha

## Submission on Smoke-free Environments (Prohibiting Smoking in Motor Vehicles Carrying Children) Amendment Bill

**To:** Select Committee

**Submitter:** Canterbury District Health Board

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**Proposal:** This Bill amends the Smoke-free Environments Act 1990 to prohibit smoking in motor vehicles carrying children and young people under 18 years of age. The purpose is to protect them from the harm associated with second-hand smoke.

## **SUBMISSION ON SMOKE-FREE ENVIRONMENTS (PROHIBITING SMOKING IN MOTOR VEHICLES CARRYING CHILDREN) AMENDMENT BILL**

### **Details of submitter**

1. Canterbury District Health Board (CDHB).
2. The Ministry of Health requires the submitter to reduce potential health risks by such means as submissions to ensure the public health significance of potential adverse effects are adequately considered during policy development.

### **Details of submission**

3. We welcome the opportunity to comment on the Smoke-free Environments (Prohibiting Smoking in Motor Vehicles Carrying Children) Amendment Bill.
4. The future health of our populations is not just reliant on hospitals, but on a responsive environment where all sectors work collaboratively to improve health outcomes, particularly in this case, for children.

### **General Comments**

5. The CDHB welcomes this Amendment Bill, which recognises the need for legislation alongside public health education campaigns in order to achieve social change. It is a common misperception that education campaigns alone achieve change of individual health-related behaviours such as tobacco use, however, education of health risks are limited in their effectiveness without being reinforced via other targeted or universal interventions such as cessation support and legislative changes like those proposed within this Bill<sup>1</sup>.
6. Protecting children and young people from the effects of both second-hand and third-hand smoke in cars has been recommended by CDHB Smokefree services for a number of years. This approach will mirror changes seen internationally (such as certain states in Australia and the US, and Canada<sup>2</sup>).

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<sup>1</sup>Wilson N. (2007). Review of the Evidence for Major Population-Level Tobacco Control Intervention. Wellington: Ministry of Health.

<sup>2</sup>Moore GF, Moore L, Littlecott HJ, et al. (2015). *Prevalence of smoking restrictions and child exposure to secondhand smoke in cars and homes: a repeated cross-sectional survey of children aged 10–11 years in Wales*. *BMJ Open* 2015;5:e006914. doi: 10.1136/bmjopen-2014-006914.

7. There is no risk-free level of exposure to second and third hand smoke, therefore providing children legislative protection from exposure in cars can help reduce the burden of childhood illness such as Sudden Unexpected Death in Infancy (SUDI), asthma, respiratory disease, infection, cardiovascular effects, behavioural and sleep difficulties and cancer risk; all of which have been associated with exposure to cigarette smoke<sup>3</sup>.
8. An emerging area of public health research into the health impacts of smoking is exposure to 'third-hand smoke' (THS). This is of particular relevance to this Bill given that the definition of THS relates to 'residual tobacco smoke pollutants', namely tobacco chemicals, which remain on surfaces and in dust after tobacco has been smoked<sup>4</sup>. Of particular concern is that compounds can be found in significant amounts in fabrics, 19 months after last tobacco smoke exposure within a lab setting<sup>5</sup>. Young children are particularly vulnerable to THS exposure given age-specific behaviours such as frequent hand to mouth contact and mouthing of exposed soft surfaces and fabrics<sup>6</sup>. Car interiors are almost entirely made up of such soft-surfaces, in fact, research has even found damage at a DNA level after exposure to THS residues extracted from car seat covers and car carpets<sup>7</sup>.
9. This research suggests that children are exposed to harmful third-hand smoke in cars even when adults are not smoking when children are present. Although outside of the scope of this legislation, proposed changes are one step towards de-normalising smoking in cars generally, which may trigger quit attempts in adults, thus further limiting exposure of children to THS alongside second-hand smoke.

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<sup>3</sup> Woodward, A., Laugesen, M. Morbidity attributable to second hand cigarette smoke in New Zealand. Ministry of Health. Wellington. 2001. <http://www.health.govt.nz/publication/morbidity-attributable-second-hand-cigarette-smoke-new-zealand>

<sup>4</sup> Matt, G. E., Quintana, P. J., Zakarian, J. M., Fortmann, A. L., Chatfield, D. A., Hoh, E., Uribe, A. M., & Hovell, M. F. 2011. *When smokers move out and non-smokers move in: Residential third hand smoke pollution and exposure*. *Tob Control*, 20(1), e1.

<sup>5</sup> Bahl, V., Jacob, P., Havel, C., Schick, S. F., & Talbot, P. 2014. *Thirdhand cigarette smoke: Factors affecting exposure and remediation*. *PLoS One*, 9(10), e108258.

<sup>6</sup> Acuff, L., Fristoe, K., Hamblen, J., Smith, M., & Chen, J. 2015. *Third-hand smoke: Old smoke, new concerns*. *J Community Health*, *Published online*.

<sup>7</sup> Bahl, V., Shim, H. J., Jacob, P., Dias, K., Schick, S. F., & Talbot, P. 2015. *Thirdhand smoke: Chemical dynamics, cytotoxicity, and genotoxicity in outdoor and indoor environments*. *Toxicol In Vitro*, In press.

## Specific comments

Section	Comment
New Part 1A 20B Purpose of this Part	The CDHB supports the purpose as detailed in this section, however recommends that reference to third-hand smoke is also included.
20D Smoking prohibited in motor vehicle carrying child occupant	<p>The CDHB recommends that 20D(2) is removed from the Bill as it is not consistent with the purpose to limit exposure for children.</p> <p>(2)(a) The CDHB recognises that there is no legal ‘smoking age’ however given all other aspects of this Bill define a child as being under 18 it makes little sense to exempt drivers under the age of 18 from the proposed protective measures. Such a clause sends confusing messages to young people regarding the acceptability of smoking in cars and allowing those 16-18 years to be exempt from infringement means there remains a group of children who remain at risk of exposure to both cigarettes and THS.</p> <p>(2)(b) Exempting vehicles used as a dwelling as per this clause has potential to exacerbate health inequities for some of our most disadvantaged. Under this proposed provision children who live in cars can legally be exposed to smoke, which places them at disproportionate risk of smoking-related harm which children who live in permanent dwellings would not experience as severely. A car is an enclosed microenvironment with a high surface to volume ratio for THS compounds to accumulate over time<sup>8</sup>. For example higher concentrations of THS compounds were found on seat covers compared to carpet surfaces when simulated in a car setting<sup>9</sup>.</p>

<sup>8</sup> Matt, et al. (2011). Thirdhand Tobacco Smoke: Emerging Evidence and Arguments for a Multidisciplinary Research Agenda. *Environmental Health Perspectives*: vol 119; 9. Sept 2011.

<sup>9</sup> Bahl, V., Shim, H. J., Jacob, P., 3rd, Dias, K., Schick, S. F., & Talbot, P. (2016). Thirdhand smoke: Chemical dynamics, cytotoxicity, and genotoxicity in outdoor and indoor environments. *Toxicology in vitro: an international journal published in association with BIBRA*, 32, 220–231. doi:10.1016/j.tiv.2015.12.007

	<p>During enforcement it may also be difficult for enforcement officers to prove that this clause does not apply should it be argued by the vehicle occupant.</p>
<p>20D (3)  Smoking prohibited in motor vehicle carrying child occupant</p>	<p>The CDHB supports the infringement fee and fine imposed in this section, as including the infringement fee as an immediate and likely perceived consequence is an important tool in deterring behaviour<sup>10</sup>. In saying this the CDHB strongly supports the discretionary use of this infringement offence.</p> <p>This Bill should act as a deterrent rather than be enforced punitively, given if strictly enforced it is likely to perpetuate inequities for certain groups who have persistently high smoking rates and are likely to be travelling with children (e.g. Māori women, those of lower socio-economic status<sup>11</sup>). The Bill needs to be coupled alongside targeted and well-funded cessation support for these groups whose smoking rates remain persistently higher than other populations, yet will experience a disproportionate burden from any financial penalties experienced as a result of this legislation.</p> <p>In summary the CDHB supports discretionary powers to enforce infringement fees and considers that the power of a constable requiring a person to stop smoking in a vehicle (as per 20E(1)(c)) sufficient in practice to achieve the intent of the Bill.</p>

## Conclusion

10. The CDHB does not wish to be heard in support of this submission.

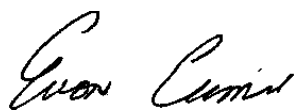
11. Thank you for the opportunity to submit on Smoke-free Environments (Prohibiting Smoking in Motor Vehicles Carrying Children) Amendment Bill.

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Davey, J. D., & Freeman, J. E. (2011). Improving Road Safety through Deterrence-Based Initiatives: A review of research. Sultan Qaboos University medical journal, 11(1), 29–37. <sup>10</sup>

<sup>11</sup> <https://www.smokefree.org.nz/smoking-its-effects/facts-figures>

**Person making the submission**



Evon Currie

Date: 8/08/2019

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