

Submission form

Your details

This submission was completed by: (name) Christina Lewis

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Organisation (if applicable): Canterbury District Health Board

Organisation address: (street/box number) 310 Manchester Street,
(town/city) Christchurch

Role (if applicable): Smokefree Enforcement Officer

Signed out by: Evon Currie, General Manager, Public Health, on behalf of EMT, CDHB



Additional organisation information

I am, or I represent an organisation that is, based in:

New Zealand Australia Other (please specify):

Click or tap here to enter text.

I am, or I represent, a: (tick all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Personal submission | <input type="checkbox"/> Healthcare provider eg Primary Care provider, stop smoking provider |
| <input type="checkbox"/> Community or advocacy organisation | <input type="checkbox"/> Professional organisation |
| <input type="checkbox"/> Iwi/Hāpu affiliated, and/or Māori organisation | <input type="checkbox"/> Tobacco manufacturer, importer or distributor |
| <input type="checkbox"/> Pacific community or organisation | <input type="checkbox"/> Retailer – small, for example a dairy or convenience store |
| <input type="checkbox"/> Government organisation | <input type="checkbox"/> Retailer – medium or large, for example supermarket chain or petrol station |
| <input type="checkbox"/> Research or academic organisation – eg university, research institute | <input type="checkbox"/> Vaping or smokeless tobacco product retail, distribution or manufacture |

- Other *(please specify)*:
The Canterbury District Health
Board
-

Additional statistical information

These questions are not mandatory. We are asking for information, including age and ethnicity information solely for the purposes of helping us to analyse submissions.

Age:

- Under 18
 18 - 34
 35 - 44
 45 - 54
 55 - 64
 65 +
 Not applicable / prefer not to say

Ethnicity/Ethnicities I identify with:

- New Zealand European
 Māori
 Pacific Peoples
 Asian
 Other European
 Other Ethnicity *(please specify)*:
Click or tap here to enter text.
 Not applicable / prefer not to say
-

Privacy

We intend to publish the submissions from this consultation, but **we will only publish your submission if you give permission**. We will remove personal details such as contact details and the names of individuals.

If you do not want your submission published on the Ministry's website, please tick this box:

- Do not publish this submission.

Your submission will be subject to requests made under the Official Information Act (even if it hasn't been published). If you want your personal details removed from your submission, please tick this box:

- Remove my personal details from responses to Official Information Act requests.

Commercial interests

Do you have any commercial interests?

- I have a commercial interest in tobacco products
- I have a commercial interest in vaping products
- I have commercial interests in tobacco and vaping products
- I do not have any commercial interests in tobacco or vaping products

Commercially sensitive information

We will redact commercially sensitive information before publishing submissions or releasing them under the Official Information Act.

If your submission contains commercially sensitive information, please tick this box:

- This submission contains commercially sensitive information.

If so, please let us know where.

Click or tap here to enter text.

Protection from commercial and other vested interests of the tobacco industry

New Zealand has an obligation under Article 5.3 of the World Health Organisation Framework Convention on Tobacco Control (FCTC) when 'setting and implementing public health policies with respect to tobacco control ... to protect these policies from the commercial and other vested interests of the tobacco industry'.

The internationally agreed Guidelines for Implementation of Article 5.3 recommend that parties to the treaty 'should interact with the tobacco industry only when and to the extent strictly necessary to enable them to effectively regulate the tobacco industry and tobacco products'.

The proposals in this discussion document are relevant to the tobacco industry and we expect to receive feedback from companies in this industry. We will consider all feedback when analysing submissions.

To help us meet our obligations under the FCTC and ensure transparency, all respondents are asked to disclose whether they have any direct or indirect links to, or receive funding from, the tobacco industry.

Please provide details of any tobacco company links or vested interests below.

Click or tap here to enter text.

Please return this form:

By email to: smokefree2025@health.govt.nz

By post to: Smokefree 2025 Consultation, Ministry of Health, PO Box 5013, Wellington 6140.

Consultation questions

The Ministry of Health is seeking comments on the following proposals for a smokefree Aotearoa 2025. You can find more information about these proposals in the discussion document which can be downloaded from -

<https://www.health.govt.nz/publication/proposals-smokefree-aotearoa-2025-action-plan>.

Focus area 1: Strengthen the tobacco control system

- a). What would effective Māori governance of the tobacco control system look like? Please give reasons.

The Canterbury DHB notes that effective governance is kaitiakitanga - the responsibility of safeguarding. This would mean maintaining an **authentic Iwi approach** (by Māori for Māori) to explore issues that keep Māori slave to tobacco and strategies that support Smokefree outcomes (i.e. use of traditional healing methodology). Strategies must resonate with all Iwi throughout Aotearoa where different locations have different lenses, different worldviews, and different identities. This means that all Iwi voices must be represented to ensure regional variances are considered when making strategic decisions. Treaty partner representatives need familiarity with tobacco control efforts, and a drive for tobacco control for their people.

This is in line with the Māori Affairs select committee vision, a **Tupeka Kore stance**, of stamping tobacco out of Aotearoa. A tobacco free country will have an immediate impact for our most vulnerable - our unborn. It would ensure the First 1000 Days for every pēpi will be Smokefree, from the very beginning of their lives, that every whānau will be Smokefree and that every home and car will be Smokefree.

- b). What action are you aware of in your community that supports Smokefree 2025?

What is needed to strengthen community action for a Smokefree 2025? Please give reasons.

Canterbury's **local coalition - Smokefree Canterbury** - disseminates information, supports national evidence based, identified strategies for achieving Smokefree 2025 and provides opportunities for professional development.

To strengthen community action for a Smokefree 2025 there needs to be **further mass media campaigns** highlighting the importance of Smokefree 2025 moving away from a national cessation drive (vape to quit, commit to quit, I quit for my whānau) to the broader issues (negative impacts of tobacco - environmental, social, health). **Resources to use with community** are also necessary as having something to offer makes engagement more

sustainable and gives priority to Smokefree i.e. Smokefree merchandise, WSFD resources. These need to encompass a variety of local needs such as different languages.

c). What do you think the priorities are for research, evaluation, monitoring and reporting? Please give reasons.

The Canterbury DHB considers the priorities to be:

Understanding what works in the **engagement and retention of priority groups** in cessation programmes. There is significant drop off from point of referral to a Stop Smoking Service, to enrolment and setting a quit date. What would help improve this, what are the barriers, is more culturally appropriate engagement needed? There is little engagement locally with Pasifika and we need to understand what the barriers are. Pasifika is not one people; it is many cultures, languages, values and needs.

Vaping - Up-to-date uptake/initiation data to stay connected with the trends and DHB collecting of vaping data. There is a lack of evidence for the health impacts of long term vape use and it is important we take a proactive approach in this space and not allow a social norm/ harms to become engrained as it did with tobacco.

Specialist Mental Health Services - high rates of smoking amongst cohort and are less successful with quit attempts. How better to support this group to engagement with quit attempts. What works? What doesn't? How have other DHBs achieved a successful supportive Smokefree environments that result in action?

1D - What else do you think is needed to strengthen New Zealand's tobacco control system? Please give reasons.

The Canterbury DHB believes that **additional Smokefree Enforcement Officers** are required to adequately enforce the Act. Additional vaping legislation has significantly increased the workload of Enforcement Officers as they attempt to educate small vape retailers regarding new obligations place upon them. English is most often a second language for these retailers. Currently, in Canterbury, there is one full time Smokefree Enforcement Officer for the geographical area between Ashburton to Kaikoura. Additional SFEO's will allow proactive monitoring of retailers and premises with smoking/vaping areas. In addition, further funding for Smokefree services is required as locally we have seen an increase in the frequency of smokers but still operate at the same level of funding.

Focus area 2: Make smoked tobacco products less available

- a). Do you support the establishment of a licencing system for all retailers of tobacco and vaping products (in addition to specialist vaping retailers)?

Yes No

Please give reasons:

The Canterbury DHB supports a licencing system being put in place. A positive licencing system, as found in certain Australian states, has been shown to be most effective in both assisting enforcement activities and providing revenue. Positive licencing systems require a yearly fee and prior approval for conducting business activities along with the adherence to minimum standards. We believe this is the most appropriate form of licencing for tobacco sales as it both provides a revenue for monitoring along with assisting with enforcement activities by obtaining addresses. A higher fee also helps reduce the number of tobacco retailers.

- b). Do you support reducing the retail availability of smoked tobacco products by significantly reducing the number of retailers based on population size and density?

Yes No

Please give reasons:

Yes, the Canterbury DHB supports the reduction of retail availability of tobacco products to prompt quit attempts and reduce initiation. For example, a cap of no more than one tobacco retailer in an area of 10,000 residents, as opposed to the current environment of one per 800 residents. This approach would need to account for differences in baseline numbers of tobacco retailers across different regions, to ensure that tobacco retailer density is sufficiently reduced in the most socially deprived communities, where those most at risk for smoking-related harm reside. This allows a system to take control of tobacco as an issue and would therefore then allow to continue a phase out approach.

- c). Do you support reducing the retail availability of tobacco by restricting sales to a limited number of specific store types (eg, specialist R18 stores and/or pharmacies)?

Yes No

Please give reasons:

The Canterbury DHB supports reducing tobacco availability by limiting its sale to specific R18 stores but does not support the sale of tobacco in pharmacies. The Canterbury District Health Board believe that pharmacies, as a provider of health products / services, are not an appropriate source of tobacco and would send mixed messages to community. The abundant presence of tobacco in numerous types of retail premises makes tobacco too easily accessible within communities. Limited

numbers of specific R18 tobacco stores will reduce access to tobacco and remove it from environments which can be visited by young persons. The Canterbury DHB suggests a similar concept to Specialist Vape Retailers which is currently being rolled. This allows a system to take control of tobacco as an issue and would therefore then allow to continue a phase out approach.

d). Do you support introducing a smokefree generation policy?

Yes No

Please give reasons:

The Canterbury DHB supports the introduction of a Smokefree generation policy. One of the biggest drivers for the reduction in smoking rates has been the decline in uptake by younger people. So, while young people might access tobacco through illicit means, the increase in legal purchase age will create a hurdle that might deter those thinking of experimenting with tobacco, which in turn will further enhance the reduction in smoking rates.

e). Are you a small business that sells smoked tobacco products?

Yes No

Please explain any impacts that making tobacco less available would have on your business that other questions have not captured. Please be specific:

Click or tap here to enter text.

Focus area 3: Make smoked tobacco products less addictive and less appealing

a). Do you support reducing the nicotine in smoked tobacco products to very low levels?

Yes No

Please give reasons:

The Canterbury DHB supports the reduction of nicotine in smoked tobacco products to very low levels. A less satisfying nicotine hit from cigarettes will encourage smoked tobacco users to switch to products such as vapes that can provide the desired nicotine experience. Additionally, it will be easier for new smokers to give up if they are less addicted to nicotine. However, we also question how the Trans-Tasman Mutual Recognition Arrangement will affect this. Currently, Australian tobacco may be sold in New Zealand even though their packaging does not comply with the Standardised Packaging requirements of New Zealand regulations and their Quitline information provides smokers with an Australian website and phone number. If Australian tobacco products are not reduced in nicotine content then this undermines the benefits of nicotine reduction in the New Zealand supply chain.

b). Do you support prohibiting filters in smoked tobacco products?

Yes No

Please give reasons:

The Canterbury DHB supports the prohibition of filters in smoked tobacco products. It makes the product less appealing for the user, which are of no health benefit, and micro plastics end up in our waterways and take many years to break down.

c). Do you support allowing the Government to prohibit tobacco product innovations through regulations?

Yes No

Please give reasons:

The Canterbury DHB supports the use of regulations to prohibit tobacco product innovations. The current setting has seen new tobacco products enter the New Zealand market despite Ministry of Health opposition; the apparent reason being that the new products were not envisaged by the authors of the initial Act. The New Zealand market does not need further tobacco products introduced. The Government needs a lever to stop the introduction of new tobacco products.

Focus area 4: Make tobacco products less affordable

a). Do you support setting a minimum price for all tobacco products?

Yes No

Please give reasons:

The Canterbury DHB supports the setting of a minimum price for all tobacco products. Presently, tax increases are applied selectively across the range of tobacco products. This means that higher end products have larger tax amounts applied to them, whereas lower priced, entry level, products have smaller increases applied thereby continuing to enable smoking uptake. Rather than continuing with these types of taxes (and their creative application to tobacco products) it is better to have a consistent minimum price applied to these products. The intention should be to stop individual retailers using price as a means to entice and having the product appear more attractive to the consumer.

A minimum price needs to reflect a barrier to continue smoking or a barrier to initiation but not be set so high as to further punish existing smokers.

Final questions

a). Of all the issues raised in this discussion document, what would you prioritise to include in the action plan? Please give reasons.

The Canterbury DHB believes that the restriction of tobacco products to a limited number of R18 tobacco stores and the Smokefree Generation options should be given the highest priority. These two options will help the reduction of numbers of smokers in both current smokers and the next generation.

The consequence for not complying (i.e. selling singles, underage) needs to be more of a deterrent i.e. lose licence selling tobacco products.

b). Do you have any other comments on this discussion document?