

Submission on the Future of Tobacco Displays in New Zealand

Name of organisation making submission:	Nurses for a Smokefree Aotearoa/New Zealand
Contact person:	Grace Wong
Address:	47 St Vincent Ave, Auckland 1050
Telephone:	09 524 6124
Email:	grace.wong@aut.ac.nz

Nurses for a Smokefree Aotearoa/New Zealand

Nurses for a Smokefree Aotearoa/New Zealand supports nurse work towards a smokefree New Zealand. It was launched in 2007 and builds on the work of groups such as Nurses Against Tobacco (Pauline Allan-Downes) from the 1990s. The decision to re-form a nurses smokefree advocacy group followed a needs assessment including a national survey of nurses and smoking and consultation with the nursing workforce at all levels and with the smokefree workforce [1,2]. The national survey demonstrated the positive attitudes nurses have towards smokefree work in practice, and the consultation about the formation of the group demonstrated support for nurse advocacy including banning retail displays of tobacco.

Nurses for a Smokefree Aotearoa/New Zealand is composed of nurses from New Zealand's four major ethnic groups, hospital and community health services, mental health services, nurse academics and researchers, the New Zealand Nurses Organisation, and the North and South Islands. More than 40 nurses have come forward in support of the group so far.

Opening comments:

- We thank the Minister and Ministry of Health for the opportunity to have input into the review of tobacco displays in New Zealand.
- We support a complete ban on tobacco displays – in all environments. These include duty-free stores, dairies, supermarkets, and service stations, and tobacconists.
- As nurses, we work with people directly and adversely affected by tobacco products. They are harmful. They cause thousands of deaths among Maori and non-Maori, and are a major contributor to illness [3]. Both users and those exposed to second-hand smoke are affected. Tobacco is dangerous. Because of this, we do not believe it should be treated like other consumer products.

- We accept the evidence in the Ministry of Health consultation document, the work of researchers from Otago University, Massey University and Whakauae Research Services, and ASH New Zealand’s review of retail tobacco displays [4-7].
- Because of this evidence we support removing tobacco products from sight for the following reasons:
 - to protect children from taking up smoking since tobacco displays increase uptake of cigarettes;
 - to help patients, colleagues and family members we have helped quit remain quit;
 - to encourage all smokers to quit
- We accept that smokers use a legal and addictive product but do not believe that a ban on displays will disadvantage them – tobacco products will still be available, but out of sight to those vulnerable to smoking.
- As nurses we believe our health promotion messages should be consistent with and supported by New Zealander can see (goods and displays) when they go shopping – that is no tobacco advertising via retail displays. This would also be consistent with the Smokefree Environments Act 1990 which bans advertising, sponsorship and promotion of tobacco products.
- **We strongly urge Parliament to completely ban the retail display of tobacco products.**

Responses to proposed options:

Option 1: Current restrictions with enhanced education and enforcement

Would you support this option? If yes, why? If no, why not? What possible advantages or disadvantages do you see with this particular option?

- We do not support this option. Only a complete ban on displays will address the adverse effects of displays on youth, ex-smokers and smokers identified in the research literature.
- We support an increase in education and enforcement to facilitate a complete ban on displays only.
- We support creating a retailer licensing scheme to enforce compliance with strong deterrents for non-compliance resulting in the permanent loss of licenses to sell tobacco if necessary.

Retaining current restrictions

- Retaining current restrictions is unacceptable. They are inadequate. They have led to subversion of the health objectives of the Smoke-free Environments Act, for instance, through the creation of “power walls” [4].

Enhanced Retailer Education

- Improved compliance through education will not address the basic problems caused by retail displays of tobacco products.
- Due to the reasons above, we support enhanced retailers’ education only in conjunction with a complete ban on tobacco retail displays.
- A complete ban will make retailers’ education simpler. It will not require complex interpretations about display location or size.
- We support requiring Ministry of Health approved education for tobacco sellers, as part of a tobacco retailer licensing scheme.

Enhanced Enforcement

- Improved compliance through enforcement will not address the adverse effects of displays on youth and ex-smokers identified in the research literature.
- We support greater enforcement of retail related regulations to facilitate a complete ban on displays only.

Option 2: Further restrictions

Do you support any of these options? If yes, why? If no, why not? Would you like to see some of the above options combined? For example, only one tobacco display per retail outlet and this display to include a graphic health-warning poster. What possible advantages or disadvantages do you see with these options?

Further limit the maximum size of tobacco displays

- We do not support this option because it is very unlikely that smaller displays will not eliminate the problems caused by displays.

Require graphic health-warning posters with a complete display ban

- We support requiring stores that sell tobacco to display large government designed graphic health warnings at the location where tobacco is sold. We suggest that they be used as the only way to alert customers that products are available. We note they have the added benefit of discouraging uptake and supporting quitting [8].

Limit the number of tobacco displays to one display per retail outlet.

- We support restricting tobacco sales to one check-out per retail outlet to reduce exposure to tobacco products.

Option 3: Ban on tobacco displays

Do you support either of these options? If yes, why? If no, why not? What possible advantages or disadvantages do you see with these options?

Ban tobacco displays in areas accessible to under-18-s

- We do not support this option because we are concerned about the very high smoking rates among young adults [3]; because the tobacco industry is targeting young adults [9]; because smoking may be further glamourised as an activity associated with adult only environments; because smoking and drinking are associated and ex-smokers may be prompted to relapse; and finally because retailers who sell to the general public will be discriminated against in favour of those who sell in adults only environments.

Completely ban all tobacco displays

- **We support a complete ban all tobacco displays**
- Our reasons for this include:
 - That tobacco use is highly addictive and carcinogenic killing thousands of New Zealanders each year.
 - That tobacco products are never safe or desirable.
 - That given their harm, tobacco products must not be treated the same as other household items.
 - That a complete ban on the retail display of tobacco products and associated imagery is consistent with health messages we deliver as nurses. Retail displays undermine our smokefree work.
 - It will contribute to de-normalising smoking behavior, especially among young people.
 - That a complete ban on all tobacco displays is easier to comply with and easier to enforce than limited restrictions.
 - That other countries have legislated to ban displays of tobacco products and have had a high compliance rate.
 - That this measure has a minimal adverse impact on smokers who are not ready to quit, as cigarettes will be readily accessible.

Which is your preferred option? Why?

- Our preferred option is a **complete ban** on the retail display of tobacco products and associated imagery
- Our reasons are listed above.

Is there anything else you would like to comment on?

- Tobacco products should be stored so that they are not visible to the public when they are being retrieved for customers.
- Tobacco products should not be in stand-alone structures since these function as displays.
- There should be a limit of one point of purchase location selling tobacco per shop.
- The only notification of tobacco sales should be graphic/pictorial health warnings (approved by the Ministry of Health) at the point of purchase with the Quitline telephone number.

Vending machines

- Vending machines should be banned since these function as displays.

Licensing

- A tobacco retailer licensing scheme should be implemented, and education and enforcement funded at a level sufficient to ensure a complete ban is adhered to.
- Measures which should be considered as part of the introduction of a comprehensive tobacco retailer licensing scheme include:
 - Requiring tobacco retailers to stock and advertise a minimum range of smoking cessation aids, to levels set by the Ministry of Health.
 - A minimum age of staff selling tobacco, as is the case for alcohol. We suggest that the danger of the product, and the pressures on young people to sell tobacco, requires that a minimum age of 25 be made.
 - That places that provide alcohol be ineligible to hold a tobacco retailer license.

Payments to retailers and disclosure

- We support a ban on tobacco industry payments to retailers.
- In addition we support the introduction of legislation requiring the disclosure of tobacco industry practices and planning to enable government to track industry payments to retailers and planning to circumvent tobacco marketing laws.

Send submission to:
Courtenay Mackie
Tobacco Policy and Implementation

Sector Capability and Innovation
Ministry of Health
PO Box 5013
Wellington
Phone: (04) 816 4448
Facsimile: (04) 816 2191
Email: courtenay_mackie@moh.govt.nz

References

1. Wong, G., Fishman, Z., McRobbie, H. et al, (2007). *Smoking and Nurses in New Zealand ASH-KAN Aotearoa: Assessment of smoking history, knowledge and attitudes of nurses in New Zealand*. Auckland: ASH-NZ and AUT University
2. Reed, F & Wong, G. (2007). *Developing and evaluating a nurse advocacy group supporting a smokefree Aotearoa/New Zealand*. Presented at the 4th NZNO Primary Health Care Conference. Auckland.
3. Ministry of Health. 2006. *Tobacco Trends 2006: Monitoring tobacco use in New Zealand*. Wellington: Ministry of Health.
4. Ministry of Health. 2007. *Review of tobacco displays in New Zealand: Consultation Document*. Wellington: Ministry of Health.
5. Hoek, J., Gifford, H., Pirikahu, G. et al. (2008). *Effects of tobacco retail displays on ex-smokers and lapsed quitters*. Report for the Cancer Society and ASH New Zealand.
6. Thomson, G. Edwards, R. and Hudson, S. (2008). *Out of sight: Evidence on the tobacco retail environment in New Zealand and overseas*. Report for the Cancer Society and ASH New Zealand.
7. Edwards, R., Hoek, J., Gifford, H. et al. (2008). *The attitudes and knowledge of retail sector staff to selling tobacco products*. Report for the Cancer Society and ASH New Zealand.
8. Hammond, D., Fong, G.T., McDonald, PW et al. (2004). Graphic Canadian cigarette warning labels and adverse outcomes: Evidence from Canadian smokers. *American Journal of Public Health*. 94(8): 1442-1445.
9. Ling, P. & Glantz, S. (2002). Why and how the tobacco industry sells cigarettes to young adults: Evidence from industry documents. *American Journal of Public Health*. 92(6):908-916.