Submission on the Maori Affairs Select Committee’s Inquiry on the Tobacco Industry and the Consequences of Tobacco use for Maori

This submission is from:

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Smokefree Nurses Aotearoa/New Zealand (SNANZ) supports work to reduce death and disease caused by tobacco. Our membership includes 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, the College of Nurses’ Aotearoa, National Council of Maori Nurses, the College of Mental Health Nurses, Pacific Nurses Association, and the North and South Islands. We are committed to the Treaty of Waitangi and to building Maori health through our support of the vision of a tobacco free Aotearoa/New Zealand by 2020. We acknowledge the Maori leadership in tobacco control in Aotearoa including this Maori Select Committee Inquiry.

Thank you for the opportunity to make a submission to the Maori Affairs Select Committee’s Inquiry into the Tobacco Industry and the Consequences of Tobacco Use for Maori.

This submission addresses the following term of reference:

The impact of tobacco use on the health, economic, social and cultural wellbeing of Maori

Smokefree Nurses of Aotearoa/New Zealand consider tobacco to be an addictive and deadly drug that has a catastrophic impact on the health of all New Zealanders, specifically Maori. As nurses we witness the direct and indirect results of tobacco use on the health and wellbeing of patients and their whanau. We use significant resources in caring for people suffering from the addictive effects of tobacco and its consumption. Nurses are also directing their energy in providing effective smoking cessation interventions.

Smoking cessation interventions are insufficient to eradicate smoking. Nurse smoking cessation work must be supported with measures to reduce smoking initiation, support ex-smokers who wish to stay quit and stimulate smokers to quit. Tobacco products are rigorously marketed, and smoking is promoted as a ‘normal’ activity. It is easily
accessible and affordable. Thus nurses are hindered in their role firstly by the tobacco industry since it is the source of tobacco products and markets them heavily, and secondly, by the government which has yet to regulate the supply and sale of cigarettes sufficiently.

We urge the government to take action to regulate the supply and sale of this addictive drug. We also encourage the government to increase support services for those attempting to quit taking this drug as a result of these measures.

Specific comments
Tobacco has a catastrophic impact on the health of Maori, and all New Zealanders. Tobacco use causes the death of around 5000 New Zealanders every year including 600 Maori. Smoking is the single most important cause of premature and preventable deaths in New Zealand. About half of all smokers who are killed by tobacco die in middle age and have a reduced life expectancy of between 13 and 16 years.

Maori have significantly higher levels of smoking than the rest of the New Zealand population. This rate of smoking results in poor health and disparities in health. Tobacco use is linked to major health conditions such as heart disease, stroke, chronic obstructive pulmonary disease, lung and upper airways cancers. These conditions require significant nursing input, frequently by specialized nurses.

Almost all smokers start before the age of 18. For Maori this age drops to 11.6 years. While smoking by Maori girls and boys is dropping, the figures are unacceptably high. Retail displays of tobacco products have been shown to have a significant effect on youth susceptibility to smoking. Preventing young people from smoking can be facilitated by education, by making access to tobacco more difficult, and banning retail displays.

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2 Public Health Intelligence Tobacco Facts May 2002 (Public Health Intelligence Occasional Report No.2) Wellington: Ministry of Health
4 Te Reo Marama website: www.tereomarama.co.nz
9 New Zealand Tobacco Use Survey 2008
Tobacco is a barrier to meeting Maori potential, aspirations and developmental goals. The tobacco industry should be held accountable and responsible for all Maori deaths and illness from tobacco.

**Recommendations**

1. Increase tobacco tax each year from 2010 by 5% as recommended by the World Bank and the World Health Organisation (WHO)

2. Increase tax on loose tobacco to match that of manufactured cigarettes

3. Use a dedicated tax from existing tobacco revenue to fund services and programmes ranging from Maori specific health promotion programmes, cessation/quit services, research and advocacy services.

4. Support kaupapa Maori approaches to removing tobacco from Maori environments e.g. fund iwi and hapu to make Maori specific environments tobacco-free

5. Remove all tobacco displays from point of sale by 2010

6. Strictly enforce sales of tobacco with particular emphasis placed in areas with educational facilities – Primary/Secondary Schools.

7. Fully implement the Framework Convention on Tobacco Control (FCTC) Article 16 (Sales to and by minors) provisions including the prohibition of vending machines

8. Restrict tobacco supply using regulations and legislative measures with the goal of eliminating tobacco by 2020

9. The Government actively monitors, demonstrates and reports how it meets its international obligations directly with Maori each year on the Pre-amble and Article 4.2 (c) of the FCTC

10. Hold further enquiries on the Tobacco Industry practices in New Zealand via a Ministerial appointed Taskforce on Tobacco or a Royal Commission of Inquiry

11. Develop a sustainable industry denormalisation programme and counter marketing campaign and implement this in 2010

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11 World Bank, *Curbing the Epidemic: Governments and the Economics of Tobacco Control* 1999