



New Zealand Nurses Organisation

Submission to the Ministry of Health

on the

Review of Tobacco Displays in New Zealand

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Inquiries to: Marilyn Head
New Zealand Nurses Organisation
PO Box 2128, Wellington
Phone: 04 499 9533
DDI: 04 494 6372
Email: marilynh@nzno.org.nz

EXECUTIVE SUMMARY

1. The New Zealand Nurses Organisation (NZNO) thanks the Ministry of Health (MoH) for the opportunity to contribute to the review of tobacco displays and congratulates the Ministry on its excellent consultation document, which objectively and comprehensively reviewed pertinent research and information. NZNO also appreciates the reasonable time frame allowed for consultation which has enabled us to canvas our members appropriately.
2. Our members, who comprise over 41 000 kaimahi hauora, students, health care assistants and other health professionals, are frontline witnesses to the appalling effects of tobacco smoking which causes around 4 000 preventable deaths in Aotearoa New Zealand and ensures countless thousands of people live with chronic respiratory and other diseases. Through their work in many different fields, as cancer and respiratory nurses dealing directly with tobacco-caused disease, and as primary health, community, Plunket and Family Planning nurses working with young people and families, they have a thorough knowledge of the myriad of social and physical factors which influence people's decision to smoke.
3. The facts, as they report them, are unequivocal. Most smokers do not want to smoke. Most understand the dangers and pollutant effects of tobacco smoking and wish they had never started. But the addictive properties of nicotine are such that it is very difficult to give up – the Quit Group confirms that on average people will try to give up 14 times before they succeed. That is a remarkable testament to the tenacity of both the drug and the addict. NZNO members know from those they care for, that the high visibility of tobacco displays is a key factor in undermining the determined efforts of smokers to give up a habit they despise, that inflicts damage on the environment and those they are closest to and seriously affects their own health.

4. Prevention is a central tenet to the Primary Health Care Strategy which NZNO strongly supports. Removing tobacco displays would be a significant step towards stopping people from starting to smoke in the first place as smoking rarely begins in adulthood.
5. The incidence of tobacco smoking is highest amongst the poorest people in Aotearoa, whose health is already compromised by poorer housing, overcrowding, and higher levels of unemployment and illness. Though NZNO appreciates the substantial steps this government has made in bringing down the costs of healthcare, it suggests that the simple, costless expedient of removing the ubiquitous “prompts to smoke” of tobacco displays would have a far more significant long-term effect.
6. Smoking amongst Māori and especially Māori women is also disproportionately high. Te Runanga o Aotearoa, which comprises NZNO’s Māori membership, believes that cessation of smoking is a primary means through which they can achieve their vision of achieving the highest level of optimal wellness for Māori: *Hei oranga motuhake mo ngā whanau me ngā hapu me ngā iwi.*
7. NZNO strongly supports the second option in Option 3, a complete ban on all tobacco displays, as the only humane, responsible and effective action to address the huge environmental, economic and human costs of smoking.
8. NZNO suggests that current legislation is contradictory in that it bans tobacco advertising yet allows tobacco displays which clearly *are* advertising, and an insidiously pervasive form at that. Tobacco displays at every corner dairy, usually behind the sweet counter, effectively sabotage the convoluted regulations restricting display size and location intended to limit their impact by not only still being highly visible, but also being associated with products appealing to children (Hoek, 2004). A more effective combination for *promoting* tobacco could scarcely be contrived. The constantly reinforced connection of the most highly addictive, disease-promoting, pollutant drug with equally tempting sweets, inexorably leads children to a much higher risk

of smoking. In effect, children are being “groomed” to take up smoking. Such cynical manipulation of the younger and most vulnerable members of society is despicable and should not be tolerated. Commenting on recent research conducted in Aotearoa, Belinda Hughes Tobacco Control adviser at the Cancer Society of New Zealand noted that “...participants expressed particular concern that the displays attract young people to develop a smoking addiction.” (Cancer Society, 2008)

9. NZNO believes there would be no advantage and considerable disadvantage in the partial restrictions proposed in Options 1 and 2, which would maximise complexity and minimise effectiveness. Anything less than a total ban compromises the clear message that tobacco smoking is lethal. We cannot ‘turn back the clock’ – if we could it would be unlikely that tobacco would ever have been legalised in the first place. But we can act on the evidence that tobacco displays promote smoking, undermine efforts to quit, reduce the effectiveness of other non-smoking messages and ‘normalises’ a product which causes more harm to public health than any other single factor.
10. NZNO does not believe that the economic impact on retailers, which are unlikely to be significant, or tobacco companies equates in any way to the costs that tobacco smoking inflicts. Such arguments should not be countenanced when considering the small financial gain of a few to the tragic losses of thousands.
11. Option 1 is unacceptable because it continues the status quo which is not delivering in terms of substantially reducing the numbers of smokers. As previously indicated, education has been extremely effective in making people understand that smoking is a huge health risk, but, on its own, it takes a very long time to affect behaviour. And the message that smoking kills is undermined constantly by tobacco being not only freely available, but actively promoted in shops and supermarkets with other products which are generally deemed safe. Dangerous goods, like guns and poisons, are physically and

visually much less accessible, yet smoking kills far more people – usually more slowly and agonisingly.

12. In that context, however, NZNO notes that a dairy owner voluntarily gave up selling tobacco because it was the primary inducement for robbery. New Zealand Police statistics bear this out: tobacco products are often the target of theft and aggravated robbery. If tobacco displays can prompt the urge to smoke, they may also be a subtle contributing factor in criminal activity especially amongst the young. NZNO notes that Aotearoa New Zealand has an extremely high level of incarceration, especially of young people, and once started it seems as hard to stop criminal activity as it is to stop smoking, no matter what the motivation is. With high rates of recidivism, and the huge social and economic costs of young lives wasted in prison, removing the visible temptation of tobacco displays is a costless action which may deliver other benefits.
13. Enhanced enforcement is expensive and unlikely to be effective even with vastly increased resources. A complete ban would make it easier for retailers to comply and would ensure equity between them.
14. Option 2 is unacceptable because *any* tobacco display prompts the use of tobacco.
15. The option of banning tobacco displays in areas accessible to under-18s is similarly ineffective. Under 18's may be the most susceptible to the subliminal messages that tobacco displays give, but it is people who are over 18 who continue to smoke and whose efforts to quit are undermined by them.
16. In short, Aotearoa has everything to gain and nothing to lose from immediate implementation of the second option in Option 3, a complete ban on all tobacco displays. This is the only course of action that NZNO supports.

ABOUT THE NEW ZEALAND NURSES ORGANISATION

17. NZNO is a Te Tiriti o Waitangi based organisation. It is the leading professional body and nursing union in Aotearoa New Zealand, representing over 41 000 nurses, midwives, kaimahi hauora, students, health care assistants and other health professionals. Te Runanga o Aotearoa NZNO comprises Māori membership and is the arm through which our Treaty based partnership is articulated.
18. The NZNO vision is “Freed to care, Proud to nurse”. Our members enhance the health and wellbeing of all people of Aotearoa New Zealand through ethically based partnerships. Our members are united in the achievement of their professional and industrial aspirations.
19. NZNO has consulted its members in the preparation of this submission in particular NZNO staff (Management, Professional Nursing Advisors, Policy Analysts, and Industrial Advisors) and NZNO members (Colleges and Sections, Board Members and other health care workers).

Marilyn Head
NZ Nurses Organisation

REFERENCES

Hoek, J. Tobacco promotion restrictions: Ironies and unintended consequences. *Journal of Business Research* , (2004), 57(11). , 1250-1257

Cancer Society of New Zealand and ASH Media release, February 7 2008 *Research highlights influence of tobacco displays*. New Zealand.