

Maori Affairs Select Committee
Committee Secretariat
Bowen House
Parliament Buildings
Wellington

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RE: INQUIRY INTO THE TOBACCO INDUSTRY IN AOTEAROA AND THE CONSEQUENCES OF TOBACCO USE FOR MAORI

This submission is from Change for our Children Limited

Introduction

We are a social innovation company with some health-funded contracts for services for whanau for addressing smoking in pregnancy, education for midwives in addressing smoking in pregnancy with their clients and their partners and education services to prevent sudden infant death. All these services impact on Maori as Maori is over represented in both smoking in pregnancy and sudden infant death. We have a high commitment to improving health and health inequalities.

Maori

- Tobacco Smoking is a key risk factor for adverse pregnancy outcomes, poor infant and child health and sudden infant death. If you were to do just one thing to improve the health development and survival of children it would be to protect them from tobacco smoke, especially in pregnancy.
- Maori continue to have high rates of smoking. Around 47% of Maori are daily smokers. Their prevalence and uptake rates are much higher than non-Maori¹.
- One in three Maori babies are born already harmed by the effects of tobacco use in pregnancy. For every non-Maori baby that dies from SUDI, 4 Maori babies die.
- Professor Lesley McCowan explains that every reproductive outcome you can think of is made worse by smoking, especially by smoking in pregnancy. Tobacco use undermines the essence of resilience for life in a child, a burden carried for life.

¹ New Zealand Ministry of Health and the Quit Group, *Maori Smoking and Tobacco Use*, Fact Sheet 1, Wellington 2006

Due to the above conditions tobacco use creates for medical care for Maori, Change for our Children strongly advocates for the implementation of strong tobacco control measures that will shift Maori demand for tobacco toward a demand for quitting services. Change for our Children is a member of the Smokefree Coalition. All members of the Smokefree Coalition share a vision for a tobacco free New Zealand by 2020. But current declines in prevalence and uptake are much too slow, the government must implement the most substantial measures to accelerate the decline of tobacco in New Zealand.

TERMS OF REFERENCE FOR THE INQUIRY

Change for our Children wishes to raise the following matter under the terms of Reference below.

1. THE HISTORICAL ACTION OF THE TOBACCO INDUSTRY TO PROMOTE TOBACCO USE AMONGST MAORI

Maori were introduced to tobacco by Captain Cook and his crewmates in 1769. Maori are reported to have “promptly doused (him) in case he is a demon.”²

Later, European traders and settlers used tobacco as a medium of exchange and koha in their dealings with Maori. Over the following decades tobacco smoking became firmly entrenched amongst Maori.

It wasn't until the mid twentieth century that tobacco was linked with any medical harm. By then, tobacco's industry had turned from a society of traders into a small group of multinational corporations with global shares and big profile marketing teams. Industry denied the medical claims with counter-research and promotion of their own data for decades. Some smokers slowly began to realise through this public information and debate that plenty of ailments and sickness in their lives was because of their smoking “habit”, and when they tried to break that habit, realised they could not.

Medical research began to prove nicotine's addictive qualities too late, because by the mid twentieth century, New Zealand's Maori population were perpetuating smoking's “habit”. A substance introduced to the indigenous population of New Zealand had been found to be addictive, and therefore needed, and still needs, intervention by New Zealand's government to stop.

Change for our Children concludes: the tobacco industry must be removed from Aotearoa by substantial tobacco control measures. Deliberate attention to Maori must be paid in efforts to educate the New Zealand public of the connections between tobacco use and health. That future generations of Maori are will be free from exposure to tobacco products and will enjoy smokefree lives.

2. THE IMPACT OF TOBACCO USE ON THE HEALTH, ECONOMIC, SOCIAL AND CULTURAL WELL-BEING OF MAORI

² Mackay J, Erickson M, The Tobacco Atlas, World Health Organisation 2002.

The impact of tobacco use is profound for Maori and is at the heart of health inequality for Maori. We have found that when Maori women engage in smokefree support, their success with becoming smokefree is similar to non-Maori. That they are from a group of higher prevalence does not undermine their chances for success. Personal stories about Maori becoming smokefree in pregnancy are related in this booklet and provide a colourful understanding of the mixed motivations involved in smoking and change³. They are stories of hope and empowerment and the reasons why Change for our Children makes this submission.

The economic impact of tobacco use is reflected in the extra costs smoking related disease and sickness creates, over a lifetime, for smokers. This extra cost becomes a burden on whole households. Once a smoking related disease takes hold, there is often a slow and painful process of dying. This economic burden impacts again on a whole household: firstly, prior to death, a smoker's capacity to work stops at some point, rendering her or him a dependent upon others; secondly, after a premature death, the family is further deprived of the deceased's contributions up to retirement age.

This impact is also a social and cultural one for Maori, whose tikanga places family and whakapapa of great value. Loss of elders before their time leaves holes in the fabric of Maori lineage, especially if smokers did not have their chance to pass on the knowledges of their whakapapa before they died. On a social level, mokapuna lose a great chance to know and be cared for by their grandparents. This can put pressure on more Maori parents to care for these mokapuna more alone than if elders did not pass away. Maori life expectancy is 11 years less than non-Maori New Zealanders⁴.

Change for our Children concludes: Tobacco is a condition that has over time in New Zealand created unequal health for Maori, which has had impact upon their economic, social and cultural well-being. The government has a treaty obligation to protect Maori from unequal conditions of health, economic, social and cultural well-being to non-Maori New Zealanders. What's more, the government has a moral obligation to protect all its citizens from harm by exiting the tobacco industry from this country.

3. THE IMPACT OF TOBACCO USE ON MAORI DEVELOPMENT ASPIRATIONS AND OPPORTUNITIES

When Maori leadership is struck down and its movers and organisers rendered ineffective through tobacco related illness, the opportunities and aspirations of whanau, hapu and iwi are severely compromised. Morbidity and mortality from tobacco use robs Maori of development potential, health status and a cultural knowledge base for future generations.

³ Cowan S and Pease A. Just Imagine. Change for our children 2008 (Available at: http://www.changeforourchildren.co.nz/files/docs/Just_Imagine_pdf.pdf)

⁴ Hunt D, Blakeley T, Woodward A, Wilson N. The Smoking-Mortality association varies over time and by ethnicity in New Zealand. International Journal of Epidemiology. 2005; 34: 1020-28.

Change for our Children concludes: The government must not cooperate in this impairment to Maori development aspirations. The government must intervene upon the operations of the tobacco industry in New Zealand in such a way that it exits the industry from New Zealand as soon as it can, without alienating any members of its community, that still need assistance quitting.

4. WHAT BENEFITS MAY HAVE ACCRUED TO MAORI FROM TOBACCO USE?

None whatsoever. Change for our Children challenges the Maori Affairs Select Committee to find one Maori who disagrees with this position.

5. WHAT POLICY AND LEGISLATIVE MEASURES WOULD BE NECESSARY TO ADDRESS THE FINDINGS OF THE INQUIRY?

Change for our Children recommends that the Smokefree Coalition's Vision for a tobacco free 2020 be accepted and embraced by the Maori Affairs Select Committee, and put to the government as a viable national position. With the Smokefree Coalition's comprehensively researched methodology, the Maori Affairs Select Committee can recommend to government a cohesive and time-lined strategy for tobacco control implementation over the next ten years.

In 2010 the Priority actions are as follows

- a substantial tobacco excise tax increase in the 2010 budget
- Tobacco retail displays will be banned
- Tobacco tax will be equalised for roll your own and factory made cigarettes

Other actions

- There will be increase in targeted support services to pregnant women, especially Māori women
- A media strategy will be developed to promote parental influence over youth smoking, including targeted messages to Māori women, especially pregnant women
- Media campaigns will promote the harm of misleading terms such as 'light' and 'mild'
- Best practice for smoking cessation will constantly be monitored and applied
- Media campaigns will promote the benefits of quitting and the support available
- National smoking cessation targets will be met
- Fast-track process for registering new NRT products in New Zealand developed

In 2011 the Priority actions are as follows

- A schedule of annual tax increase of 10% per annum (or greater) will be agreed, with a view to increasing the price of a packet of 20 cigarettes to \$20 by 2020
- The sale of tobacco will be limited to licensed retailers. There will be a schedule to reduce the number of licenses issued, and a strict public health focused criteria for issuing licenses.

Other actions

- Internet sales of tobacco products by New Zealand retailers will be banned
- System for registering and selling alternate nicotine products introduced.
- Full implantation of FCTC article 5.3. Protecting public health from tobacco industry influence

In 2012 the Priority actions are as follows

- Supply model for controlling the tobacco market explored and developed
- introducing supply control policy that mandates a reduction in the volume of tobacco sold,
- and the range/number of locations where it may be purchased.
- Legislation will ban smoking in cars carrying children

Other actions

- Duty free cigarettes sale will be banned, including the import of non-duty paid tobacco, and overseas internet sales
- The addition of sugars to tobacco products during manufacture will be banned
- All health professionals qualifying in New Zealand will have received training on smoking cessation as part of their compulsory studies

In 2013

- Tobacco products branding will be limited to generic plain text and graphic picture warnings
- The use of terms, packaging and marketing tools that mislead smokers about the relative harm of tobacco products will be banned
- No new smoked tobacco products will be permitted into New Zealand unless they can demonstrably be proved to have a public health benefit
- Introduce a schedule for the mandatory reduction of nicotine content in cigarettes

2013 onwards

- Regulation and control on the supply and sale of tobacco products will set a mandatory annual decrease in the tobacco available for sale in New Zealand, and the location at which it can be sold.
- The addition of flavourings designed to improve the palatability of tobacco products will be banned.