

# Political bulletin

All Party Parliamentary Group on Smoking and Health



## New Parliament, New Plan!

Over the last Parliament, we saw great and welcome progress in reducing smoking rates. Figures from the NHS Health and Social Care Information Centre, published on 15<sup>th</sup> June, show that smoking rates in the UK are now at a record low.

Across England, about one in twelve smokers quit during 2016: the percentage of people in England aged above 18 who were smokers in 2016 is 15.5% compared to 16.9% in 2015, a fall of 1.4 percentage points. [1] This is the largest annual fall in the last 40 years. Particularly welcome is the large decline among young people with smoking rates falling 6.5% among 18-24 year olds since 2010.

The fall in smoking rates is the result of a well-funded and comprehensive tobacco control strategy, which criteria set by the World Bank has placed the UK top in Europe this year for implementation of tobacco control policies. In the UK, we have seen:

- Annual increases in tobacco taxes of 2% above inflation since 2011, to reduce affordability
- The continuing impact of the ban on smoking in enclosed public places
- The complete ban on advertising, promotion and sponsorship
- The requirement to put tobacco out of sight in shops
- The availability of stop smoking services for smokers, with nicotine replacement products available on prescription (although these are now facing significant reductions and service changes following the devolution of public health in England to local authorities)
- A shift to the use of electronic cigarettes by current smokers; survey figures released by ASH last month estimated that there are now 2.9 million vapers across the UK, of whom 1.5 million no longer smoke at all
- The introduction of standardised packaging for tobacco products (the figures published in June for 2016 include the period since May 2016 in which standardized packs were gradually being introduced by retailers).

However, there remains a great deal to do. Across the country, smoking is still responsible for about half the difference in life expectancy between rich and poor. Smoking rates among those with mental health conditions are more than double the national average.

And disturbing figures from NHS Digital, also published on 15<sup>th</sup> June [2] show that rates of smoking among pregnant women have hardly changed over the last year, with only a 0.1% decline from 10.6% in 2015/16 to 10.5% in 2016/17. Worse, maternal smoking at time of birth rose in the last quarter of 2016/17 to 10.8%. This should raise serious concerns for the Government, given that the national target was 11% in 2015.

Successive Governments have published Tobacco Control Plans for England (the devolved nations produce their own), with the last one expiring at the end of 2015. We urgently need a replacement, and I hope that the new Public Health Minister will make this a priority.

There has been an All Party Group on Smoking and Health in Parliament for more than forty years. It has played an important role in defining action to cut smoking as a cross-party concern and in mobilising support for key tobacco control legislation. Colleagues are warmly welcomed at our meetings, the next being a joint meeting with the APPG on Baby Loss on Tuesday 18<sup>th</sup> July to launch the latest Smoking in Pregnancy Challenge Group report. This meeting will also be our AGM, which you are most welcome to attend.

### Bob Blackman MP

Chair of the APPG on Smoking & Health

[1] [Statistics on Smoking, England, 2017. NHS Digital](#)

[2] [Statistics on Women's Smoking Status at Time of Delivery \(SATOD\), England - Quarter 4, 2016-17](#)

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# Cutting Tobacco Use: A Key Goal for Sustainable Development

31<sup>st</sup> May is the World Health Organisation's World No Tobacco Day. This is a day set aside as a tribute to the six million people killed each year by tobacco and a call to action to Governments to halt this deadly epidemic, which two of Britain's largest companies, Imperial Tobacco and British American Tobacco, are vigorously exporting around the world. While the twentieth century tobacco epidemic was concentrated in high income countries like the UK and the US, nearly 80% of smokers now live in low and middle income countries (known as LMICs). In the twentieth century 100 million people died from smoking, in the twenty first, on current trends, 1 billion will die, the majority in their most productive years and disproportionately concentrated in poorer countries.

This year's theme was "Tobacco - a threat to development". The UK government has already responded to this call to action by committing £15 million (around US\$18 million) to support implementation of the WHO's tobacco treaty (FCTC) in poorer countries between now and 2021. As the UK said in its statement launching the project, "*tobacco use negatively impacts on health and development.*" From civil society, Cancer Research UK has invested £5 million (around \$6 million) to support treaty implementation, with a focus on helping build the evidence base in poorer countries. The UK Government's funding comes from the aid budget (the UK is the only G7 country to have met the UN's target to spend 0.7 per cent of gross national income on overseas aid). The initiative is being delivered by the WHO FCTC Secretariat to directly support a number of Parties as well as supporting initiatives to promote implementation of the treaty in all low- and middle income countries.

The UK has come top of the European tobacco control country listings since 2007, and in 2015 was awarded the prestigious American Cancer Society's Luther L Terry medal for exemplary leadership by a government ministry. These awards are due to the global leadership the UK has shown in implementing the WHO FCTC to the highest standards, from smoking cessation support free at the point of delivery to a complete ban on advertising promotion and sponsorship; from high taxes consistently rising above inflation year on year to comprehensive smokefree laws; from a ground breaking and highly effective anti-smuggling strategy to, most recently, being the second country in the world to pass legislation requiring standardised "plain" packaging of tobacco products.

On 30<sup>th</sup> May, the Secretariat of the WHO FCTC launched a new paper with the UN Development Programme (UNDP) on tobacco and the UN Sustainable Development Goals (SDGs), which

include targets to reduce mortality and morbidity from non-communicable diseases, including those caused by tobacco use.

The report ([The WHO Framework Convention on Tobacco Control – an Accelerator for Sustainable Development](#)) sets out a "co-benefit analysis" of tobacco control with other development targets. The report suggests that FCTC implementation interacts positively with 67 targets, is consistent with 99, and limits options on only 3 targets in the 2030 Agenda for Sustainable Development.

Some MPs and newspapers have criticised the UK for spending aid money on tobacco control. But as overseas aid minister Priti Patel has said: "*The truth is that UK development influence is massive, greater than our foreign policy, and this isn't just about money, Britain is saving lives and bringing stability and security, and that's good for our economy and for what comes to our doorstep.*"

Writing in the Huffington Post, Dr Vera Luiza da Costa e Silva, Head of the WHO FCTC Secretariat, pointed out that "*tobacco is a hydra that brings hunger, disease, poverty and environmental destruction, raining misfortune on families and across whole continents. Without it, everyone can enjoy a better future.*"



# New Evidence on Electronic Cigarettes Shows More Use by Ex-Smokers

In May this year, Action on Smoking and Health (ASH) published the latest findings from its annual Smokefree GB survey into the use of electronic cigarettes and vapourisers in Great Britain. [1]

The study was conducted by YouGov for ASH and shows an estimated 2.9 million adults in Great Britain currently use electronic cigarettes. For the first time ever, the survey finds more ex-smokers (1.5 million) use e-cigarettes than current smokers (1.3 million). There has been a fourfold increase in the number of vapers since 2012, when the figure was 700,000.

However, growth has slowed a great deal in the last couple of years. The main reason people offered for their use of e-cigarettes was to stop smoking. While this is a very positive development, there are still many people who “dual-use” combustible and electronic cigarettes which still exposes them to the toxic, cancer causing substances in tobacco smoke. [2] While this number rose sharply from 2010 (2.6% of smokers) to 2014 (17.6% of smokers), it now seems to have stopped rising, while the proportion of ex-smokers using electronic cigarettes is still rising, from 4.5% in 2014 to 9.5% in 2017. The most common reason given by ex-smokers for their use of electronic cigarettes is: “to help me stop smoking entirely” (61%).

Worryingly, however, fewer smokers year on year understand the reduced risk of vaping compared to smoking tobacco. The research shows that many people are over-estimating the risk posed by e-cigarettes. Only 13% of respondents recognise that e-cigarettes are a lot less harmful than smoking, with 26% thinking they are more or equally harmful. This is a communications challenge that urgently needs to be met if we are to cut the harm caused by tobacco to smokers and those around them.

The EU Tobacco Products Directive (TPD), which came into effect from 20 May this year, includes new regulations that apply to electronic cigarettes as well as tobacco. The maximum strength of nicotine allowed in e-liquid is 20 mg/ml, the maximum tank size is 2 ml and the maximum e-liquid bottle size is 10 ml. The ASH survey found that only 6% of vapers use nicotine above the TPD maximum of 20 mg/ml and only 1% of vapers use more than 10 ml of liquid a day. Most daily vapers (62%) are using 4ml or less each day.

Tobacco is no longer the most commonly used flavour in electronic cigarette liquids, having been overtaken by fruit flavours, which are now used by 29% of vapers.

Commenting on the latest survey results, Deborah Arnott, Chief Executive of ASH, said:

*“It’s excellent news that the number of vapers who have quit smoking is continuing to grow.” She went on to say: “The rapid growth in e-cigarette use has come to an end while over a third of smokers have still never tried e-cigarettes, saying the main reasons are concerns about the safety and addictiveness of e-cigarettes. It’s very important smokers realise that vaping is much, much less harmful than smoking”.*

You can view the ASH factsheet here: [Use of e-cigarettes among adults in Great Britain 2017](#)



[1] Opinion research from YouGov. Total sample size was 12696 adults. Fieldwork was undertaken between 16th February 2017 and 19th March 2017. The survey was carried out online. The figures have been weighted and are representative of all GB adults (aged 18+). Link to factsheet

[2] Shahab L. Goniewicz M. Blount B. Brown J. McNeill A. Alwis K U. Feng J. Wang L. West R. Nicotine, Carcinogen, and Toxin Exposure in Long-Term E-Cigarette and Nicotine Replacement Therapy Users: A Cross-sectional Study. *Annals of Internal Medicine*.

# July 1<sup>st</sup> 2017: Ten Year Anniversary of Smokefree Legislation

July 1<sup>st</sup> 2017 will be the tenth anniversary of the implementation of smokefree legislation in England. The legislation, included in the Health Act 2006, ended smoking in virtually all enclosed public places and was passed on a free vote in the House of Commons by a majority of 200.

ASH has commissioned annual surveys from YouGov from 2007 to 2017, with the goal of measuring public attitudes to legislation and other measures to reduce the harm caused by tobacco use.

Smokefree legislation has proved overwhelmingly popular with the general public in England (one reason why it is widely observed and requires little enforcement). In the survey conducted just before the legislation came into force in 2007, 78% of respondents said they supported the law. Ten years later, in 2017, support had risen to 83%. The growth in support for the legislation is a result of increasing support for it by smokers themselves. In 2007, only 39% of smokers supported it. In 2017, support from this group had risen to 56%.

Smokefree legislation (which was also introduced in Scotland, Wales and Northern Ireland) was part of a series of major advances in tobacco control across

the UK. Every tobacco control measure introduced by Government has had the support of a majority of the adult population, and support has grown since they were implemented.

- In 2012, when displays of tobacco were banned in supermarkets and large shops, 57% of respondents to the YouGov survey supported the ban. In 2017 this figure has risen to 72%
- In 2015, legislation banning smoking in cars with children had 85% support, up to 88% in 2017
- In 2016, when standardised packaging was introduced, 58% of respondents supported the policy. This rose to 60% in the following year.

## ASH Website and Daily News

Action on Smoking and Health's new website ([www.ash.org.uk](http://www.ash.org.uk)) is designed to make it easier to access key information about tobacco issues.

ASH Daily News is a brief roundup of the main national and international news and research updates on tobacco control. Parliamentarians and researchers can sign up to the service through the new website.

Tuesday 18<sup>th</sup> July 2017, 16:00 – 18:00, Committee Room 15, House of Commons

## APPG on Smoking and Health and APPG on Baby Loss AGMs & Meeting

This meeting will celebrate the launch of a new Smoking in Pregnancy Challenge Group report: *Smokefree Skills: An assessment of maternity workforce training*.

**Speakers:** will include Chairs of the APPGs alongside experts from the Royal College of Midwives, Royal College of Obstetricians and Gynaecologists, Public Health England and NHS England.

RSVP: [appg@ash.org.uk](mailto:appg@ash.org.uk)

### Officers of the All Party Group

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The All Party Parliamentary Group (APPG) on Smoking and Health is a cross-party group of Peers and MPs which was founded in 1976

**"To monitor and discuss the health and social effects of smoking; to review potential changes in existing legislation to reduce levels of smoking; to assess the latest medical techniques to assist in smoking cessation; and to act as a resource for the group's members on all issues relating to smoking and public health."**

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