

ash.
action on smoking and health

Annual Review 2014



...and on the other hand?

CHAIR'S INTRODUCTION - 2014

The last year has been very productive. The necessary primary legislation for standardised tobacco packaging is now in place, embedded in the Children and Families Act. Although there is still some way to go, there is now a realistic chance of getting regulations passed and a commencement date in place before the 2015 general election. This is no mean feat given the multi-million pound global lobbying campaign being run against standard packs by the tobacco transnationals.

ASH has continued its important work with local authorities following the handover to Public Health England of the CLear standard for local government which ASH had initiated. To see so many local authorities pledging their support for the Local Government Declaration on Tobacco Control is very encouraging. The Declaration will underpin their local tobacco control policies and help ensure that they are free of any interference by the tobacco industry.

Internationally, ASH, working in collaboration with the Brussels based organisation the Smokefree Partnership, has played a key role in building support throughout Europe for a strong revised EU Tobacco Products Directive. This passed its final legislative stages this spring and will be implemented from May 2016 onwards. ASH's Chief Executive also continues to work with colleagues in the Framework Convention Alliance to drive development and implementation of the WHO FCTC. At the Conference of the Parties this year several ground-breaking measures were agreed, in particular guidelines on tobacco taxation which will help other Parties to the WHO FCTC adopt tax policies as tough as those of the UK. These guidelines have the potential to help reduce smoking prevalence and the global burden of non-communicable disease; and to support the funding of FCTC implementation.

Smoking rates are continuing to fall both among adults and children in England. This highlights the effectiveness of successive government strategies to tackle smoking, despite tobacco industry efforts to undermine or derail the Government's health promoting policies. However, smoking still remains the largest preventable cause of death and disease, which underlines how important it is to keep up the pressure to ensure governments at all levels - local, regional and national continue to sustain and develop tough tobacco control measures.

On behalf of my fellow trustees I am pleased to present the 2014 annual review and to thank our funders and supporters without whom this vitally important work would not be possible.



Professor John Moxham
Chairman

Overview

During the past year important new laws on tobacco control have been passed both domestically and in Europe. The Children and Families Act contains powers to enable the government to bring in standardised packaging, prohibition of smoking in cars with children present, age of sale of 18 for electronic cigarettes and prohibition of the purchasing of tobacco by adults for children. Meanwhile in Europe the finalised revised Tobacco Products Directive will require the introduction of larger pictorial health warnings amongst other important regulatory measures.

But for many the big news of last year was the extraordinary rise in use of electronic cigarettes: our research shows that in spring 2014 there were an estimated 2.1 million adult users in Great Britain, up from 1.3m in 2013. ASH has been leading the call for a regulatory regime that maximises the potential benefits while minimising the risks. To this end, ASH has worked with organisations such as the Chartered Institute of Environmental Health to produce policy briefings and guidance on usage of electronic cigarettes.

Working with Smokefree Action Coalition (SFAC) partners, ASH has been active in continuing to build support for tobacco control at local level and we have produced a range of new materials for local government, following the transfer of CLear to Public Health England.

Also this year we published ground-breaking research on the social care costs of smoking which shows that the cost to local authorities in England of providing care is £600 million, with a further £450m being spent by smokers or former smokers who require care. The report shows that smokers are likely to need care on average nine years earlier than non-smokers. Consequently, local authorities can save money by providing stop smoking services to help current smokers to quit in order to reduce social care costs in the future.

Children and Families Act

Standardised packs campaign

After stalling by Government on this issue in 2013, the prospects for standardised packaging were given a boost towards the end of the year when a cross-party and cross-bench group of peers, backed by the APPG on Smoking and Health, tabled an amendment to the Children and Families Bill. Following parliamentary debates in both Houses which revealed widespread cross-party support for the measure, the Government tabled its own amendment to the Children and Families Bill to give the Secretary of State for Health powers to bring in regulations for standardised packaging. At the same time, the Government announced that it had commissioned a paediatrician, Sir Cyril Chantler, to review the public health evidence for standardised packaging.

In his review, which included an analysis of the impact of standardised packaging in Australia, Sir Cyril Chantler concluded that the measure could be expected to have a positive impact on public health. He also dismissed tobacco industry arguments that standardised packaging would lead to an increase in illicit trade.

Responding to the review, the Minister for Public Health said that she was “minded to proceed with introducing regulations to provide for standardised packaging”, subject to a further short consultation to take into account any evidence that had arisen since the end of the 2012 consultation. Following the public consultation which closed in August, the Government notified the regulations on standardised packaging to the European Commission as it is required to do under EU law. The timetable is tight but sufficient parliamentary time remains for MPs to vote through the regulations in advance of the general election. If successful, this would mean that standardised packaging could be implemented at the same time as tobacco packaging measures under the Tobacco Products Directive enter into force in May 2016.

Smokefree cars

The Opposition tabled an amendment in the Lords to the Children and Families Act to prohibit smoking in cars when children are present. After this was passed by the Lords the Government tabled its own amendment in the Commons and announced that it would allow a free vote on the issue. The government amendment was passed by a huge majority: 376 voted in favour and only 107 against. This is a major step forward. However, in our response to the consultation on the regulations, we argued that the Government should also include the option of a review of the legislation in the regulations. This would enable the regulations to be extended to all cars which we believe would be preferable for reasons both of health and easier enforcement.

Revised EU Tobacco Products Directive

In February, the European Parliament approved tough new tobacco control legislation which will be implemented by Member States from May 2016 onwards. ASH had worked with members of the SFAC and ASH's partner in Europe, the Brussel's based Smokefree Partnership to build support for a strong revised Tobacco Products Directive (TPD). Key elements include:

- increasing the size of the health warnings to cover 65% of the front and back surfaces of cigarette packs;
- making picture warnings mandatory at the top of the front and back of packs;
- prohibiting characterising flavours other than menthol; menthol will be phased out by 2020;
- minimum pack size of at least 20 cigarettes and 30g for hand-rolled tobacco;
- tracking and tracing measures to counter illicit trade;
- regulation of electronic cigarettes; and
- allowing Member States to implement standardised packaging

Electronic Cigarettes

Electronic cigarettes are a contentious issue and ASH is working hard to support the public health community in engaging with the evidence base. As noted above, from 2016 most electronic cigarettes on sale within the European Union will be regulated by the Tobacco Products Directive. The exception will be those that have been granted a medicines licence by the Medicines and Healthcare products Regulatory Agency.

As in previous years, ASH commissioned YouGov to conduct a survey of public attitudes to smoking and tobacco control among both adults and children. (The adult survey was the eighth consecutive annual survey and the youth survey the second.) With regard to electronic cigarettes, the research revealed a significant increase in awareness of the devices among children but, as in 2013, sustained use is rare and remains confined to those who have already tried smoking. Among adults, we found a substantial rise in the number of current smokers who had tried electronic cigarettes: from 8% in 2010 to 51% in 2014. There has also been a steady rise in the number of adults using electronic cigarettes on a regular basis – from an estimated 700,000 in 2012 to 2.1 million in 2014. A third of these are ex-smokers and about half of the rest report actively trying to quit smoking.

ASH responded to the consultation by the Committees on Advertising Practice on new rules to govern the advertising of electronic cigarettes. The new rules are designed to protect young people and also ensure that ads are not targeted at non-smokers and do not promote smoking.



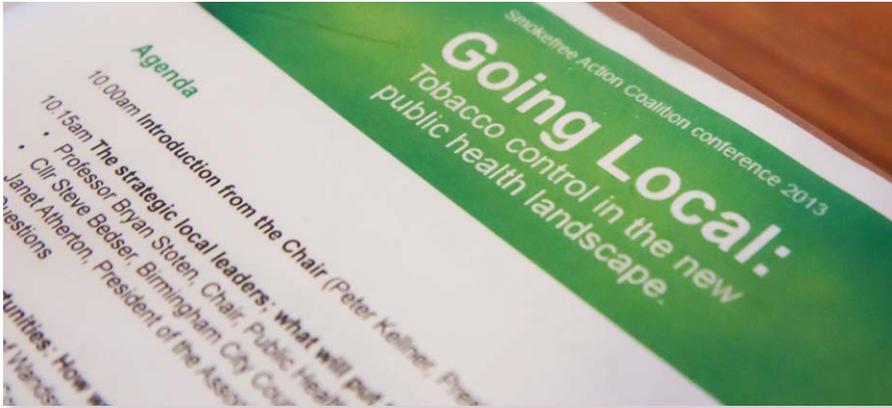


Photo: Nicolas Chinardet

Supporting Local Tobacco Control

CLear – which stands for Challenging services, Leadership and Results – is a self-assessment tool developed by ASH to enable local authorities to review existing action on tobacco control and to identify areas for improvement. It was developed to help transition of tobacco control to local authorities. In April, ASH handed over management of the CLear project to Public Health England, as PHE stepped up its delivery of support to local authorities. PHE recognises the value of the programme and aims to expand uptake by local authorities. By the time of the handover, 90 of England's 152 top tier local authorities had become members of the CLear scheme with 35 having undergone peer reviewed assessments.

Local Government Declaration on Tobacco Control

Launched in 2013 by Newcastle City Council, the Local Government Declaration on Tobacco Control commits councils to protect communities from tobacco harms and protect policies from the commercial and vested interests of the tobacco industry. To encourage local authorities to sign the Declaration we produced a package of supportive materials and also engaged in activities such as speaking to networks, creating a web page and developing joint briefings with PHE centres. We are pleased to report that over 70 councils (55 top tier and 17 district councils) have now signed the Declaration.

NHS Statement of Support for Tobacco Control

The NHS Statement was created following requests from local NHS organisations who wanted something similar to the Local Government Declaration to show their support for tobacco control. The Statement of Support has been endorsed by 10 leading public health figures/organisations including the Minister for Public Health, the Royal College of GPs, Public Health England, the Care Quality Commission and NHS England, and local NHS organisations are now starting to sign up.

Social care costs of smoking

In September ASH launched a new report on the cost of smoking to the social care system. This was in response to the Care Act 2014 which requires councils with social care responsibilities to put in place measures designed to reduce the need for social care. One way of doing this is to improve the health and well-being of people now to reduce care costs in the future. As smoking remains the biggest single cause of preventable ill-health it is a priority issue.

The report was based on an analysis by economist Howard Reed at Landmark Economics. The estimates are conservative as they are based only on people aged over 50 (data for younger age groups are not available). The report finds that smoking costs local authority social care budgets around £600 million a year and costs those who fund their own care a further £450 million. However, these costs could be significantly reduced if local authorities invested in services to help current smokers to quit, thus saving future care costs.

The report was sent to council leaders, Chairs of Health and Wellbeing Boards and Directors of Public Health. It has also been disseminated through the Association of Directors of Adult Social Services.

In addition to the social care costs report we have updated the Ready Reckoner tool which provides a breakdown of the costs of smoking at national, regional and local level. We have also produced regional briefings on key policy areas.



Photo: Danny Fitzpatrick

APPG on Smoking & Health

The All Party Parliamentary Group on Smoking and Health has been active over the past year particularly in building support among parliamentarians for standardised tobacco packaging. In addition, the Chair, the Rt Hon Paul Burstow MP, gave a speech at a meeting of the Department of Health and World Health Organization on Article 5.3 of the FCTC, in December 2013 regarding the protection of public health policy from the vested interests of the tobacco industry. This was followed by the publication in January of a report prepared by ASH for the APPG on tobacco industry front groups and third party lobbying tactics.

The APPG also hosted a meeting on electronic cigarettes in partnership with the APPGs on Pharmacy and on Heart Disease. The purpose of the meeting was to inform the positions of the APPGs going forward and to give Members the opportunity to ask questions of experts in the field. Speakers included Professor David Walker, Deputy Chief Medical Officer and Professor Robert West from University College London. An FAQ document on electronic cigarettes was produced for the meeting. Following the meeting, Paul Burstow MP, Chair of the APPG on Smoking and Health, and Kevin Barron MP, Chair of the APPG on Pharmacy and Vice Chair of the APPG on Smoking and Health, sent a letter and a position paper to parliamentary colleagues.

The APPG continues to circulate a regular political bulletin to around 400 Members of the House of Commons and 200 Members of the House of Lords who are interested in tobacco policy issues.

Tax and smuggling

As in previous years, ASH worked with the UK Centre for Tobacco & Alcohol Studies to develop a budget submission which was endorsed by a total of 80 organisations. Our key recommendation was that the government introduce a tobacco tax escalator of 5% on cigarettes and a 15% above inflation increase on hand-rolled tobacco until tax levels are equivalent with those for manufactured cigarettes. In the Budget the government announced that the tax escalator would be sustained for the whole of the next Parliament, but only at 2% above inflation.

We were pleased the Government took on board our recommendation to revise its anti-smuggling strategy and welcomed plans to hold a series of consultations on tax and the illicit trade in tobacco.

To mark World No Tobacco Day (31 May), which this year had as its theme “Raise tobacco tax, lower death and disease”, ASH released data from its annual YouGov poll showing that support for raising tobacco tax is high in Britain, a country with one of the highest rates of tobacco tax in the world. The survey found that overall, 66% of adults support increasing the price of cigarettes and 53% favour using tax to increase the price of tobacco products by 5% above the rate of inflation each year.

Reducing smoking in pregnancy

ASH’s work to support the Government’s ambitions to reduce smoking in pregnancy continues. Following our successful co-ordination last year of the Smoking in Pregnancy (SiP) Challenge Group report we held a seminar in March to bring together the Department of Health, Public Health England, the Royal College of Midwives, local tobacco control staff, NHS representatives and civil society to establish the next steps. This highly successful event led to the establishment of a SiP communications to women group, further correspondence with the Health Minister and collaboration with Public Health England to produce a series of seminars for Midwifery Commissioners. The purpose of the seminars is to improve stop smoking support for pregnant

women and increase the number of pregnant women being offered carbon monoxide monitoring as part of standard prenatal care.

Tobacco Industry – BAT AGM

This year's activity to mark the BAT AGM sought to highlight the industry's use of packaging to attract children, and the use of child labour in tobacco farming. Around 120 young people from schools and youth groups in Gateshead, Leicestershire, Cambridge, Kent and London joined the protest to make noise and confront company shareholders going into the meeting.

Following the protest, the young people hosted a Parliamentary reception in the House of Commons, which was chaired by the Rt Hon Paul Burstow MP. The event was opened by Lord Rea and included a presentation by young people from Cut Films as well as a talk from Observer journalist, Jamie Doward.

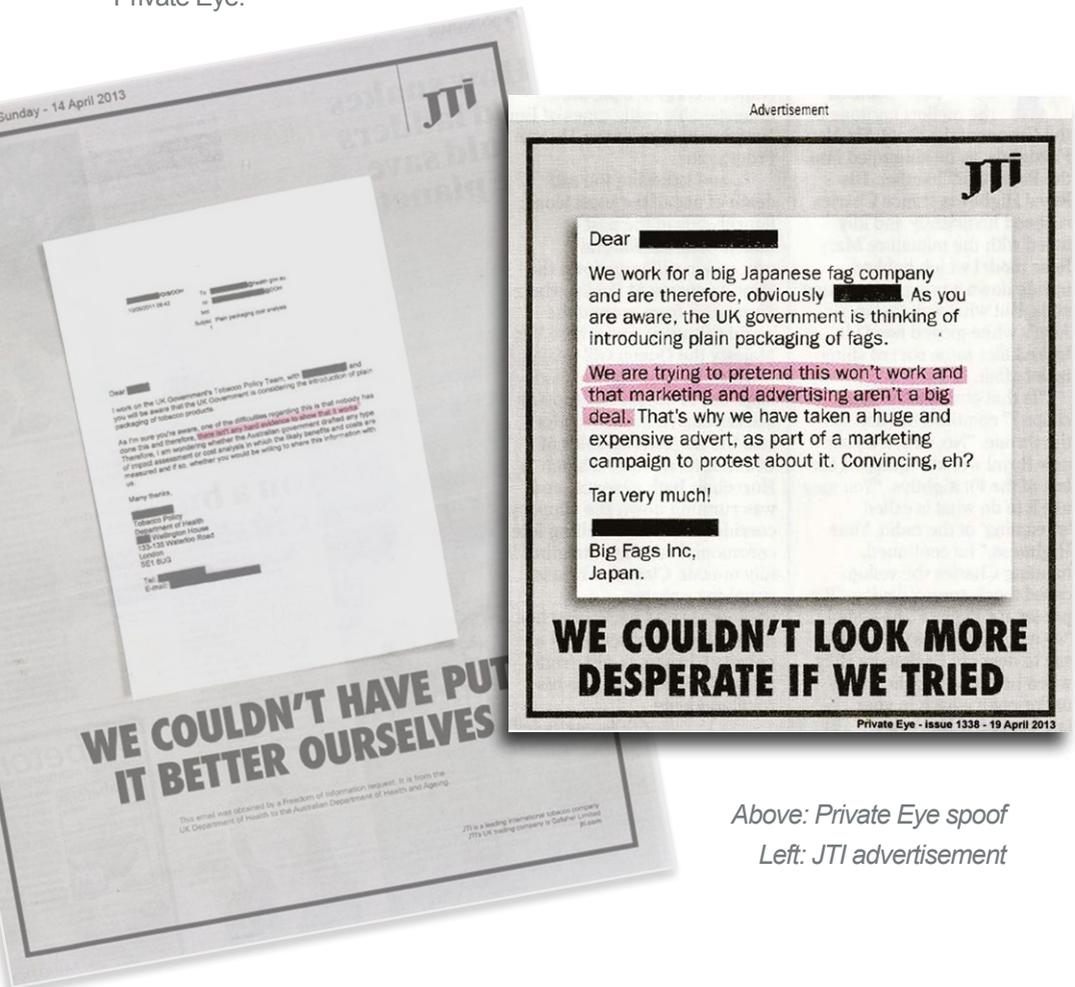


Photos: Nicolas Chimardet

JTI ads ruled misleading

ASH and a number of other organisations complained to the Advertising Standards Authority about a series of six advertisements by Japan Tobacco against standardised packaging. The ASA ruled that all six of the ads were misleading and the company was ordered not to publish them again. The ads were part of a £2m campaign by JTI against the Government’s proposals for standardised packaging.

The last in the series of the JTI ads was followed by a spoof in the satirical magazine Private Eye.



Above: Private Eye spoof
 Left: JTI advertisement

WHO FCTC COP 6

The sixth Conference of the Parties took place in Moscow from 13-18 October 2014. ASH's Chief Executive, Deborah Arnott, attended as a member of the Framework Convention Alliance, a coalition of over 500 organisations in over 100 countries, which has observer status. There were many significant developments of which the most notable was the adoption of Article 6 guidelines on tobacco tax. Other measures that were agreed included support for ratification and implementation of the Illicit Trade Protocol; an impact assessment to demonstrate the effectiveness of the FCTC; and strengthening of work to support implementation of the FCTC particularly in low to middle income countries.

ASH Reputation survey

For an organisation the size of ASH, which spends no money on advertising or promotion we have a high level of public recognition. Over 50% of the public are aware of ASH, a proportion which has remained stable in recent years.

ASH also commissioned a survey this year of key stakeholders to inform the development of the next strategic plan. As in previous years, the research was designed to gauge ASH's effectiveness, and perceived strengths and weaknesses and to identify improvements that could be made.

We are pleased to report that our key stakeholders continue to regard ASH as an outstandingly effective contributor to tobacco control, with 91% of respondents rating the charity as excellent or good. ASH's policy and campaigning work was rated very highly, with 92% seeing it as excellent or good.

Provision of accurate information, evidence and intelligence is a high priority role for ASH among many key stakeholders, for whom ASH's credibility and its expert knowledge are its most mentioned strengths. We were therefore pleased to see that 89% of stakeholders saw ASH as factually credible and over three-quarters rated ASH's publications as excellent or good.

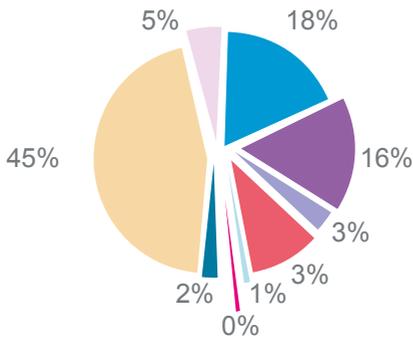
Information & Media work

Over the past 12 months we have responded to 15 consultations on topics including the draft regulations on standard packaging, banning smoking in cars, HMRC consultations relating to tax & smuggling and various NICE public health guidance updates.

In addition to the social care costs report we produced a new briefing jointly with regional tobacco control organisations on health inequalities. We also worked with adoption and fostering agencies to produce guidance for local authorities and service providers concerning smoking and use of electronic cigarettes among foster carers and adoptive parents.

During 2014 we issued 22 press releases. We also reviewed and updated our procedure for media monitoring including the way we measure online audience reach which took effect from June. This means that it is not possible to give a figure for estimated audience reach for this year.

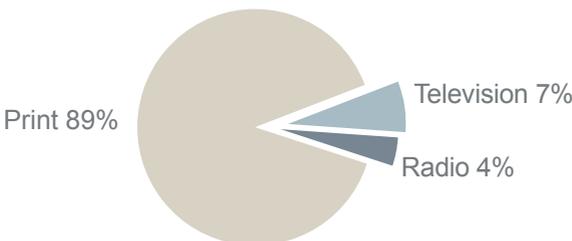
Overall media coverage by subject area



Key

- Smokfree places
- Plain packaging
- Health & science
- Tax & smuggling
- Industry conduct/litigation
- Advertising and promotion
- Smoking cessation
- Product regulation
- Youth

Total ASH reach by medium



ASH Website

Traffic on the website is slightly up from last year, with over 450,000, unique visitors during the period between September 2013 and August 2014. As last year, about 80% of those were new visitors. This amounts to almost 1.5 million page views over that period.

Most users of the ASH website (76%) are from the UK, with most overseas visitors coming from the USA, followed by India, Australia and Malaysia.

The Smokefree Action Coalition website, also maintained by ASH, is the main tool of the coalition's campaign for standardised packaging. See: www.smokefreeaction.org.uk

ASH also maintains a webpage for the APPG on Smoking and Health on the ASH website. See: www.ash.org.uk/APPG

Accounts 2013-14

A full copy of the audited accounts for the financial year ended 31st March 2014 can be found on the ASH website at: www.ash.org.uk/accounts2013

Acknowledgements

ASH would like to thank the British Heart Foundation, Cancer Research UK and our individual members, for supporting and funding our work during the year. We are also funded by the Department of Health for work to support the Government's tobacco control strategy.



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