#### **Designing the Tobacco End Game**

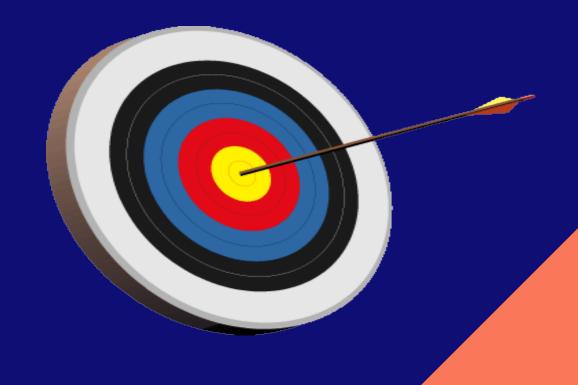
**Professor Judith Mackay** MBChB (Edin), FRCP (Edin), FRCP (Lon) **Senior Advisor, Vital Strategies Tobacco Control Office, Department** Vital Strategies of Health, Hong Kong 14 Feb 2017

#### This lecture will cover:

# End game scenarios/targets How to achieve the Endgame Lessons learned



#### 1. Endgame, targets



#### I asked one of HK's 100 top businesspeople about targets...

#### incredulous

- He was incredulous that tobacco control has only recently developed targets.
- He said "<u>Every aspect of</u> our company operations are forecast."



#### Why no tobacco targets up to now?

- Targets have been confined to process targets getting a law passed, a tax increase, not prevalence targets.
- Governments don't like targets in case they don't reach them.
- Many health targets were impossible from the start, such as :
  - 1955 Global Malaria Eradication Programme;
  - 1998 Roll Back Malaria.
  - 1971 US War on Cancer eliminate deaths by 2015.
  - 2001 Global Plan to End TB by 2016-2020.
  - 2014 UK Eliminate cancer deaths < 80 yrs by 2050...?</p>



#### **Announced targets**

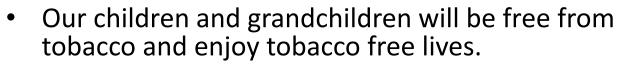


Country	Target date	Target smoking prevalence Whose target?	
New Zealand	2025	5%	Government
Ireland	2025	5%	Government
Scotland	2034	5%	Government
Finland	2040	5%	Government
Malaysia	2025	15%	Government
	2045	5%	
UK			Government pending
Canada	2035	5%	NGO
Australia	2018	10%	Federal government
Japan	?	12%	Government
Singapore	2018	SF millennium generation	NGO
Pacific Islands	2025	<5%	WHO
НК	2022	5%	NGO

## Principles: NZ SF by 2025



#### This will mean that:



- Almost no-one will smoke (<5% prevalence).
- It will be very difficult to sell or supply tobacco.
  It will be achieved by:
- Protecting children from exposure to tobacco marketing and promotion.
- Reducing the supply of, and demand for, tobacco.
- Providing the best possible support for quitting.



2010



#### **Identify responsibility: NZ**



Vital Strategies Responsibility and accountability for the goal should be shared between:

- Government
- The health services
- The tobacco control sector
- Communities

## Structural choice: Raises questions for governments to decide:



• Single agency responsibility (in bureaucracy)



• Cross-agency responsibility (across bureaucracy).



#### Announce interim goals, NZ

- Interim goals for current smoking are vital to monitor progress and focus efforts.
- Targets should be set for prevalence and for successful quit rates. In NZ, to reach prevalence rates below 5% by 2025, over 40,000 smokers need to quit successfully every year and no new smokers start.
- Failure to meet goals should result in more rigorous policies.





## Identify specific goals, e.g. for NZ

- Plain packs by 2013
- Pack warnings revised and updated
- Smoke-free cars
- Smoke-free communities
- Mandatory Registration of all Tobacco Retailers





## Identify specific goals cont...

- Specified Annual Tax increases
- Tobacco Product Modification
- Govt publish guidelines for FCTC Art 5.3
- Cessation support
- SF NZ



#### Identify other measures, e.g. NZ



- Improved and wider availability of new quitting devices including NRT, pharmacotherapies.
- Regulated use of high quality and effective e-cigarettes.
- Banning of duty free sales.
- Restrictions on the supply of tobacco products.



## ies

## Singapore: 3 Endgame Strategies





Suggests combining 3 approaches into an integrated endgame strategy:

- 1. Harm reduction
- 2. The tobacco-free generation proposal (born post-2000).
- 3. Further implementation of WHO Framework Convention for Tobacco Control.

#### Scotland Endgame 5% by 2034 Government 5-year plan



Introduction

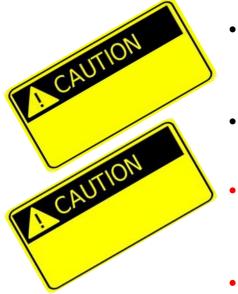


- 3. Smoking and Health Inequalities
- 4. **PREVENTION** creating an environment where young people do not want to smoke
- 5. **PROTECTION** protecting people from SHS
- 6. CESSATION helping people quit smoking
- 7. Monitoring and evaluation
- 8. Summary of Actions (46 such actions)





#### Note of caution re 5% target





- Tobacco is the world's leading cause of preventable premature death and is likely to remain so for decades to come.
- Thus, for many low and middle-income countries the 5% endgame scenario lies in the distant future.
- The industry will argue the proposed strategies could create large black markets, corruption, high illegal earnings, violence and/or organised crime.
- There may/will be challenges under global trade and investment laws, or under constitutional freedom issues.

## Another target? Borland, Australia



"A possible target would be to effectively eliminate use of the most harmful forms of nicotine within the next decade and then turn our focus to a long-term strategy for the low-harm forms."

Re-conceptualising the tobacco problem into seeking two related goals may help resolve tensions in the tobacco control community:

- I. Eliminate the most harmful forms of tobacco use.
- 2. Manage the remaining tobacco and nicotine use problem.
- A regulated market approach could facilitate achieving these goals.



## **SDG/WHO** target

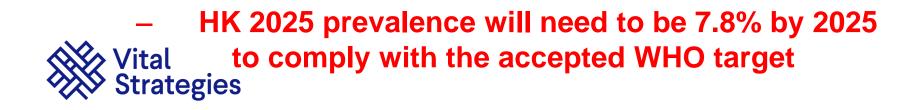


A 30% relative reduction in prevalence of current tobacco use in persons aged 15+ by 2025 from 2010.

**BUT at present rate of progress:** 

- Only 1/3 will meet target
- Final reduction will be 18% not 30%



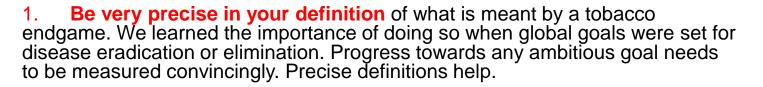


#### 2. How to achieve the Endgame

More of the same OR New ideas?

#### Tobacco endgame. Dr Margaret Chan, WHO DG, 2013





2. Anchor endgame strategies in impeccable science. Arguments for taking action need this water-tight support. Experience tells us that industry will challenge the science, distort the findings, or fund its own studies with a predictable bias. An impeccable scientific foundation is the best defence.

**3.** Back up goals and strategies with solid feasibility studies. This is another lesson from the eradication experience. Governments need to know what commitment to an ambitious goal really means in practical terms and what the likely pay-backs will be, for economies as well as societies. Good feasibility studies build confidence, and confidence inspires commitment.





#### Tobacco endgame Dr Margaret Chan, WHO DG, 2013





4. Recognize the diversity of factors that drive the tobacco epidemic in different economic and cultural contexts. These contexts also create their own unique barriers to success. A diversity of endgame strategies, as opposed to a single global strategy, might be needed to accommodate these different contexts. Provision of a menu of strategic and policy options might be another wise way forward.

**5.** Be realistic. Your scientific programmes will consider how the drive for sustainable development and concern about NCDs can bolster support for tobacco endgames. Doing so is promising, yet also faces some challenges. Concern about NCDs creates a receptive environment for tobacco endgames. Time and time again, ministers of health from the developing world have told me that prevention of NCDs must be the cornerstone of their response. The costs and demands of chronic and acute care are beyond their reach. Prevention is the best option.

Dr Chan summary: full implementation of the WHO Framework Convention on Tobacco Control would deal the greatest single preventive blow to all of these diseases.



## **Continue more of the same: accelerate proven strategies**



- Last 50 years: many remarkable changes, e.g.:
- Bans on most tobacco advertising
- Smoke-free public and workplace laws
- Graphic pack warnings >100 countries
- Plain packaging initiated in Australia



 Full implementation of WHO FCTC is capable of reducing tobacco use far below current levels.

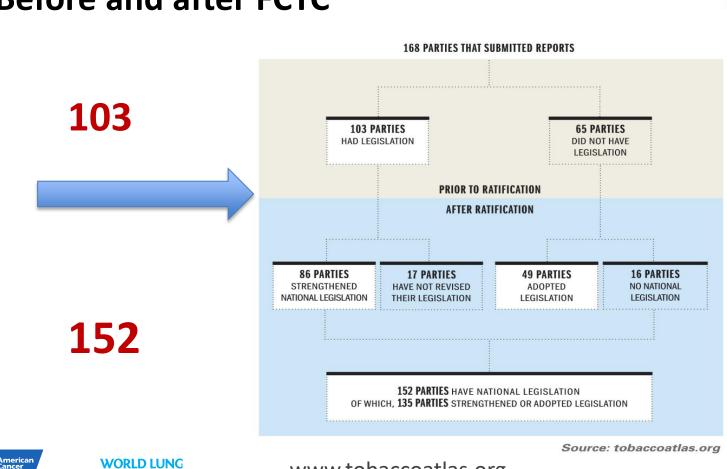


#### IMPLEMENT









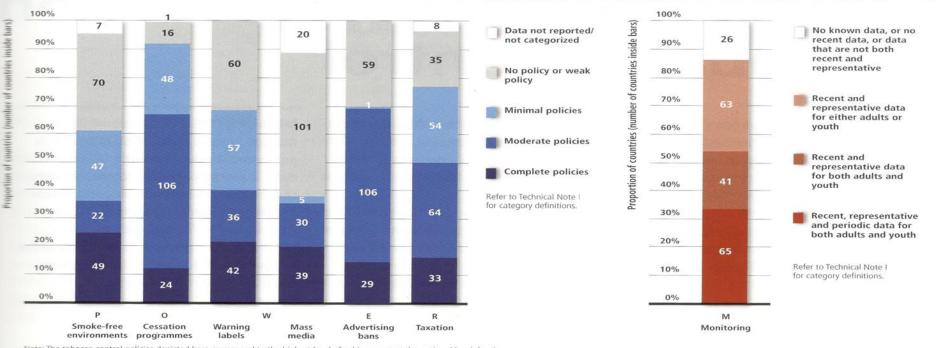
**Before and after FCTC** 

FOUNDATION

www.tobaccoatlas.org

#### But, ways to go...

#### THE STATE OF SELECTED TOBACCO CONTROL POLICIES IN THE WORLD, 2014



Note: The tobacco control policies depicted here correspond to the highest level of achievement at the national level; for the definitions of these highest categories, refer to Technical Note I.

#### **New ideas?**



- Fundamental reform of tobacco industry
- Harm reduction
- Supply side options, eg alternative farming
- Prohibition of possession of tobacco products by all individuals born from 2000 (eg Singapore)
- Framing tobacco as development issue
- Greater use of IT, following mobile quitting apps



#### New administrative measures. Warner

"The continuing scourge of tobacco-produced disease is unlikely to yield to today's evidence-based interventions."

- Endgame administrative mechanisms:
  - -Remove profit incentive from selling tobacco products.
  - -Require reduction of nicotine to non-addicting levels.
  - -Impose 'sinking lid' on the supply of tobacco (decreasing quotas on sales or imports).
  - Prohibit possession of tobacco products by all individuals born 2000+
  - Outright abolition of commercial tobacco product manufacture and sale.





#### **Either way – tax and cessation**



QUIT SMOKING OR DIE TRYING.

- The right regulatory framework has yet to be decided, and may differ from country to country.
- To reduce consumption among already-users, need to put much greater and immediate emphasis on:
  - 1. Price policies
  - 2. Cessation

#### Frame within NCDs: 60% Global Deaths

	Major NCD	Major modifiable causative Risk Factors				
		Tobacco Use	Unhealthy Diet	Physical Inactivity	Harmful Use of Alcohol	
	Heart Disease & Stroke	v	v	v	v	
	Diabetes	٧	٧	٧	v	
	Cancer	٧	v	v	٧	
Vital Strategie	Chronic Lung Disease	v				

Source: WHO, 2010

#### Now need more nuanced targets due to E-cigarettes and HeatNotBurn Much dissent, but ALL AGREE:







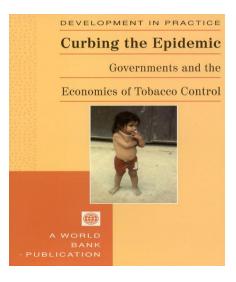
- 1. Include e-cig and HNB in all monitoring of tobacco: prevalence, harm, attitudes, etc.
- 2. Monitor safety and effect.
- 3. Require disclosure of ingredients (or government testing), and set standards.
- 4. Ban promotion of all unproven health claims.
- 5. Ban marketing and sales to youth.
- 6. Require warning labels on packets.
- 7. Ban in smoke-free areas
- 8. Urgent need for behavioural research on **?gateway ?quit**

#### 3. Key lessons learned to reduce tobacco epidemic

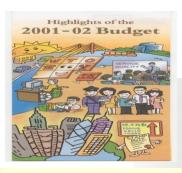




#### **Traditional Medical Model Not Enough**







	TES DISTRICT COURT CT OF COLUMBIA
THE REPUBLIC OF GUATEMALA, Plainsiff,	CIVIL ACTION NO. 98-CV-01 (PLP) (JMP)
THE TOBACCO INSTITUTE, INC.:	1
THE COUNCIL FOR TOBACCO RESEARCH-U.S.A., INC. (SUCCESSOR TO TOBACCO INSTITUTE RESEARCH COMMITTED);	
B.A.T. INDUSTRIES, PLC;	1
BRITUH AMERICAN TOBACCO CO., LTD.:	1
BATUS HOLDINGS, INC.;	1
BROWN & WILLIAMSON TOBACCO CORPORATION;	
PHILIP MORRIS COMPANIES, INC.;	:
PHILIP MORRIS INCORPORATED:	1
PHILIP MORRIS INTERNATIONAL, INC.:	1
LIGGETT GROUP, INC.; and	1
BROOKE OBOUP LTD. Defendants.	1

THE REPUBLIC OF GUATEMALA'S RULE 12(B)(6) HEARING EXHIBITS



obacc

muggling

Hnd

婦女事務委員會 Women's Commission







Need to intervene throughout tobacco cycle





#### GROWING

DISPOSAL

clean-up regulations

THIS IS A SMOKE REE WORKPLACE

· Ban smoking in multi-family

dwellings, homes, cars with

children as passengers

PRODUCT USE • Enforce smoke-free public places (indoor and outdoor)

· Establish litter and environmental

禁止吸救

ED SMOKIN

Regulate pesticide use

 Provide occupational safety and health safeguards for farmers  Protect the environment from tobacco curing driven deforestation practices

 Prohibit all incentives and subsidies to grow tobacco

SЕ

POINT OF PURCHASE

· Set a minimum age of purchase

· Ban prominent displays in retail

· Require retail licensing

· Ban vending machines

environments

RODUCTION

#### STAGES OF TOBACCO REGULATION

PURCHASE



#### TAX POLICIES

 Increase tobacco excise taxes
 Require application of tax stamps to packaging



DISPLAY

#### MANUFACTURING

 Ensure safe manufacturing practices
 Set product standards, including regulating nicotine content and additives



PACKAGING AND LABELING

 Establish plain/standardized packaging as the gold standard Require warning labels, including graphic images Ban "kiddie"-sized packs

Naus Sighter

#### MARKETING

 Ban or restrict advertising, promotion and sponsorships Restrict language suggesting reduced health risk.
 Ban price promotions, including coupons and discounts

#### **Lessons learned: Similarities**

In spite of differences between countries of population size, income, development and political systems...

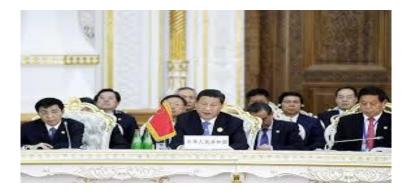
- There are similarities of the product, harm, obstacles, action including endgame scenarios.
- WHO FCTC is proof of this, as it is applicable to all nations.
- Everywhere, need sound, standardised health and economic data to support comprehensive policies, enforcement after legislation, effective health promotion, assistance with cessation, and need decades of persistence.



#### **Lessons learned: Political will**

 Political will is crucial: this epidemic will never be solved in the corridors of hospitals and clinics, but in the corridors of power.





#### Important because <u>only</u> governments can mandate an Endgame, eg:

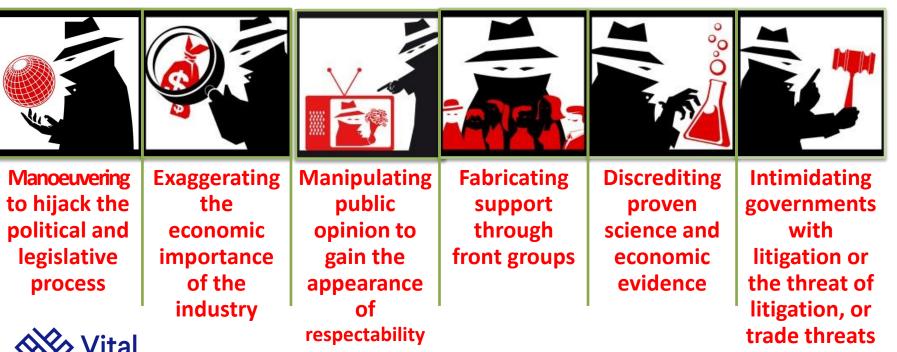


- Introduce public health legislation
- Implement taxation policy
- Ratify and implement UN treaties, such as the Framework Convention on Tobacco Control (FCTC).



#### There will be TI obstruction to Endgame: Litigation, trade threats

**Strategies** 



# Legal challenges THE INDUSTRY SAYS:

"We will continue to use all necessary resources... and where necessary litigation, to actively challenge unreasonable regulatory proposals."



.....Louis Camilleri, Chairperson and CEO, Philip Morris International, 2010

## Yet, industry challenges dismissed



... by High Courts, Constitutional **Courts, and Courts of Justices** e.g. Australia, UK, France, the **European Union, South Africa,** Thailand, Uruguay...

So why? Delay and intimidation



#### **Costs of trade challenges**

- Typical cost to govts: US\$3-8 million
- As high as over US\$ 50 million
- Regulatory chill effect, even if rarely successful





#### LEGAL CHALLENGES and TRADE THREATS TO TOBACCO CONTROL

2015 Bloomberg/Gates announced USD4m fund to support countries against trade

D DRUG ADMINISTRATION EALTH ORGANIZATION FRAMEWORK ON ON TOACCO CONTROL

ADE ORGANIZATION ADVERTISING, PROMOTION SORSHIP

2011+

2011

**AUSTRALIA** 

PHILIPPIHES

Various legal cases

regarding jurisdiction

over tobacco regulations,

including graphic heath

warnings, TAPS bans and

smoking bans are ongoing

threats



2012-2014 PERU The Specialized Constitutional Court of Lima rejected the RRITISH AMERICAN TOBACCO Peru case against Congress, which challenged a ban on packages of less than 10 cigarettes The Court observed that the WHO PCTC is a human rights treaty that ratifies the idea that economic freedoms should be limited in order to protect economic and social rights.

from implementing a ban on additives and lavvings agging that XMMSA lavied legal autority and the ule vas not apported by

scientific evidence

After several tobacco

PHILIP MORBLS

INTERNATIONAL

regulations in 2009,

including 80% graphic

health warnings, as a

violation of a bilateral

investment treaty between

Switzerland and Uruguay

They also challenged and

lost in the domestic courts

control laws, affiliates of

challenged two additional

URUGUAY

..... ArnicA

The Constitutional Court dismissed an appeal by BRITISH AMERICAN TOBACCO over suing the Minister of Health claiming that the Tobacco Products Control Act was unconstitutional. This case involved person-toperson marketing techniques prohibited under a TAPS ban. The Court found that the hazards of smoking far outweigh the interests of smokers, and that South Africa is obliged to observe the WHO ECTC

TOBACCO MANUFACT URERS to stop the Minister of Public Health from implementing langer-sized packet warnings was ultimately denied.

THOMESIA The Court accepted some challenges, but rejected a constitutional challenge by Indonesian tobacco famers and industry workers to Indonesia's Health Iaw.

The Australian government is tighting challenges to its Polacon Parin Rockaging Ac. One challenge is from PHILIP MORRIS ASIA using a bilateral investment treaty between Australia and Hong Kong. The other challenge is from several countries using the World Trade Organization.

which had challenged a to stop in parking of tobaco product within 100 yards of any educational institution any educational institution against griths. The Our of the State of Bhar distinisted a challenge by DISTR BUTOR Stor the The Our Distribution of con

masala containing tobacco. 2007 SRI LXHKX The Court of Appeal denied CEYLON TOBACCO COMPANY'S request to delay 80% argubbic pictorial beath warnings. but the ourt also ordered a reduction in the size of the warnings to 50%-60%

of the nack

TOBACCO WHOLESALERS.

implementing larger-sized packet warnings was ultimately denied. 2012 IHDOHESIA

#### Finally – The tobacco Endgame: Can it be done?

Every historical achievement was preceded by many people saying it couldn't be done, wouldn't work, or would create new problems.









Same said of the Tobacco Endgame...

## **Benefits of endgame**



- Confidence in the belief that epidemic can be beaten.
- Tobacco industry will hate the assumption (on record 2009: prevalence would never fall below 10%).
- Focusses governments on strategies to reach endgame.
- Orderly plan of action.
- No longer need to fight every annual action, eg tax increases.



## Thank you!

#### Fighting for Hong Kong's Endgame!





vitalstrategies.org

- 1. Increase tobacco taxation to at least 75% of retail pricing
- 2. Mandate plain packaging for cigarettes and other tobacco products
- 3. License all tobacco retailers. Amend privacy laws to allow licensed tobacco retailers to verify the identity and age of youth buyers. Make it an offence to buy for and supply youth. All tobacco sales retail outlets must not be allowed to display the product openly and must sell from below the counter. Withdraw licences of tobacco retailers caught selling to underage youth and enforce punitive fines.







- 4. Double the number of TCO inspectors
- 5. Enact laws to prevent smoking within (at least) 10 meters of building entrances, exits and entrances to bars, restaurants and food establishments.
- 6. Enact laws to prevent smoking in OSA areas of restaurants, bars and food outlets.

7. Prevent access to youth and schools by YSP supposed NGOs which are funded by tobacco companies.





8. Stop the sales of duty free tobacco at seaport , Macau / Zhuhai etc ferry terminals and airport. Reduce the amount of duty free tobacco allowed to be imported to zero.

9. Increase the number of cessation and treatment clinics available out of office hours in accessible locations.

10. Forbid infomercial stories in the media that announce tobacco related material or new products such as the start of the Playboy cigar range shown this year in SCMP





11. Ban smoking in partially covered outdoor areas of the airport, seaport terminals and ferry terminals within 30 meters of the entrances and exits.

12. Rebrand Hong Kong as 'Asia's World Non Smoking City'

13. Ban smoking in vehicles where children under the age of 18 are present.



## CTA Wish List, 2017... and also



14. Raise the age to purchase and use tobacco products to 21 (frontal lobe development affects decision making)

15. E-Cig liquid must have an FDA approval and any e-cig equipment must possess an EMSD certificate of electrical safety compliance before it can be imported and used

16. Graphic health warnings 85% on both sides of the pack, with at least 12 new graphic warnings to be rotated on a regular basis to maintain the effect



## CTA Wish List, 2017... and also



16. Follow FCTC guidelines to demand excise tax in excess of inflation and additionally have regular excise tax increases as a preventative measure with excise tax to be at least 85% of the local retail price

17. Under FCTC guidelines demand and reveal all sponsorship by tobacco companies of local front groups, political party funding and any CSR by same tobacco companies

18. Deny lawmakers who are found or admit to being tobacco / tobacco front or similar bodies consultants (whether unpaid or paid) from any voting /decision making on tobacco related policies



## CTA Wish List, 2017... and also

19. Ban flavored tobacco products such as DJ Peel from local sales, import and export



20. Enforce FCTC guidelines that any Government dealings with the tobacco industry to be held in public

21. Charge tobacco executives whose products are found DNP in the local market with conspiracy to defraud the Govt of excise tax by failing to control their distribution network + Name and Shame

22. Mandate that all shisha, cigar and other tobacco products must have tar and nicotine certification by the Government chemist like cigarettes

23. Implement a point of display ban on tobacco products and licence all tobacco retailers



#### HK needs to do more: Mackay Wish List

Set goals and targets	5% smoking prevalence rate by 2022 **********
Tobacco tax	Increase from 70% to 85%
Illicit trade	Track and trace; higher fines
Smoke-free areas	Make owners/managers of bars and restaurants responsible
	Withdraw licence of repeat offenders
	Increase TCO officers
Packaging	Change packet warnings every 2 years; increase from 50% to 85%
	Introduce plain packaging
Retailers/Point of sale	Ban counter display in shops and stalls.
	Enforce ban on sales to minors; withdraw licences if non-compliance
Quitting	Increase free quitting facilities and assistance
Tobacco industry and its	Investigate tobacco industry funding and connections of and with:
supporters	a) political parties – currently not required to divulge funding sources
	b) Revoke the charity status of front organisations being used by Big
	Tobacco