List of chapters available at tobaccoinaustralia.org.au

Introduction

Chapter 1  Trends in the prevalence of smoking
Chapter 2  Trends in tobacco consumption
Chapter 3  The health effects of active smoking
Chapter 4  The health effects of secondhand smoke
Chapter 5  Factors influencing the uptake and prevention of smoking
Chapter 6  Addiction
Chapter 7  Smoking cessation
Chapter 8  Tobacco use among Aboriginal peoples and Torres Strait Islanders
Chapter 9  Smoking and social disadvantage
Chapter 10  The tobacco industry in Australian society
Chapter 11  Tobacco advertising and promotion
Chapter 12  The construction and labelling of Australian cigarettes
Chapter 13  The pricing and taxation of tobacco products in Australia
Chapter 14  Social marketing and public education campaigns
Chapter 15  Smokefree environments
Chapter 16  Tobacco litigation in Australia
Chapter 17  The economics of tobacco control
Chapter 18  The WHO Framework Convention on Tobacco Control
Appendix 1  Useful weblinks to tobacco resources
Introduction
Tobacco in Australia: facts and issues—an introduction

Smoking in the mid-20th century was ubiquitous in Australia, as in other Western countries. In 1945, more than three out of every four men and one in every four women were regular smokers. Smoking rates fell dramatically over the following two decades as many men died prematurely and others gave up smoking in response to the concerns about health that were starting to be raised by research scientists and medical authorities. Working against this trend, however, were two major—arguably the two major—social forces of the late 20th century. First was the advent of television in the late 1950s, which brought an avalanche of advertisements for cigarettes into the lounge rooms of Australian families, and distracted from concerns about cancer with images of European sophistication, American-style affluence and Australian sunshine and fun that resonated with the optimism and aspirations of a generation wanting to build a new life after two long decades of war and Depression. A new breed of advertising men in the United States, Britain and Australia helped tobacco companies to side-step the health issue with appeals to emotion combined with reassuring, if vague allusions to filters and reductions in ‘tar’. Next came the social and sexual revolution of the late 1960s and early ’70s, which saw a rejection of conservative ‘older generation’ values such as worrying about financial security and future health, and many young women taking up smoking as a statement of independence and equality.

Anti-smoking health education

Medical authorities grew increasingly concerned throughout the 1970s about continued smoking, including by youth. They attempted with only moderate success to enlist doctors to warn people about the dangers of smoking. Health educators and psychologists stepped in to work out how best to discourage children from experimenting with cigarettes, and to try to help smokers to shake off the grip of their tobacco habits. Much was learnt about smoking as an addiction and about the process of smoking cessation. Brochures were produced and courses were run by bodies such as the state Cancer Councils and the Seventh Day Adventist Church. However, giving up smoking during the 1970s was seen in much the same category as becoming a vegetarian or a tee-totaller, and little dent was made in smoking rates in the face of the powerful commercial forces that continued to promote cigarettes.

Medical groups continued to press governments to restrict the promotion of tobacco products, and to discourage their use on a wider scale. A discreet faint gold-lettered warning about smoking being a health hazard appeared on cigarette packs in 1973, and direct cigarette advertisements were banished from television in the mid-1970s. However, the cultural dominance of tobacco was barely disturbed. Budgets for TV shifted from advertising to sponsorship of sport, which continued to allow tobacco products to be promoted through television, and may have entrenched smoking even more deeply into the Australian psyche. Advertisements for cigarette products—forced to move to the print media—could then be tailored specifically to the readership of particular newspapers and magazines, including those intended for young women. Advertisements on billboards and outside shops signalled that tobacco was still a prominent part of every-day life. Smoking was allowed in all but the most fire-prone public buildings and several tobacco company executives received knighthoods for their services to the business community.

The birth of tobacco control

A pioneer in using behavioural science to adapt commercial marketing techniques for public education, in the late 1960s the Anti-Cancer Council in Victoria organised prominent Victorian Football League (VFL) footballers to promote the quit smoking message. In 1971, the Victorian Anti-Cancer Council traded on its respectability to push boundaries by securing community service spots for what broadcasters no doubt expected to be advertisements.
to promote cancer screening, but instead were hilarious spoofs of cigarette advertisements. The advertisements were quickly taken off air after complaints from tobacco companies, but prompted a flurry of news coverage that helped to build support for amendments to broadcasting legislation that would eventually see the end of TV advertising of cigarettes in Australia.

It wasn’t until the early 1980s, however, that governments and cancer councils seriously began to challenge the power of the tobacco companies through the mass media and in popular culture. Quit campaigns established in each state from 1983 used social marketing to ‘sell’ the message that smoking was harmful—see Chapter 14. Budgets were secured to place television advertisements during prime-time television rather than merely late at night during the ‘community service’ spots. Professional public relations companies encouraged media coverage about smoking and used celebrities and high-rating television and radio programs to popularise the ‘Quit’ message. The tide began to turn. Public support for the ‘Quit’ initiative emboldened governments to seriously consider, and to start to enact recommendations from international health agencies to ban all forms of promotion of tobacco products, to mandate prominent health warnings, and to raise taxes on tobacco products with the dual objectives of making smoking less affordable and generating additional funds for expanded social marketing efforts and to replace tobacco sponsorship of sport.

Tobacco control hits its stride

Quit campaigns were underway in all states and territories by the late 1980s, sharing advertising materials and running a national phone line to advise and support people quitting smoking. Health education in schools remained a major theme but was complemented with more vigorous efforts to stop retailers from selling cigarettes to children—refer Chapter 5.

During the late 1980s and early 1990s, concerns about the health effects of exposure to other people’s smoking—see Chapter 4—led to the progressive restriction of smoking in more and more workplaces. Once people ‘got a taste of clean air they ‘couldn’t get enough’ and ever-expanding restrictions of smoking in hospitality venues and public places—see Chapter 15—combined with the ever-growing evidence about the health effects of smoking—see Chapter 3—all contributed to a torrent of anti-smoking sentiment worldwide which in turn is having a profound effect on the frequency and uptake of smoking.

Comprehensive tobacco control in full swing

A stalling of the decline in prevalence occurred in the mid-1990s, corresponding with reduced expenditure on public campaigns, but a major injection of funds through the National Tobacco Campaign in 1997 kick-started the decline in smoking and campaigns over the late 2000s were funded at more commercially realistic levels in most states—see Chapter 14. Smoking rates resumed their downward trend.

Taxes on large packets of cigarettes increased substantially in 1999, with further increases associated with implementation of Australia’s Goods and Services Tax between June 2000 and February 2001—see Chapter 13. Governments continued to chip away at remaining forms of promotion, with all states outlawing advertising of products at point of sale in the early 2000s and then, towards the end of the decade, outlawing the display of products altogether—see Chapter 11, Section 11.9.

Smoking cessation aids were listed on the Pharmaceutical Benefits Scheme in 2001, 2007 and 2011 and a variety of phone, internet and SMS programs have since been put in place across the country to support and encourage...
smokers in their quit attempts—see Chapter 7. These programs are soundly based on knowledge about addiction, the process of smoking cessation and the predictors of success in quitting that has continued to grow since the 1970s. However, the addictive properties of nicotine and the degree to which smoking is entrenched in smokers’ lives continues to result in very high rates of relapse.

**Tobacco control as a legal, economic and social justice issue**

During the 1980s smoking came to be seen not just as a health issue, but also as a matter of consumer rights: that smokers have the right to be informed not just about all the diseases caused by smoking, but also about the addictive properties of nicotine and about the nature and effects of chemical residues in tobacco leaf and substances added during manufacture—see Chapter 12. The consumer rights perspective translated into a number of legal actions against tobacco companies based on the premise that tobacco products are more harmful and more addictive than they need to be, and that companies failed to adequately warn consumers about the dangers of their use. The understanding that secondhand smoke is dangerous led courts and various tribunals concerned with workers’ health and safety to award compensation for sickness arising from exposure to tobacco smoke in the workplace, which sent a powerful signal to governments and the private sector about the need to protect citizens from exposure to secondhand smoke—see Chapter 16. The courts also demonstrated the power of litigation by upholding laws designed to restrict the promotion of tobacco products and, potentially, of securing resources to fund tobacco control activity. The need for legal expertise in ensuring that law more generally works in the interests of public health is now well recognised.

Smoking is also now well understood in Australia as an economic issue—see Chapter 17— with the health care and other economic costs associated with tobacco use justifying a significant investment in the treatment of smoking and anti-smoking campaigns both to reduce short-run costs and as part of efforts to contain future costs in the public health system.

But reducing smoking is not just a matter of economic efficiency; smoking is also central to concerns about social equality. For several decades, smoking rates have been substantially higher among those who are educationally and socially disadvantaged—see Chapter 9. Reducing smoking and the attendant health costs, financial stress and intergenerational poverty associated with spending on tobacco products has become a major social justice issue, particularly among Australia’s Indigenous population—see Chapter 8—and among those with living with mental illness or problems with drug and alcohol use. Tobacco use among the homeless, among those in correctional facilities and among others facing multiple and severe disadvantage is particularly high, and these groups have also been identified as priorities.

**Understanding what has ‘worked’**

In the 50 years between 1962, when the Royal College of Physicians released its landmark report on the hazards of smoking, and 2012 when this fourth edition of Facts and Issues is going on-line, the prevalence of smoking has more than halved—see Chapter 1, Section 1.3, and per capita consumption has declined by more than 75%—see Chapter 2, Section 2.3.

In line with the findings of research throughout the rest of the world, studies measuring short-run effects have been able to attribute reductions in smoking prevalence in Australia to increasing taxes, greater expenditure on social marketing campaigns and smokefree policies. Multivariate analysis of the effects of policy on prevalence of smoking among teenagers in various Australian states from 1990 to 2005 also indicates strong effects for increases in the price of tobacco products, expenditure on social marketing and comprehensiveness of laws mandating smokefree policies in public places. Indeed, much of the decline in smoking in Australia since the late 1990s appears to be attributable not to more people quitting, but to fewer young people taking up smoking in the first place. However, such studies tell only part of the story.

As illustrated in US Surgeon General’s reports which have exhaustively reviewed the evidence about the effectiveness of tobacco control over the past five decades, smoking is a multi-factorial problem—a tug-of-war between the forces which promote and facilitate the use of tobacco products and the forces which discourage and
Figure I.2
Major tobacco promotion & tobacco control policies vs regular smoking & per capita consumption of tobacco products, Australia 1910 to 1960 (5-yrly), 1960 to 2010

Sources:

- Figures before 1966 were recorded in imperial weights but have been converted to kilograms in this table.
- Numbers on excise and customs data on current consumers. Data are on current consumers.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1907–1912 (calendar years).
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1929–1930 to 1949–50.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1950–1951 to 1958–59.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1978–79 to 1980–81.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1981–82 to 1987–88.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1989–90 to 1993–94.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1994–95 to 1999–2000.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 2000–2001 to 2010–2011.

Note on excise and customs duty

Excise data from 1989 onwards are estimated.

Figure I.2
Major tobacco promotion & tobacco control policies vs regular smoking & per capita consumption of tobacco products, Australia 1910 to 1960 (5-yrly), 1960 to 2010

Sources:

- Figures before 1966 were recorded in imperial weights but have been converted to kilograms in this table.
- Numbers on excise and customs data on current consumers. Data are on current consumers.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1907–1912 (calendar years).
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1929–1930 to 1949–50.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1950–1951 to 1958–59.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1978–79 to 1980–81.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1981–82 to 1987–88.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1989–90 to 1993–94.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 1994–95 to 1999–2000.
- Excise reports: comparative statement of quantity of spirits, beer and tobacco on which excise duty was paid in the Commonwealth during the years 2000–2001 to 2010–2011.

Note on excise and customs duty

Excise data from 1989 onwards are estimated.

Figure I.2
Major tobacco promotion & tobacco control policies vs regular smoking & per capita consumption of tobacco products, Australia 1910 to 1960 (5-yrly), 1960 to 2010
inhibit its use; a tug-of-war played out at the individual, household and community levels as well as in the wider culture. Each of the regulatory, educational and clinical factors highlighted in Figures I.2 and I.3 vary widely in their techniques and effects, some of which are contributory rather than independent,\textsuperscript{12}–\textsuperscript{44} and too complex to capture through standard statistical analysis.\textsuperscript{52–44}

However, each measure must have contributed in some way—either directly or indirectly, in the longer if not the short term—by having:

- reduced the glamour and appeal of tobacco products
- increased knowledge about health effects
- reduced cues or opportunities to smoke
- reduced the social acceptability of smoking
- reduced withdrawal symptoms during quitting
- increased smokers’ knowledge about how to manage the quitting process.

Continuing progress requires a comprehensive approach to maintain momentum and ensure that government efforts on one front are not undermined by more vigorous efforts and greater investment by tobacco companies on other fronts.

**Figure I.3**

*Reported prevalence of smoking at least weekly & number of cigarettes smoked per day per secondary school student 12 to 17 years vs. major tobacco control initiatives—1984 to 2011*

Commencement and peak funding of state Quit Campaigns, 1984 to 1988


Strengthening of state laws banning sales to minors 1993 to 2005

National Tobacco Campaign, launched May ’97


Smokefree public places, 2000 to 2008

**Sources:** L Stinson personal communication\textsuperscript{179}, using data published in ABS 4221.0 Schools Australia, 1984, 1987, 1990, 1993\textsuperscript{178}, ABS 4221.0 Schools 1996\textsuperscript{177}, 1999\textsuperscript{178}, 2002\textsuperscript{179}, 2005\textsuperscript{180} and 2008\textsuperscript{181}; V White, personal communication, using data from Hill, White, and Houston 1993\textsuperscript{182}, J Hill, White, Pain and Gardner 1990\textsuperscript{31}, J Hill, White, Williams and Gardner 1992\textsuperscript{32}, J Hill, White and Seguin 1995\textsuperscript{33}, J Hill, White and Lester 1999\textsuperscript{34}, J Hill, White and Effendi 2002\textsuperscript{35}, White and Hayman 2004\textsuperscript{186} and 2006,\textsuperscript{187} White and Smith 2009\textsuperscript{188} and White and Banoka 2012\textsuperscript{189}

**Suggested citation for this graph.** Figure I.2 Reported prevalence of smoking at least weekly & number of cigarettes smoked per day per secondary school student 12 to 17 years vs. major tobacco control initiatives—1984 to 2011 In Introduction. M. Scollo and Winstanley, M Eds, Tobacco in Australia: Facts and Issues 2012 using material from Chapters 1, 2, 3, 4, 5, 7, 11, 12A, 13, 14, 15 and 16

This is the fourth edition of *Tobacco in Australia: facts and issues*, a project originally conceptualised by Paul Magnus, a founding director of Action on Smoking and Health Australia (ASH). The first edition (1989),\textsuperscript{191} compiled by Margaret Winstanley and ASH Director Stephen Woodward, and the second edition (1995), by Winstanley, Woodward and Noni Walker\textsuperscript{181} rapidly became the standard compendia of tobacco control related information for Australia. The third, on-line edition edited by Winstanley and Michelle Scollo (2008)\textsuperscript{192} greatly expanded the earlier editions and became one of the largest and most comprehensive repositories of information and analysis about tobacco control in the world.

Smoking and tobacco control must surely be the most exhaustively researched and thoroughly documented of any public health problem and any public policy initiative in history. This fourth and once again vastly expanded edition of *Tobacco in Australia* consists of 20 chapters summarising the health effects of smoking, documenting the history of tobacco control in Australia, describing past and current trends and explaining major policy topics from an Australian perspective. It contains 308 sections and 899 subsections, 10% more than in the previous edition and indicating a considerable widening in breadth. Even more significantly the word count has increased by 60% to more than half a million words, and the number of references by 120% to almost 8000. This expansion of content reflects both the increasing depth of understanding of tobacco control in Australia and internationally, and the increasing sophistication required to develop, argue the case for and defend policy in the political and legal realms both locally and internationally. The fourth edition
also differs from the previous three in that it is only produced on-line.

Australia became a Signatory to the World Health Organization (WHO) Framework Convention on Tobacco Control (FCTC) on 5 December 2003, soon after the Convention opened for signature. Australia was one of the first 40 countries to ratify the FCTC, and so became a full Party on 27 February 2005, the date on which the FCTC came into force. Australia is thus legally bound to perform, in good faith, the full range of obligations set out in the Convention. Just prior to the release of this 4th edition of Tobacco in Australia: facts and issues, the High Court of Australia handed down its decision upholding world-first, groundbreaking laws mandating plain packaging of tobacco products.\textsuperscript{195} Cigarettes and other tobacco products in plain packaging with unmissable health warnings started appearing in shops throughout the country in September 2012—see Section 11.10 for detailed discussion.

In 2008, all governments in Australia signed the National Healthcare Agreement\textsuperscript{196} with the ambitious goal of reducing adult daily smoking prevalence to 10\% and halving the adult daily smoking rate among Aboriginal and Torres Strait Islanders by 2018. As the 4th edition of the compendium was going on-line, the Commonwealth and state and territory governments had just approved a new National Tobacco Strategy 2012–2018\textsuperscript{ii} which is much more far-reaching than its predecessor\textsuperscript{197–199} and aims to strengthen and extend activities in all the major streams of tobacco control over the six years to 2018. Advancing all these initiatives will require major political will, a great deal of effort from many, many people and, no doubt, an awful lot of writing! With each section of Facts and Issues produced by people who are highly knowledgeable in their fields, and thoroughly referenced with urls wherever available, it is to this last task in particular that we hope this publication makes a major contribution.

Michelle Scollo and Margaret Winstanley, editors, updated November 2012

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{Tobacco_in_Australia_facts_and_issues_4th_edition.jpg}
\caption{Tobacco in Australia: facts and issues, edition 2
Source: Quit Victoria collection}
\end{figure}

\textsuperscript{i} Australia submitted its first report to the Conference of Parties (COP) on its implementation of the FCTC in February 2007, and its second report in November 2010—see Chapter 18, Section 18.9 for further details.

References


Tobacco in Australia: Facts and Issues


70. Health CBSASa. The Australian Retail Tobacconist 1966 to 2010; 27 to 70(February)


73. NSW Retail Tobacconist Association. Cigarette price lists. The Australian Retail Tobacconist 1966 to 2010; 27 to 70(February)


Date of last update: 11 Nov 2011
Introduction


151. Commonwealth Bureau of Census and Statistics. Overseas Trade Statistics: Imports Cleared for Home Consumption 1953–54; Quantity from Each Major Importer, Codes 822 (Cut, Not Elsewhere Included), 829 (Manufactured Other Than Cut (The Manufacture of UK Containing Not Less Than 15% Australian Leaf)), 830 (22A Cigarettes of UK Origin and 22B1 Cigarettes Not of UK Origin), 840 (Cigars), 851 (Snuff).

152. Commonwealth Bureau of Census and Statistics. Overseas Trade Statistics: Imports Cleared for Home Consumption 1952–53; Quantity from Each Major Importer, Codes 822 (Cut, Not Elsewhere Included), 829 (Manufactured Other Than Cut (The Manufacture of UK Containing Not Less Than 15% Australian Leaf)), 830 (22A Cigarettes of UK Origin and 22B1 Cigarettes Not of UK Origin), 840 (Cigars), 851 (Snuff).

