



Government of **Western Australia**
Department of **Health**
Public and Aboriginal Health Division

Our ref:
Contact:
Telephone:

Ms Lauren Wells
Parliamentary Officer (Committees)
Select Committee on Personal Choice and Community Safety
Parliament House
4 Harvest Terrace
WEST PERTH WA 6005

Dear Ms Wells,

**Select Committee on Personal Choice and Community Safety –
Questions on Notice.**

I refer to the questions taken on notice at my appearance before the Committee on 27 February 2019. The responses to the questions are provided below:

1. **The CHAIRMAN:** 'Does the Department of Health fund or otherwise collaborate with any research groups or scientists who are involved in trials to determine the safety or efficacy of e-cigarettes?'

Dr Robertson: 'That is a good question. I am not aware of any funding of such things, but I would need to just check that and take that on notice.'

The CHAIRMAN: 'We can take that on notice.' (Page 2)

Response: In 2014, the Department of Health's Environmental Health Directorate funded one study investigating respiratory health effects of e-cigarettes. The study was conducted by researchers at the Telethon Kids Institute. A copy of the report of that study is available if requested. There has been no ongoing funding or collaboration with this research since then.

2. **The CHAIRMAN:** 'I am sure you would be aware that in spite of funding and Quit smoking campaigns and advertising, the daily smoking rate in Western Australia has not significantly changed between 2013 and 2016.'

189 Royal Street East Perth Western Australia 6004
Telephone (08) 9222 4222 Fax (08) 9222 4314 TTY 1800 007 211
Letters PO Box 5172 Perth Business Centre Western Australia 6849

ABN 28 624 700 332 <http://www.health.wa.gov.au>

I think it went from about 12.4 per cent to 11.5 per cent. You see a similar trend across Australia where the decline in smoking rates has slowed somewhat in recent years. Can you give us an idea of how much the health department has spent on anti-tobacco advertising campaigns over the last few years? I would be interested in the figures since 2016 with the new government.'

Dr Robertson: 'I would have to take that question on notice. I cannot give you an exact figure on that.' (Page 3)

Response: The Department of Health contracts Cancer Council WA to provide a comprehensive Tobacco Control Program, Make Smoking History (MSH), which aims to reduce the prevalence of smoking in the WA community by increasing the proportion of current smokers quitting and reducing the incidence of people starting to smoke. Make Smoking History employs a comprehensive range of strategies including mass media campaigns, policy development, capacity building, research and evaluation, community based strategies, and working with groups who have a higher smoking prevalence. The funding provided to MSH by the Department contributes to all activities of MSH.

Financial Year	Total(GST inclusive).
2016/17	\$2,273,588.00
2017/18	\$2,292,458.60
2018/19 (to date)	\$1,738,371.33
TOTAL	\$6,304,417.93

3. **The CHAIRMAN:** 'The 2012-2018 target set by the National Tobacco Strategy. The target was 10 per cent; we have not reached that. Do you know by how much it has declined?'

Dr Robertson: 'I have rates for Australia, but not Western Australia. I can again take that' —

The CHAIRMAN: 'Thank you, I appreciate that. We will take that on notice too.' (Page 3)

Response: The WA Health and Wellbeing Surveillance System, in 2017, found that 9.7% of adult Western Australians (18 years and over) were a daily smoker, which meets the NTS 2010-2018 target.

The changes in daily and current smoker (daily and occasional smoking) rates are shown in the table below. These figures are reported by the WA Health and Wellbeing Surveillance System.

Year	Daily smoker (%)	Current smoker (%)
2012	9.8	12.7
2013	10.9	13.1
2014	9.5	12.3
2015	9.3	12.5
2016	8.7	10.8
2017	9.7	11.8

4. **The CHAIRMAN:** 'The 900 per cent increase—is that young people who take up habitual e-cigarette use, or are those people who have reported using e-cigarettes at one time?'

Dr Robertson: 'I would have to check the figures. It is at least one use, but it certainly may be habitual use as well. That is not the case in Australia.' (Page 4)

Response: The study in question, *Tobacco Use Among Middle and High School Students — United States, 2011–2015*, examined any tobacco use within the last 30 days.

5. **Hon RICK MAZZA:** 'Can I just ask a supplementary? What is the current penalty for somebody selling an e-cigarette device?'

Dr Robertson: 'Good question. I may have to take that on notice. I believe it was around \$1 000, but I will have to take that one on notice.' (Page 5)

Response: Under Section 106 of the *Tobacco Products Control Act 2006*, it is an offence to sell any food, toy, or other product that resembles a tobacco product. A 2014 Western Australian Supreme Court decision found that e-cigarettes resembled a tobacco product.

The penalty for a first offence under this section is a maximum fine of \$10,000 for an individual or \$40,000 for a body corporate. Second or subsequent offences carry maximum penalties of \$20,000 or \$80,000 for individuals or body corporates respectively.

6. **The CHAIRMAN:** 'The penalty for possessing liquid nicotine is \$45 000, if I am not mistaken. Is that right?'

Hon RICK MAZZA: 'Maybe we can take those figures on notice, if you would not mind. That would be great.'

Dr Robertson: 'I can take both of those notice, yes.' (Page 5)

Response: Section 16 of the *Medicines and Poisons Act 2014* relates to the unauthorised supply, possession and use of a Schedule 7 (dangerous poison), or

supply threatening health, safety and welfare. The penalty for offences to this section includes a fine of up to \$45,000. This Section applies to any substance classified as a Schedule 7 of the National Poisons Standard.

7. **The CHAIRMAN:** 'I would also be interested to know if anybody has been fined for the possession of liquid nicotine in this state.'

Dr Robertson: 'Fined for the possession?'

The CHAIRMAN: 'Yes, or the importation. But as I understand it, it is the same penalty.'

Dr Robertson: 'Yes.'

The CHAIRMAN: 'So we will take that on notice too.' (Page 8)

Response: The Department of Health has not prosecuted any person for the supply of liquid nicotine in Schedule 7.

The Department of Health is occasionally alerted by Australian customs to the attempted importation of liquid nicotine. These tend to be smaller quantities, which are said to be for personal use. Where supply is not authorised, the substances are confiscated and safely destroyed.

8. **The CHAIRMAN:** 'To what do you attribute, I suppose, the difficulty of decreasing smoking rates as we approach that smaller cohort of smokers?'

Dr Robertson: 'Look, I think there are a number of challenges in different communities. One of the issues is that it is not homogenous. We talk about the 10 per cent as if it is a homogenous solution. It is not. We know that in the lower socioeconomic groups, the rates are far higher. In Aboriginal and other groups, the rates are far higher. In mental health areas, the rates are far higher. We are probably at a stage where we need to be targeting some of those groups more effectively as we go forward rather than the general population. Some of the measures are unlikely to have an effect on them.'

Hon Dr SALLY TALBOT: 'Do you have any data about what proportion of that cohort wants to quit?'

Dr Robertson: 'Not that I am aware of, but it is a good question. We may have that data. I would have to check that.' (Page 11)

Response: Among the general population, approximately 90% of smokers would not start smoking if given the choice again¹. Since 1980 the prevalence of smoking has generally declined over time among all disadvantaged groups, regardless of the indicator².

Among Aboriginal and Torres Strait Islander people, 70% of smokers wish to quit³.

Of smokers entering prison in Australia, 50% report they would like to quit⁴.

An Australian study of smoking among people living with a psychotic illness found 72% of current smokers had ever tried to quit⁵. UK data shows that smokers with a mental health condition are no less likely to want to quit smoking⁶.

Rates of smoking among homeless people are significantly higher than the general population, with up to 84% being daily smokers, but a Perth survey found 59% would like to quit smoking⁷.

Lesbian, gay, bisexual, and transgender people have also been identified as a group with higher smoking rates. Research on lesbian, bisexual, and queer women has found that 74% of current smokers planned on giving up within the next 3 months⁸.

Thank you for the opportunity to provide the above responses to questions taken on notice.

Yours sincerely



Dr Andrew Robertson
ASSISTANT DIRECTOR GENERAL
PUBLIC AND ABORIGINAL HEALTH DIVISION

/3 March 2019

¹ Fong, Geoffrey T., David Hammond, Fritz L. Laux, Mark P. Zanna, K. Michael Cummings, Ron Borland, and Hana Ross. "The near-universal experience of regret among smokers in four countries: findings from the International Tobacco Control Policy Evaluation Survey." *Nicotine & Tobacco Research* 6, no. Suppl_3 (2004): S341-S351.

² Greenhalgh, EM, Scollo, MM, & Pearce, M. 9.2 Socio-economic disparities in tobacco exposure and use: are the gaps widening? In Scollo, MM and Winstanley, MH [editors]. *Tobacco in Australia: Facts and issues*. Melbourne: Cancer Council Victoria; 2018. Available from: <http://www.tobaccoinaustralia.org.au/chapter-9-disadvantage/9-2-socioeconomic-disparities-in-tobacco-exposure>

³ Thomas, David P., Maureen E. Davey, Viki L. Briggs, and Ron Borland. "Talking About the Smokes: Summary and Key Findings." *Medical Journal of Australia* 202, no. S10 (2015): S3-S4.

⁴ Australian Institute of Health and Welfare 2015. *The health of Australia's prisoners 2015*. Cat. no. PHE 207. Canberra: AIHW

⁵ Cooper, Jae, Serafino G. Mancuso, Ron Borland, Tim Slade, Cherrie Galletly, and David Castle. "Tobacco Smoking among People Living with a Psychotic Illness: The Second Australian Survey of Psychosis." *Australian & New Zealand Journal of Psychiatry* 46, no. 9 (2012): 851-63.

⁶ Royal College of Physicians, Royal College of Psychiatrists. *Smoking and mental health*. London: RCP, 2013. Royal College of Psychiatrists Council Report CR178.

⁷ Cancer Council Western Australia, "Homeless Sector Surveys". 2014.

⁸ Mooney-Somers, Julie, Johann Kolstee, Rachel Deacon, Samar Haidar, Jain Moralee, and Karen Price. *Lesbian, Bisexual and Queer (LBQ) Women's Tobacco Reduction Project Community Report Online Survey Findings*. 2016.