

**Date:** **Wednesday 4 February 2004**

**Venue:** **Committee Room, National Assembly for Wales**

**Title:** **The 12<sup>th</sup> World Conference on Tobacco and Health, Helsinki, August 2003**

## **Purpose**

1. The Report provides a brief summary of some key themes addressed at the 12<sup>th</sup> World Conference in Helsinki, August 2003.

## **Summary/Recommendations**

2. The report highlights some key themes in Tobacco Control.

- Health as a human right. Given the current debate on ‘Smoking in Public Places’ and the health risks of exposure to environmental tobacco smoke, the recent legislation in Kerala, India and Uganda provides examples of how other countries are tackling this issue.
- The role of the European Commission (EC) illustrates the importance of a European approach especially in relation to new legislation such as the Tobacco Advertising Ban.
- Good practice discussed in the session on smokers’ helplines has been incorporated into the Smokers Helpline Wales contract.

## **Action**

3. Members of the Health and Social Services Committee are asked to note the Report.

**Jane Hutt**  
**Minister for Health and Social Services**

**Cathy Weatherup, Health Promotion Division. Tel 029 2082 5587**

## **12<sup>th</sup> World Conference on Tobacco and Health August 5<sup>th</sup>-8<sup>th</sup> 2003**

This international conference is held every three years. It is credited with having a major impact on tobacco control activities around the World, such as ratification of new treaties or providing endorsement of strategic direction for tackling the tobacco industry. There were approximately 5000 delegates from both the developed and undeveloped world in attendance.

### **Highlights**

Many of the tobacco control experts from around the world were present at the conference. For example, Stan Glantz, lobbyist and tobacco activist, presented his findings regarding the influence of films on young people's smoking and Dr Richard Peto, epidemiologist, gave an overview of the differing prevalence rates across the world and how these figures are directly related to smoking policies (or the lack of them).

### **Key themes**

Presentations were made from individuals from around the world who provided a collection of new ideas, research or strategies for tobacco control activities. Some examples are as follows:-

#### **1. Health as a human right**

In Kerala, India, they have used existing human rights legislation and their national laws for smoke free policies. Their 'right to life legislation' states that people have a fundamental right to quality water and air. Smoking in any form in a public place has therefore been held to be illegal, unconstitutional and violative of article 21 within their laws.

In Uganda – inspired by the Court of Kerala (above), Ugandan lawyers put evidence together including the Childrens Rights Convention which has led to regulations prohibiting smoking in public places. This will be in place by December 2003.

Similar presentations were made by South Africa, Montana State (USA), and Hong Kong which identified their progress in taking forward this issue.

## 2. Sponsorship and Social responsibility

Numerous presentations focused on the need to reveal the covert nature of the tobacco industry.

Research undertaken on industry-funded prevention campaigns identified how the tobacco industry had chosen messages and role models which were evaluated as unrealistic, lacking in credibility and in some cases, were shown to reinforce young smokers' decision to take up smoking.

A mapping exercise of Industry funding of academia revealed evidence from the UK, Canada and Italy to reveal the funding of corporate development and donations, various investment portfolios and board appointments. A separate study examining funding in Italian universities revealed how difficult it was to identify the source of the original funding, with the use of non tobacco industry branding, non tobacco industry websites and gifts in kind for students.

## 3. Cessation, effective treatments and genetics

The Conference strongly endorsed evidence-based cessation methods, citing the equivalent of the Thorax guidelines from around the world.

Presentations were made from USA, Canada, Finland and the UK on existing evidence for effective methods ranging from self help materials and helplines to the most effective combination of pharmacological support and behavioural support

There were also insights into the links between genetics and their influence regarding the initiation of smoking and becoming a heavy smoker.

## **The role of the European Commission**

It was noted that the European Community had established itself as a major player in tobacco control at a world level. For example, the Tobacco Advertising Directive was cited as one of the major steps forward in Tobacco Control.

Important proposed European Commission developments which would influence the world of Tobacco Control include:-

- New rules to regulate tobacco ingredients with the aim of eliminating tobacco's addictive potential
- A major initiative that aims to ban smoking in workplaces
- Tobacco advertising in print, radio and internet banned by the end of 2005

## **Benefits for the Welsh Assembly Tobacco Programme**

As well as gaining an overview and update on tobacco control world-wide, specific sessions were instructive regarding key elements of the Welsh Tobacco Programme. The session on 'Helplines' provided examples from Canada, USA, Sweden and Australia. The use of structured protocols, proactive counselling and relapse-sensitive scheduling of callbacks were all elements that have now been incorporated into the cessation counselling section of the Smokers Helpline Wales contract. Similarly the use of standard referral from health professionals is something which is being encouraged by the marketing and materials from the helpline.

Another important learning for Wales was the use of a Counselling Call advert. This illustrates exactly what help the caller receives, the tone of the counsellor, and the types of advice and support offered when they phone the helpline. In combination with the results from the pre and post research findings of the 2002-03 campaign, which revealed a need to de-mystify what the helpline, and the experience of other countries has influenced the making of a new advert showing a caller on the phone to Smokers Helpline Wales. This went on air on November 3<sup>rd</sup> 2003.

More innovative suggestions regarding call back counselling and the integration with clinical management (surgeries call the helpline and give them the telephone numbers of new clients) are perhaps opportunities for the future contract.

Other ideas such as linkages to internet services (the provision of a quitting coach, who provides tailored advice to individuals) were also useful for future development.