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Government failing to adequately address tobacco harm for Māori

Māori smoking rates have barely changed since 2011, and the Government is not doing enough to address tobacco-related harm amongst Māori, say leading tobacco researchers and public health advocates.

The Government's actions on the Māori Affairs Select Committee's 2010 recommendations for addressing tobacco-related harm have been reviewed and published in the *New Zealand Medical Journal*. This review shows, five years on, little or no progress on several key measures recommended in the Committee's report.

"Only eight out of 42 recommendations have been fully implemented and we believe the failure to complete or adequately advance the remaining 34 recommendations is hindering progress towards the Smokefree 2025 goal, particularly for Māori," conclude the review authors.

The recommendations came from the Māori Affairs Select Committee's 2010 *Inquiry into the tobacco industry in Aotearoa and the consequences of tobacco use for Māori*. The Committee's report made 42 recommendations to the Government, including a goal of making New Zealand a smokefree nation by 2025, which the Government endorsed, making New Zealand the first country in the world to set a national goal of achieving minimal levels of tobacco use.

"The intent of the original inquiry was to expose the tobacco industry to the full glare of political and public scrutiny," says Shane Kawenata Bradbrook, Director of Te Ao Hurihuri.

"Yet five years on, and despite cross-party political and very high public support for stronger tobacco control measures, progress has been glacial. Thousands of people have continued to be killed by smoking, and many children have become addicted to smoking," he says.

The authors say key missed opportunities include a lack of progress on:

- introduction of standardised packaging for tobacco products
- implementation of a comprehensive Government strategy and action plan to achieve Smokefree 2025
- reducing availability and supply of tobacco
- comprehensive and effective use of mass media including targeted mass media campaigns, in particular for Māori and pregnant women
- extension of smokefree environments, in particular smokefree cars carrying children
- further disclosure of product additives, and the regulation of nicotine and additives.

“Māori communities strongly supported these measures during the Select Committee process, and surveys show that the general public also want to see tighter controls on tobacco,” says Professor Chris Cunningham, from Massey University’s Research Centre for Māori Health and Development.

“We now have clear evidence that the current ‘business as usual’ approach will not achieve the Smokefree 2025 goal, particularly for Māori. Unless decisive steps are taken to introduce best practice measures, the interim target of halving Māori and Pacific daily smoking prevalence to 19% and 12% respectively by 2018 will be missed by a substantial margin,” says University of Otago, Wellington’s Professor Richard Edwards.

Recently released figures from the New Zealand Health Survey show that there has been no significant change in smoking rates for Māori or Pacific peoples since the Smokefree 2025 goal was set in 2011. Prevalence of daily smoking for Maori stands at 35.5%, nearly three times that of non-Māori, while the Pacific rate is 22.4%.

“Not only is the government failing to take action needed to accelerate smoking decline, but spending on key measures such as mass media advertising actually reduced after the Government adopted the 2025 goal,” says Edwards.

“The lack of leadership in executing the recommendations is woeful. Māori and non-Māori alike were adamant that removing tobacco is critical to promoting better health for all New Zealanders. If we want a smokefree nation by 2025, we need immediate political action,” says Shane Kawenata Bradbrook.

The authors of the report include leading Māori and non-Māori tobacco control researchers and advocates: Chris Cunningham, Shane Kawenata Bradbrook, Richard Edwards, Tony Blakely, Nick Wilson, Heather Gifford, Sue Taylor, Anaru Waa, George Thomson, Janet Hoek and Jude Ball.

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