



NEW ZEALAND MEDICAL ASSOCIATION

29 January 2010

Maori Affairs Select Committee
Committee Secretariat
Bowen House
Parliament Buildings
Wellington

RE: INQUIRY INTO THE TOBACCO INDUSTRY IN AOTEAROA AND THE CONSEQUENCES OF TOBACCO USE FOR MAORI

The NZMA is New Zealand's largest medical organisation and has a pan professional membership. We have around 4000 members who come from all areas of medicine including medical students, resident medical officers, general practitioners, and other specialists.

The NZMA aims to provide leadership of the medical profession, and promote:

- professional unity and values;
- the health of New Zealanders.

The key roles of the NZMA are to:

- provide advocacy on behalf of doctors and their patients;
- provide support and services to members and their practices;
- publish and maintain the Code of Ethics for the profession; and
- publish the New Zealand Medical Journal.

The NZMA is also a member of the Smokefree Coalition and supports its vision for a tobacco free New Zealand by 2020.

Smoking is a health hazard to all New Zealanders causing 16% of deaths per year, and particularly effects a number of subsets of the New Zealand population one of which, and one which must be directly addressed, is Maori.

By way of background we have set out below some key statistics relating to smoking in New Zealand:

Statistics - General

- Around one in five (19.9 percent) adults currently smoke.¹ In New Zealand, 21.1 percent of men and 18.8 percent of females currently smoke.²
- Tobacco use is a risk factor for six of the eight leading causes of death globally. This includes ischaemic heart disease, cerebrovascular disease, lower respiratory infections, chronic obstructive pulmonary disease (COPD), tuberculosis and lung cancer.³
- Since 1950 over 170,000 people in New Zealand have died as a direct consequence of smoking.⁴
- Tobacco smoking in New Zealand accounts for about 23% of all cancer deaths and 16% of deaths from all causes. When risk factors are ranked, smoking is responsible for more premature death and disability than competing risks such as physical inactivity, high blood pressure, low fruit and vegetable intake, and high cholesterol.⁵
- At least 50 percent of all regular cigarette smokers will eventually be killed by their addiction. On average they will lose 14 years of quality life.⁶

Statistics - Maori

- Smoking is still most prevalent for Maori than any other ethnic group in New Zealand⁷ and is more common in areas with a significant Maori population and in areas of deprivation.⁸
- The current smoking prevalence among Maori adults is 40.4 percent, 37 percent among Maori men and 43.2 percent among Maori female⁹. Maori women are more than twice as likely to be a current smoker as women in the general population. Both Maori men and Pacific men are 1.5 times more likely to be current smokers than men in the total population.¹⁰
- There was a significant decrease in the daily smoking rate among Maori from 47.2 percent in 2002/03 to 37.6 percent in 2006/2007.¹¹ This downward trend in daily smoking is significantly observed among Maori women from 51 percent to 40.1 percent; while the daily prevalence of Maori men has also dropped from 34.8 percent to 42.9 percent.¹²

¹ The current smoking prevalence is based on the definition of World Health Organization. A current smoker is someone who has smoked more than 100 cigarettes in their lifetime and currently smokes.

² Ministry of Health. 2008. A Portrait of Health. Key Results of the 2006/07 New Zealand Health Survey. Wellington.

³ WHO Report on the Global Tobacco Epidemic, 2008: The MPOWER package. Geneva: World Health Organization.

⁴ Peto R, et. al. 2006. Mortality from smoking in developed countries 1950-2000 (2nd edition, 2nd edition, revised June 2006: www.deathsfromsmoking.net). Geneva: Switzerland: International Union Against Cancer (UICC).

⁵ Thornley, S et al Few smokers in South Auckland access subsidised nicotine replacement therapy, NZMJ 29 January 2010, Vol 123 No 1308.

⁶ Above n4

⁷ Ministry of Health. (2007)

⁸ Barnett, R. Pearce, J. Moon, G. (2004). Does social inequality matter? Changing ethnic socio-economic disparities and Maori smoking in New Zealand, 1981-1996.

⁹ Above n7.

¹⁰ Above n7.

¹¹ Above n7.

¹² Above n7

- Maori experience a 10 percent greater mortality rate from smoking than non-Maori.¹³
- Each year, 22 percent of deaths in Maori men and 21 percent of deaths in Maori women are attributable to smoking.¹⁴ One in five of all males' deaths in New Zealand are attributable to smoking¹⁵.
- The average age of smoking initiation amongst youth in Aotearoa is 14.6 years. However, uptake amongst taiohi Maori begins earlier at 14.2 years of age Maori also begin experimentation with smoking at the age of 10.7 years – significantly younger than their non-Maori counterparts who start at the age of 11.8 years¹⁶.
- The prevalence of regular smoking by Maori boys has decreased by 1.7 percent from 2006 to 19 percent in 2007. The number of Maori boys who have never smoked has also increased from 37.4 percent in 2006 to 39.1 percent in 2007¹⁷. There has been a decrease in daily smoking by Maori girls from 25 percent in 2006 to 22 percent in 2007¹⁸.

The NZMA strongly advocates for the implementation of strong tobacco control measures that will shift Maori demand for tobacco toward a demand for quitting services.

Terms of Reference for the Inquiry

Set out below are our comments in respect of the Terms of Reference.

The Historical Action of the Tobacco Industry to Promote Tobacco Use Amongst Maori

Tobacco is not a Maori tradition – before the arrival of the Pakeha, the Maori world was tupeka kore (tobacco free). This toxic and lethal substance was introduced as a tool of colonisation and used by the British as a 'gift' or trade in return for land and other resources¹⁹.

The Impact of Tobacco Use on the Health, Economic, Social and Cultural Well-being of Maori

In regard to this issue we refer to the submission prepared by researchers at the Department of Public Health, University of Otago which notes the following:

- Smoked tobacco is a highly addictive and extremely hazardous product whose normal use results in the premature death of half of its long term users.
- Tobacco is a leading cause of death among Māori and contributes to the gap in health between Māori and non-Māori.

¹³ Blakely et al. 2006. What is the contribution of smoking and socioeconomic position to ethnic inequalities in mortality in New Zealand? Lancet. Online. June 2006.

¹⁴ Ministry of Health. 1999. Our Health, Our Future: Hauora Pakari, Koiora Roa: The Health of New Zealanders 1999. Wellington. Ministry of Health.

¹⁵ Above n4

¹⁶ Paynter, J. (2008). National Year 10 ASH Snapshot Survey, 1999-2008: Trends in tobacco use by students aged 14-15 years.

¹⁷ Above n 16.

¹⁸ Above n 16.

¹⁹ Broughton, J. (1996). Puffing Up a Storm; Volume I – "Kapai te torori!" Dunedin: University of Otago

- Tobacco smoking causes social and economic disadvantage for Māori whanau, hapu and iwi.
- Māori smokers spend an estimated \$266 million per annum on tobacco. Low income whanau are particularly burdened by the costs of having members who smoke.
- Premature death deprives whanau, hapu and iwi of their leaders and support people.
- Smoking-related illness causes immense suffering and can inhibit whanau members from fully participating within their whanau.

We support the above statement.

The Impact of Tobacco Use on Maori Development Aspirations and Opportunities

The tangible costs of smoking to New Zealand in 2005 were in the order of NZ\$1.7 billion, or about 1.1 percent of GDP.²⁰ Major components are lost production due to premature mortality, lost production due to smoking caused morbidity, and smoking-caused health care costs. A pack a day smoker spends over \$4000 a year on cigarettes.²¹

What Benefits may have Accrued to Maori from Tobacco Use?

We are not aware of any.

What Policy and Legislative Measures would be Necessary to Address the Findings of the Inquiry?

The NZMA recommends that the Smokefree Coalition's Vision for a tobacco free 2020 be accepted and embraced by the Maori Affairs Select Committee, and put to the government as a viable national position. With the Smokefree Coalition's comprehensively researched methodology, the Maori Affairs Select Committee can recommend to government a cohesive and time-lined strategy for tobacco control implementation over the next ten years.

We do not wish to appear before the Select Committee.

Yours faithfully



Dr Peter Foley
Chair

²⁰ O'Dea D, Thomson G. Report on tobacco taxation in New Zealand. Report commissioned by The Smokefree Coalition and ASH New Zealand.

²¹ Quit calculator. www.quit.org.nz – based on 20 cigarettes per day at a cost of \$11 per pack.