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Consultation: Standardised packaging for all tobacco products

Response on behalf of ASH Wales Cymru

ASH Wales Cymru is the only organisation solely dedicated tobacco control in Wales. Established in 1976, we work to raise awareness of the health, social and economic effects of smoking by working closely with communities, young people and partner organisations across Wales to create change for the better.

 Provide any general points or evidence on standardised packaging of tobacco products. (optional)

ASH Wales fully supports standardised packaging because of the evidence that standard packs are:

- less attractive, particularly to young people;
- make the health warnings stand out more; and
- stop smokers believing (incorrectly) that some products can be less harmful than others

ASH Wales supports standardised packaging for all tobacco products because research shows it will make cigarettes less attractive to children and it may help to reduce tobacco use amongst children and young people. Research shows that branded packaging can undermine existing tobacco control legislation in several ways. Firstly, it gives the impression and misleads customers into thinking that some products are "healthier" than others. Secondly, we know that branded packs reduce the prominence and impact of health warnings.

Tobacco companies have a long track record of exploiting loopholes in regulations to continue marketing their products, for example in relation to mentholated cigarillos. It is therefore necessary to ensure that all tobacco products are covered by standard packaging regulations. In Wales, we are seeing emerging evidence that point of sale promotion of heated tobacco products are being displayed in shops. This may signal an intention by the industry to promote new products to new customers and must be addressed by the authorities, to prevent young people being drawn into using them, risking a lifelong addiction to tobacco and nicotine.

Wales specific evidence on the tobacco products contained in this consultation is limited, because of the small sample size of respondents in this area to ASH Wales surveys. However, our unpublished research mirrors the picture in England, and as such, we support and endorse the findings and evidence presented by ASH UK in their separate consultation response.

 Provide any evidence and examples of pack inserts in the packaging of tobacco products, cigarette papers and herbal smoking products, and their impact on public health outcomes. (optional)

We welcome the Government's commitment to mandate pack inserts in cigarette packs and RYO tobacco packaging. We recommend that inserts are included in all tobacco products where possible. Pack inserts can complement the existing warnings on tobacco packaging by providing smokers with additional information on the harms of smoking or positive messaging on quitting and information on the best methods of doing so.

One study in the UK found that a majority of smokers would support the introduction of pack inserts and felt that pack inserts were a good way to provide information about quitting." Another study in Scotland found that pack inserts were viewed favourably and were generally viewed as having the potential to alter behaviour.

Pack inserts are not just effective but also have public support, with 67% of adults in Great Britain supportive of introducing pack inserts in 2024. iv

- Provide evidence of wider impacts of standardised packaging of tobacco products, cigarette papers and herbal smoking products, such as on the environment, enforcement authorities, illicit trade. (optional)
- Contrary to tobacco industry claims, there has been no evidence that the introduction of standard packs has increased the use of illicit tobacco either in the UK^v or Australia. The illicit market for cigarettes in the UK has declined from 22% of the market in 2000 to 11% in 2022 thanks to a robust national enforcement strategy.
- In Wales, the illegal tobacco volume market share was 10% in 2022, a decrease from 12% in 2014.

The introduction of tough anti-smoking policies such as plain cigarette packs in 2015 did not lead to an increase in illicit sales. The most effective way to reduce demand for illicit tobacco is to encourage more people to quit smoking.

Nor is there evidence that the introduction of standard packs has burdened small retailers. In 2022, ASH UK surveyed small retailers and found that 75% of businesses felt the introduction of standardised packaging of cigarettes and RYO had had either a positive impact or none at all on their business. Tobacco represents a small and declining part of small retailers' profits. New analysis from the University of Edinburgh

shows that small retailer profit margins for tobacco are 8.5%, compared to 21% across all product types.* Contrary to claims by the tobacco industry, tobacco is a declining driver of "footfall" in small retailers, included in 13% of transactions in 2022 compared to 21% in 2016.

Cigars

 Provide any evidence on the current prevalence or use of cigars in the UK. (optional)

The ITC UK survey data from August to December 2022 found that 5.7% of surveyed adults who use nicotine products, currently smoke or recently quit have smoked a cigar in the past 30 days.xi

Provide any evidence on the health harms of cigars. (optional)

Cigar smoke causes multiple cancers, and significantly increases the risk of gum disease and tooth loss. Heavy cigar use is associated with an increased risk of developing coronary heart disease and lung diseases, such as chronic obstructive pulmonary disease (COPD). YIV XV

 Provide any evidence on how cigars are currently sold, such as branding or pack sizes. (optional)

Cigars are required to have a text warning and a general health warning stating "Smoking kills – quit now". Cigars are not required to display picture warnings and cigar packaging varies in size, colour, and includes branding and graphics. Cigars are harmful tobacco products and should be covered by the same packaging regulations as cigarettes. This would also prevent tobacco companies from using the weaker regulation of cigars to undermine public health regulations.

Cigarillos

 Provide any evidence on the current prevalence or use of cigarillos in the UK. (optional)

The ITC UK survey data from August to December 2022 found that 4.6% of adults who have recently quit, smoke or are nicotine product users have smoked cigarillos in the last month.^{xvi} In 2024, 33% of 11-18 year olds who had tried smoking had tried using cigarillos, and 43% of those who were regular smokers.^{xvii}

Provide any evidence on the health harms of cigarillos. (optional)

Due to their similar composition, cigarillos likely pose the same threats to health as cigarettes, exposing smokers to a similar composition of toxicants.**

 Provide any evidence on how cigarillos are currently sold, such as branding, pack sizes. (optional) Although cigarillos look like cigarettes, they are taxed at a much lower rate and are not subject to regulations such as requiring standardised packaging, minimum pack sizes or prohibition of characterising flavours. Tobacco companies have introduced new cigarillos which are clearly aimed at smokers and closely resemble cigarettes: the only difference is that they are wrapped in tobacco leaf which covers a cigarette-like paper tube containing tobacco. Cigarillos only need to display written health warnings and can be displayed in eye-catching colourful packs, with graphics and logos. Smaller minimum pack sizes mean that a pack of 10 Sterling cigarillos, can be bought for £6.90, compared to around £12 for 20 cigarettes. xx

The tobacco industry takes advantage of the weaker restrictions on cigarillos to undermine regulations designed to reduce smoking prevalence. In May 2020, both Japan Tobacco International (JTI) and Imperial Brands launched mentholated cigarillos, targeting cigarette smokers and bypassing the ban on menthol cigarette flavours. **i Mentholated cigarettes are addictive, popular and a gateway for young smokers. **i Approximately a million adults reported still smoking menthol cigarettes in Great Britain, with the exception of Wales, in the first quarter of 2023 despite the prohibition in 2020. **iii **iv* There is no indication that this was driven by illicit purchases and was likely thanks to the production of mentholated cigarillos that mirror cigarettes, as well as mentholated filters and cigarette papers. **vv xxvi

Extending standardised packaging to cigarillos would close down a clear avenue for marketing cigarette-like products. We also urge the government to classify cigarillos as factory-made cigarettes to prevent manufacturers using these products to continue undermining tobacco policy.

Pipe tobacco

 Provide any evidence on the current prevalence or use of pipe tobacco in the UK. (optional)

Pipe tobacco is a harmful and addictive combustible smoking product, generally made up of loose-leaf tobacco. The most recent ITC UK survey in 2022 found that 2.3% of adults who have recently quit, smoke or use nicotine products have smoked pipe tobacco in the past 30 days.xxvii

Provide any evidence on the health harms of pipe tobacco. (optional)

Smoking pipe tobacco is harmful; pipe users have a 50% increased mortality from tobacco-related cancers compared to non-smokers.***

 Provide any evidence on how pipe tobacco is currently sold, such as branding or pack sizes. (optional) Pipe tobacco packaging is required to feature combined health warnings consisting of text and picture warnings and the text 'Get help to stop smoking at www.nhs.uk/quit. Pipe tobacco packaging includes marketing content such as branding and graphics. Pipe tobacco is harmful to health and should be covered by the same packaging regulations as cigarettes. This would also close a potential loophole tobacco companies could use to evade packaging regulations on cigarettes.

Waterpipe tobacco products

Provide any evidence on the current prevalence or use of waterpipe tobacco in the UK. (optional)

Waterpipe tobacco products, also known as shisha or hookah, are addictive and pose significant harms to health. The most recent ITC UK survey in 2022 found that 3.4% of adults who smoke, have recently quit or use nicotine products have smoked a waterpipe in the last 30 days.**

Use of waterpipe tobacco, specifically shisha, is much more prevalent in ethnic minority communities.** The ASH Smokefree GB survey carried out by YouGov found that almost 30% of South Asian, Black/African/Caribbean and Other/mixed ethnicity respondents had ever tried shisha compared to only 12% of white respondents. ** Evidence suggests that British ethnic minorities are already at higher risk of smoking related diseases like diabetes, cardiovascular disease and certain cancers so further efforts are needed to reduce tobacco use in these groups. ** Evidence** Evidence** The ASH Smokefree GB survey carried out by YouGov found that almost 30% of South Asian, Black/African/Caribbean and Other/mixed ethnicity respondents had ever tried shisha compared to only 12% of white respondents.

Provide any evidence on the health harms of waterpipe tobacco products. (optional)

Shisha is commonly misunderstood by shisha users globally to be less harmful than cigarette smoking. **xxxx** The number of shisha cafes and bars in the UK increased by 210% between 2008 and 2012. **xxxx** Shisha exposes smokers to similar cancer-causing toxins and carcinogens as those in cigarettes. A literature review found that shisha smoking consistently produces significant levels of noxious chemicals and various carcinogens. **xxxxx** Shisha has also been demonstrated to cause heavy metal contamination of the blood and urine. **xxix** One study found that a session of shisha smoking for 40 minutes was equivalent to smoking 100 or more cigarettes. **I Second-hand smoke exposure from shisha is also extremely dangerous given that it is a mixture of smoke exhaled by the smoker and smoke from the fuel used to heat the pipe.

Provide any evidence on how waterpipe tobacco is currently sold, such as branding or pack sizes. (optional)

Waterpipe packaging is currently sold with both text and pictorial health warnings but includes marketing content such as branding and graphics. Waterpipe tobacco, can be sold in a variety of sizes from 50 grams to 1 kilogram. It is possible that the lighter

regulation of waterpipe tobacco packaging has contributed to the widespread harm misperceptions for shisha. Waterpipe tobacco is harmful to health and should be covered by the same packaging regulations as cigarettes. Standardised packaging will not, however, impact customers in shisha bars as they will not see health warnings as staff add the tobacco to the waterpipe. The government should consider further measures to raise public awareness about the harms of waterpipe tobacco products.

Nasal Tobacco

 Provide any evidence on the current prevalence or use of nasal tobacco in the UK. (optional)

Nasal tobacco (snuff) is a smokeless tobacco product consumed via the nose. There is limited data on nasal tobacco prevalence and more data is needed to be gathered on its use.

Provide any evidence on the health harms of nasal tobacco. (optional)

There is limited data on the health risks from nasal snuff but there is some evidence that it is linked to an increased risk of nasal cancer. XLI XLIII

 Provide any evidence on how nasal tobacco is currently sold, such as branding or pack sizes. (optional)

Snuff packaging is required to carry a health warning but includes marketing content such as branding and graphics. Nasal tobacco products are harmful to health and should be covered by the same packaging regulations as cigarettes.

Chewing tobacco

 Provide any evidence on the current prevalence or use of chewing tobacco in the UK. (optional)

Chewing tobacco covers a variety of smokeless tobacco (ST) products which are intended for to be chewed or consumed orally. This category includes Paan masala, Gutka and tobacco-containing betel quid (tumbaku-paan), as well as products like Snus and Naswar.

In the UK, these products are mainly consumed by South Asian Britons of Bangladeshi, Indian and Pakistani origin. The 2020 ASH smokefree GB survey included a boosted 500-strong South Asian sample and found that 9% of men and 7% of women from South Asian backgrounds are current users of smokeless tobacco products, many of which are chewed. xiiii Of the 41 South Asian respondents using ST, 9 used Naswar and 4 used Swedish Snus. The most recent ITC UK survey in 2022 found that 4.6% of British adults who currently smoke, have recently quit or use nicotine products have used chewing tobacco in the last 30 days. xiiv

• Provide any evidence on the health harms of chewing tobacco. (optional)

There is a lack of direct evidence identifying the negative health impacts of chewing tobacco. Most research looks at the risks from ST products as a category, rather than the risk from individual products. Data extracted from cancer registries does suggest a significantly higher risk of oral and pharyngeal cancers among South Asians ethnic groups, as compared to the general population. *Iv Global evidence on ST use suggests strong associations with oral and pharyngeal cancers, ischaemic heart disease, stroke and adverse perinatal outcomes. *Itvi xlviii xlviiii

 Provide any evidence on how chewing tobacco is currently sold, such as branding or pack sizes. (optional)

Chewing tobacco regulations only require one minimal text warning ('This tobacco product damages your health and is addictive'). There is no minimum purchase requirement, meaning that chewing tobacco products can be bought as individual items, as well as be sold in a variety of flavours. Chewing and other oral tobacco products are harmful to health and should be covered by the same packaging regulations as cigarettes. Despite having less stringent requirements, less than 50% of chewing tobacco products were observed to comply with existing regulations in 2010.xlix Stronger regulation and enforcement is needed to address the illicit market in chewing tobacco and smokeless tobacco products.

Heated tobacco and devices and other novel tobacco products

 Provide any evidence on the current prevalence or use of heated tobacco and devices and other novel tobacco products in the UK. (optional)

Heated tobacco products (HTPs) are relatively uncommon in England, with less than one percent of people using a HTP in July 2024 according to the Smoking Toolkit Study. The ASH Smokefree GB survey found that among all adults, 19% had heard of HTPs, 2.6% had ever tried them and 0.9% currently use them. Current use of HTPs has more than doubled among people who smoke during the last few years, from 1.5% in 2020 to 3.5% in 2024. Less than 1% of ex-smokers are current users of heated tobacco products and 2.7% had tried them at some point. Only 0.1% of people who have never smoked and never vaped currently use heated tobacco products.

• Provide any evidence on the health harms of heated tobacco and devices and other novel tobacco products. (optional)

There is limited research on the health impacts of HTPs. While available data, including from a 2022 Cochrane review, suggest that HTPs reduce exposure to harmful combustion products, indirect comparisons from published data and a direct comparison based on an unpublished lab study by academics from UCL suggest that HTPs have a more limited harm reduction role than e-cigarettes, providing lower

reductions in biomarkers of harm such as nitrosamines. If There is a need for more independently funded research on HTPs. There is very little evidence on the use of HTPs in supporting cigarette smoking cessation.

 Provide any evidence on how heated tobacco and devices and other novel tobacco products are currently sold, such as branding or pack sizes. (optional)

HTP packaging is required to carry a health warning but includes marketing content such as branding and graphics. HTPs are a form of tobacco product and therefore should be covered by the same packaging regulations as cigarettes. Applying different rules to different tobacco products simply creates opportunities for tobacco companies to circumvent regulations.

ASH Wales has collected several examples of Philip Morris International (PMI) advertising their heated tobacco product IQOS in shops in Wales, despite it being illegal to advertise tobacco at products at the point of sale. In 2018, the then UK public health minister Steve Brine wrote to PMI stating that: "It was claimed by [Philip Morris] ... that TAPA [Tobacco Advertising and Promotion Act 2002] does not apply to IQOS as it is not a cigarette; however, to be clear, the legislation applies to all tobacco products, including novel tobacco products. It also applies to the indirect promotion of tobacco products by promoting devices that may only be used with tobacco products, such as the IQOS device." In a statement, Brine said "[the government] will not rule out legal action" if the company fails to take the necessary steps. Despite this, PMI continue to advertise IQOS in shops in flagrant disregard for the law.

Strict regulation is needed to prevent manufacturers from circumventing public health legislation and marketing tobacco products.

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