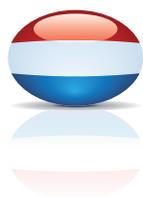


The International Tobacco Control Policy Evaluation Project ITC Netherlands National Report



FINDINGS FROM THE WAVE 1 TO 8 SURVEYS (2008-2014)

SEPTEMBER 2015

EXECUTIVE SUMMARY



Promoting Evidence-Based Strategies to Fight the Global Tobacco Epidemic



International Tobacco Control
Policy Evaluation Project



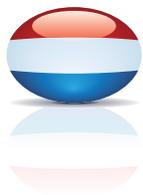
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Findings from the ITC Netherlands Wave 1 to 8 Surveys

ITC Netherlands Executive Summary



2008-2014

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The complete version of the ITC Netherlands Wave 1 to 8 National Report is available on the ITC Project website at www.itcproject.org.

EXECUTIVE SUMMARY

BACKGROUND

The World Health Organization Framework Convention on Tobacco Control (WHO FCTC) is the world's first global health treaty which obligates 180 signatory Parties (to date) to implement evidence-based tobacco control policies to reduce the prevalence of tobacco use and exposure to tobacco smoke. It has been 10 years since the Netherlands adopted the FCTC – the treaty was signed in June 2003 and ratified in January 2005. This report evaluates the effectiveness of the Netherlands' implementation of the FCTC. The findings are based on research conducted by the International Tobacco Control Policy Evaluation Project (the ITC Project) – an international comparative cohort survey conducted in 22 countries, designed to measure the impact of tobacco control policy measures on tobacco users over time. Between 2008 and 2014, seven survey waves of the full cohort (approximately 2,000 youth and adult smokers above the age of 15 years at Wave 1) were conducted in the Netherlands.ⁱ The ITC Netherlands Survey was developed by an international research team from Canada (University of Waterloo) and the Netherlands (STIVORO (now discontinued), Maastricht University (CAPHRI), and University of Amsterdam (ASCoR)).

ITC Netherlands data collected over 6 years has demonstrated that progress has been made in some areas, but the Survey findings make it clear that the Netherlands needs to do more to strengthen tobacco control policies and meet its obligations as a Party to the FCTC. The ITC Netherlands research findings point to several specific opportunities for the Dutch government to address the leading cause of preventable death in the Netherlands as it enters the second decade of FCTC implementation.

Tobacco Price and Taxation

Substantially increasing tobacco taxes and prices is recognized worldwide as one of the most effective measures for achieving reductions in tobacco use. Increases in taxes on both cigarettes and roll-your-own (RYO) tobacco in recent years have reduced the affordability of tobacco products in the Netherlands. However, ITC cross-country comparisons indicate that compared to smokers in other countries, fewer Dutch smokers identify price as a reason to quit. Similarly, the percentage of smokers reporting that they think about the money they spend on smoking “often” or “very often” is relatively low in the Netherlands in comparison to other ITC countries. Although the excise taxes on RYO tobacco have been increased several times since 2008, the price differential between cigarettes and RYO tobacco has remained, and continues to drive high RYO use among Dutch smokers – the second highest use among 12 high- and middle-income ITC countries – as 82% of RYO users report that the cheaper price is a reason for using RYO tobacco.

Although the percentage of smokers who reported purchasing cigarettes or tobacco outside of the Netherlands, but within the European Union in the last 6 months increased significantly between 2008 and 2014, the frequency of these cross-border purchases has remained low: across all survey waves, a large majority of the smokers who made cross-border purchases reported to have made such purchases only once or a few times in the last 6 months.

i. Eight survey waves in total have been conducted, but the Wave 2 Survey only contacted a sub-sample of approximately one-third of the Wave 1 cohort and is not included in this report.

Recommendations

1. Further steps need to be taken to increase total excise tax on tobacco products to meet the WHO target of at least 70% of the retail price. The price advantage for RYO tobacco products should also be eliminated in order to minimize switching to cheaper products and reduce smoking initiation among youth.
2. Ensure continued reductions in tobacco affordability by using a combination of inflation- and income-adjusted tax increases.
3. Advocate higher excise tax burdens and floors at the level of the European Union to reduce price differentials, which would contribute to reduced cross-border tobacco purchasing.

Smoke-free Public Places

Smoke-free legislation is the most widely adopted tobacco control policy measure around the world. It is critical for protecting the public from the harms of secondhand smoke and for changing social norms and attitudes around smoking. However, the Netherlands has not kept pace with many other countries and with the requirements of the FCTC, which call for a comprehensive smoking ban in indoor public places, and other public places as appropriate, with no exceptions. While there is evidence of substantial progress in creating smoke-free restaurants since the 2008 hospitality industry smoking ban, smoking prevalence in bars and cafés remains a concern. At Wave 8 (2014), more than one-third (38%) of smokers still noticed smoking in bars and cafés during their last visit. The October 2014 decision to reinstate the smoking ban in small hospitality venues is a positive step, however, the allowance of designated smoking rooms means that the Dutch smoke-free policy falls short of best practice guidelines for Article 8 of the FCTC. As a result, it continues to place the public at risk from the harms of exposure to tobacco smoke. Evidence from ITC surveys in France, the United Kingdom, Australia, Canada, and other countries demonstrates that strongly enforced comprehensive smoking bans combined with effective public education campaigns can nearly eliminate indoor smoking in all hospitality venues.

Recommendations

4. Strengthen current smoke-free legislation by removing the allowance for designated smoking rooms in accordance with the FCTC Article 8 Guidelines which call for 100% smoke-free public places.
5. Implement strong education and enforcement activities to increase public awareness of the harms of secondhand smoke and the benefits of a comprehensive ban, and to further strengthen compliance with the ban.

Tobacco Health Warnings

Health warnings on tobacco packages are a low-cost, high-reach means of educating smokers on the harms of tobacco. Although the Netherlands was the first EU country to introduce the text health warnings included in the European Tobacco Products Directive (TPD) 2001/37/EC (covering 30% of the front and 40% of the back of cigarette and RYO tobacco packages) in 2002, the warnings did not change before or during the 6-year period of the ITC Surveys. ITC evidence demonstrates the low effectiveness and declining performance of the warnings over time. The percentage of smokers who reported noticing the health warnings “often” or “very often” in the last month decreased from 25% in 2008 to 13% in 2014 – the lowest rate of 19 ITC countries. Similarly, in 2014, the Netherlands had the lowest percentage of smokers (7%) who reported that warning labels made them think about the health risks of smoking “somewhat” or “a lot”.

Forthcoming pictorial warnings on 65% of the front and back of tobacco packages as required by the revised TPD will bring Dutch legislation into compliance with the requirements of Article 11 of the FCTC and stand to raise awareness of the harms of smoking and secondhand smoke and change social norms about tobacco use. Evidence from Australia shows that plain packaging further enhances the noticeability of pictorial health warnings and reduces the appeal of tobacco packs. Moreover, Australian smokers' support for this policy almost doubled less than 6 months after the introduction of plain packaging.

Recommendation

6. Consider further actions to strengthen the effectiveness of forthcoming pictorial health warnings by implementing plain packaging – a strategy that is recommended in the FCTC Articles 11 and 13 Guidelines and has been implemented in Australia (2012), is forthcoming in Ireland and the United Kingdom, and is being seriously considered in various other countries, such as France and Norway.

Education, Communication, and Public Awareness

The Survey findings reflect the absence of sustained funding for mass media education campaigns in the Netherlands. Across all survey waves, only a small minority of smokers (approximately 1 in 10) “often” or “very often” noticed advertising or information that talks about the dangers of smoking or encourages quitting in the last 6 months. The impact of cuts in funding for public education campaigns and weak tobacco health warnings are evident in societal attitudes that are tolerant of smoking and alarming gaps in Dutch smokers' knowledge of the harms of smoking and secondhand smoke. Although the percentage of smokers who “agreed” or “strongly agreed” that society disapproves of smoking increased between 2008 and 2014, the Netherlands still ranks last among 9 high-income ITC countries. In 2014, only 21% of Dutch smokers had a negative opinion of smoking – the second-lowest percentage of 13 high- and middle-income ITC countries.

Although smokers' awareness of specific health risks of smoking has also improved between 2008 and 2014, ITC findings indicate that fewer Dutch smokers are aware of the full range of health risks of tobacco use compared to smokers in other countries. Dutch smokers were among the least likely to know or believe that smoking causes heart disease, stroke, and lung cancer, and that secondhand smoke causes heart disease in non-smokers. The Netherlands also has the lowest percentage of smokers who report “often” or “very often” thinking about the harm their smoking might be doing to themselves (18% in 2014) and to others (8% in 2014) compared to 15 other ITC countries.

Recommendation

7. The Dutch government is urged to provide well-funded and sustained educational media campaigns in order to promote greater public awareness of the harms of smoking and secondhand smoke, to encourage cessation, and to denormalize smoking.

Tobacco Advertising, Promotion, and Sponsorship

Bans on tobacco advertising, promotion, and sponsorship (TAPS) are highly effective in reducing tobacco use and initiation, but only if they are comprehensive. Although the Netherlands has banned several sources of direct and indirect TAPS, the legislation does not go far enough. In 2014, almost half of Dutch smokers reported noticing things that promote smoking in the last 6 months, with 12% noticing these things “often” or “very often”. Although this percentage has decreased from 2008 to 2014, it is still high compared to many other ITC countries. Measures such as a ban on sales through vending machines, a complete ban on point of sale (POS) advertising, POS display bans, and limits on the number of shops selling tobacco have not yet been implemented in the Netherlands, leaving the tobacco industry with several channels to promote their products.

There is growing international momentum in implementing POS display bans (Iceland, Thailand, Ireland, Norway, Australia, Canada, and the United Kingdom are examples of countries that have implemented these bans) and there is fairly strong support among Dutch smokers for stronger TAPS restrictions in the retail setting. In 2014, more than half of smokers supported a complete ban on tobacco advertising inside stores and 40% supported a complete ban on POS displays inside shops and stores. Evidence from ITC countries shows that point of sale display bans reduce exposure to tobacco marketing and reduce impulse purchasing of cigarettes.

Recommendation

8. Close the gaps in current national TAPS laws by banning tobacco vending machine sales, banning tobacco advertising and the display of tobacco products in all stores and shops, and generally reducing the number of tobacco sale outlets.

Smoking Cessation

ITC evidence indicates the need for stronger efforts to motivate and assist smokers in quitting through well-funded media campaigns, large pictorial health warnings, and improved linkages to cessation support. In 2014, about one-quarter of Dutch smokers reported plans to quit smoking within the next 6 months. The one-year Smoking Cessation Reimbursement Program (SCRCP) that ran in 2011, along with the two-month mass media campaign that supported its introduction, had an impact on cessation-related thoughts and behaviours among Dutch smokers. For example, following the initial launch of the SCRCP (which was discontinued in 2012 and reinstated in 2013), the percentage of smokers who made a quit attempt in the last year increased from 24% in 2010 to 30% at 2012. Evidence from the most recent Surveys suggests that the reinstatement of the smoking cessation program in 2013, which was not accompanied by a smoking cessation media campaign, has not had as strong of an impact.

Receiving cessation advice from doctors or other health professionals has been shown to increase quit rates. However, fewer than 1 in 5 Dutch smokers reported receiving advice on ways to quit smoking from the doctor or other health professionals over the 6-year survey period, suggesting the need for stronger efforts to engage health professionals in providing quitting advice and linking them to other cessation services. The percentage of smokers reporting to have made use of such other cessation services such as quitlines has consistently been at very low levels as well.

Recommendations

9. The reinstatement of the reimbursement program for smoking cessation treatment in 2013, which is still in place, is a positive step forward in efforts to increase cessation rates in the Netherlands. However, in order to be more effective, the reimbursement should be accompanied by education efforts such as mass media campaigns in order to enhance awareness of the reimbursement policy and the availability of various options for cessation support and services for smokers.
10. Greater efforts to engage physicians and other health professionals and encourage them to provide evidence-based smoking cessation advice to patients would help to improve smokers' motivation to quit and greater use of cessation services.

The International Tobacco Control Policy Evaluation Project

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Evaluating the Impact of FCTC Policies in...

20+ countries • 50% of the world's population
60% of the world's smokers • 70% of the world's tobacco users

Australia
Bangladesh
Bhutan
Brazil
Canada
China (Mainland)
France

Germany
India
Ireland
Kenya
Malaysia
Mauritius
Mexico
Netherlands

New Zealand
Republic of Korea
Thailand
United Kingdom
Uruguay
United States of America
Zambia

