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Ms Lynn Moeng-Mahlangu
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0001

16 July 2018

Dear Ms Lynn Moeng-Mahlangu

Submission on the Draft Control of Tobacco Products and Electronic Delivery Systems Bill

I am the Principal Investigator of the Economics of Tobacco Control Project, based at the University of Cape Town. The Project traces its origins to the middle 1990s and aims to perform rigorous and objective policy-relevant research. Our website can be found at www.tobaccoecon.uct.ac.za. In 2016, at the request of the National Department of Health (NDoH), I led a team of researchers that conducted the socio-economic impact assessment (SEIA) on the Draft Control of Tobacco Products and Electronic Delivery Systems Bill. The process and the research was guided by the 2015 version of the Department of Planning, Monitoring and Evaluation's SEIA Guidelines.

The SEIA involved two main processes: (1) an extensive review of international evidence on the impact of each aspect of the proposed legislation and (2) consultation with important stakeholders and other interested parties. A draft report was submitted to the NDoH in October 2016, and a final report was submitted in January 2017. Your department, together with the Department of Planning, Monitoring and Evaluation, used this report to compile the NDoH's SEIA report, which is in the public domain.

South Africa ratified the World Health Organization's Framework Convention on Tobacco Control (WHO FCTC) on 19 April 2005. Through this treaty, the Government of South Africa has an obligation to protect its citizens from tobacco by implementing strong evidence-based tobacco control interventions. While a strong commitment to tobacco control during the 1990s and the early 2000s saw a sharp decrease in adult daily smoking rates—from 32.6% in 1993 to 23.4% in 2008—South Africa's smoking rates appear to have plateaued at about 20% of the adult population in recent years.[1] Alarmingly, estimates from the South African Global Youth Tobacco Survey (GYTS) show an increase in smoking rates among girls, from 10.5% in 2008 to 12.1% in 2011.[2] Second-hand smoke exposure is

[1] Southern Africa Labour and Development Research Unit. 2016. *National Income Dynamics Study 2014 - 2015, Wave 4*. [Dataset]. Version 1.1. Cape Town: Southern Africa Labour and Development Research Unit. Available: http://www.nids.uct.ac.za/nids-data/data-access [2018, February 2].
[2] James, S., Mbewu, A., Mthembu, Z., Reddy, P., Resnicow, K., Sewpaul, R., Sifunda, S. & Yach, D. 2013. A decade of tobacco control: The South African case of politics, health policy, health promotion and behaviour change. *South African Medical Journal*. DOI: 10.7196/samj.6910.

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also a pressing concern in the country, with 25.7% of youth exposed at home,[3] and even higher exposures among the adult population in restaurants (33.4%) and bars (32.7%).[4]

The emergence of electronic nicotine delivery systems (ENDS) and non-nicotine delivery systems (ENNDS), commonly referred to as 'e-cigarettes', is an area of major interest and debate. Accurate prevalence statistics for ENDS/ENNDS use are not yet available, but the ENDS/ENNDS market in the country is growing and several companies are involved in importing the products into the country, mainly via the internet, while manufacturing is dominated by a single industry player. The public health community remains divided on the role of ENDS/ENNDS with respect to tobacco control, but is unanimous on the need for regulation.[5]

These trends demonstrate the need for the strengthening of current government legislation on tobacco control in order to be in line with changes in the epidemiological and technological environments, as well as with recommendations from the WHO FCTC. I therefore wish to commend the Minister of Health for his initiative in introducing the proposed Control of Tobacco Products and Electronic Delivery Systems Bill, which aims to address four main aspects of tobacco control in South Africa. To do this, the bill proposes to:

1. Ban all indoor tobacco use;
2. Introduce plain/standardized packaging and rotating pictorial health warnings on tobacco products;
3. Ban the display, advertisement and marketing of tobacco products at retail and wholesale point-of-sale (POS); and
4. Include the use of Electronic Nicotine Delivery Systems (ENDS), Electronic Non-Nicotine Delivery Systems (ENNDS) and other such devices in the tobacco act and regulate their use.

In spite of a growing base of global evidence documenting the positive health and economic consequences of each aspect of the proposed legislation (summarized in appendices 1 through 4 and enshrined in the WHO FCTC), as well as South Africa's obligation to comply with the recommendations of the FCTC by virtue of ratifying this treaty, the tobacco industry opposes the proposed legislation. This was expressed most strongly through a written submission received from British American Tobacco South Africa (BATSA) during the SEIA process.

[3] Peltzer, B. 2011. Determinant of Exposure to Second-Hand Tobacco Smoke (SHS) among Current Non-Smoking In-School Adolescents (aged 11 – 18 years) in South Africa: Results from the 2008 GYTS Study. *International Journal of Environmental Research and Public Health*. DOI: 10.3390/ijerph8093553
[4] Agaku, I.T., Ayo-Yusuf, O.A. & Olufajo, O. 2014. Exposure to second-hand smoke and voluntary adoption of smoke-free home and car rules among non-smoking South African adults. *BMC public health*. 14(1):580. DOI: 10.1186/1471-2458-14-580
[5] Van Zyl Smit, R.N. 2013. The electronic cigarettes debate. South African Medical Journal. 103(11):833. DOI:10.7196/SAMJ.7435

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I would like to use this submission to highlight the evidence base documenting the positive health and economic impacts of the proposed legislation, to reiterate South Africa's obligation to comply with the recommendations of the FCTC, and to refute the tobacco industry's arguments against the proposed legislation, which were presented during the SEIA process and which currently receive a lot of attention in the media. Although there are many aspects to the proposed legislation, we focus only on those with the greatest economic content as this is the main focus of our research.

1. Control over smoking public places

The evidence base documenting the positive health and economic impacts of adopting total indoor smoking bans is summarised in Appendix 1. The evidence points overwhelmingly to the conclusion that comprehensive smoking bans, in contrast to partial smoking bans or none at all, are most effective in reducing exposure to second-hand smoke. Tobacco smoke is a known carcinogen and there is no safe level of exposure to tobacco smoke. Designated smoking rooms, expensive ventilation systems, and similar partial approaches do not protect people from the dangers of second-hand smoke. The simplest and most affordable way to protect people, especially employees in the hospitality industry, from second-hand smoke - and tobacco smoke pollution more broadly - is to create smoke-free environments. In terms of the economic impact of smoke-free public places, non-industry financed international evidence of sales and employment data before and after the implementation of smoke-free policies has pointed to no impact, or even a positive impact, on employment and sales within the hospitality sector.[6]

The ETCP further supports the Bill because South Africa, by virtue of ratifying the FCTC, was expected to implement complete smoking bans in indoor workplaces, public transport and indoor public places within five years of the FCTC's entry into force in the country (i.e. in 2010).[7] The legislation that will make this a reality is thus long overdue.

Although FEDHASA did not respond to the ETCP's request for a consultation during the SEIA process, BATSA's written submission to the SEIA team raised objections to the proposed total indoor smoking ban, which are disputed below.

1.1 "Costs have already been incurred by the hospitality industry to conform with existing legislation"

Implementing this legislation will not require any additional renovations or costs on the part of the hospitality industry; it will merely require that they do not allow people to smoke in their venues. The

[6] International Agency for Research on Cancer. 2009. Evaluating the effectiveness of smoke-free policies. IARC Handbooks of Cancer Prevention. Volume 13. Available: https://www.iarc.fr/en/publications/pdfs-online/prev/handbook13/handbook13.pdf [2018, July 22].
[7] World Health Organization Framework Convention on Tobacco Control Conference of The Parties. 2007. *Guidelines for the implementation of Article 8 of the WHO FCTC (Decision FCTC/COP2(7))*. Geneva, Switzerland: World Health Organization Press. Available: http://www.who.int/fctc/guidelines/adopted/article_8/en/ [2018, July 17].

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International Agency for Cancer Research (IARC, 2009) has found that smoking establishments typically experience an advantage following implementation as enclosed areas can be rented out for private functions, and the costs imposed on businesses from allowing indoor smoking – which range from lost productivity among employees to higher insurance costs, higher cleaning and maintenance costs, and the potential for significant legal costs resulting from claims filed by employees seeking compensation for damage caused by exposure to tobacco smoke in the workplace, or by customers seeking protection from tobacco smoke – are no longer incurred.[8]

The sunk cost incurred by those who have established smoking sections is of little relevance to the present policy debate. Laws are rarely static. It has been more than 15 years since the current 25% indoor smoking allowance was implemented, meaning that most costs incurred to comply with this rule would have been written off by the time a comprehensive indoor smoking ban is enacted.

In fact, a survey among 741 South African restaurants, which was conducted in December 2016, found that 44% of restaurants were already 100% smoke-free, while 44% had smoking sections outside, 11% had smoking sections inside, and only 1% allowed smoking anywhere.[9] Over the past ten years, 23% of the surveyed restaurants had changed their smoking policies. Of these 23% of restaurants that have changed their smoking policies, 35% had become completely smoke-free, 16% moved the smoking section outside, and 16% reduced the size of the smoking section. Very few restaurants had introduced a smoking section where previously they had been smoke-free (4%), enlarged their smoking section (4%) or moved it inside (4%). Seventeen per cent of restaurants that had changed their smoking policies in the past 10 years indicated that they had previously allowed smoking everywhere and had since installed a smoking section. The remaining 6% of restaurateurs could not recall what change had been implemented.

1.2 "There will be a loss of business and employment in the hospitality sector"

The tobacco industry's concern about the viability of the hospitality sector, especially with respect to smoking restrictions, is not new. In 1998, when (what turned out to be partial) smoking restrictions were debated, the tobacco and hospitality industries raised very similar concerns. Two subsequent studies sought to analyse the impact of the smoke-free policies that were mandated by the Tobacco Products Control Amendment Act of 1999.[10,11] Using survey data from over 1000 restaurants, Blecher and colleagues (2007) found a very modest impact on the turnover of restaurants, with the net effect being, in fact, marginally positive. Blecher (2008), who analysed the policies' impact using a time-

[8] International Agency for Research on Cancer. 2009. Evaluating the effectiveness of smoke-free policies. IARC Handbooks of Cancer Prevention. Volume 13. Available: https://www.iarc.fr/en/publications/pdfs-online/prev/handbook13/handbook13.pdf [2018, July 22].
[9] Little, M., & van Walbeek, C.P. 2018. Restaurant smoking sections in South Africa and the perceived impact of the proposed smoke-free laws: Evidence from a nationally representative survey. *South African Medical Journal*. 108(3):240-244. DOI:10.7196/SAMJ.2018.v108i3.12683
[10] Blecher, E., Van Graan, M. & Van Walbeek, C.P. 2007. The effects of the Tobacco Products Control Amendment Act of 1999 on restaurant revenues in South Africa – a survey approach. *South African Medical Journal*. 97(3): 208 -211.
[11] Blecher E. The effects of the Tobacco Products Control Amendment Act of 1999 on restaurant revenues in South Africa: A panel data approach. S Afr J Econ 2006;74(1):123-130. https://doi.org/10.1111/ j.1813-6982.2006.00052.x

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series approach that compared the change in tax-paid revenues (as a proxy for restaurant turnover) before and after the law was implemented, found a non-significant effect on restaurant revenues, holding other things constant. In contrast to the predictions by the tobacco industry and FEDHASA in 1998, both these studies suggest that the legislation had minimal impact on restaurant revenues and patronage.

The ETCP is not aware of any ex-post studies in South Africa, even commissioned by the tobacco industry, which found a detrimental impact of the smoke-free policies on the profitability of the hospitality sector. To some extent, the lack of business loss subsequent to the introduction of smoke-free policies may be why FEDHASA, after being so vehemently opposed to the smoking ban in the late 1990s, did not feel it necessary to respond to the ETCP's invitation to discuss the implications of the proposed new regulations that aim to strengthen smoking bans. Additionally, it is important to note that non-industry financed international evidence of sales and employment data before and after the implementation of smoke-free policies has pointed to no impact, or even a positive impact, on employment and sales within the hospitality sector (see Appendix 1).

1.3 "Enforcement of smoke-free legislation will be costly"

Similar arguments were raised in the late 1990s when the Tobacco Products Control Amendment Bill was being debated. The tobacco and hospitality industries claimed that the monitoring of smoke-free policies would place a large and unnecessary burden on the law-enforcement authorities. These predictions proved to be groundless. Proponents of the legislation argued at the time that the legislation would be largely self-enforcing by members of the public. The legislation clearly placed the right to clean smoke-free air of non-smokers above the right of smokers to smoke, and this was accepted by the public.

The aforementioned survey of 741 South African restaurants found that 91% of the restaurant respondents supported the current legislation, while 63% supported the proposed legislative changes; 68% of respondents who were aware of the proposed legislation supported it, compared with 58% of respondents who were not aware of the proposed legislation.[12]

These findings suggest that, in contrast to the vehement opposition to the 1999 legislation, which resulted in restaurants only going partially smoke-free in 2001, there is limited opposition from restaurants to the proposed legislative changes that would make restaurants 100% smoke-free.

[12] Little, M., & van Walbeek, C.P. 2018. Restaurant smoking sections in South Africa and the perceived impact of the proposed smoke-free laws: Evidence from a nationally representative survey. *South African Medical Journal*. 108(3):240-244. DOI:10.7196/SAMJ.2018.v108i3.12683

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2. Standardised packaging and labelling of tobacco products

The purpose of standardised packaging is to ensure that the attractiveness of tobacco products is reduced; that any package designs which may suggest that some products are less harmful than others are eliminated; and to increase the noticeability of health warnings.[13]

A review of the international evidence on the impact of standardised packaging indicates that its implementation would help reduce tobacco use in South Africa through the following channels: decreasing the impact of shelf displays at cigarette counters; improving the effectiveness of health warnings through removal of pro-smoking messages (such as trademarks and colours); adversely affecting some consumers' perception of the quality and taste of the product inside; and sending a strong educational message to the public that tobacco is different from other products, and that unique consideration should be given before a purchasing decision is made.[14, 15] A summary of the literature documenting both the health and economic impacts of standardised packaging is presented in Appendix 2.

In addition to the positive outcomes for public health that its implementation would achieve, the implementation of standardised packaging is crucial to South Africa's fulfilment of its obligations under the WHO FCTC.[16] Below, we respond to the tobacco industry arguments against the introduction of standardised packaging.

2.1 "Standardised packaging will result in an increase in the illicit trade of tobacco products"

The argument that illicit trade results from any kind of tobacco control intervention – primarily tax increases but also, in this instance, standardised packaging – became particularly strident in South Africa after 2006.

In 2006, the Tobacco Institute of Southern Africa (TISA)was re-launched under the strategic priority of "Ilicit Trade in the RSA and the SACU/SADC regions," among others.[17] TISA has strongly expressed its view that illicit trade is a problem in South Africa, arguing that the illicit market is so large and growing that the government is losing substantial amounts of tax revenue, and that illicit trade in cigarettes is closely associated with organised crime.

[13] World Health Organisation. 2016. Plain packaging of tobacco products: evidence, design and implementation. Geneva, Switzerland: WHO Press. Available: http://apps.who.int/iris/bitstream/10665/207478/1/9789241565226_eng.pdf [2018, July 17].
[14] Hammond, D. 2014. Standardized Packaging of Tobacco Products: Evidence Review. Report Prepared on behalf of the Irish Department of Health. Available: http://health.gov.ie/wp-content/uploads/2014/06/2014-Ireland-Plain-Pack-Main-Report-Final-Report-July-26.pdf [2018, August 1].
[15] McNeill A, Gravely S, Hitchman SC, Bauld L, Hammond D, Hartmann-Boyce J. 2017. Tobacco packaging design for reducing tobacco use. *Cochrane Database of Systematic Reviews*. 4: CD011244. DOI:10.1002/14651858.CD011244.
[16] World Health Organization Framework Convention on Tobacco Control Conference of the Parties. 2008. *Guidelines for the implementation of Article 11 of the WHO FCTC (Decision FCTC/COP3(10))*. Geneva, Switzerland: World Health Organization Press. Available: http://www.who.int/fctc/guidelines/article_11.pdf [2018, July 17].
[17] Tobacco Institute of Southern Africa. 2016. *Our objectives and strategic priorities*. [Online]. Available: http://www.tobaccosa.co.za/about/our-objectives-strategic-priorities/ [2018, July 17].

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There has been a sizeable increase in illicit trade in cigarettes in South Africa in the past two or three years, and this is cause for concern. The fact that, between 2015 and 2017, the volume of tax-paid cigarettes has decreased by an unprecedented 20%, indicates that the illicit market is growing very rapidly. A recent study, funded by TISA and performed by IPSOS, had the subtext that the TISA members (mainly BAT, Philip Morris and Japan Tobacco) were the victims of illicit trade and that most of the illicit cigarettes were produced in South Africa by small companies associated with the Fair-trade Independent Tobacco Association (FITA). Other than presenting themselves as victims of illicit trade, TISA presents itself as a "partner" to government in the quest to stamp out illicit cigarettes. Recent books by Johan van Loggerenberg ("Rogue") and Jacques Pauw ("The President's Keepers"), and testimony presented before the Nugent Commission suggests that prominent tobacco companies have misused government resources to fight their competitive battles, and have greatly undermined SARS. This, and other institutional failures at SARS, explains much of the decrease in tax-paid cigarette sales, and, by implication, the very rapid growth in the illicit market.

The tobacco industry has a clear interest in exaggerating the size of the illicit market. Independent researchers have shown that the tobacco industry's previous estimates are either overstated[18,19], or are subsequently manipulated to fit the narrative that the problem *now* is worse than it has ever been.[20]

In addition to the fact that it is in the tobacco industry's interest to exaggerate the size of the illicit market, there is no rational basis on which to argue that standardised packaging will increase illicit trade. Tobacco packs are already easily counterfeited, which is why, globally, the industry is required to add covert markings to distinguish legitimate products from counterfeit. Standardised packs will have all the health warnings and other markings required on current packs, so they will be no easier to counterfeit than branded packs. Appendix 3 provides references to peer-reviewed academic research that found no increase in the illicit tobacco trade following the introduction of standardised packaging in Australia, the first country in the world to adopt this legislation. The illicit trade argument is typically invoked to discourage legitimate regulation and to dispute the effectiveness of tobacco control measures when sales decline after implementation.

[18] Blecher, E. 2010. A mountain or a molehill: is the illicit trade in cigarettes undermining tobacco control policy in South Africa?. *Trends in Organized Crime*. 13 (4): 299-315.
[19] Van Walbeek, C.P. 2014. Measuring changes in the illicit cigarette market using government revenue data: the example of South Africa. *Tobacco Control.* 0:1-6. doi:10.1136/tobaccocontrol-2013-051178.
[20] Van Walbeek, C.P. & Shai, L. 2015. Are the tobacco industry's claims about the size of the illicit cigarette market credible? The case of South Africa. *Tobacco Control.* 24(e2):e142-6doi: 10.1136/tobaccocontrol-2013-051441.

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Globally, there is evidence that the tobacco industry has actively aided and abetted illicit trade as a consequence of its practice of round-tripping in Asia[21, 22, 23], Africa[24,] Latin America[25]. Many cigarette packs are sold Duty-Not-Paid (DNP). This means that the packs have been marked for export, but they never leave the country, meaning that the excise tax (and often VAT) due on these packs is not paid. This allows them to be sold in the 'home' country at a lower cost.

The International Consortium of Journalists has established that this is the case in Hong Kong, Canada, Colombia, Italy, and the United States.[26] There is also evidence of British American Tobacco's involvement in the illicit trade of cigarettes across the African continent, based on internal documents from the Guildford Depository and the BAT Document Archive.[27]

If the South African government is to address the issue of smuggling and the illicit trade in tobacco products appropriately, it should do so without the influence or assistance of the industry. The tobacco industry's interests are not aligned with those of public health. It is in its interest to portray the illicit market in a way that will have the least detrimental impact on its profitability. A more productive strategy in fighting the illicit trade in tobacco would be for South Africa to ratify and implement the World Health Organization's Illicit Trade Protocol. This would entail, among other things, implementing a tracking and tracing system on tobacco products, implementing a tax stamp, and imposing a requirement on the tobacco industry that they perform due diligence on their customers. Failing to implement standardised packaging will not improve the illicit trade situation, but will represent a missed opportunity to improve health outcomes for South Africans.

2.2 "Standardised packaging will decrease employment and tax revenues due to the expected increase in illicit trade"

There is no rational basis for the prediction that the introduction of standardised packaging will result in an increase in illicit trade. Alarmist arguments regarding decreases in employment and tax revenues following its introduction are spurious. The tobacco industry's reference to job losses in particular are merely a scare-tactic to dissuade government from implementing a policy that has proven effective in reducing sales of tobacco products (see Appendix 2).

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[21] Collin, J., LeGresley, E., MacKenzie, R. *et al.* 2004. Complicity in contraband: British American Tobacco and cigarette smuggling in Asia. *Tobacco Control*. 13:ii104–11. doi:10.1136/tc.2004.009357

[22] Lee, K. & Collin, J. 2006. "Key to the future": British American Tobacco and cigarette smuggling in China. *PLoS Med*.3:e228. doi:10.1371/journal.pmed.0030228

[23] Nakkash, R. & Lee K. 2008. Smuggling as the "key to a combined market": British American Tobacco in Lebanon. *Tobacco Control*. 17:324–31. doi:10.1136/tc.2008.025254

[24] LeGresley, E., Lee, K., Muggli, M.E, *et al.* 2008. British American Tobacco and the "insidious impact of illicit trade" in cigarettes across Africa. *Tob Control*. 17:339–46. doi:10.1136/tc.2008.025999

[25] Pan American Health Organization. 2002. Profits over people. [Online]. Available: http://www1.paho.org/English/DD/PUB/profits_over_people.pdf [2016, August 30].

[26] Marsden, W., Beelman, M., Birnbauer, B. *et al.* 2001. Tobacco companies linked to criminal organizations in lucrative cigarette smuggling. [Online]. Available: https://www.icij.org/node/460/tobacco-companies-linked-criminal-organizations-lucrative-cigarette-smuggling [2016, August 30].

[27] Collin, J., *et al.* 2008. British American Tobacco and the "insidious impact of illicit trade" in cigarettes across Africa. *Tobacco Control.* 17 (5):339-346 doi:10.1136/tc.2008.025999

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The economy is dynamic and flexible. Jobs are continuously created and destroyed as the structure of the economy changes, and as demand and supply patterns change. An analysis that considers the direct, indirect and induced employment associated with a particular industry will always arrive at a large number of people "dependent" on that industry. However, this is disingenuous economics, because those jobs will not permanently disappear when an industry shrinks. If people were to buy fewer cigarettes, some people in the tobacco manufacturing industry and the tobacco-growing sector would be retrenched. Of course, that is associated with disruption for the people involved, and this is regrettable. But that is the nature of a dynamic economic system.

However, rather than spending their money on tobacco, people will spend it on other goods and services, to the benefit of industries producing such goods and services. This will stimulate the demand for more workers. Most workers in the tobacco value chain have easily transferable skills. For example, labourers on tobacco farms can quite easily be trained to work on farms producing other crops. Not many agricultural jobs are at risk because of the tobacco control legislation, because tobacco leaf can easily be exported, should domestic demand decrease.

Despite the rhetoric in its submission to the SEIA process and the media, the actions by the tobacco industry do not suggest that it has a genuine concern for employment in South Africa. BATSA has a history of pointing to tobacco control measures as the source of employment losses, when these losses were typically the consequence of its own business strategy. For example, BATSA alleges that South Africa's tobacco control policies led to the 2008 closure of the BAT Paarl factory and 350 job losses, putting up to 10,000 associated jobs (including farmers) at risk.[28] However, according to internal company documents, BATSA closed the Paarl factory because it was obsolete and inefficient and they relocated 50 workers to the modern Heidelberg factory.[29] Mechanisation, much more than tobacco control policy, has been responsible for job losses.[30] Thus, while it is expedient for BATSA to have a pro-employment rhetoric, its actions do not support that rhetoric.

2.3 "Standardised packaging will result in efficiency losses and a corresponding increased security risk in retailer operations, especially for small retailers"

Studies from Australia, which introduced standardised packaging in December 2012, show that, after an initial period of adjustment, the day-to-day operations of retailers are not negatively affected by

[28] Action on Smoking and Health. 2011. *Tobacconomics*. Available: https://web.archive.org/web/20160418045701/http://www.ash.org.uk/files/documents/ASH_774.pdf [2018, July 20]
[29] Joossens L. 2010. European Cancer Leagues. *The use of pseudo-economics*. Presentation, Bath 2010. Cited in Action on Smoking and Health. 2011. *Tobacconomics*. Available: https://web.archive.org/web/20160418045701/http://www.ash.org.uk/files/documents/ASH_774.pdf [2018, July 21].
[30] Buck, D. *et al.* 1995. Tobacco and jobs - the impact of reducing consumption on employment in the UK.

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the introduction of standardised packaging. This body of research also does not support any claims that small retailers are negatively impacted by standardised packaging.[31, 32, 33]

2.4 "Reducing the appeal of tobacco products to consumers has no impact on smoking behaviour"

In their submission to the SEIA process, BATSA argued that reducing the appeal of tobacco packaging through standardised packaging will not reduce the rate of smoking initiation or increase the rate of smoking cessation because "the appeal/attractiveness of branded packaging is not a factor that causes smoking." They then cited several studies to support their assertion. The evidence submitted by BATSA during the SEIA, and our rejection of the evidence they cite, is presented in Appendix 3.

In addition to the problems with the evidence cited by BATSA, the importance of marketing to the tobacco industry is clearly indicated in its internal industry documents. These documents reveal a long-held understanding by the tobacco industry that cigarette packets and tobacco pouches represent mobile advertisements. One Rothmans document from 1982, for example, stated that the company was: "very aware that every customer carries the Rothmans logo, on the package, with him or her all the time. That package comes out many times a day, and every time it is seen makes a personal comment about the person who carries and shows it."[34]

In 1994, Philip Morris said: "In the absence of any other marketing messages, our packaging -- comprised of the trademark, our design, color and information -- is the sole communicator of our brand essence. Put another way -- when you don't have anything else -- our packaging is our marketing."[35]

As standard advertising tools are becoming increasingly out-of-bounds to the tobacco industry, the only remaining "advertising" medium is the cigarette pack. The tobacco industry claims that cigarette packaging has no bearing on people's smoking behaviour; however advertising works for every other industry. The tobacco industry has long argued that tobacco advertising is aimed at building brand loyalty, not trying to persuade young people to smoke or smokers to continue and not quit. However, others within the advertising industry have disputed this categorically. Advertising executive Emerson Foote, former Chairman of the Board of McCann-Erickson, which handled $20 million in tobacco account sales, argued that: "The cigarette industry has been artfully maintaining that cigarette advertising has nothing to do with total sales. This is complete and utter nonsense. I am always

[31] Bayly, M., Scollo, M. & Wakefield, M.A. 2014. No lasting effects of Plain Packaging on cigarette pack retrieval time in small Australian retail outlets. *Tobacco control*. 24(March):3–5. DOI: 10.1136/tobaccocontrol-2014-051683.
[32] Bayly, M., Scollo, M., & Wakefield, M. A. 2014b. Availability of illicit tobacco in small retail outlets before and after the implementation of Australian plain packaging legislation. *Tobacco Control*, 1–7.
[33] Scollo, M., Zacher, M., Durkin, S., & Wakefield, M. A. 2014. Early evidence about the predicted unintended consequences of standardised packaging of tobacco products in Australia: a cross-sectional study of the place of purchase, regular brands and use of illicit tobacco. *BMJ Open*. 4(8): e005873.
[34] Rothman's of Pall Mall Canada Limited, *Rothmans of Pall Mall Canada Limited 1957-1982 history*. Toronto: Rothman's of Pall Mall Canada Limited.
[35] Hulit,M. 1994. *Marketing issues corporate affairs conference*. 27 May 1994. Available: https://www.industrydocumentslibrary.ucsf.edu/tobacco/docs/#id=qsbd0116 [2018, July 18].

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amused by the suggestion that advertising, a function that has been shown to increase consumption of virtually every other product, somehow miraculously fails to work for tobacco products."[36]

There is also a wealth of evidence which suggests that standardised packaging reduces false beliefs about the risks of smoking, increases the efficacy of health warnings, reduces consumer appeal among youth and young adults, and may promote smoking cessation among established smokers (see Appendix 2).

2.5 "Standardised packaging is unconstitutional and/or illegal"

The tobacco industry in South Africa, and around the world, has a long record of using or threatening to use lawsuits to delay and prevent the implementation of tobacco control policies.[37,38,39] Despite spending a great deal of money in fighting these cases, their success rate has been very poor. Recently Australia (December 2015), the United Kingdom (May 2016) and Uruguay (July 2016) have had favourable rulings in relation to standardised packaging. These precedents make it easier for a country like South Africa to pass such legislation. It should also be noted that the WHO FCTC was invoked by Australia and Uruguay in defence of challenges to their tobacco product packaging and labelling measures in international trade and investment cases (via bilateral investment treaties in both countries, and in the case of Australia, an additional challenge brought before the WTO).[40]

2.6 "Standardised packaging lowers cigarette prices leading to an increase in consumption and undermining the public health objective of reducing smoking"

Standardised packaging is likely to cause prices to become the primary basis for competition amongst tobacco manufacturers. This will lead to a relative reduction in prices of cigarettes and renders down-trading inevitable for people who will continue smoking following the introduction of standardised packaging. However, standardised packaging is one part of a comprehensive tobacco control strategy. National Treasury is urged to use price and tax policy to mitigate these adverse effects, as has happened in Australia. Tax policy has been shown to be a particularly effective means to influence smoking behaviour and improve population health outcomes globally,[41] and in South Africa in particular.[42]

[36] Foote E. A piece of my mind: Advertising and tobacco. JAMA 1981; 245: 1667-1668.
[37] Daynard, R. & Sweda Jr, E. 1996. Tobacco Industry Tactics. *British Medical Bulletin*. 52(1): 183-192.
[38] Nixon, M.L., Mahmoud, L. & Glantz, S.A. 2004. Tobacco industry litigation to deter local public health ordinances: the industry usually loses in court. *Tobacco Control* . 13:65-73.
[39] Tumwine, J. 2011. Implementation of the Framework Convention on Tobacco Control in Africa: current status of legislation. *International Journal of Environmental Research and Public Health.* 8 (11): 4312–31. DOI: 10.3390/ijerph8114312
[40] C/hung-Hall, J., Craig, L., Fong, G. T., Gravely, S. & Sansone, N. 2016. Impact of the WHO Framework Convention on Tobacco Control on the Implementation and Effectiveness of Tobacco Control Measures: A Global Evidence Review. ITC Project. University of Waterloo, Waterloo, Ontario, Canada.
[41] International Agency for Research on Cancer. 2011. *IARC Handbook of Cancer Prevention -Volume 14.* Geneva, Switzerland: World Health Organisation; World Health Organization. 2010. World Health Organization Technical Manual. Geneva, Switzerland: World Health Organisation.
[42] Chelwa, G., Blecher, E. & van Walbeek, C. 2016. Evaluating South Africa's tobacco control policy using a synthetic control method. *Tobacco Control.* 0:1–9. doi:10.1136/tobaccocontrol-2016-053011

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3. Point of Sale display bans

The impact of POS display bans have on public health outcomes is well-documented. We provide a summary of this evidence in Appendix 4. Children and young people are particularly influenced by tobacco imagery.[43, 44, 45, 46] There is further evidence that indicates that point of sale exposure to tobacco products stimulated purchases and made it more difficult for smokers to quit.[47, 48, 49] A comparative study of Australia, Canada, the United Kingdom and the United States found point of sale display bans resulted in lower exposure to tobacco marketing, as well as less frequent impulse buying of cigarettes.[50] Below, we respond to tobacco industry arguments against the introduction of a point of sale display ban on tobacco products.

3.1 "A point of sale display ban will lower cigarette prices which will lead to an increase in consumption and undermine the public health objective of reducing smoking"

A point of sale display ban will exacerbate price competition between manufacturers and ultimately result in lower cigarette prices. While this may be the case, a point of sale display ban is one part of a comprehensive tobacco control strategy. As already mentioned, tax policy is a very effective part of tobacco control strategy, and particularly so in South Africa. The adverse effect of lower cigarette prices can be mitigated by National Treasury designing price and tax policy specifically for this purpose. Tax policy needs to be used to offset any potential price decreases resulting from the policies introduced.

3.2 "Costs will be incurred by retailers, impacting their profitability and reducing employment. Small retailers will be most adversely affected. "

The impact of lower prices from increased price competition following a point of sale display ban is to squeeze profit margins for retailers selling tobacco products (in both formal and informal sectors). While there are financial implications to a complete point of sale display ban for retailers, any concern over the immediate economic consequences must be weighed against the right to health of South Africans, and the economic and social benefits of a healthier population. Healthier people save money

[43] Paynter, J. & Edwards, R. 2009. The impact of tobacco promotion at the point of sale: A systematic review. *Nicotine and Tobacco Research*. 11(1):25–35. DOI: 10.1093/ntr/ntn002
[44] Paynter, J., Edwards, R., Schluter, P.J. & McDuff, I. 2009. Point of sale tobacco displays and smoking among 14-15-year olds in New Zealand: a cross-sectional study. *Tobacco control*. 18(4):268–274. DOI: 10.1136/tc.2008.027482.
[45] Spanopoulos, D., Britton, J., McNeill, A., Ratschen, E. & Szatkowski, L. 2014. Tobacco display and brand communication at the point of sale: implications for adolescent smoking behaviour. *Tobacco control*. 23(1):64–9. DOI: 10.1136/tobaccocontrol-2012-050765.
[46] Henriksen, L., Schleicher, N.C., Feighery, E.C. & Fortmann, S.P. 2010. A longitudinal study of exposure to retail cigarette advertising and smoking initiation. *Pediatrics.* 126(2):232-238.
[47] Germain, D., McCarthy, M. & Wakefield, M. 2010. Smoker sensitivity to retail tobacco displays and quitting: a cohort study. *Addiction*. 105(1):159–163.
[48] Burton, S., Clark, L. & Jackson, K. 2012. The association between seeing retail displays of tobacco and tobacco smoking and purchase: findings from a diary-style survey. *Addiction*. 107(1):169–175.
[49] Carter, O.B.J., Mills, B.W. & Donovan, R.J. 2009. The effect of retail cigarette pack displays on unplanned purchases: Results from immediate post-purchase interviews. *Tobacco Control.* 18(3):218-21
[50] Li, L., Borland, R., Fong, G.T., Thrasher, J.F., Hammond, D. & Cummings, K.M. 2013. Impact of point-of-sale tobacco display bans: Findings from the International Tobacco Control Four Country Survey. *Health Education Research*. 28(5):898–910. DOI: 10.1093/her/cyt058.

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because they are relieved of a financial burden of extra medical and personal expenses, money which can be used to stimulate growth and employment in other areas of the economy.

3.3 "A point of sale ban will increase illicit trade"

A study, by two tobacco industry associates, suggests that point of sale display bans in the provinces of Canada have led to increases in illicit trade.[51] No other studies on this issue have identified an association between point of sale display bans and illicit trade.[52] Furthermore, counterfeited cigarettes are increasingly expertly made, and can only be identified through close inspection by enforcement officers. Thus, whether or not they are on display is largely irrelevant to illicit trade.

3.4 "Point of sale display bans will not actually reduce smoking prevalence"

In 2008, a review of the evidence relating to point of sale display bans concluded that there is good evidence to support the imposition of controls which put tobacco completely out of sight at point of sale.[53] Since then, several new studies and a systematic review of the evidence published have all reinforced this conclusion. Three Australian studies found that if smokers are exposed to cigarettes at the point of sale it stimulated purchases and made it more difficult to quit.[54,55,56].A comparative study of Australia, Canada, the UK and the US found that bans on point of sale tobacco displays resulted in lower exposure to tobacco marketing and less frequent impulse purchasing of cigarettes.[57] The systematic review[58] found evidence that images of tobacco packs elicit cravings for cigarettes among smokers and can lead to impulse purchasing and urges to start smoking amongst recent ex-smokers. The only study which counters these findings by claiming that point of sale display bans are associated with an increase in prevalence was conducted by two authors with long-term tobacco industry associations.[59]

[51] Basham, P. & Luik, J. 2011. Tobacco display bans: A global failure. *Economic Affairs*. 31(1):96-102.
[52] Cancer Research UK. 2015. Cancer Research UK Briefing: Point of Sale Tobacco Displays. Available: https://www.cancerresearchuk.org/sites/default/files/feb2014_pointofsale_briefing_final.pdf [2018,August].
[53] Hastings, G., Mackintosh, A.M., Holme, I., Davies, K., Angus, K. & Moodie, C. 2008. Point of Sale Display of Tobacco Products. Stirling: Centre for Tobacco Control Research, University of Stirling, The Open University and Cancer Research UK.
[54] Burton, S., Clark, L. & Jackson, K. 2012. The association between seeing retail displays of tobacco and tobacco smoking and purchase: findings from a diary-style survey. *Addiction.* 107(1):169
[55] Carter, O.B.J., Mills, B.W. & Donovan, R.J. 2009. The effect of retail cigarette pack displays on unplanned purchases: Results from immediate post purchase interviews. *Tobacco Control*. 18(3):218-21.
[56] Germain, D., McCarthy, M. & Wakefield, M. 2010. Smoker sensitivity to retail tobacco displays and quitting: A cohort study. *Addiction.* 105(1):159-63.
[57] Li, L., Borland R, Fong GT, Thrasher JF, Hammond D, Cummings KM. Impact of point-of-sale tobacco display bans: findings from the International Tobacco Control Four Country Survey. Health Educ Res 2013;28(5):898-910.
[58] Paynter, J. & Edwards, R. 2009. The impact of tobacco promotion at the point of sale: a systematic review. *Nicotine Tob Res*. 11(1):25-35.
[59] Basham, P. & Luik, J. 2011. Tobacco display bans: A global failure. *Economic Affairs* 31(1):96-102.

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In conclusion

The ultimate goal of tobacco control interventions is to reduce tobacco consumption. A reduction in sales will hurt the tobacco industry, which is why they are so vehemently opposed to it. Despite the tobacco industry's claims of providing livelihoods to many tens of thousands of people, most of the income generated by the tobacco industry is channelled to a modest number of wealthy shareholders of large tobacco companies. The cost of smoking is borne primarily by smokers, their families, and society. To the extent that the proposed legislative amendments are successful in reducing these costs, they would be an economic benefit to society. I implore the Minister to honour the country's commitment to implement evidence-based tobacco control policies and to place the public health of South Africans above the commercial interests of a relatively small group of people.

Thank you for allowing us to comment on the Draft Control of Tobacco Products and Electronic Delivery Systems Bill. Of course, if you require any further information or clarification, I will be grateful to engage with you.

Kind regards,

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Appendix 1. Summary of international evidence on the impact of indoor smoking bans, to be read in conjunction with section 1 ("Control of smoking in public places")

Authors - Title	Study description synopsis	Impact category	Description of results/Conclusion	Direction of impact
Van Walbeek, C., Blecher, E. & van Graan, M. 2007. Effects of the tobacco products control amendment act of 1999 on restaurant revenues in South Africa - A survey approach. *South African Medical Journal*. 97(3):208–211. DOI: 10.1111/j.1813-6982.2006.00052.x.	Researchers conducted a telephone survey of 1,011 restaurants in South Africa from a sample of searched publicly accessed Internet databases. They investigated the impact of the restrictions on smoking in indoor public places on the financial situation of the hospitality industry.	Economic impact	- 50% of the restaurants complied to the policy, spending an average of R67 000 (median of R25 000). - The overall impact on restaurants revenue was limited, with 59% reporting no change, 22% an increase and 19% a decrease as a result of the legislation. - Franchised restaurants experienced a net gain in revenue (34% reporting an increase, 16% reporting a decrease, and 50% reporting no change) The policy is well accepted by non-smokers (100%) and smokers (87%)	Minimal negative effect, overall no effect

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Stolzenberg, L. & D'Alessio, S.J. 2007. Is non-smoking dangerous to the health of restaurants?. *Evaluation review*. 31(1):75–92. DOI: 10.1177/0193841X06284814.	The study used an interrupted times-series autoregressive integrative moving average to assess the effect of indoor smoking ban on revenue rates of both non-alcohol and alcohol-serving restaurants in California, USA.	Economic impact	- Revenues for alcohol-serving restaurants dropped immediately by 4% after the smoking ban and later return to their normal levels. - Indoor smoking ban had little observable impact on the revenue rate for restaurants overall and for non-alcohol-serving restaurants.	Minimal negative impact on revenue
Pyles, M.K., Mullineaux, D.J., Okoli, C.T.C. & Hahn, E.J. 2007. Economic effect of a smoke-free law in a tobacco-growing community. *Tobacco control*. 16(1):66–8. DOI: 10.1136/tc.2006.017012.	The study used a fixed-effects time series to estimate the effect of the smoke-free law on employment and ordinary least squares to estimate the effect on business openings and closings for all restaurants and bars in Lexington Fayette County, Kentucky in USA.	Economic impact	- The policy had a positive and significant relationship with restaurant employment, but not with bar employment. - It had significant association with employment in contiguous counties and openings or closures in alcohol-serving and or non-alcohol-serving.	No effect
Lal, A. & Siahpush, M. 2009. The effect of smoke-free policies on revenue in bars in Tasmania, Australia. *Tobacco control*. 18(5):405–8. DOI: 10.1136/tc.2008.028589.	The study used a linear regression approach on data from Australian Bureau of Statistics to examine the impact of smoke free policy on the revenue of bar in Tasmania in Australia.	Economic impact	The smoke-free policy had no effect on sales turnover.	No effect

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Guerrero Lopez, C.M., Jimenez Ruiz, J.A., Reynales Shigematsu, L.M. & Waters, H.R. 2011. The economic impact of Mexico City's smoke-free law. *Tobacco Control*. 20(4):273–278. DOI: 10.1136/tc.2010.036467.	The study used a before and after study design and differences-in-differences regression models with fixed effects to assess the impact of smoke free air laws on revenues, employment and payments to employees in Mexico's hospitality industry.	Economic impact	- Controlling for other observable factors and the fixed effects, the revenue of restaurants increased by 24.8% after the policy. The difference was not statistically significant and the restaurants on average did not suffer economically. - Total wages and employment increased by 28.2% and 16.2%, respectively. The revenue of nightclubs, bars and taverns reduced by 1.5% while wages and employment increased by 0.1% and 3.0%, respectively. - None of these effects are statistically significant in multivariate analysis. - Mexico City's experience suggests that smoke-free laws in Mexico and elsewhere will not hurt economic productivity in the restaurant and bar industries.	No significant effect
Pyles, M.K. & Hahn, E.J. 2012. Economic effects of smoke-free laws on rural and urban counties in Kentucky and Ohio. *Nicotine and Tobacco Research*. 14(1):111–115. DOI: 10.1093/ntr/ntr123.	The study used fixed effects time series models to examine the effectiveness of state-wide smoke-free laws relative to local ordinances in Kentucky State, USA.	Economic impact	There was no evidence of a disproportionate change in economic activity in Ohio or Kentucky border counties relative to their non-border counterparts; No evidence of a relation between Ohio's smoke-free law and economic activity in Kentucky border counties; The law generated a positive influence on wages and number of establishments in Ohio border counties.	No effect on economic activities but a positive effect on wages

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Huang, J. & Chaloupka, F.J. 2013. The economic impact of state cigarette taxes and smoke-free air policies on convenience stores. *Tobacco Control*. 22(2):91–6. DOI: 10.1136/tobaccocontrol-2011-050185.	The study used a two-way fixed effect regression model to investigate whether increasing state cigarette taxes and/or enacting smoke-free air policies had a negative impact on store profits in the United States.	Economic impact	-Controlling for taxes and other tobacco control policies, State-level smoking free air (SFA) policies do not correlate with convenience store density in a state, even gas stations were included. - Contrary to tobacco industry and related organisations' claims, higher cigarette taxes and stronger SFA policies do not negatively affect convenience stores.	No effect
Cornelsen, L. & Normand, C. 2014. Impact of the Irish smoking ban on sales in bars using a large business-level data set from 1999 to 2007. *Tobacco Control*. 23(5):443–448. DOI: 10.1136/tobaccocontrol-2013-051145.	The study used fixed effects and weighted ordinary least square models to evaluate the economic impact of workplace smoking bans on the value of sales in bars in Ireland.	Economic impact	- The overall impact of the Irish smoking ban on bar sales appears to be very small. - The ban was associated with an increase in sales among medium to large bars in the Border-Midland-West (more rural) region of Ireland, and a small reduction in sales among large bars in the more urban, South-East region. - These findings provide further supporting evidence that comprehensive smoke-free workplace legislation does not harm hospitality businesses while having positive health effects	Overall negligible, despite mixed results in some counties

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Talias, M.A., Savva, C.S., Soteriades, E.S. & Lazuras, L. 2015. The effect of smoke-free policies on hospitality industry revenues in Cyprus: An econometric approach. *Tobacco Control*. 24(E3):e199–e204. DOI: 10.1136/tobaccocontrol-2013-051477.	The study used pooled ordinary least squares, fixed effects and random effects generalized least squares to examine the impact of smoke-free policies on revenues of the hospitality industry in Cyprus.	Economic impact	- Study showed that the implementation of the smoke-free policy did not have negative effects on the hospitality industry profitability - Conclude that even in regions with relatively high smoking rates, pro-smoking societal attitudes and weak social norms against tobacco control, and even during periods of economic crisis, smoke-free legislation does not impact negatively on hospitality industry revenues and if anything may lead to a small positive increase.	Small positive effect
Lee, J.T., Glantz, S.A. & Millett, C. 2011. Effect of smoke-free legislation on adult smoking behaviour in England in the 18 months following implementation. *PLoS ONE*. 6(6):1–6. DOI: 10.1371/journal.pone.0020933.	The study used logit and linear regression models to examine the impact of the smoke-free policy in England on smoking prevalence, cigarette consumption and location of smoking.	Public health impact	- Smoking prevalence (current smoker) decreased from 25% in 2003 to 21% in 2008 and the mean number of cigarettes consumed daily by smokers decreased from 14.1 in 2003 to 13.1 in 2008 - Widespread compliance with the legislation was noted and declines in smoking prevalence and consumption continued along existing trends; they did not accelerate during the 18 months immediately following implementation.	Positive effect on smoking prevalence and consumption.

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Evans, W., Farrelly, M. & Montgomery, E. 1996. Do Workplace Smoking Bans Reduce Smoking? (5567). Cambridge, MA. DOI: 10.3386/w5567.	Using pooled cross-sectional surveys in the USA, the study estimated changes in smoking prevalence and smoking intensity using a bivariate probit regression model.	Public health impact	- Workplace smoking ban reduces smoking by about 5% and average daily consumption by about 10% among smokers - Impact is greatest for those with longer work weeks - The rapid increase in workplace smoking bans can explain the recent sharp fall smoking among workers relative to non-workers	Positive effect on smoking prevalence and intensity.
Fichtenberg, C.M. & Glantz, S. A. 2002. Effect of smoke-free workplaces on smoking behaviour: systematic review. *BMJ (Clinical research ed.)*. 325(7357):188. DOI: 10.1136/bmj.325.7357.188.	The study was a systematic review and meta-analysis of articles from the USA, Australia, Canada and Germany.	Public health impact	- Totally smoke-free workplaces are associated with reductions in prevalence of smoking of 3.8% (95% confidence interval 2.8% to 4.7%) and 3.1 (2.4 to 3.8) fewer cigarettes smoked per day per smoker. -If all workplaces became smoke-free, consumption per capita would drop by 4.5% in the US and 7.6% in the UK, which require a tax increase of $1.11 and £4.26 if tax policy was to be used	Positive effect

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Khuder, S.A. *et al.* (2007). The impact of a smoking ban on hospital admissions for coronary heart disease. *Preventive Medicine* 45(1): 3-8. DOI:10.1016/j.ypmed.2007.03.011	The study, conducted in the US state of Ohio adopted a quasi-experimental interrupted time-series. The authors used Autoregressive Integrated Moving Average (ARIMA) models to observe the trends.	Public health impact	- A reduction in admission rates for coronary heart disease was achieved in Bowling Green compared to the control city, where rates were decreased significantly by 39% after 1 year and by 47% after 3 years following the implementation of the ordinance. - ARIMA models revealed a statistically significant downward trend in monthly admission rates for coronary heart disease (Bowling Green, ω=−1.69, p=0.036 vs. Kent, ω=−1.14, p=0.183) and support the hypothesis that the ordinance had a significant impact on admission rates for coronary heart disease.	Positive effect
Hyland, A. *et al.* (2008). A 32-country comparison of tobacco smoke derived particle levels in indoor public places. *Tobacco Control*. 17(3):159–165. DOI: 10.1136/tc.2007.020479.	The study used cross-sectional data from several countries. The analysis method involved a comparisons of geometric mean for particulate matter concentrations (PM2.5).	Public health impact	Geometric mean PM2.5 levels were highest in Syria (372 mg/m3), Romania (366 mg/m3) and Lebanon (346 mg/m3), while they were lowest in the three countries that have nationwide laws prohibiting smoking in indoor public places (Ireland at 22 mg/m3, Uruguay at 18 mg/m3 and New Zealand at 8 mg/m3). On average, the PM2.5 levels in places where smoking was observed was 8.9 times greater (95% CI 8.0 to 10) than levels in places where smoking was not observed	Positive effect

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Grassi, M.C. *et al*. (2009) - A smoking ban in public places increases the efficacy of bupropion and counselling on cessation outcomes at 1 year. cessation outcomes at 1 year. *Nicotine and Tobacco Research*. 11(9):1114–1121. DOI: 10.1093/ntr/ntp110.	The study used data from Italy using a before and after study design. The authors used propensity score matching method to determine the impact of the policy.	Public health impact	- Introduction of the ban resulted in 52% reduced odds of continued smoking at 12 months among the GCT + bupropion group and 41% reduced odds in the GCT-only group.	Positive effect
Callinan, J.E. *et al*. (2010). Legislative smoking bans for reducing secondhand smoke exposure, smoking prevalence and tobacco consumption. *Cochrane database of systematic reviews (Online)*. (4):CD005992. DOI: 10.1002/14651858.CD005992.pub2.	The authors conducted a systematic review of studies from multiple countries.	Public health impact	- There was consistent evidence that smoking bans reduced exposure to SHS in workplaces, restaurants, pubs and in public places and a greater reduction in exposure to SHS in hospitality workers compared to the general population. - Failed to detect any difference in self-reported exposure to SHS in cars. - There was no change in either the prevalence or duration of reported exposure to SHS in the home as a result of implementing legislative bans. - Twenty-three studies reported measures of active smoking, often as a co-variable rather than an end-point in itself, with no consistent evidence of a reduction in smoking prevalence attributable to the ban, however tobacco consumption was reduced in studies where prevalence declined. - There was consistent evidence of a reduction in hospital admissions for cardiac events as well as an improvement in some health indicators after the ban. - There is an increase in support for and compliance with smoking bans after the legislation.	Positive effect

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Mackay, D.F., Haw, S., Pell, J.P. (2011) Impact of Scottish Smoke-Free Legislation on Smoking Quit Attempts and Prevalence. PLoS ONE 6(11): e26188. https://doi.org/10.1371/journal.pone.0026188	Using time-series data from Scotland, the authors used Box-Jenkins autoregressive integrated moving averages (ARIMA) to assess impact smoke free legislation in smoking quit attempts and prevalence.	Public health impact	- Following implementation of the legislation, the NRT costs fell exponentially and significantly by around 26% per month (p,0.001), which was higher than expected prior to implementation. A twelve months reduction not significantly different to the monthly norms. - Smoking prevalence fell by 8.0% overall, from 31.3% in 1999 to 23.7% in 2010, relatively higher than the decline in the quarter prior to implementation (1.7%). - The increased quitting attempt after the first three months was not sustained.	Positive effect on prevalence rates, but temporary effect on quitting attempts.
Bajoga, U. *et al*. (2011) - Does the introduction of comprehensive smoke-free legislation lead to a decrease in population smoking prevalence? *Addiction.* https://doi.org/10.1111/j.1360-0443.2011.03446.x	The study used data from multiple countries. Using a before and after study design, they used segmented regression methods to determine the impact of smoke free legislation on smoking prevalence.	Public health impact	- In all but three locations there was a statistically significant decline in smoking prevalence prior to the introduction of smoke-free legislation. - In two locations, Washington and the Republic of Ireland, there was an immediate decline in the level of smoking prevalence at the introduction of legislation. - In Six American states there was a significant change in the rate of decline in smoking prevalence, with smoking prevalence declining more steeply in the post-legislation period compared to the pre-legislation period. - No change in the level or trend of population smoking prevalence was seen in 13 of the 21 locations studied.	Positive effect

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Issa, J.S. *et al.* (2011). The effect of Sao Paulo's smoke-free legislation on carbon monoxide concentration in hospitality venues and their workers. *Tobacco control*. 20(2):156–162. DOI: 10.1136/tc.2010.037614.	The study used data from Sao Paulo, Brazil. The authors used a before and after study design. Using both one-way and two-way Analysis of Variance (ANOVA), they observed the effect of smoke free legislation on the air quality in hospitality venues.	Public health impact	- The policy significantly reduced the carbon monoxide concentration in hospitality avenues and in their workers, both smokers and non-smokers. -The pre-ban concentration in hospitality avenues was 4.57 (3.70) ppm for indoor area, 3.79 (2.49) ppm for semi-open, and 3.31 (2.2) ppm for open area; relative to 1.35 (1.66) ppm, 1.16 (1.14) ppm, and 1.31 (1.39) ppm, respectively for the post-ban. The pre-ban concentration was 15.78 (9.76) ppm for smoking employees and 6.88 (5.32) ppm non-smoking employees whereas the post-ban was 11.50 (7.53) ppm and 3.50 (2.21) ppm, respectively. - The average CO concentration measured in the city was lower than 1 ppm during both pre-ban and post-ban periods.	Positive effect

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Agbenyikey, W. *et al*. (2011) – Second-hand tobacco smoke exposure in selected public places (PM2.5 and air nicotine) and non-smoking employees (hair nicotine) in Ghana. *Tobacco control*. 20(2):107–11. DOI: 10.1136/tc.2010.036012.	The study used data from Ghana in a before and after study design. The authors used scatter plots and spearman's correlation coefficients to determine the levels of secondhand smoke exposure in public places without smoke free air laws.	Public health impact	- Compared to non-smoking venues, smoking venues had markedly elevated PM2.5 (median 553 [IQR 259e1038] vs 16.0 [14.0e17.0] mg/m3) and air nicotine (1.83 [0.91e4.25] vs 0.03 [0.02e0.04] mg/m3) concentrations. - Hair nicotine concentrations were also higher in non-smoking employees working in smoking venues (median 2.49 [0.46e6.84] ng/mg) compared to those working in non-smoking venues (median 0.16 [0.08e0.79] ng/mg). - Hair nicotine concentrations correlated with self-reported hours of SHS exposure (r¼0.35), indoor air PM2.5 concentrations (r¼0.47) and air nicotine concentrations (r¼0.63). - SHS levels were unacceptably high in public places in Ghana where smoking is allowed, despite a relatively low-smoking prevalence in the country.	Positive effect

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Federico, B. *et al*. (2012). Impact of the 2005 smoke-free policy in Italy on prevalence, cessation and intensity of smoking in the overall population and by educational group. *Addiction*. 07(9):1677-86. doi: 10.1111/j.1360-0443.2012.03853.x	The study used cross-sectional data from Italy to determine the effect of a smoke free policy on prevalence, cessation and smoking intensity.	Public health impact	- Among males, smoking prevalence decreased by 2.6% (P = 0.002) and smoking cessation increased by 3.3% (P = 0.006) shortly after the ban, but both measures returned to pre-ban values in the following years. The policy has no potentials for achieving long term smoking prevalence with limited effects on inequality in smoking. - Among low-educated females, the ban was followed by a 1.6% decrease (P = 0.120) in smoking prevalence and a 4.5% increase in quit ratios (P < 0.001).	Positive effect, but temporary on smoking prevalence and cessation
López, M.J. *et al.* (2012). Impact of the 2011 Spanish Smoking Ban in Hospitality Venues: Indoor Second-hand Smoke Exposure and Influence of Outdoor Smoking. *Nicotine & Tobacco Research*. 15(5):992–996. DOI: 10.1093/ntr/nts218.	The authors used data from Spain in a before and after study. They used Wilcoxon and Mann–Whitney U tests as well as McNemar tests to determine associations between smoking bans and exposure to secondhand smoke at hospitality venues.	Public health impact	- Both nicotine and PM2.5 concentrations decreased by more than 90% (nicotine from 5.73 to 0.57 µg/m3, PM2.5 from 233.38 to 18.82 µg/m3). - After the law came into force, both nicotine and PM2.5 concentrations were significantly higher in venues with outdoor smokers close to the entrance than in those without outdoor smokers. - All the observational tobacco consumption variables significantly decreased (p < .001).	Positive effect

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Del Bono, E. *et al*. (2014). Seasonality in Smoking Behaviour: Re-evaluating the Effects of the 2005 Public Smoking Ban in Italy. I*ZA DP No. 7693*.	The authors used data from Italy in a before and after study. They used a difference-in-difference regression method to determine the effect of the public smoking ban on smoking prevalence.	Public health impact	- The 2005 public smoking ban in Italy had negligible effects on the population as a whole while it reduced smoking prevalence by 8.8% and number of cigarettes smoked by 13.9% among young and not married individuals, mainly women.	No effect
Seguret, F. *et al*. (2014) - Changes in hospitalization rates for acute coronary syndrome after a two-phase comprehensive smoking ban. *European Journal of Preventive Cardiology*. 21(12): 1575 - 1582	The authors used data from France in a before and after study. Using poisson regression, they estimated the effect of a comprehensive smoking ban on hospitalization rates for acute coronary syndrome.	Public health impact	- The hospitalization rate decreased by 12.8% (from 269 to 235/100,000) with a significant historical trend reduction (p<0.10–3) in all groups, but in young women. - This study did not demonstrate a significant effect of a two-phases smoking ban on ACS hospitalization rate.	No effect
Savage, M. (2014). Smoking outside: the effect of the Irish workplace smoking ban on smoking prevalence among the employed. *Health Econ Policy Law.* 9 (4):407-24. DOI: 10.1017/S1744133114000036	The authors used data from Ireland in a before and after study. They used a differences-in-differences regression method to determine the impact of a workplace smoking ban on smoking prevalence among the employed.	Public health impact	- The research finds that the workplace smoking ban did not induce a greater reduction in smoking prevalence among the employed population compared with the non-working population. - The evidence suggests a significantly larger decrease in smoking prevalence among the non-workers relative to the employed.	Positive effect

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Vuolo, M. *et al*. (2016). Independent and Interactive Effects of Smoking Bans and Tobacco Taxes on a Cohort of US Young Adults. *American Journal of Public Health*. DOI: 10.2105/AJPH.2015.302968	The study used data from the USA in a retrospective cohort study. Using multilevel logistic regression, the authors estimated both independent and interaction effects of smoking bans and tobacco taxes on cigarette consumption.	Public health impact	- For current smoking, found significant effects for comprehensive smoking bans, but not excise taxes. - Also found an interaction effect, with bans being most effective in locales with no or low taxes. For daily pack smoking, found significant effects for taxes, but limited support for bans.	Positive effect

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Appendix 2. Evidence on the impact of Standardised/Plain packaging, to be read in conjunction with section 2 ("Standardised packaging and labelling of tobacco products")

Authors (Year) - Title	Study details	Impact category	Results and conclusions	Direction of impact/comment
Hammond, D. (2010). "Plain Packaging" regulations for tobacco products: the impact of standardizing the colour and design of cigarette packs. *Salud Publica Mex*. 52 Suppl 2:S226-32.	Evidence review	Other impact	- The evidence indicates three primary benefits of Plain Packaging: increasing the effectiveness of health warnings, reducing false health beliefs about cigarettes, and reducing brand appeal especially among youth and young adults. - Overall, the research to date suggests that "plain" packaging regulations would be an effective tobacco control measure, particularly in jurisdictions with comprehensive restrictions on other forms of marketing.	NA

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Bayly, M., Scollo, M. & Wakefield, M.A. 2014. No lasting effects of Plain Packaging on cigarette pack retrieval time in small Australian retail outlets. *Tobacco control*. 24(March):3–5. DOI: 10.1136/tobaccocontrol-2014-051683.	The study, conducted in Australia, used a before and after study design. They compared pack retrieval times to determine the impact of plain packaging in small retail outlets.	Economic impact	- Compared 1,265 pack retrievals recorded between June 2012 and July 2013, well before and after the implementation of Plain Packaging. - Found a small, temporary increase in pack retrieval time only in the implementation month of December 2012, after which retrieval time returned to, and remained at, baseline levels. - These results strengthen findings that Plain Packaging did not result in substantial delays to consumers at the point of sale in the real world.	Temporary negative effect

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Scollo, M., Bayly, M. & Wakefield, M. 2015a. The advertised price of cigarette packs in retail outlets across Australia before and after the implementation of Plain Packaging: a repeated measures observational study. *Tobacco Control*. 24(Supplement 2):ii82–ii89. DOI: 10.1136/tobaccocontrol-2014-051950.	The authors used data from Australia in a before and after study. Using maximum Likelihood estimation, they observed the changes in the advertised price of cigarette packs in Australian retail outlets.	Economic impact	- The inflation-adjusted stick price of the most- prominently advertised single packs was significantly higher than in May–July 2012 from August–October 2012 for mainstream and premium brands and from February–April 2013 for value brands. - Adjusted average stick prices of lowest-priced packs in August 2013 were \$0.02 (95% CI \$0.02 to \$0.03, p<0.001) higher than in May–July 2012. - A large real increase in stick price was seen in February–April 2013 across all major manufacturers, market segments and pack size categories. - The price of cigarettes most prominently promoted on price boards did not decrease in the months following implementation of Australia's Plain Packaging legislation.	Temporary negative effect

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Wakefield, M., Bayly, M. & Scollo, M. (2014). Product retrieval time in small tobacco retail outlets before and after the Australian Plain Packaging policy: real-world study. *Tobacco Control*. 23(1):70-6. doi: 10.1136/tobaccocontrol-2013-050987	The authors used data from Australia in a before and after study. Using multivariate regression analysis, the authors observed the impact of plain packaging of cigarettes on product retrieval times in retail outlets.	Economic impact	- In multivariate analysis, December retrieval time (12.43 s) did not differ from June (10.91 s; p=0.410) or February (10.37 s; p=0.382), but was slower than September (9.84 s; p=0.024). - In December, retrieval time declined as days after Plain Packaging implementation increased (β=−0.21, p=0.011), returning to the baseline range by the second week of implementation. - Retailers quickly gained experience with the new Plain Packaging legislation, evidenced by retrieval time having returned to the baseline range by the second week of implementation and remaining so several months later.	Temporary negative effect

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Scollo, M., Zacher, M., Coomber, K., Bayly, M. & Wakefield, M. 2015. Changes in use of types of tobacco products by pack sizes and price segments, prices paid and consumption following the introduction of Plain Packaging in Australia. *Tobacco Control*. 24(Suppl 2):ii66–ii75. DOI: 10.1136/tobaccocontrol-2014-052071.	The study was conducted in Australia using cross-sectional survey data. The authors used both multivariable logistic regression and multivariate linear regression to assess changes in use of tobacco products after the introduction of plain packaging.	Economic impact Public health impact	- The proportion of current smokers using roll- your-own (RYO) products fluctuated over the study period. - Proportions using value brands of factory-made (FM) cigarettes increased from pre-Plain Packaging (21.4%) to Plain Packaging year 1 (25.5%; p=0.002) and Plain Packaging post-tax (27.8%; p<0.001). - Introduction of Plain Packaging was associated with an increase in use of value brands, likely due to increased numbers available and smaller increases in prices for value relative to premium brands. - Consumption did not change in Plain Packaging year 1 among daily, regular or current smokers or among smokers of brands in any market segment. - Consumption among regular smokers declined significantly in Plain Packaging post-tax (mean=14.0, SE=0.33) compared to Plain Packaging year 1 (mean=14.8, SE=0.17; p=0.037	Positive effect

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Scollo, M., Bayly, M. & Wakefield, M. 2015. Availability of illicit tobacco in small retail outlets before and after the implementation of Australian Plain Packaging legislation. *Tobacco Control*. 24(Supplement 2):e45 – e51. DOI: 10.1136/tobaccocontrol-2014-051950.	The authors used data from Australia in a before and after study design. They used logistic regression to determine the change in availability of illicit tobacco in small retail outlets following the implementation of the plain packaging.	Economic impact	- Thirteen (2.2%) of 598 packs purchased pre-Plain Packaging were either non-compliant with Australian health warnings and/or suspiciously priced. - Four packs (1.3%) of 297 met either or both criteria in the December implementation month, and five (0.6%) of 878 did so in the three collection months following implementation. - Packs judged likely to be illicit were sold in response to requests for cheapest available packs on fewer than one percent of occasions. - The likelihood of a 'positive' response (either an offer to sell or information about where unbranded tobacco may be purchased) did not differ across pre-implementation, during implementation and post-implementation waves - No change in availability of illicit tobacco was observed following implementation of Plain Packaging.	No effect

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Scollo, M., Zacher, M., Coomber, K. & Wakefield, M. 2015. Use of illicit tobacco following introduction of standardized packaging of tobacco products in Australia: results from a national cross-sectional survey. *Tobacco Control*. 24 (Suppl 2):ii76–ii81. DOI: 10.1136/tobaccocontrol-2014-052072.	The study was conducted in Australia using cross-sectional survey data. The authors used a logistic regression model to observe the difference in use of illicit tobacco following the implementation of plain packaging.	Economic impact	- Among those whose factory-made cigarettes were purchased in Australia, compared with pre-Plain Packaging, there were no significant increases in the Plain Packaging phase in use of: 'cheap whites' (<0.1%; OR=0.24, 95% CI 0.04 to 1.56, p=0.134); international brands purchased for 20% or more below the recommended retail price (0.2%; OR=3.49, 95% CI 0.66 to 18.35, p=0.140); or packs purchased from informal sellers (<0.1%; OR=0.24, 95% CI 0.04 to 1.47, p=0.124). - The prevalence of any use of unbranded illicit tobacco remained at about 3% (adjusted OR=0.79, 95% CI 0.58 to 1.08, p=0.141). - Found no evidence in Australia of increased use of two categories of manufactured cigarettes likely to be contraband, no increase in purchase from informal sellers and no increased use of unbranded illicit 'chop-chop' tobacco.	No effect

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Wakefield, M.A., Germain, D. & Durkin, S.J. 2008. How does increasingly plainer cigarette packaging influence adult smokers' perceptions about brand image? An experimental study. *Tobacco Control*. 17(6):416–421. DOI: 10.1136/tc.2008.026732.	The study was conducted in Australia using an experimental study design. The authors used a logistic regression model to determine the effect of plain packaging on smokers' perception about brand image.	Public health impact	- Compared with current cigarette packs with full branding, cigarette packs that displayed progressively fewer branding design elements were perceived increasingly unfavourably in terms of smokers' appraisals of the packs, the smokers who might smoke such packs, and the inferred experience of smoking a cigarette from these packs.	Positive effect

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Hammond, D. & Parkinson, C. 2009. The impact of cigarette package design on perceptions of risk. *Journal of Public Health*. 31(3):345–353. DOI: 10.1093/pubmed/fdp066.	The study was conducted in Canada using an experimental study design. The authors used pearson correlation coefficients and Chi-square tests to assess the impact of cigarette package design on perceptions of risk.	Public health impact	- Respondents were significantly more likely to rate packages with the terms 'light', 'mild', 'smooth' and 'silver' as having a smoother taste, delivering less tar and lower health risk compared with 'regular' and 'full flavour' brands. - Respondents also rated packages with lighter colours and a picture of a filter as significantly more likely to taste smooth, deliver less tar and lower risk. - Smokers were significantly more likely than non-smokers to perceive brands as having a lower health risk, while smokers of light and mild cigarettes were significantly more likely than other smokers to perceive brands as smoother and reducing risk. - Perceptions of taste were significantly associated with perceptions of tar level and risk.	Positive effect

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Germain, D., Wakefield, M.A. & Durkin, S.J. 2010. Adolescents' Perceptions of Cigarette Brand Image: Does Plain Packaging Make a Difference? *Journal of Adolescent Health*. 46(4):385–392. DOI: 10.1016/j.jadohealth.2009.08.009.	The study was conducted in Australia using an experimental study design. The authors used Analysis of variance (ANOVA) methods to determine the impact of plain packaging on adolescents' perception of cigarette brand image.	Public health impact	- Removing as much brand information from cigarette packs as possible is likely to reduce positive cigarette brand image associations among adolescents. - Pack appeal was reduced even further when the size of the pictorial health warning on the plainest pack was increased from 30% to 80% of the pack face, with this effect apparent among susceptible non- smokers, experimenters, and established smokers	Positive effect

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Doxey, J. & Hammond, D. 2011. Deadly in pink: the impact of cigarette packaging among young women. *Tobacco control*. 20:353–360. DOI: 10.1136/tc.2010.038315.	The study was conducted in Canada using an experimental study design. The authors used OLS regression analysis to determine the effect of cigarette packaging on young women's perceptions of the product.	Public health impact	- Fully-branded female packs were rated as significantly more appealing than 'no descriptor' packs, 'plain' packs and non-female branded packs. - Female branded packs were associated with a greater number of positive attributes including glamour, slimness and attractiveness, compared to brands without descriptors and 'plain' packs. - Women who viewed plain packs were less likely to believe that smoking helps people control their appetite, an important predictor of smoking among young women compared to women who viewed branded female packs. '- Removing as much brand information from cigarette packs as possible is likely to reduce positive cigarette brand image associations among adolescents. - 'Plain' packaging removing colours and design elements and removing descriptors such as 'slims' from packs may reduce brand appeal and thereby susceptibility to smoking among young women.	Positive effect

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Thrasher, J.F., Rousu, M.C., Hammond, D., Navarro, A. & Corrigan, J.R. 2011. Estimating the impact of pictorial health warnings and "plain" cigarette packaging: Evidence from experimental auctions among adult smokers in the United States. *Health Policy*. 102(1):41–48. DOI: 10.1016/j.healthpol.2011.06.003.	The used data from the USA from an experimental study design. They used both bivariate and multivariate random effects models to determine the effect of pictorial health warnings and plain packaging.	Public health impact	- Models indicated that there was no statistically significant difference in demand for packs with either of the two text only warnings. - However, demand was significantly lower for both packs with prominent pictorial warnings, with the lowest demand associated with the plain, unbranded pack.	Positive effect

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Munafò, M.R., Roberts, N., Bauld, L. & Leonards, U. 2011. Plain Packaging increases visual attention to health warnings on cigarette packs in non-smokers and weekly smokers but not daily smokers. *Addiction (Abingdon, England)*. 106(8):1505–10. DOI: 10.1111/j.1360-0443.2011.03430.x.	The study was conducted in the UK using mixed model experimental study designs. The authors used mixed-model analysis of variance (ANOVA) to determine the impact of plain packaging on smokers' and non-smokers' perceptions.	Public health impact	- Analysis of variance indicated more eye movements (i.e. greater visual attention) towards health warnings compared to brand information on plain packs versus branded packs. - Among non-smokers and non-daily cigarette smokers, Plain Packaging appears to increase visual attention towards health warning information and away from brand information.	Positive effect

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Maansi Bansal-Travers, David Hammond, Philip Smith, K. Michael Cummings (2011) - The Impact of Cigarette Pack design, Descriptors, and Warning Labels on Risk Perception in the U.S. *American Journal of Preventative Medicine* 0(6):674-82. doi: 10.1016/j.amepre.2011.01.021	The study was conducted in the USA using a cross-sectional study design. The authors used bivariate and multivariate random effects models to assess the impact of cigarette pack designs on perceptions of risk.	Public health impact	- Participants selected larger, pictorial, and loss-framed warning labels as more likely to attract attention, encourage thoughts about health risks, motivate quitting, and be most effective. - Participants were more likely to select packs with lighter colour shading and descriptors such as light, silver, and smooth as delivering less tar, smoother taste, and lower health risk, compared to darker-shaded or full-flavour packs. - Additionally, participants were more likely to select the branded compared to plain white pack when asked which delivered the most tar, smoothest taste, was more attractive, appealed to youth aged 18 years, and contained cigarettes of better quality. - Plain Packaging may reduce many of the erroneous misperceptions of risk communicated through pack design features.	Positive effect

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Bansal-Travers, M., O'Connor, R., Fix, B.V. & Cummings, M. (2011). What Do Cigarette Pack Colours Communicate to Smokers in the U.S.? *American Journal of Preventative Medicine*.0(6):683-9. doi: 10.1016/j.amepre.2011.01.019.	The study was conducted in the USA using cross-sectional survey data. The authors used logistic regression and negative binomial regression models to examine how cigarette pack colours are perceived by smokers.	Public health impact	Participants were more accurate in matching descriptors to pack images for Marlboro brand cigarettes than for unfamiliar Peter Jackson brand (sold in Australia). - Smokers overwhelmingly chose the "whitest" pack if they were concerned about health, tar, and nicotine. - Removal of descriptor terms but not the associated colours will be insufficient in eliminating misperceptions about the risks from smoking communicated to smokers through packaging.	

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Hammond, D., Daniel, D., & White, C.M. (2012). The Effect of Cigarette Branding and Plain Packaging on Female Youth in the United Kingdom. *Journal of Adolescent Health*. 52(2): 151-157. https://doi.org/10.1016/j.jadohealth.2012.06.003	The study was conducted in the UK using cross-sectional data. The authors used a linear regression model to assess the impact of cigarette branding and plain packaging on female youth.	Public health impact	- Plain packs were rated as the least appealing and worse tasting compared with all other conditions. - Plain packs were also associated with fewer false beliefs about health risks compared with branded packs. - Removing brand descriptors from packs significantly reduced measures of appeal and taste, particularly for brands with flavour descriptors, such as cherry and vanilla. - Plain packs were significantly less likely to be associated with positive images, such as glamour, sophistication, and slimness. - Most importantly, respondents were significantly less likely to accept a pack of cigarettes when offered only plain versus branded packs.	Positive effect

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White, C.M., Hammond, D., Thrasher, J.F. & Fong, G.T. (2012). *BMC Public Health.* The potential impact of Plain Packaging of cigarette products among Brazilian young women: an experimental study. 12:737. https://doi.org/10.1186/1471-2458-12-737	The study was conducted in Brazil using a between-subjects experimental study design. The authors used both logistic regression and linear regression models to determine the effect of plain packaging of cigarettes on brand appeal and perceptions of health risk among women.	Public health impact	- Branded packs were rated as significantly more appealing, better tasting, and smoother on the throat than plain packs. - Branded packs were also associated with a greater number of positive smoker attributes including style and sophistication, and were perceived as more likely to be smoked by females than the plain packs. - Removing descriptors from the plain packs further decreased the ratings of appeal, taste and smoothness, and also reduced associations with positive attributes. - In the pack offer, participants were three times more likely to select branded packs than plain packs.	Positive effect

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Wakefield, M., Hayes, L., Durkin, S. & Borland, R. 2013. Introduction effects of the Australian Plain Packaging policy on adult smokers: a cross-sectional study. *BMJ open*. 3(7):1–10. DOI: 10.1136/bmjopen-2013-003175.	The study was conducted in Australia using cross-sectional data. The authors used bivariate and multivariate logistic regression models to assess the effect of plain packaging intention to quit and smoking beliefs among smokers.	Public health impact	- Compared with branded pack smokers, those smoking from plain packs perceived their cigarettes to be lower in quality (adjusted OR (AdjOR)=1.66, p=0.045), tended to perceive their cigarettes as less satisfying than a year ago (AdjOR=1.70, p=0.052), were more likely to have thought about quitting at least once a day in the past week (AdjOR=1.81, p=0.013) and to rate quitting as a higher priority in their lives (F=13.11, df=1, p<0.001). - Plain pack smokers were more likely to support the policy than branded pack smokers (AdjOR=1.51, p=0.049). - Branded and plain pack smokers did not differ on measures of less immediate smoking intentions, frequency of thoughts about harms or perceived exaggeration of harms.	Positive effect

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Stead, M., Moodie, C., Angus, K., Bauld, L., McNeill, A., Thomas, J., Hastings, G., Hinds, K., et al. 2013. Is Consumer Response to Plain/Standardized Tobacco Packaging Consistent with Framework Convention on Tobacco Control Guidelines? A Systematic Review of Quantitative Studies. *PLoS ONE*. 8(10):1–10. DOI: 10.1371/journal.pone.0075919.	The authors used data from multiple countries to conduct a systematic review on the potential impacts of plain packaging on reduced appeal, perceptions of product strength and harm, and increased salience and effectiveness of health warnings.	Public health impact	- Studies that explored the impact of package design on appeal consistently found that standardised packaging reduced the appeal of cigarettes and smoking, and was associated with perceived lower quality, poorer taste and less desirable smoker identities. - Although findings were mixed, standardised packs tended to increase the salience and effectiveness of health warnings in terms of recall, attention, believability and seriousness, with effects being mediated by the warning size, type and position on pack. - Pack colour was found to influence perceptions of product harm and strength, with darker coloured standardised packs generally perceived as containing stronger tasting and more harmful cigarettes than fully branded packs; lighter coloured standardised packs suggested weaker and less harmful cigarettes. - Findings were largely consistent, irrespective of location and sample.	Positive effect

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Gallopel-Morvan, K., Gabriel, P., Le Gall-Ely, M., Rieunier, S. & Urien, B. 2013. Plain Packaging and public health: The case of tobacco. *Journal of Business Research*. 66(1):133–136. DOI: 10.1016/j.jbusres.2012.09.004.	The study was conducted in France using a qualitative study design. The authors determine to investigate the impact of plain packaging on perceptions pf appeal.	Public health impact	Findings suggest that Plain Packaging significantly reduces the pack's appeal and benefits public health policies if combined with pictorial warnings on both sides and if the colour of the plain pack is carefully chosen.	Positive effect

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Maynard, O.M., Leonards, U., Attwood, A.S., Bauld, L., Hogarth, L. & Munafò, M.R. 2015. Effects of first exposure to plain cigarette packaging on smoking behaviour and attitudes: a randomised controlled study. *BMC public health*. 15:240. DOI: 10.1186/s12889-015-1586-8.	The study was conducted in the UK using a randomized control design. The authors used a linear regression model to determine the impact of first exposure to plain packaging on smoking behaviour and attitudes.	Public health impact	- There was no evidence that pack type had an effect on either of the primary measures (ps > 0.279). - However, smokers using plain cigarette packs rated the experience of using the pack more negatively (−0.52, 95% CI −0.82 to −0.22, p = 0.001), rated the pack attributes more negatively (−1.59, 95% CI −1.80 to −1.39, p < 0.001), and rated the health warning as more impactful (+0.51, 95% CI 0.24 to 0.78, p < 0.001). - Plain cigarette packs reduce ratings of the experience of using the cigarette pack, and ratings of the pack attributes, and increase the self-perceived impact of the health warning, but do not change smoking behaviour, at least in the short term.	Positive effect

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Moodie, C. *et al.* 2012. *Plain Packaging: A Systematic Review*. Centre for Tobacco Control Research, University of Sterling.	The authors conducted a systematic review on the impact of plain packaging.	Public health impact	Appeal of cigarettes, packs and brands: - Nineteen studies found that plain packs were rated less attractive than branded or equivalent, by both adults and children. - Twelve studies found that plain pack were perceived to be of poorer quality and lighter colours associated with weaker taste. - Thirteen studies found that plain packs consistently lower ratings on projected personality attributes and considered 'less fashionable' and likely to be smoked by 'older' people. - Ten studies found that plain packs weaken attachment to brands, project less desirable smoker identity, expose the reality of smoking. Salience of Health warnings: - Seven studies examined impact of salience of health warnings (Ability to recall, believability) – four of them found it increased	Positive effect

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			the salience of the warnings; one found no effect; and two found mixed results. - One study found that both weekly smokers and non-smokers paid more attention to warnings with Plain Packaging than daily smokers. Perceptions of product harm: - Fourteen studies found mixed results but darker coloured plain packs were seen as more harmful and lighter coloured plain packs less harmful than branded cigarettes. - Plain packs without descriptors were considered more harmful than packs with descriptors - Plain packs were perceived as more effective than branded cigarettes in raising the awareness of health risk. Smoking-related attitudes, beliefs, intentions and behaviour:	

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			- Two studies found that plain packs were associated with negative beliefs about smoking while one found it was less likely than branded packs to reinforce beliefs among women that it helps with staying slip and control of appetite. - Overall impact on smoking behaviour was mixed but were generally supportive of plain packs having a likely deterrent effect on smoking. having a likely deterrent effect on smoking.	

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Zacher,M., Bayly,M., Brennan, E. *et al*. 2015. Personal pack display and active smoking at outdoor café strips: assessing the impact of plain packaging 1 year post implementation. *Tobacco Control*. **24:**ii94-ii97. http://dx.doi.org/10.1136/tobaccocontrol-2014-051826	The study was conducted in Australia in a before and after study. The authors used multilevel poisson regression analysis to the impact plain packaging on pack displays and active smoking at outdoor café strips.	Public health impact	- Prevalence of pack display among patrons declined from pre-Plain Packaging (1 pack per 8.7 patrons) to early post-Plain Packaging (1 pack per 10.4), and remained low 1-year post-Plain Packaging (1 pack per 10.3). - Active smoking declined more in venues with children present than in those without. - In early post-Plain Packaging, plain packs were less often displayed face-up (74.0%) and more often concealed (8.9%) than branded packs pre-PP (face-up: 85.2%; concealed: 4.0%), this was not sustained 1-year post-PP (face-up: 85.7%; concealed: 4.4%). - This study demonstrated a sustained reduction in visibility of tobacco products and smoking in public, particularly in the presence of children, from pre-PP to 1 year post-PP.	Positive effect

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Appendix 3. Summary of evidence submitted by BATSA during the SEIA process to support the view that "Reducing the appeal of tobacco products to consumers has no impact on smoking behaviour" and the ETCP's reasons for rejecting the evidence supplied

BATSA is of the view that reducing the appeal of tobacco packaging via Standardised packaging will not reduce the rate of smoking initiation or increase the rate of smoking cessation because "the appeal/attractiveness of branded packaging is not a factor that causes smoking." BATSA justifies this claim with reference to studies which have sought to determine the drivers of smoking initiation (Fuller, 2013; US Government and Human Services, 1994; US Government and Human Services, 2012) as well as those which seek to determine the drivers of smoking cessation (Halpern & Warner, 1993; Mc Caul *et al.*, 2006; Caponnetto & Polosa, 2008; and Pisinger, 2010). BATSA emphasizes that product packaging does not appear to be a driver of smoking initiation or smoking cessation in any of the studies that they have cited.

BATSA also refers to studies which acknowledge limitations to inferences that Standardised packaging is effective. These studies rely on survey respondents' self-reported attitudes, intentions and beliefs in order to assess the impact of Standardised packaging on smoking behaviour. These are cited as support for the view that Standardised packaging legislation should not be implemented in South Africa (Moodie *et al.,* 2012; Chantler, 2014; and US Court of Appeals, 2012). BATSA is of the view that evidence on the impact of Standardised packaging on the attitudes, beliefs or intentions of smokers cannot answer the question of whether Standardised packaging is effective in changing smoking behaviour. They suggest that researchers should analyse the empirical evidence from Australia regarding the measured impact on smoking prevalence and consumption.

To this end, BATSA firstly referred to data from the Australian Federal Government's National Drug Strategy Household Survey (ANDSHS) of 2013. BATSA indicated that these data suggest that "…smoking prevalence in Australia has been steadily declining in Australia since 1995 and that the proportion in 2013 is almost exactly on the long-term trend-line, suggesting that these data do not

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provide any evidence of an additional effect from plain-packaging." BATSA also referred to the fact that the ANDSHS data reveal an increase in the rate of under-age smoking following the introduction of Standardised packaging.

BATSA's insistence that an analysis of empirical evidence from Australia regarding the measured impact of Standardised packaging on smoking prevalence and consumption further led to an extensive exposition of an expert report conducted by Professor Kip Viscusi of Vanderbilt University Law School. This report – commissioned by BAT – was submitted to the Post-Implementation Review of Standardised packaging undertaken by the Australian Government. The Viscusi report reviews data from two surveys on Australian smokers' beliefs and behaviours before and after the advent of Standardised packaging policy.[60] The findings of the report suggest that there may have been increases in smoking-related behaviours following the introduction of Standardised packaging.

Particularly, Viscusi's analysis of the data from the Cancer Institute New South Wales Tobacco Tracking Survey (CIITS) indicates that after the implementation of Standardised packaging in Australia, there has been an increase in the *self-reported* intensity of smoking behaviour by those surveyed, as well as an increase in the *self-reported* number of cigarettes smoked per day by those surveyed. The Viscusi report further suggests that following the implementation of Standardised packaging in Australia, the number of *self-reported* cigarettes smoked per day by those surveyed increased. According to BATSA, the report further presents findings indicating that the implementation of Standardised packaging in Australia has not increased the effectiveness of health warnings. According to the report, there has been no statistically significant impact on *beliefs* regarding the harmfulness of cigarettes; as well as a decline in respondents' *intention* to quit in the next month following the introduction of Standardised packaging (amidst a host other adverse consequences from a public health perspective).

[60] These surveys are the Cancer Institute New South Wales Tobacco Tracking Survey (CITTS) and the National Tobacco Plain Packs tracking Survey (NTPPTS).

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Lastly, BATSA indicated that the implementation of Standardised packaging cannot be justified by reference to the Australian Department of Health's *Post Implementation Review of the Australian Tobacco Standardised packaging Act 2011*, for a host of reasons ranging from concerns regarding the author's objectivity to issues with the statistical analysis conducted in the review.

Reasons for the ETCP's rejection of the evidence cited by BATSA

The studies cited by BATSA to draw the conclusion that Standardised packaging will not impact smoking initiation rate (Fuller, 2013; US Government and Human Services, 1994; US Government and Human Services, 2012) neither purport to, nor attempt to measure, the impact of product packaging on smoking initiation. Thus, using these studies as a basis to conclude that the attractiveness of packaging does not influence smoking behaviour reflects a distortion of the evidence presented in these sources to justify a conclusion which the scope of these studies does not warrant. Many of the studies cited, including those that aim to determine the relative importance of drivers of smoking cessation, were published long before Standardised packaging was seriously considered as a practical tobacco control strategy.

BATSA cites two publications by the US Surgeon General (1994, 2012) to support their view that Standardised packaging does not influence smoking initiation. Although these two publications do not explicitly refer to Standardised packaging, a subsequent publication by the US Surgeon General is very explicit on this. The US Surgeon General (2014:855) states that, "Increasing evidence indicates that Plain Packaging has the potential to decrease smoking (Hammond and Parkinson 2009; Hoek et al. 2011; Gallopel-Morvan et al., 2012; Hammond et al. 2013; Wakefield et al. 2013)."

Evidence invoked by BATSA to nullify the link between product packaging and smoking cessation (Halpern & Warner, 1993; Mc Caul et al., 2006; Caponnetto & Polosa, 2008; and Pisinger, 2010) is also not necessarily from research designed to investigate this. For example, in Halpern & Warner (1993), only six reasons for smoking cessation and their association with successfully quitting are researched. The six reasons were "… (1) concern about the current health effects of smoking for the smoker; (2)

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concern about the future health effects of smoking for the smoker; (3) the desire to set a good example for children; (4) cost of smoking, (5) the effect of smoking on others' and (6) pressure from family and friends to quit (Halpern & Warner, 1993:248)," none of which relate to the appeal or attractiveness of product packaging in any manner, rendering this type of evidence meaningless as a means to dispute the effectiveness of Standardised packaging.

If a particular measure is not investigated, one cannot say that that measure is not an important determinant or correlate of the variable under scrutiny. In the studies cited by BATSA, the impact of Standardised packaging simply was not investigated.

Furthermore, one of the articles cited by BATSA as showing evidence that packaging is not a driver of smoking cessation (Mc Caul et al., 2006), provides direct support for the implementation of graphic health warnings through its discussion on ways to get smokers to increase attempts at quitting. The paper argues that "From a public health perspective, we need to continue to remind the public about the dangers of smoking, with vivid illustrations. The recent adoption in Canada of pictures to accompany the risk messages on cigarette packing is a potentially strong intervention (Hammond, Fong, McDonald, Brown, & Cameron, 2004). We would argue that discussing specific health effects has not yet been overdone (Mc Caul et al., 2006:53)."

Additionally, BATSA's invocation of the smoking data obtained from the 2013 ANDSHS to discredit the effectiveness of Standardised packaging should be interpreted with prudence. This is on account of the fact that, firstly, the implementation of Standardised packaging in Australia took full effect from 1 December 2012 (Australian Government Department of Health, 2016), whilst the ANDSHS data were collected over the period 31 July to 1 December 2013 (Australian Federal Government, 2015:120). Thus, the extent to which the data from the 2013 ANDSHS can be used to assess the impact of Standardised packaging in Australia is questionable given that the survey followed a mere 7-12 months after the Standardised packaging became a legal requirement.

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Indeed, the ANDSHS notes that 18.5% of smokers had seen tobacco products without Standardised packaging in the three months preceding their completion of the survey for the ANDSHS (Australian Federal Government, 2015:26), which suggests that full compliance with the regulation may not been achieved by the time the survey was conducted. Ultimately, this renders the use of the 2013 ANDSHS data to negate (or validate) the effectiveness of Standardised packaging questionable.

Furthermore, BATSA's use of the argument that "…there may have been serious negative impacts on smoking behaviour following the introduction of Standardised packaging in Australia,"[61] directly contradicts their own view that "we do not believe that there is any credible evidence that reducing the appeal of packaging would have any impact on smoking behaviours. This is because the appeal attractiveness of branded packaging is not a factor that causes smoking." Either packaging affects smoking behaviour or it does not. If BATSA's view is that packaging does not influence smoking behaviour, then statements such as "this data…indeed indicates that there may have been serious negative impacts on smoking behaviour following the introduction of Standardised packaging in Australia" are logically inconsistent.

Additionally, BATSA's appeal to the Viscusi report is curious given that the report relies on exactly the type of evidence often used to support the implementation of Standardised packaging that BATSA discredits earlier in its written submission, namely, findings regarding smoking-related attitudes, beliefs and intentions. It also relies on surveys that are based on smoking-related behaviours (as well as beliefs and attitudes) that stem from surveys and qualitative studies that are reliant on self-report, an aspect identified by BATSA itself as proving limited in its use of inferring predictive validity.

This points to an inconsistency in BATSA's argument that can be resolved either by accepting research that makes use of data on self-reported beliefs, attitudes intentions and behaviours regardless of whether the findings support the implementation of Standardised packaging; or not. BATSA cannot discredit the findings of public health advocates because they are based on these data, yet praise the

[61] This is justified by reference to the fact that "following the introduction of Plain Packaging, the number of daily smokers aged 12 to 17 years appears to have increased between 2010 and 2013 to its highest level in more than 6 years."

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findings of studies that do not support the implementation of Standardised packaging using the same type of data.

Public health advocates are of the view that the purpose of Standardised packaging is to ensure consumers are better-informed about the consequences of using tobacco products and to ensure that they are not attracted by the packaging of the product. Thus, if Viscusi's findings are to be taken as reflective of the true situation in Australia, the implementation of Standardised packaging would represent a win-win policy from both a public health and an industry perspective. This is on account of the fact that public health advocates will be satisfied that consumers are not misled by attractive or misleading packaging on tobacco products (which they believe will reduce smoking), and the concerns surrounding the negative economic implications espoused by BATSA will be partially mitigated as cigarette sales will be unaffected (or may even increase, based on Viscusi's findings).

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Appendix 4. Evidence on the impact of Point of Sale display bans, to be read in conjunction with section 3 ("Point of Sale display bans")

Authors (Year) - Title	**Study details**	**Results and conclusion**	**Direction of impact/comment**
Li, L. *et al*. (2015). Impact of Point-of-Sale Tobacco Display Bans in Thailand: Findings from the International Tobacco Control (ITC) Southeast Asia Survey. I*nt J Environ Res Public Health.* 12(8):9508-22. doi: 10.3390/ijerph120809508	The study used data from Thailand and Malaysia. The authors conducted a comparative analysis of Thailand (imposed POS bans) with Malaysia (which did not impose bans) using generalized estimating equations (GEE).	**Results on awareness of tobacco displays and advertising at POS:** - At the first post-ban survey wave over 90% of smokers in Thailand were aware of the display ban policy and supported it, and about three quarters thought the ban was effective; - Noticing tobacco displays in stores was lowest (16.9%) at the first post-ban survey wave, but increased at later survey waves; however, the levels were consistently lower than those in Malaysia ; - Similarly, exposure to POS tobacco advertising was lower in Thailand. The display ban reduced exposure to tobacco marketing at POS.	Positive effect

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Li, L. *et al*. (2013) - Impact of point-of-sale tobacco display bans: findings from the International Tobacco Control Four Country Survey. *Health Education Research*. 28(5):898–910. DOI: 10.1093/her/cyt058.	The study used data from Australia, Canada, United Kingdom and the United States. The authors conducted a comparative analysis to examine the impact of point-of-sale (POS) tobacco marketing restrictions in Australia and Canada, in relation to the United Kingdom and the United States where there were no such restrictions during the study period (2006-10).	**Results for exposure to TAPS:** - Banning POS displays in Canada markedly decreased reported exposure to tobacco marketing at the POS; in Australia, there was a significant decline in reported exposure to tobacco displays [especially between 2008 and 2010 when some Australian states started to implement a POS display ban]; exposure to POS marketing in the United States and United Kingdom remained constantly high (or even with some increase) over studied waves. **Results for cigarette purchasing behaviours:** - The proportions of buying non-usual brand cigarettes because of noticing tobacco displays/advertising were generally low (<11%) in Australia, Canada and the United Kingdom between Waves 6 and 8 (this question was only asked from Wave 6); The United States had the highest levels of buying non-usual brands because of noticing tobacco advertising/displays; participants were asked in Wave 8 if cigarettes display led them to buy unplanned cigarettes and the results show that	- Positive public health effect in Australia and Canada. - Negative public health effect in the USA and UK. -

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		compared with smokers in Canada, smokers in the United States and United Kingdom were more likely to buy unplanned cigarettes because of exposure to cigarette displays. **Results for exposure between smokers with and without a point-of-sale tobacco display ban:** - Those smokers who were covered by a POS display ban were less likely to be exposed to POS tobacco displays or advertising/promotional activities in the other specific channels, had a lower level of overall salience of tobacco marketing, and were less likely to purchase non-usual brand of cigarettes (or buy unplanned cigarettes in Wave 8) because of exposure to tobacco displays/advertising.	

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Shang, C. *et al*. (2016). Global Evidence on the Association between POS Advertising Bans and Youth Smoking Participation. *International Journal of Environmental Research and Public Health*. 13(3):306. DOI: 10.3390/ijerph13030306.	The study used two waves (primarily one wave) of the Global Youth Tobacco Survey (GYTS) that were conducted in 130 countries between 2007 and 2011. These surveys were linked to the WHO "MPOWER" data using country and year identifiers to analyse the association between POS advertising bans (a dichotomous measure of the existence of such bans) and smoking participation in the past month.	- Study found that in countries with POS advertising bans, current smoking, daily smoking, and regular smoking participation in the past month is significantly lower, suggesting that POS promotion bans can potentially reduce youth smoking. - The study provides evidence to support the implementation of POS promotion regulations by the US FDA and implementation of the WHO FCTC guidelines regarding restrictions on tobacco POS promotion.	Positive effect

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Dunlop, S.M. *et al*. (2014). Out of Sight and Out of Mind? Evaluating the Impact of Point-of-Sale Tobacco Display Bans on Smoking-Related Beliefs and Behaviours in a Sample of Australian Adolescents and Young Adults. *Nicotine & Tobacco Research.* 17(7):761-8. doi: 10.1093/ntr/ntu180.	The study used data drawn from the Tobacco Promotion Impact Study, a repeated cross-sectional survey of youth (12-24 years) in New South Wales and Queensland conducted yearly 2010-2012. Regression analyses examined differences in youth's recall of PoS tobacco displays, smoking-related beliefs, and smoking behaviours in relation to the timing of the PoS display bans in order to ultimately estimate the medium-term impact of the POS bans on youth.	- Recall of PoS tobacco displays was significantly less likely for youth interviewed after the bans versus before. They were also less likely to report tobacco brand awareness, to over-estimate peer smoking, or be current smokers. Stratified analyses showed that these differences were primarily apparent in the group of youth most likely to be affected by tobacco PoS displays: those who visit tobacco retailers most frequently. After the bans, smokers were less likely to report that they think about smoking as a result of seeing PoS tobacco displays. These results suggest that removing tobacco displays from retail environments can positively contribute to the de-normalization of smoking among youth.	Positive effect

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Levy, D.T. *et al*. (2015). Public Health Effects of Restricting Retail Tobacco Product Displays and Ads. *Tob Regul Sci*. 1(1):61-75.	The study was conducted in the United States. The paper estimates the effects on initiation and cessation rates from restricting POS tobacco product displays and ads in the US and uses the SimSmoke simulation model to project related smoking declines and health benefits. Therefore, the authors firstly make a projections of status quo smoking rates from 2015 to 2065 by assuming that policies remain constant at their 2014 levels. The effects from the comprehensive restrictions are then estimated assuming enactment in 2015.	- New comprehensive POS restrictions are projected to reduce smoking prevalence by approximately 16% [range=3%–31%] relative to the status quo by 2065, preventing about 630,000 smoking-attributable deaths [range=108,000–1,225,000], 215,000 low birth weight births [range=33,000–421,000], 140,000 preterm births [range=22,000–271,000], and 1900 infant deaths from SIDSs [range=300–3800]. - Federal, state, or local action to restrict POS tobacco product displays and ads would contribute to a substantial reduction in smoking-attributed death and disease.	Positive effect

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Kuipers, M.A.G. *et al*. (2016). Impact on smoking of England's 2012 partial tobacco point of sale display ban: a repeated cross-sectional national study. *Tobacco Control*. tobaccocontrol–2015–052724. DOI: 10.1136/tobaccocontrol-2015-052724.	The study was conducted in England. The paper used data from 129 957 respondents participating in monthly, cross-sectional household surveys of representative samples of the English adult population aged 18+ years from January 2009 to February 2015. Interrupted-time series regression models assessed step changes in the level of current smoking and cigarette consumption in smokers and changes in the trends post-ban compared with pre-ban. Models were adjusted for sociodemographic variables and e-cigarette use, seasonality and autocorrelation. Potential confounding by cigarette price was accounted for by time, as price was almost perfectly correlated with time.	- Following the display ban, there was no immediate step level change in smoking or in cigarette consumption. There was a significantly steeper decline in smoking post display ban. This effect was demonstrated by respondents in manual occupations, but not for those in non-manual occupations. Cigarette consumption declined pre-ban period, but no significant change in cigarette consumption trend was observed. - The partial tobacco PoS display ban introduced in England in April 2012 did not lead to an immediate decline in smoking, but was followed by a decline in the trend of smoking prevalence that could not be accounted for by seasonal factors, e-cigarette use or price changes.	Minimal positive public health effect

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Scheffels, J. & Lavik, R. 2013. Out of sight, out of mind? Removal of point-of-sale tobacco displays in Norway. *Tobacco control*. 22(e1):e37–42. DOI: 10.1136/tobaccocontrol-2011-050341.	The study was conducted in Norway. The paper assesses the impact of point of sale bans on retailer compliance as measured using audit surveys. Consumer's perceptions of the ban were assessed in three web surveys: one conducted before and two after implementation of the ban. The sample for each of these consisted of about 900 people aged 15-54 years and an extra sample of smokers and snus users. 10 focus group interviews with male and female daily, occasional and former smokers aged 16-50 years were also conducted, before and after implementation of the ban.	- Immediately following implementation of the POS display ban, compliance was 97% for cigarettes and rolling tobacco and 98% for snus. - Pre-implementation, young people were tempted by tobacco products when seeing them in the shop more often than older people. - Post-implementation, young people also more often found it difficult to choose brand. The POS tobacco display ban was supported by a majority of the population, and by one out of three daily smokers. - The removal of POS tobacco displays was perceived as a barrier for young people's access to tobacco products, as affecting attachment to cigarette brands and as contributing to tobacco de-normalisation.	Positive effect

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Shang, C., Huang, J., Li, Q. & Chaloupka, F.J. 2015. The Association between Point-of-Sale Advertising Bans and Youth Experimental Smoking: Findings from the Global Youth Tobacco Survey (GYTS). *AIMS Public Health*. 2(4):832–844. DOI: 10.3934/publichealth.2015.4.832.	The study used Global Youth Tobacco Surveys from 130 countries during 2007-2011. These were linked to the WHO "MPOWER" tobacco control policy measures to analyse the association between POS advertising bans (a dichotomous measure of the existence of such bans) and experimental smoking using weighted logistic regressions. All analyses were clustered at the country level and controlled for age, parents' smoking status, GDP per capita, and country-level tobacco control scores in monitoring tobacco use, protecting people from smoke, offering help to quit, warning about the dangers of tobacco, enforcing promotion/advertising bans, and raising taxes on tobacco.	- The results suggest that a POS advertising ban is significantly associated with reduced experimental smoking among youth , and that this association is seen for both genders.	Positive effect

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Robertson, L., McGee, R., Marsh, L. & Hoek, J. 2015. A systematic review on the impact of point-of-sale tobacco promotion on smoking. *Nicotine and Tobacco Research*. 17(1):2–17. DOI: 10.1093/ntr/ntu168.	The paper reviews original quantitative and qualitative research that examined the relationship between POS tobacco promotion and smoking prevalence, individual-level smoking and quitting and tobacco purchasing behaviour, smoking susceptibility, and smoking-related cognitions.	- Twenty peer-reviewed studies (18 quantitative and 2 qualitative) met the inclusion criteria; each study reported findings consistent with a positive association between exposure to POS tobacco promotion and smoking or smoking susceptibility. Several studies met key criteria for causality: 4 indicated a dose-response association, 2 prospective studies were identified, and evidence from intervention studies supported the reversibility of the association. - Findings were consistent across different study designs, settings, and measures. This review provides evidence to support the continuation of POS tobacco display bans in those jurisdictions where such legislation has been introduced and strengthens the evidence encouraging similar policies in jurisdictions without a POS display ban.	Positive effect

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van der Slujis, W. *et al*. (2016) - "It Looks Like an Adult Sweetie Shop": Point-of-Sale Tobacco Display Exposure and Brand Awareness in Scottish Secondary School Students. *Nicotine & tobacco research: official journal of the Society for Research on Nicotine and Tobacco*. ntw032–. DOI: 10.1093/ntr/ntw032.	The study was conducted in Scotland. Cross-sectional school surveys and focus groups were conducted with 13-14 year old and 15-16 years old students in four schools of differing socioeconomic status in 2013, prior to the PoS display ban in large shops. Adjusted negative binomial regression analysis examined associations between brand awareness and exposure variables (visiting tobacco retailers, noticing displays of tobacco products).	- Students visiting small shops more frequently, and those who noticed cigarette displays in small shops and large supermarkets, had higher brand awareness. The focus groups supported these findings. Participants described PoS tobacco displays as being eye-catching, colourful and potentially attractive to young people. - The study showed that higher cigarette brand awareness was significantly associated with regularly visiting small shops and noticing PoS displays in small and large shops, even when students' smoking status, smoking in their social networks, leisure activities, and demographics were included as confounding variables.	Positive effect

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Spanopolous, D. 2014. Tobacco display and brand communication at the point of sale: implications for adolescent smoking behaviour. *Tobacco Control.* 23: 64-69. http://dx.doi.org/10.1136/tobaccocontrol-2012-050765	The study was conducted in England. Self-completion questionnaire survey in students aged 11-15 years in March 2011. Measures ever-smoking and susceptibility to smoking as the main outcome measures	- The odds of ever-smoking doubled for those visiting shops almost daily relative to less than once a week, and susceptibility increased by around 60%. Noticing tobacco on display every time during store visits increased the odds of susceptibility more than threefold compared with never noticing tobacco. For each additional tobacco brand recognised at the PoS, the adjusted odds of being an ever-smoker increased by 5% and of susceptibility by 4%. - The association between frequency of visiting stores and susceptibility was predominantly due to exposure in small shops. - These findings suggest that a one-off, comprehensive tobacco display ban is the recommended approach for countries considering a display ban.	Positive effect

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Kim, A.E. *et al*. (2013) - Influence of tobacco displays and ads on youth: a virtual store experiment. *Pediatrics*. 131(1):e88–95. DOI: 10.1542/peds.2012-0197.	The study was conducted in the United States. An interactive virtual convenience store was created with scenarios in which the tobacco product display at the POS was either openly visible (status quo) or enclosed behind a cabinet (display ban), and tobacco ads in the store were either present or absent. A national convenience sample of 1216 youth aged 13 to 17 who were either smokers or non-smokers susceptible to smoking participated in the study. Youth were randomized to 1 of 6 virtual store conditions and given a shopping task to complete in the virtual store. During the shopping task, the authors tracked youth's attempts to purchase tobacco products. Subsequently, youth completed a survey that assessed their perceptions about the virtual store and perceptions about the ease of buying cigarettes from the virtual store.	- Compared with youth in the status quo condition, youth in the display ban condition were less aware that tobacco products were for sale (32.0% vs 85.2%) and significantly less likely to try purchasing tobacco products in the virtual store. Banning ads had minimal impact on youth's purchase attempts. - Policies that ban tobacco product displays at the POS may help reduce youth smoking by deterring youth from purchasing tobacco products at retail stores.	Positive effect

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Paynter, J. & Edwards, R. 2009. The impact of tobacco promotion at the point of sale: A systematic review. *Nicotine and Tobacco Research*. 11(1):25–35. DOI: 10.1093/ntr/ntn002.	The paper reviews the evidence that PoS tobacco promotion influences key smoking-related behaviours and beliefs, increases susceptibility to smoking in youth, undermines smokers' quit attempts, and promotes relapse among ex-smokers.	- The authors found 12 peer-reviewed studies, 10 of which were focused on children. Seven of 8 observational studies found statistically significant associations between exposure to tobacco promotion at the PoS and smoking initiation or susceptibility to smoking. Two experimental studies of children found statistically significant associations between exposure to PoS tobacco promotions and beliefs about ease of getting tobacco and smoking prevalence among their peers. - An experimental study with adults found that a picture of collected tobacco pack elicited cravings for cigarettes among smokers. A cross-sectional study found that 25% of adult smokers reported impulse purchasing and a third of recent ex-smokers reported urges to start smoking after seeing tobacco displayed. - The authors conclude that more prospective studies are needed to clarify the temporal relationship between exposure to PoS tobacco and outcome. However, given the addictiveness of tobacco, the severity of the health hazards posed by smoking, the evidence that tobacco promotion encourages children to start smoking, and the consistency of the evidence that PoS promotion influences children's smoking, the authors suggest that ample justification exists for banning PoS advertising and displays of smoked tobacco products.	Positive effect

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Bogdanovica, I. *et al*. (2015). Exposure to point-of-sale displays and changes in susceptibility to smoking: findings from a cohort study of school students. Exposure to point-of-sale displays and changes in susceptibility to smoking: findings from a cohort study of school students. *Addiction*. 110(4):693–702. DOI: 10.1111/add.12826.	The study was conducted in the United Kingdom. Two surveys of a school based cohort study carried out in 2011 and 2012. The study looked at changes in susceptibility to smoking and smoking status in relation to frequency of visiting shops and noticing PoS displays and number of tobacco brands recognized, controlling for a range of potential confounders. Susceptibility to smoking was defined using a set of three questions covering intentions to try smoking, to smoke within the next year and likelihood of smoking if a best friend offered a cigarette.	- Among non-susceptible never-smokers, noticing PoS displays more frequently was associated independently with an increased risk of becoming susceptible to smoking, but was not associated with smoking uptake. - Recognizing a higher number of brands among non-susceptible never smokers doubled the risk of becoming susceptible to smoking and of becoming a smoker, but this did not have a significant effect on transition to smoking among susceptible never smokers. - Frequency of noticing tobacco PoS displays was not associated significantly with smoking uptake among those who were susceptible never smokers at baseline.	

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Paynter, J., Edwards, R., Schluter, P.J. & McDuff, I. 2009. Point of sale tobacco displays and smoking among 14-15-year olds in New Zealand: a cross-sectional study. *Tobacco control*. 18(4):268–274. DOI: 10.1136/tc.2008.027482.	The study was conducted in New Zealand. The sample comprised a national cross-section of 14–15 year olds with two measures of exposure to tobacco displays at the point of sale and three outcome measures. The outcome measures examined in this paper are susceptibility to smoking initiation, experimenting with smoking or current smoking.	- Compared with visiting stores less often than weekly, a greater frequency of store visits was related to increased odds of being susceptible to smoking and experimenting with smoking. - The likelihood of being a current smoker increased with a greater frequency of store visits among students of medium and high socioeconomic status, but not among those of low socioeconomic status. - Study was consistent with the notion that greater exposure to tobacco displays at the point of sale increases youth smoking, and suggest display bans are needed.	Positive effect

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Siapush, M. *et al*. (2016). The Association of Exposure to Point-of-Sale Tobacco Marketing with Quit Attempt and Quit Success: Results from a Prospective Study of Smokers in the United States. *International Journal of Environmental Research and Public Health*. 13(2):203. DOI: 10.3390/ijerph13020203.	The study was conducted in the United States. Data were collected via telephone-interview on exposure to POS tobacco marketing, sociodemographic and smoking-related variables from 999 smokers in Omaha, Nebraska, in the United States and then a six-month follow-up interview was conducted so as to get information on quit attempts and smoking cessation.	- Exposure to POS marketing at baseline was not associated with the probability of having made a quit attempt as reported at the six-month follow-up (p = 0.129). However, higher exposure to POS marketing was associated with a lower probability of quit success among smokers who reported to have attempted to quit smoking at six-month follow-up (p = 0.006). - Exposure to POS tobacco marketing is associated with lower chances of successfully quitting smoking. - Policies that reduce the amount of exposure to POS marketing might result in higher smoking cessation rates.	Positive public health impact

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Brown, A. *et al*. (2012) - Support for removal of point-of-purchase tobacco advertising and displays: findings from the International Tobacco Control (ITC) Canada survey. *Tobacco control*. 21(6):555–9. DOI: 10.1136/tobaccocontrol-2011-050153.	The study was conducted in Canada. Longitudinal data from 10 Canadian provinces in the International Tobacco Control Survey was analysed to examine adult smokers' support for a ban on tobacco advertising and displays in stores and whether this support is associated with noticing either advertising or displays in stores, and quit intentions, over time. The surveys were conducted before, during and in some cases after the implementation of display bans in most Canadian provinces and territories.	- Smokers in all provinces showed strong support for a ban on tobacco displays over the study period. Levels of support for an advertising and display ban were comparable between Canadian provinces over time, irrespective of whether they had been banned or not. - Noticing tobacco displays and signs in-store was demonstrably less likely to predict support for displays and advertising ban, respectively. - Smokers intending to quit were more likely to support advertising and display bans over time.	Positive public health impact

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Quinn, C., Lewis, S., Edwards, R. & McNeill, A. 2011. Economic evaluation of the removal of tobacco promotional displays in Ireland. *Tobacco control*. 20(2):151–5. DOI: 10.1136/tc.2010.039602.	The study was conducted in Ireland. Cigarette sales were evaluated using scanning (weekly data since January 2006) and audit data (bimonthly since November 2007) within different retail categories using data sourced from AC Nielsen, Ireland. Visual inspection and time-series regression techniques were used where appropriate to assess changes in sales over time and in relation to the legislation.	- No change was observed in sales data in any retail category over and above seasonal patterns and an underlying downward trend over time. Similarly, where available data enabled statistical analysis, there was no significant effect in the short term (up to 12 months after implementation) on retail sales of tobacco products, over and above seasonal and long-term trends. - Claims of substantial revenue losses and closures of small retailers as a direct result of the removal of point of sale tobacco promotional displays in Ireland are not borne out by these data.	No economic impact

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Hoek, J. *et al*. (2012) - Tobacco retail displays: a comparison of industry arguments and retailers' experiences. *Tobacco Control*. 21:497-501. http://dx.doi.org/10.1136/tc.2011.043687	The study was conducted in New Zealand. The study conducted in-depth interviews with New Zealand retailers who had voluntarily removed tobacco from open display in their stores. The main outcomes measured were revenue of store owners, security risk, convenience of store owners.	- Retailers who had removed tobacco displays did so primarily to reduce their security risk and found their stores had become less vulnerable to retail crime. They did not find removing displays costly or inconvenient nor had this decision significantly reduced their revenue. - The findings reveal that retailers' experiences differed in many ways from tobacco companies' predictions and suggest that industry arguments against display removal lack objective support and are self-serving.	Positive economic impact

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Zacher, M., Germain, D., Durkin, S., Hayes, L., Scollo, M. & Wakefield, M. 2013. A store cohort study of compliance with a point-of-sale cigarette display ban in Melbourne, Australia. *Nicotine & Tobacco Research*. 15(2):444–449.	The study was conducted in Australia. Three audits of 302 stores in Melbourne, Australia by trained observers who gathered information on point-of-sale tobacco displays 2-3 months before and 3-4 and 11-12 months after the enactment of new restrictions. Main outcome measure was compliance with POS ban legislation.	- Between the first and second audits, nine stores stopped selling tobacco and three stores had either shut down or were closed for renovations. Of the remaining 290 stores, 94.1% observed the full ban on cigarette package visibility, while new restrictions on price board size and new requirements for graphic health warnings were followed in 85.9% and 67.2% of stores, respectively. - Between the second and third audits, another seven stores ended tobacco sales and two stores closed. In Audit 3, 89.7% of the remaining 281 stores complied with price board restrictions, and 82.2% of stores followed requirements for graphic health warnings. - Overall, the prevalence of anti-tobacco signage increased and pro-tobacco features decreased between audits for every store type and neighbourhood socio-economic status.	Tobacco retailers were almost universally compliant with placing cigarettes out of sight and a substantial majority were compliant with regulations on price board size and display of graphic health warnings, demonstrating that such legislation can be implemented successfully.

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Minstry, R. *et al*. 2015. Compliance With Point-of-Sale Tobacco Control Policies in School-Adjacent Neighbourhoods in Mumbai, India. *American Journal of Health Promotion.* DOI: 10.4278/ajhp.140925-QUAN-469	The study used data from India. The authors conducted face-to-face interviews, and audits of POS environments were used to assess compliance.	- About 4% of vendors were fully compliant. Although 80% reported compliance with the ban on tobacco sales to minors, only 10% displayed signage about the ban. - About 84% were compliant with the two-tobacco advertisement limit; of those displaying advertisements, 67% were compliant with size limits, 68% with content restrictions, and 8% with health warning requirements. - Knowledge about fines for noncompliance was associated with compliance with the ban on sales to minors and signage requirement. Greater compliance with the two-advertisement limit was associated with higher store income from tobacco and lower neighbourhood socioeconomic status; the latter was associated with advertisement size limits compliance.	Low compliance

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Salloum, R.G., Nakkash, R.T., Myers, A.E., Wood, K.A. & Ribisl, K.M. 2013. Point-of-sale tobacco advertising in Beirut, Lebanon following a national advertising ban. *BMC Public Health*. 13:534. DOI: 10.1186/1471-2458-13-534.	The study was conducted in Lebanon, 3 months following the ban on tobacco advertising. Trained students observed 100 retail outlets and entered data into a web-based form using iPad technology. The objective was to assess compliance with the national advertising ban.	- Among the 100 tobacco retail outlets, 62% had tobacco advertisements, including 7% with a tobacco brand logo as part of the main exterior store sign. - POS tobacco advertising is widespread in Beirut despite the national advertising ban. These findings point to an urgent need for the enforcement of the advertisement ban with tobacco retail outlets in Lebanon.	Low compliance

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Goel, S., Kumar, R., Lal, P., Tripathi, J.P., Singh, R.J., Rathinam, A. & Christian, A. 2014. How compliant are tobacco vendors to India's tobacco control legislation on ban of advertisments at point of sale? A three jurisdictions review. *Asian Pacific Journal of Cancer Prevention*. 15(24):10637–10642. DOI: 10.7314/APJCP.2014.15.24.10637.	The study was conducted in India. A cross-sectional survey using an observation checklist was conducted in 1860 POS across three jurisdictions (Chennai city, District Vadodara and District Mohali) in India. Measured compliance with POS advertising ban.	- The most common mode of advertisement of tobacco products was product showcasing (51.1%), followed by dangles (49.6%), stickers (33.8%) and boards (27.1%). More than one fourth of POS were found violating legal provisions for displaying advertisement boards in one or other forms (oversized, extended to full body length of POS, displayed brand name/ pack shot and promotional messages). - Advertisement boards (16.3%) without health warnings were also found and wherever found, more than 90% health warning were not as per the specification in respect to size, font and background color. - There is an urgent need of effective implementation of a comprehensive ban on tobacco product advertisement, promotion and sponsorship at point of sale.	Low compliance