10 January 2014

Sir Cyril Chantler
Chair, Independent Review into standardized packaging of tobacco
c/o Kings College London
Room 1.2 Hodgkin Building
Guy’s Campus
London SE1 1UL

Dear Sir Cyril,

As you may be aware, the Centre for Behavioural Research in Cancer at the Cancer Council Victoria is undertaking several research projects to evaluate aspects of the impact of plain packaging in Australia. These are at various stages of completion/review/publication as described below.

**Background on the Centre for Behavioural Research in Cancer**

The study of smoking attitudes and behaviour including the effects of policies designed to discourage the use of tobacco is a major focus of the work of the Centre for Behavioural Research in Cancer (CBRC) which was established at the Cancer Council Victoria in 1986.

Multiple factors affect attitudes to smoking and the likelihood of experimentation and progression to regular smoking. Changes in patterns of smoking across the population are driven not just by policies and programs implemented by government but also by promotional strategies adopted by tobacco companies and by cultural and social factors (e.g. parenting) which can work for, against and independently of public sector and commercial activity.

**Approach to assessing the impact of tobacco control policies**

Effects of policies may be complex, indirect, multi-dimensional and far-reaching and it is rarely possible to precisely quantify the contribution of each factor. Some effects of a policy are likely to operate immediately and directly—for instance the effects of a large increase in the price of a packet of cigarettes. Such effects are much more easily detected using standard statistical techniques than are those of factors likely to be longer term and even generational in nature. Fewer older role models smoking in front of children, for instance, is a factor likely to exert powerful effects on children’s attitudes to smoking. Such effects could reduce the likelihood of experimentation in small and largely undetectable ways until five or so years have elapsed when cumulative effects become apparent.
CBRC’s approach to assessing tobacco policies includes a combination of experimental studies, cross-sectional analysis of attitudes and behaviour, long-term monitoring and empirical analysis of changes in behavioural measures.

**Experimental studies**

Experimental studies attempt to simulate the important elements of a particular policy and examine immediate responses relevant to likely effects, for instance:


These studies are critical sources of evidence prior to the actual implementation of policies because they permit isolation of particular components of policies for more focussed study and begin to point to how policies, once implemented, could be expected to work in practice. Other recently completed experimental studies of relevance to packaging (but not to children per se) include:


**Long term surveillance and analysis of data from long-running cross-sectional surveys**

CBRC’s Australian Secondary School Survey of Smoking Alcohol and Drug Use (ASSAD) has been conducted every three years since 1984, and includes every State and Territory with a total sample size of over 20,000 students aged 12–17 years per wave, with the most recent report available here:


Studies based on data from ASSAD surveys examining the immediate or short-run effects of policies on proximal beliefs, attitudes and inclinations among young people, include a study of the early impact of the 2006 (30% front-of-pack) graphic health warnings on school students:

The Cancer Council's annual household survey of adults for Quit Victoria concerning smoking knowledge, attitudes and behaviour in the state of Victoria has been conducted since 1984. The 2012 survey coincided with the introduction of plain packaging and allowed us to undertake an opportunistic study of its short-run effects.


Empirical analysis of long-term behavioural data

The Centre is also engaged in the long-term collection of data on the population reach and frequency of anti-smoking campaigns (Target Audience Rating Points for televised mass media campaigns), press coverage of the smoking issue, the implementation timetables of national and state-level legislation and (in conjunction with Quit Victoria) tobacco taxes and prices.

The Centre merges this long-term policy and program activity data with long-standing survey data sets and conducts empirical studies to quantify the impact of relevant tobacco policy and marketing factors, using statistical techniques to attempt to partition the relative contribution of various policies over time to changes in smoking behaviour, for instance see:


Early and longer-term impact of plain packaging and other tobacco control policies on smoking rates

The contribution of plain packaging to a reduction in smoking rates needs to take into account the counterfactual—what might have happened anyway in the absence of the policy. A decline in smoking may have occurred anyway; alternatively, smoking may have increased, and ‘no change’ could represent a policy victory. Generally, the effects of policies on smoking rates can really only be assessed in hindsight—once several years have passed since implementation and after the effects of other policies and programs can be factored in. Data on smoking rates collected from the more than
20,000 children who will participate in the ASSAD 2014 survey will take many months to be processed, and results are unlikely to be analysed and published until late-2015. Results from ASSAD 2017 will be available only in late-2018.

Studies in progress
Evidence concerning the more proximal effects of the policy will be available in due course.

Effects of plain packaging on adults
CBRC has been commissioned by the Australian Department of Health and Ageing to undertake a monthly tracking study of Australians aged 18 to 69 years to assess the impact of plain packaging and larger graphic health warnings on pack perceptions, salience of warnings and perceptions of product harmfulness, as well as several ‘downstream’ measures such as concern about health, brand identification and enjoyment of smoking, and attitudes and intentions concerning quitting.

Effects of plain packaging on children
The Department has also commissioned CBRC to undertake a study assessing perceptions of packaging and salience of warnings among secondary school children aged 12 to 17 years. Smoking is restricted in an ever-increasing number of places in Australia. Most smokers do not smoke indoors and many smokers make an effort not to smoke in front of children. For such a study of the impact of plain packaging to be feasible, many months needed to elapse before sufficient numbers of (especially younger) school children had actually seen the new plain packaging on at least a couple of occasions and had seen more than one or two of the new health warnings. Data for the study was therefore not collected until the second half of 2013 in Victoria and Queensland and is currently being processed prior to analysis. A report on results is due to be submitted in the second half of 2014.

Studies recently completed
In the meantime, one study that may become available within the time-frame of the Review should be helpful in your deliberations.


Between October and April 2011–2012 (before packaging changes) and 2012–2013 (during and after packaging changes), researchers counted patrons, smokers and tobacco packs at cafes, restaurants and bars with outdoor seating in Melbourne and Adelaide. Pack type (fully-branded, plain, or unknown) was noted, and rates of pack display, patrons observed smoking and pack orientation were analysed. In this study of over 35,000 patrons, Zacher et al found a decline both in the rate of observed smoking in outdoor areas of cafés, restaurants, and bars and in personal pack display (packs clearly visible on tables). Further, a small proportion of smokers took steps to conceal packs that would otherwise be visible. The decline in pack display coincided with the full implementation of plain packaging (PP) from December 2012, was stronger in venues with children present (of primary school age or younger), and was limited to mid- and high- socio-economic (SES) areas. As indicated in the report, the orientation of packs that remained on tables also changed: “The proportion of packs oriented face-up declined from 85.4% of fully-branded packs pre-PP to 73.6% of plain packs post-PP (IRR=0.87, 95% CI=0.79-0.95, p=.002). Alternately, the proportions concealed by phones, wallets or other items (4.4% of fully-branded packs pre-PP and 9.5% of plain packs post-PP; IRR=2.33, 95% CI=1.72-3.17, p<.001) and in an external case (1.5% to 3.5% of all packs; IRR=2.79, 95% CI=1.77-4.40, p<.001) increased. Low-SES areas evidenced the greatest increase in pack concealment and the greatest decline in face-up pack orientation.”

This study provides extremely encouraging evidence of a likely reduction attributable to plain packaging in exposure of children to promotional packaging and to role modelling of smoking in day-to-day life.

We would be happy to expand on any of these points or provide further details on any of the studies summarised above. We wish you every success with the Review and look forward to meeting you should you wish to include a visit the Cancer Council Victoria in Melbourne as part of your investigations in Australia. I can be reached on +61-3-9514 6351 and by email at melanie.wakefield@cancervic.org.au

Yours faithfully

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cc Fiona Sharkie, Director Quit Victoria, Ms Kylie Lindorff, Manager tobacco control policy, Quit Victoria and Michelle Scollo, Senior adviser tobacco, Cancer Council Victoria.