



# How did Government and Opposition MPs justify and oppose repealing the smokefree endgame measures?

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# **Summary**

In February 2024, Aotearoa New Zealand's coalition Government repealed policies that would have greatly reduced the addictiveness, availability and accessibility of smoked tobacco. This decision did not heed advice from the Ministry of Health, overlooked experts' views, and was contrary to public opinion. Because the repeal occurred under urgency, a process that does not include public submissions or allow for external scrutiny, analysing the arguments presented may help explain how such an unpopular decision proceeded. This information can assist other countries hoping to introduce similar policies. In this Briefing, we discuss core narratives presented by Government and Opposition MPs, and consider implications these may have for other countries considering tobacco endgame measures.

In December 2022, Aotearoa New Zealand (Aotearoa) passed world-leading legislation designed to catalyse reductions in smoking prevalence and realise the Smokefree 2025 goal: smoking prevalence of no more than five percent among all population groups. However, in February 2024, the newly-elected coalition Government repealed measures that would have set a new low nicotine standard, greatly reduced tobacco availability, and created a smokefree generation.

Because the repeal proceeded under urgency, a process that does not allow for select committee hearings, public submissions or extensive debate,<sup>2</sup> examining the arguments MPs presented could help other countries anticipate potential opposition and avoid the fate Aotearoa's measures met. We recently reviewed the verbatim Hansard record using the Policy Dystopia Model,<sup>3</sup> a framework that outlines argumentative strategies tobacco companies use to oppose policies that would restrict their marketing. In general terms, the PDM explains tactics tobacco companies use to deny and question benefits that public health policies would bring, while escalating the perceived costs of introducing these policies. We expanded the PDM by analysing counter-arguments presented by Opposition MPs, who argued against the repeal legislation.

# What arguments did we identify?

Evidence from the NZ Health Survey showed daily smoking prevalence among Māori in 2023 (i.e., the most recent data at the time of the repeal) was 17.1%, more than three times the maximum specified in the goal.<sup>4</sup> However, Coalition MPs argued endgame policies were unnecessary and claimed Aotearoa was "on track" to achieve the Smokefree 2025 goal.

Our smoking rates have fallen drastically in recent times... If those trends continue without any additional measures, [we] will hit the headline smoke-free goal"—NZ First Party MP

Even using the most recent data, which show daily smoking prevalence of 14.7% among Māori, it is clear the Smokefree 2025 goal is very unlikely to be achieved for Māori. Arguments to the contrary fail to align with findings from our most comprehensive population health survey.<sup>4</sup>

Rather than regulate tobacco companies' aggressive marketing, role in promoting smoking as socially normative,<sup>6</sup> and creation of highly addictive products,<sup>7</sup> Coalition MPs proposed returning to individually focused measures, such as smoking cessation support.

"We're going to be a lot less punitive... provide [people] with more choice to help them quit"—National Party MP

This approach shifts responsibility for smoking onto people who smoke and overlooks tobacco companies' efforts to question smoking's harms and addictiveness.<sup>89</sup>

NZ data showed endgame measures would not create unexpected costs (and would have resulted in health savings<sup>10</sup>) for example, illicit tobacco trade has remained stable over time with a recent analysis suggesting it may even have decreased.<sup>11 12</sup> However, Coalition MPs alleged the endgame measures would increase illicit trade and retail crime.

Furthermore, "...we [would] have a large illegal market putting profits in the pockets of gangs..."—<u>ACT Party MP</u>.

In fact, a key way to reduce retail crime is to reduce smoking prevalence as quickly as possible; as fewer people smoke, the market for illicit products and incentive to steal tobacco decrease. Our earlier briefings explain this logic (see <a href="here">here</a> and <a href="here">here</a>).

Coalition MPs' narratives lacked supporting evidence and were often contrary to research findings and national survey data. Few Coalition MPs referred to supporting evidence and several presented ideas that had strong parallels with tobacco companies' rhetoric.<sup>13</sup>

Opposition MPs fought the repeal, raised concerns about the process followed, and argued progressing the repeal under urgency created numerous procedural failures. Citing Te Tiriti o Waitangi, they suggested the process was anti-democratic and breached constitutional obligations to Māori; furthermore, they criticised the Coalition Government for proceeding without awaiting the outcome of a claim lodged with the Waitangi Tribunal.

Opposition speakers criticised the rushed repeal process; they drew unfavourable

comparisons between the process used to develop the SERPA legislation and its repeal, which excluded many submitters, including community representatives, iwi members, young people, and public health experts, and suggested the Coalition Government had no mandate to proceed with the repeal.

Where exactly does [the Government's] mandate come from? To say that it's from the general election is not satisfactory when there are no checks and balances..."—<u>Labour Party MP</u>

For Opposition speakers, these procedural failures made harmful outcomes inevitable; they predicted socially and economically regressive outcomes that would exacerbate health, economic and social inequities.

## What are the implications for Aotearoa and other nations?

Whether deliberate or not, Coalition MPs' use of arguments made by tobacco companies suggests an urgent need to restrict tobacco companies' ability to influence policy. Countries that allow tobacco companies to submit on policy proposals could close this opportunity, given tobacco industry interference is a powerful obstacle to evidence-based tobacco policies. Additional measures, include introducing lobbying regulations, such as a code of conduct to govern lobbying, a register that records all lobbying activity undertaken by organisations, and legislation that would define how policy makers and officials maintain high compliance with their obligations under the Framework Convention on Tobacco Control. These policies would increase transparency and should be an urgent priority here and internationally.

Yet while limiting lobbying and making interactions more transparent is crucial, even these steps may not capture all the interactions between politicians, their staff, and tobacco companies (or groups they support). Researchers must thus continue to question tobacco companies' arguments, and the logic and evidence used to support these, particularly given court findings that tobacco companies deceived the public for many decades.<sup>17</sup>

# What this Briefing adds

- Analysing arguments used by Coalition government and Opposition MPs during the debate repealing the smokefree "endgame" measures highlights stark differences in the logic and evidence used.
- Coalition MPs' claims the Smokefree 2025 goal would be realised were not consistent with population survey findings; nor did peer-reviewed research findings support claims the endgame policies would have led to unintended adverse outcomes.
- Opposition MPs focussed strongly on procedural failures in the repeal process, which they alleged breached Te Tiriti o Waitangi, did not allow consultation, undermined democracy, and would exacerbate inequities.

# Implications for policy and practice

Tobacco companies' arguments permeated Coalition MPs' discourse. Measures to limit tobacco companies' influence and strengthen compliance with Article 5.3 of the WHO Framework Convention on Tobacco Control are urgently needed and could include:

- Excluding tobacco companies from policy consultation processes.
- Developing a robust lobbying code of conduct.
- Requiring comprehensive and complete disclosure of any interactions between politicians, their staff and tobacco companies or groups that have financial connections with them.

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### References

- New Zealand Government. Smokefree Environments and Regulated Products Amendment Regulations 2023. In: New Zealand Government, ed. 2023/201. Wellington.
  - https://www.legislation.govt.nz/regulation/public/2023/0201/latest/whole.html#whole
- 2. New Zealand Parliament. What is "urgency"? 2017
  <a href="https://www.parliament.nz/mi/visit-and-learn/how-parliament-works/fact-sheets/what-is-urgency/">https://www.parliament.nz/mi/visit-and-learn/how-parliament-works/fact-sheets/what-is-urgency/</a>
- 3. Ulucanlar S, Fooks G, Gilmore A. The policy dystopia model: an interpretive analysis of tobacco industry political activity. *PLoS Medicine* 2016;13(9):e1002125.
- 4. Ministry of Health. Annual Update of Key Results 2022/23: New Zealand Health Survey

- Wellington2023 [Available from:
- https://www.health.govt.nz/publication/annual-update-key-results-2022-23-new-zealandhealth-survey accessed 15 December 2023.
- 5. Nip J, Edwards R, Hoek J, et al. Smoking prevalence and trends: important findings from the 2023-24 New Zealand Health Survey. *Public Health Expert Briefing* (21 November 2024).
  - https://www.phcc.org.nz/briefing/smoking-prevalence-and-trends-important-findings-2 02324-new-zealand-health-survey accessed 21 November 2024.
- 6. Hoek J, Edwards R, Waa A. From social accessory to societal disapproval: Smoking, social norms and tobacco endgames. *Tobacco Control* 2022;31(2):358-64. <a href="https://tobaccocontrol.bmj.com/content/tobaccocontrol/31/2/358.full.pdf">https://tobaccocontrol.bmj.com/content/tobaccocontrol/31/2/358.full.pdf</a>
- 7. Rabinoff M, Caskey N, Rissling A, et al. Pharmacological and chemical effects of cigarette additives. *American Journal of Public Health* 2007;97(11):1981-91. https://doi.org/10.2105/ajph.2005.078014
- 8. Goldberg RF, Vandenberg LN. Distract, delay, disrupt: examples of manufactured doubt from five industries. *Reviews on Environmental health* 2019;34(4):349-63. https://doi.org/10.1515/reveh-2019-0004
- 9. Brandt AM. Inventing conflicts of interest: a history of tobacco industry tactics. American Journal of Public Health 2012;102(1):63-71. https://doi.org/10.2105/ajph.2011.300292
- van der Deen FS, Wilson N, Cleghorn CL, et al. Impact of five tobacco endgame strategies on future smoking prevalence, population health and health system costs: two modelling studies to inform the tobacco endgame. *Tobacco control* 2018;27(3):278-86. <a href="https://doi.org/10.1136/tobaccocontrol-2016-053585">https://doi.org/10.1136/tobaccocontrol-2016-053585</a>
- 11. Wilson N, Carter R, Heath D, et al. Assessing cigarette smuggling at a time of border closure to international tourists: survey of littered packs in New Zealand. *Tobacco Control* 2022;33(2):273-74. <a href="https://www.ncbi.nlm.nih.gov/pubmed/36028304">https://www.ncbi.nlm.nih.gov/pubmed/36028304</a>
- 12. Bullen C, Gregan MJ, Arachchilage N, et al. Research, Evaluation and Monitoring of Illicit Tobacco in New Zealand: Baseline report 2022. Wellington: Ministry of Health,. <a href="https://www.health.govt.nz/system/files/documents/publications/report-on-illicit-tobacco-trade-baseline-report-oct23.v3.pdf">https://www.health.govt.nz/system/files/documents/publications/report-on-illicit-tobacco-trade-baseline-report-oct23.v3.pdf</a>
- 13. Ozarka E, Hoek J. A narrative analysis of a tobacco industry campaign to disrupt Aotearoa New Zealand's endgame policies. *Tobacco Control* 2023:tc-2023-058372. <a href="https://tobaccocontrol.bmj.com/content/tobaccocontrol/early/2023/12/20/tc-2023-058372.full.pdf">https://tobaccocontrol.bmj.com/content/tobaccocontrol/early/2023/12/20/tc-2023-058372.full.pdf</a>
- 14. World Health Organization. Tobacco industry interference with tobacco control. 2009. https://escholarship.org/uc/item/98w687x5.
- 15. Verrall A. Smokefree Environments and Regulated Products (Preventing Industry Interference) Amendment Bill (Draft). <a href="https://assets.nationbuilder.com/nzlabour/pages/33503/attachments/original/1746580227/SERPA\_Preventing\_Industry\_Interference.pdf?1746580227">https://assets.nationbuilder.com/nzlabour/pages/33503/attachments/original/1746580227</a>
- 16. Rashbrooke M. A Balance of Voices: Options for the regulation of lobbying in New Zealand report. Health Coalition Aotearoa (March 2024).

  <a href="https://www.healthcoalition.org.nz/wp-content/uploads/2024/06/Options\_for\_lobbying\_regulation.pdf">https://www.healthcoalition.org.nz/wp-content/uploads/2024/06/Options\_for\_lobbying\_regulation.pdf</a>
- 17. Campaign for tobacco-free kids. U.S. District Judge Gladys Kessler's Final Opinion: Summary of Findings Against the Tobacco Industry.

  <a href="https://www.tobaccofreekids.org/us-resources/fact-sheet/u-s-district-judge-gladys-kesslers-final-opinion-summary-of-findings-against-the-tobacco-industry">https://www.tobaccofreekids.org/us-resources/fact-sheet/u-s-district-judge-gladys-kesslers-final-opinion-summary-of-findings-against-the-tobacco-industry</a>



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