



Australian
Nursing &
Midwifery
Federation

27 September 2023

Ms Apolline Kohen
Committee Secretary
Senate Standing Committees on Community Affairs
PO Box 6100
Parliament House
Canberra ACT 2600

Via email: community.affairs.sen@aph.gov.au

Dear Ms Kohen,

Public Health (Tobacco and Other Products) Bill 2023 and the Public Health (Tobacco and Other Products) (Consequential Amendments and Transitional Provisions) Bill 2023

Thank you for the opportunity to provide feedback to the Senate Standing Committee on Community Affairs' public consultation on the provisions of the Public Health (Tobacco and Other Products) Bill 2023 and the Public Health (Tobacco and Other Products) (Consequential Amendments and Transitional Provisions) Bill 2023.

The Australian Nursing and Midwifery Federation (ANMF) is Australia's largest national union and professional nursing and midwifery organisation. In collaboration with the ANMF's eight state and territory branches, we represent the professional, industrial, and political interests of more than 322,000 nurses, midwives, and carers across the country. Our members work in the public and private health, aged care, and disability sectors across a wide variety of urban, rural, and remote locations. We work with them to improve their ability to deliver safe and best practice care in each and every one of these settings, fulfil their professional goals, and achieve a healthy work/life balance.

The ANMF welcomes the introduction of these timely reforms and recognises them as an important step towards improving the health and wellbeing of the Australian community and future generations as well as a clear pathway to contributing to reducing burden on Australia's already strained health and aged care system. These reforms will update and simplify Australia's tobacco control measures and together with wider actions to further reduce tobacco use, will help to protect and improve the health of our community.

There is no safe or beneficial level of tobacco use and while smoking rates have significantly fallen over recent decades, the use of tobacco is a significant direct and indirect contributor to ill health and preventable disease. With the rise in popularity and accessibility of vaping and e-cigarettes, particularly among children and young people, it is timely and appropriate to ensure that legislation and policy remain fit

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ANMF Journals

Australian Nursing and
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Australian Journal of
Advanced Nursing (AJAN)
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*The industrial and
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for purpose and indeed are strengthened further to combat and reduce the clear risks and damaging impact of tobacco on our community and future generations. There is no evidence to demonstrate that heated tobacco products including vaping and e-cigarettes are safe alternatives to other tobacco products and many chemicals and toxicants found in heated tobacco aerosols can be found in higher concentrations than tobacco smoke.

Although fewer Australians smoke than ever before, which is clearly a result of both progressively stronger legislation and increasing community awareness and understanding of the risks of tobacco use, tobacco use remains the single greatest preventable contributor to disease and premature death in Australia. As with the use and misuse of other substances and drugs, not all members of the community are equally impacted by the risks and harmful impacts of tobacco use. Experiencing stigma and prejudice increases the incidences of problematic and long-term substance use including tobacco. This is particularly the case for vulnerable and marginalised populations, including people who:

- are older (classified as over 50, tobacco and other substance misuse can contribute to premature ageing);
- are experiencing homelessness;
- are sex and gender diverse;
- are of Aboriginal and/or Torres Strait Islander heritage;
- have had contact with the criminal justice system;
- have mental ill-health;
- have chronic pain;
- and/or have experienced institutional abuse.

Tobacco use is also associated with greater likelihood of having experienced adverse childhood experiences, including out-of-home care, and/or experienced complex, inter- or multi-generational trauma. Many people who use tobacco are also more likely to use or misuse alcohol and other substances and are also more likely to occupy more than one of these population groups. Combined use of tobacco, alcohol, and other drugs has a compounding negative impact on the health of users and other community members and also contributes to the economic and social burden of disease and increased healthcare costs.

It is the position of the ANMF that;

- a. People use substances for a wide range of reasons, including recreational use, and they are generally unaware of the potential for harmful effects. This might be particularly true in the context of tobacco use in the context of vaping and e-cigarettes, especially among younger people and children.
- b. Tobacco use not only affects the individual but families, friends and the broader community. The prevalence of tobacco use means that people receiving care across the full spectrum of nursing and midwifery practice are adversely affected. It is therefore essential that all nurses and midwives are aware of, educated and informed about issues relating to harm minimisation for tobacco use, and be prepared to provide opportunistic education in their practice settings. Health assessments should include screening for tobacco (as well as alcohol and other



substance/drug use, both prescription and illicit) with education and referral to support services offered as appropriate.

c. State/Territory and Federal funding should be provided to:

- assist in the education of nurses and midwives on tobacco use interventions and management strategies;
- facilitate more nurse- and midwife-led programs;
- enable and engage people to access support services from nurses and midwives through face-to-face and/or telehealth when and where needed to suit people's needs, and;
- employ more nurse practitioners in the tobacco and other drug sector.

d. Harm minimisation measures are required to reduce harm from tobacco use, avoid unnecessary deaths, reduce the burden of disease, and decrease hospitalisations for the benefit of the individual and the community.

e. While essential and underfunded, harm minimisation and rehabilitation services do not prevent initial or prolonged substance use. Any meaningful action must therefore address the wider socioeconomic causes that increase the likelihood of people using tobacco and other drugs.

f. Meaningful action requires early intervention which contribute to breaking the cycle of under-education, unemployment, problematic tobacco and substance use, and incarceration, including;

- Education and policy measures to reduce stigma and prejudices, particularly those experienced by marginalised populations, that contribute to anxiety, depression, shame, and fear which lead to tobacco use and self-medication with alcohol and drugs;
- Reducing poverty and inequity through increasing social support payments;
- Investing in public housing;
- Providing parenting programs and other support services to reduce the number of children in out-of-home care, and;
- Allocating dedicated, direct funding to services that address trauma and chronic pain management.

Australia has implemented among the best tobacco control initiatives worldwide and these reforms further strengthen a national position and legislation to continue reducing the number of people taking up tobacco use and helping others to quit. By enhancing our laws to cover newer emerging tobacco related risks including vaping, e-cigarettes, and the tobacco industry's latest approaches to marketing and advertising, many Australians will have healthier, longer lives.



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We appreciate the opportunity to participate in this consultation process and provide our feedback on behalf of our membership.

Should you require further information on this matter, please do not hesitate to contact us at

Yours sincerely

Annie Butler
Federal Secretary