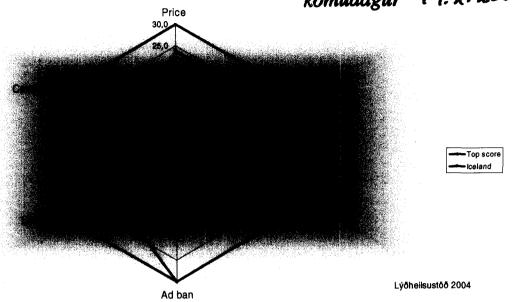
Alþingi Erindi nr. Þ 134/882 komudagur 19.2.2009





Canada

2000-present

Health Effects sex - impotence, clever



Canada

2000-present

Health Effects stroke - diseased organ, brain, stroke, gross

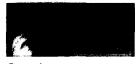
Other Warnings used in Testing and Development**



Canada

2006

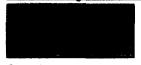
Health Effects other - cervical cancer, lived experience



Canada

2006

Addiction - cigarette addiction uncontrollable



Canada

2006

Addiction - cigs as jail bars, clever



Canada

2006

Addiction - death, gravestone, clever



Canada

2006

Addiction - lived experience



Canada

2006

Addiction - promoting healthy living



Canada 2006

Addiction - quitting, lived experience



Canada 2006

Addiction - teens hooked on cigs, clever

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Progress in Tobacco Control in 30 European Countries, 2005 to 2007

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Introduction

In this report we describe the results of a survey of tobacco control activity in 30 European countries in 2007, using the Tobacco Control Scale (TCS), first described in our 2006 paper, *The Tobacco Control Scale: a new scale to measure country activity* (1). A description of how the scale was constructed and the original survey methodology can be found in this paper, and the scale itself is reproduced in Table 1. We here report the results of the 2007 survey, compare them with the results of the 2005 survey, and discuss the changes and reasons for them.

The TCS, which quantifies the implementation of tobacco control policies at country level, is based on six policies described by the World Bank (2), which they say should be prioritised in a comprehensive tobacco control programme. The six policies are:

- price increases through higher taxes on cigarettes and other tobacco products;
- bans/restrictions on smoking in public and work places;
- better consumer information, including public information campaigns, media coverage, and publicising research findings;
- comprehensive bans on the advertising and promotion of all tobacco products, logos and brand names;
- large, direct health warning labels on cigarette boxes and other tobacco products;
- treatment to help dependent smokers stop, including increased access to medications.

Table 1. The Tobacco Control Scale (TCS)

Price of cigarettes and other tobacco products	30
Trice of digarettes and other topacoop products	
The price of Marlboro in January 2005, taking into account Gross Domestic	15
Product per capita expressed in Purchasing Power Standards (PPS). Country	
with highest price ratio receives 15 points. (see notes)	
The price of a packet of cigarettes in the most popular price category in	15
January 2005, taking into account Gross Domestic Product per capita	
expressed in the PPS. Country with highest price ratio receives 15 points.	22
Smoke-free work and other public places on 1 July 2005	22
Complete ban without exceptions (no smoking rooms); enforced	10
Complete ban, but with closed, ventilated, designated smoking rooms;	8
enforced	
Complete ban, but with ventilated, designated smoking rooms; enforced	6
Meaningful restrictions; enforced	4
Legislation, but not enforced	2
Complete ban; enforced	8
Complete ban, but with closed, ventilated, designated smoking rooms;	6
enforced	
Meaningful restrictions; enforced	4
Legislation, but not enforced	2
Complete ban in domestic trains without exceptions	1
Complete ban in other public transport without exceptions	1
Complete ban in educational, health, government and cultural places without	2
exceptions OR Ban in educational, health, government and cultural places, but with	1
designated smoking areas or rooms	
Spending on public information campaigns in 2004	15
Tobacco control spending by the government in 2004, as a proportion of	10
Gross Domestic Product (GDP). Country with highest ratio receives 15 points	
(see notes).	
Comprehensive bans on advertising and promotion on 1 July 2005	13
	THE AN
Complete ban on tobacco advertising on television	3
Complete ban on outdoor advertising (e.g. posters)	2
Complete ban on advertising in print media (e.g. newspapers and magazines)	2
Complete ban on indirect advertising (e.g. cigarette branded clothes, watches,	2
etc)	
Ban on point of sale advertising Ban on cinema advertising	1
Ban on sponsorship	1
Ban on internet advertising	1/2
Ban on internet advertising Ban on radio advertising	1/2
Ban on internet advertising Ban on radio advertising Large direct health warning labels on 1 July 2005	1/2 1/2 10

10% or less of packet	1
11 – 25% of packet	2
26 – 40% of packet	3
41% or more of packet	4
4178 of more of packet	
	634 3 896 8 0
Treatment to help dependent smokers stop	10
Well funded national quitline or well funded quitlines in all major regions of	2
country OR National quitline with limited funding or a patch work of small local	1
quitlines	Marin begarde Africa
Cessation support network covering whole country (3); free (3)	6
Cessation support network, but only in selected areas, e.g. major cities (2); free (3)	5
Cessation support network covering whole country (3), partially free (2)	5
Cessation support network, but very limited, just a few centres (1), free (3)	4
Cessation support network, but only in selected areas, e.g. major cities (2),	4
partially free (2)	
Cessation support network covering whole country (3), not free (0)	3
Cessation support network, but very limited, just a few centres (1), partially free (2)	3
Cessation support network, but only in selected areas, e.g. major cities (2); not	2
free (0)	
Cessation support network, just a few centres (1), not free (0)	1
Reimbursement of pharmaceutical treatment products	2
OR Partial reimbursement of pharmaceutical treatment products	1
Maximum possible score	100

Table notes. Cigarette price: Gross Domestic Product can be expressed in PPS (purchasing Power Standard). PPS per capita has been used to take account of real purchasing power in different countries; points are awarded using the same method as for public information campaign spending. Public information campaign spending: the top country, the UK, is awarded 15 points; the UK ratio (spending/GDP) is then divided by 15 and the resulting number receives 1 point; countries achieve points for multiples of that number. Advertising: television is the medium most used for tobacco advertising in countries with no advertising restrictions; outdoor advertising (e.g. posters) is a prominently used medium when television advertising is banned; indirect advertising (e.g. clothing, watches, or other products with cigarette branding, is the industry's favoured loophole when there are otherwise comprehensive advertising bans.

Why rankings for price and spending? PPS takes account of affordability within a country. This introduces a (constantly changing) ratio, rather than absolute figures. In order to simplify this abstract ratio ranking system, we attributed the highest score to the country with the highest ratio. The method is best understood by consulting the raw data and resulting points scored, on the website.

Methods

In 2005 the European Network for Smoking Prevention (ENSP) provided a grant to LJ to re-run a survey, originally conducted in 2005, to measure tobacco control activity at country level in Europe (3). The questionnaire was sent to the ENSP correspondents, who had agreed to fill in their country data. They were nominated by ENSP because they were the official country representatives to ENSP, members of their national coalition and thus knowledgeable about tobacco control (Table 2). During 2007 the survey was repeated with the same 30 European countries, with financial support from the Swiss Cancer League.

Table 2: National correspondents who filled in the TCS questionnaire in 2007

Country	Name	Organisation
Austria	Manfred Neuberger	University of Vienna
Belgium	Luk Joossens	Belgian Foundation against Cancer
Bulgaria	George Kotarov	National Centre of Public Health
Cyprus	Stelios Sycallides	Cyprus National Coalition for the Prevention of Smoking
Czech Rep.	Eva Kralikova	Czech Coalition against Tobacco, Charles University of Prague
Denmark	Jørgen Falk	National Board of Health.
Estonia	Andrus Lipand	Ministry of Social Affairs of Estonia
Finl a nd	Mervi Hara	Suomen ASH
France	Gérard Dubois	French Alliance against Tobacco
Germany	Martina Poetschke-Langer	German Cancer Research Centre
Greece	Maria Pilali & ENSP reports on EU smoke-free and advertising legislation	Hellenic Cancer Society
Hungary	Tibor Szilagyi	Health 21 Hungarian Foundation
Iceland	Bara Sigurjonsdottir	Tobacco Control Task Force of Iceland
Ireland	Valerie Coghlan	ASH Ireland
Italy	Elizabeth Tamang	Centro Regionale di Referimento per la Prevenzione (CRP), Regione del Veneto
Latvia	Janis Caunitis	Health Promotion Centre
Lithuania	Aurelijus Veryga	Kaunas University of Medicine
Luxembourg	Marina Tomasic	Fondation Luxembourgeoise contre le Cancer
Malta	Anne Buttigieg	Health Promotion Department
Netherlands	Marc Willemsen	Foundation on Smoking or Health (Stivoro)
Norway	Siri Naesheim/Rita Lindbak	Directorate for Health and Social Affairs
Poland	Witold Zatonski/Jolanta Smolis	Cancer Centre and Institute of Oncology
Portugal	Luis Reis Lopes	Portuguese Smoking Prevention Council
Romania	Mihaela Haratau & ENSP	Romtens Foundation

	reports on EU smoke-free and advertising legislation	
Slovakia	Darina Sedlakova	WHO Country Office in Slovakia
Slovenia	Ann Luin/Mihaela Lovse & ENSP reports on EU smoke-free and advertising legislation	Slovenian coalition for tobacco control
Spain	Teresa Salvador-Llivina	National Committee for Smoking Prevention (CNPT)
Sweden	Margaretha Haglund	National Institute of Public Health
Switzerland	Verena El Fehri	Association Suisse pour la Prévention du Tabagisme
United Kingdom	Amanda Sandford/Allison Brisbane	ASH and ASH Scotland

The Tobacco Control Scale (TCS), showing the points allocated to each policy, with a maximum score of 100, is shown in Table 1. The right column of the blue rows shows the maximum points that can be scored for each policy. The questionnaire asked about legislation in force on 1 July 2007, price data on 1 January 2007, and the 2006 tobacco control budget. Any legislation, price increases or funding introduced or enforced after those dates are not included.

The following data sources (apart from the questionnaire) were used to score the scale:

- The price of a pack of 20 cigarettes in the most popular price category on 1 January 2007 was based on the 2007 European Commission report "Excise duty tables" (4)
- GDP expressed in Purchasing Power Standards (PPS) per capita and GDP in 2006, and country population data on 1 January 2006 were collected from the statistical office of the European Union (5)
- The tobacco legislation database of the Regional Office for Europe of the World Health Organization
- The WHO European Tobacco Control Report 2007 (6)
- The ENSP report on smoke-free provisions (7)
- The ENSP report on tobacco advertising legislation in Europe (8).

As in 2005 the most common problem in assigning points remained the subjectivity involved in assessing enforcement/implementation and so again we relied in general on the judgment of our correspondents, familiar with the situation in their country.

Results

The results are shown in Tables 3 to 6. Table 3 shows the average sub-scale and total scores in 2005 and 2007; Table 4 shows the TCS scores for the 30 countries in 2007; Table 5 shows the TCS scores for the 30 countries in 2005 (1); and Table 6 compares scores and ranks from 2005 and 2007 and shows how much a country's score and rank has risen or fallen.

Table 3: Average TCS total and sub-scale scores on 1 July 2005 and 1 July 2007 for all 30 countries

	1 July 2005	1 July 2007
Total TCS score (100)	47	52
Price (30)	17	17
Smoke free public places (22)	8	11
Tobacco control spending (15)	2	3
Comprehensive advertising ban (13)	9	11
Health warnings (10)	6	6
Treatment (10)	5	5

Table notes: conventional rounding: .5 and more up, <.5 down; maximum possible score in brackets.

Table 4: European countries ranked by total TCS score in 2007

Rank	Country	Price (30)	Public place bans (22)	Public info. campaign spending (15)	Advert- ising bans (13)	Health warnings (10)	Treat- ment (10)	
1	UK	30	21	15	11	6	10	
2=	ireland	23	21	3	12	6	9	
2=	Ic ela nd	22	17	14	13	6	2	
4	Norway	22	17	4	13	6	4	
5	Malta	22	17	3	12	7	1	
6	Sweden	19	15	1	13	6	7	
7	France	21	12	3	11	6	6	
8=	Finland	17	12	2	13	7	7	
8=	Belgium	16	13	3	12	9	5	
10	Italy	17	17	1	10	6	6	
11	Estonia	11	13	5	13	6	8	kd.F
12	Spain	12	15	5	12	6	5	
13	Bulgaria	22	8	0	12	6	6	
14=	Netherlands	14	9	4	12	6	5	
14=	Romania	18	8	1	12	6	5	
14=	Poland	14	12	0	12	6	6	
17	Slovakia	17	8	0	11	6	6	1 高橋
18	Switzerland	14	6	10	4	6	7	
19	Cyprus	17	6	-	12	6	5	
20	Denmark	16	3	3	10	6	7	
21	Lithuania	10	14		10	6	4	w ģ.
22	Hungary	14	6	_	10	6	7	3 . 1.449.
23	Portugal	20	5		10	6	1	7
24	Latvia	9	12	4	9	6	1	14 July 2016
25=	Czech Rep.	13	6	0	10	6	5	
25=	Slovenia	12	6	0	12	6	4	
27	Germany	19	2	0	5	6	5	ka zasii
28=	Greece	15	7	0	4	6	4	\$ (1 P. 1 S)
28=	Luxembourg	6	11	0	9	7	3	
30	Austria	13	4	0	9	6	3	Francis P. F.

Bold – EU; shaded = countries that increased their score by 10 points or more

Table 5: European countries ranked by total TCS score in 2005

Rank	Country	Price (30)	Public place bans (22)	Public info. campaign spending (15)	Advertising bans (13)	Health warning s (10)	Treat- ment (10)	Total (100)
1	Ireland	23	21	3	12	6	9	74
2	UK	30	and the second of the second o	15	11	6	10	73
3	Norway	26	17	5	13 an e de Grecola	6	4	71
4	Iceland	25	11	13	13	6	2	70
5	Malta	19	17	3	9	7	7	62
6	Sweden	19	15	2	13	6	5	60
7	Finland	18	12	1	13	7	7	58
8	Italy	16	17	2	10	6	6	57
9	France	23	6	4	11	6	6	56
10	Netherlands	16	9	4	12	6	5	52
11	Cyprus	21	6	1	12	6	5	51
12=	Poland	16	10	0	12	6	6	50
12=	Belgium	16	8	2	12	7	5	50
14	Slovakia	18	8	0	11	6	6	49
15	Hungary	17	6	1	10	6	7	47
16	Bulgaria *	19	6	0	9	6	6	46
17=	Estonia	14	9	2	11	1	8	45
17=	Denmark	17	3	2	10	6	7	45
19	Portugal	17	5		10	6	1	3 9
20=	Greece	17	7	0	4	6	4	38
20=	Czech Rep.	12	6		9	6	5	38
22	Germany	20	2	0	4	6	4	36
22=	Slovenia	13	6	O Company	7 - Man militarini - 1	6	4	36
24	Switzerland	15	5	4	4	3	4	35
25	Lithuania	11	6		9	6	1	34
26=	Spain	12	3	3	3	6 m	4	31
26=	Austria	14	4	0	4	6	3	31
28	Latvia	9	6		6	61,47,001.2	1	29
29	Romania *	13	6	0	0	344000	5	27
30	Luxembourg	7	4	0	5	7	3	26

Bold - EU asterisk - accepted to join EU; other - non EU; --- no data. The 10 countries which joined the EU in 2004 are Cyprus. Czech Republic, Estonia, Hungary, Latvia, Lithuania, Malta, Poiand, Slovakia, Siovenia.

Table 6: Comparison of 2005 and 2007 total TCS scores and ranks

Country	2007 rank	2005 rank	Change in rank	2005 score	2007 score	Change in score
					1	. 20-
Ireland	2=	1	▼1	74	74	
Iceland	2=	4	▲2	70	74	▲ 4
Norway	4	3	▼1	71	66	▼ 5
Malta	5	5		62	62	
Sweden	6	6	▲1	60	61	▲ 1
France	7	9	▲2	56	59	▲ 3
Finland	8=	7	▼1	58	58	
Belgium	8=	12	▲ 4	50	58	▲ 8
Italy	10	8	▼2	57	57	
Bulgaria	13	16	▲ 3	46	54	▲ 8
Netherlands	14=	10	▼4	52	50	▼2
Poland	14=	12	▼2	50	50	
Slovakia	17	14	▼3	49	48	₩1
Cyprus	19	11	▼ 8	51	46	▼ 5
Denmark	20	17	▼3	45	45	
Hungary	22	15	▼7	47	43	₩4
Portugal	23	19	▼4	39	42	▲ 3
Czech Rep.	25=	20	▼ 5	38	40	▲ 2
Slovenia	25=	22	▼ 3	36	40	▲ 4
Germany	27	22	▼ 5	36	37	▲ 1
Greece	28=	20	▼ 8	38	36	▼2
Austria	30	26	▼4	31	35	▲4

Grey: countries that increased total TCS score by 10 points or more.

Table 3 shows that the average overall score has risen over the two years, although not by much, from 47 to 52, just 5 points out of the scale maximum of 100. Furthermore, only three of the six sub-scales show increases – smoke-free public places, tobacco control spending and advertising bans – and again they are small. There is no increase in average scores for price, health warnings and treatment.

The most notable results in the main table (Table 4) are the sharp increases in scores in a handful of countries: UK, Estonia, Spain, Romania, Switzerland, Lithuania, Latvia and Luxembourg. In the table we have highlighted in shading countries that increased their score by 10 points or more. The biggest gain is shown by the UK, as a result of introducing laws

banning smoking in public places, first in Scotland in March 2006, then in Wales and Northern Ireland in April 2007, and finally in England on 1 July 2007. The score for this policy rises from 1 point in 2005 to 21 points (maximum is 22 points), taking the UK into top place at the expense of Ireland. Table 6 summarises the changes in scores and shows, perhaps surprisingly, that several countries have actually lost points. Norway and Cyprus lost 5 points each, both mainly points on prices. In Norway, for example, a pack of cigarettes went up to € 8, but taking into account the cost and standard of living, which rose even more, this did not represent a real increase.

Estonia increased their scores mainly on smoke-free public places and better health warnings. **Spain** increased their overall score by a huge 24 points, mainly on smoke-free public places and an advertising ban. **Romania** almost doubled its overall score from 27 to 50, improving on price, an advertising ban and health warnings. **Switzerland** improved their tobacco control spending, health warnings and treatment provision. **Lithuania** improved a lot on smoke-free public places, and a little on treatment. **Latvia** increased their score a lot on smoke-free public places, and modestly on tobacco control spending, and advertising restrictions. Finally **Luxembourg** moved off the bottom of the table, to be replaced by Austria, by increasing their smoke-free public places and advertising restrictions scores.

Discussion

Overall there has been a big improvement in Europe in the last two years because of the 2003 EU directive banning tobacco advertising, and because of new smoke-free laws. The adoption by the European Parliament and Council in 2003 of Directive 2003/33/EC banning tobacco advertising and sponsorship with a cross-border dimension in all EU Member States was a very important development, and resulted in strengthening the legislation on advertising in many European countries (9). The adoption of laws banning smoking in public places was feared by the tobacco industry decades ago and in our 2006 paper we showed that the financial world concurred with this judgement and rated smoke-free legislation as having a significant impact on the market.

The importance of smoke-free laws

Trade analysts Citigroup Smith Barney made the following comment on the Irish market in September 2004: "Once again, the month-by-month data continues to look worrying. Overall, we believe the ban has probably reduced consumption by 5%. It will also make recruiting new smokers, and marketing to all smokers, much harder, we believe" (10). In April 2005 they said: "Investors currently are most concerned about the impact of bans in bars and public places. The impact in Ireland has been quite severe, probably between 5-7% on volume" (11).

The investment bank *Morgan Stanley* speculated on the possible impact of a smoking ban in the UK: "According to our estimates a complete UK smoking ban may reduce consumption by an incremental 4%-5%, but we would expect manufacturers to offset the impact of lost volumes through price increases, an approach which seems to have worked in Ireland" (12). Even the impact of the Italian law, which is less strict than the Irish ban and which allows closed, designated and ventilated smoking rooms, was feared by the stock analysts. *Morgan Stanley* described the situation in Italy in their 29 June 2005 analysis thus: "Italy. Indications from the most recent Nielson retail data that despite increasingly warmer weather – which would presumably moderate the adverse impact of the January 2005 indoor smoking ban – the pace of cigarette consumption decline has unfortunately not significantly moderated" (13). Data from

Italy show that 28.3 million kg of cigarettes were sold in the period January to April 2005, compared with 31.1 in the same period in 2004, a reduction of 9% (14).

Comments on individual countries

Here we comment briefly on individual countries, in reverse order of their ranking.

- **30. Austri**a. In 1997 Austria voted with Germany against the EU directive on tobacco advertising and continues to foliow the same weak approach to tobacco control as Germany. Smoke-free legislation is currently being considered.
- **28.** Luxembourg. Despite being the richest country in the EU, Luxembourg has very low taxes on tobacco products in order to attract cross-border shopping from neighbouring countries. In 2005 89% of all cigarettes sold in Luxembourg were bought by foreigners (15). Luxembourg made progress in 2006 by banning tobacco advertising and introducing legislation banning smoking in public places and restaurants.
- **28. Greec**e. According the World Health Organization, Greece has the highest per capita consumption of cigarettes in the world in 2006 (16). Tobacco control is clearly not on the political agenda.
- **27. Germany**. Germany has long been the biggest problem for tobacco control in Europe, having well established connections with the tobacco industry (17), but there are possible positive signs recently. They ratified the FCTC early and have increased tax on tobacco products three times in recent years. Smoke-free legislation was introduced in two Länder on 1 August 2007. However, they currently have weak legislation on smoke-free environments and on tobacco advertising.
- **25. Slovenia**. Slovenia was dynamic on tobacco control legislation in the 1990s, but has been less so in recent years. On a more positive note, smoke-free legislation came into force in August 2007.
- **25. Czech Republic.** There is a strong tobacco industry presence in the Czech Republic and a negative attitude towards tobacco control. The Senate refused to ratify the FCTC in June 2005.
- **24. Latvia**. There has been progress on smoke-free legislation, but Latvia has very low tobacco taxes and has done almost nothing to increase them in line with EU requirements on tax.
- 23. Portugal. Little activity on tobacco control legislation, and although there is new smoke-free legislation, which is due to come into effect on 1 January 2008, the law remains weak, certainly in bars and restaurants.
- **22. Hungary**. Hungary was active on tobacco control legislation at the beginning of this decade and is reviewing its legislation now.
- **21. Lithuania**. As with Latvia, Lithuania has low taxes on tobacco products, but introduced ambitious smoke-free legislation in January 2007.
- **20. Denmark**. Denmark is the only Scandinavian country where tobacco control is not high on the political agenda. New smoke-free legislation came into force in August 2007, but regrettably it contains exceptions, such as allowing smoking in individual offices at work.

- 19. Cyprus. Cyprus has ongoing problems adopting and enforcing smoke-free legislation.
- **18. Switzerland**. Home country of the international tobacco companies, Switzerland has weak tobacco advertising legislation and has not ratified the FCTC. In April 2004 a fund was established by law to support tobacco control activities (Fonds de Prévention du Tabagisme), financed by an obligatory contribution from the tobacco industry of CHF 0.026 per pack of cigarettes. In 2006 the budget of the fund was about € 11 million (6).
- **17. Slovaki**a. Slovakia has maintained a low profile on tobacco control but smoke-free legislation is now under review.
- **14. Poland**. Poland was a shining example to the world in the 1990s and had a positive impact in Central and Eastern Europe. However, it only ratified the FCTC in September 2006 and is lacking new legislative processes in recent years. Smoke-free legislation is under review.
- **14. Rom**ania. When Romania joined the EU in January 2007, it adopted comprehensive legislation on labelling, smoke-free public places and advertising, although enforcement of the legislation remains a big problem. In 2006 a "sin tax" of 30% on tobacco and alcohol sales was introduced, which is to start in 2007 and will generate between € 100 million and € 200 million each year. How much will be allocated to tobacco control remains to be seen (18). Romania will introduce pictorial health warnings on cigarette packs from 1 July 2008.
- **14. Netherlands**. Active in passing tobacco control legislation at the beginning of the decade, but has slowed down between 2004 and 2006. The Netherlands will enforce new smoke-free legislation in bars and restaurants in July 2008. However, smoking rooms are allowed with no restrictions on their size.
- **13. Bulgaria**. Bulgaria has introduced comprehensive tobacco control legislation but enforcement remains a problem, and it has high smoking prevalence. A positive development is that 1% of tobacco and alcohol excise duties will be used to finance national programmes on tobacco, alcohol and drugs from 2007 to 2010.
- **12. Spain**. In 2005 Spain adopted an advertising ban and comprehensive legislation on smoke-free public places, although the legislation on smoking in bars and restaurants is weak and ineffective.
- **11. Estonia.** Despite the high smoking prevalence in the Baltic countries, progress has been made in tobacco control in Estonia, which recently adopted smoke-free legislation.
- **10. Italy**. Italy surprised the whole world in 2005, not only by adopting smoke-free legislation for bars and restaurants but because it is well respected. However, Italy has not yet ratified the FCTC (at the time of going to press in August 2007).
- **8. Belgium**. Belgium is the first European country to introduce pictorial health warnings on cigarette packets and it has adopted several new tobacco control laws in recent years as result of a federal action plan against tobacco. However, the legislation on smoking in bars is complex, weak and confusing.
- **8. Finland**. For many years a leader in tobacco control, Finland has in recent years been much less dynamic. It granted an unnecessarily long transition period until June 2009 for the implementation of its smoke-free legislation in restaurants.

- 7. France. France banned tobacco advertising in 1991, increased tobacco tax significantly in 2003 and is now implementing smoke-free legislation in two stages in 2007 and 2008.
- **6. Sweden**. Sweden has the lowest daily smoking prevalence rate in Europe, but the highest use of smokeless tobacco (snus) by men in Europe. Sweden has a good record on tobacco control but should increase funding on tobacco control activities.
- **5.** Malta. High tobacco prices and comprehensive smoke-free legislation mean that Malta remains highly ranked.
- **4. Norway**. Norway was the first country to adopt comprehensive smoke-free legislation, but its legislation came into force after Ireland. It has been and remains one of the strong leaders of tobacco control in Europe since the 1960s.
- **2. Iceland**. Iceland has adopted very comprehensive tobacco control legislation and has the highest spending on tobacco control per capita in Europe at € 2.20 per capita in 2006. The law obliges the government to spend at least 0.9% of the total amount spent on tobacco on tobacco control.
- **2. Ireland**. In March 2004 Ireland led the way in Europe by becoming the first country to implement smoke-free legislation in pubs and restaurants. It had an enormous impact in the rest of Europe, not least because as with Italy, many people could not really imagine smoke-free bars.
- **1. UK**. The UK is doing well on all six of the World Bank tobacco control policies, and has invested £ 30 million in 2007 introducing and promoting its new smoke-free legislation. We hope there is no risk of it becoming a victim of its own success by deciding to reduce investment in tobacco control policy in the coming years, as it will be important to sustain this comprehensive approach and continue to invest in hard-hitting mass media campaigns.

Areas for improvement

We think that one of the lessons of tobacco control over the last few decades is that it is important to keep the pressure up and maintain a high level of activity. In fact our data bear this out in the sense that several countries that maintained their tobacco control score nevertheless slipped down the table, as other countries improved their scores and overtook them.

According to the stock analysts *Morgan Stanley*: "Of the various measures available to governments in reducing demand for tobacco, clearly the one that concerns the cigarette companies the most is rising taxation" (19). High price remains the most effective tobacco control measure, thus it is important to note that the price of tobacco products varies greatly in Europe. On 1 January 2007 a pack of Marlboro cigarettes ranged from € 1.17 in Latvia to almost € 7.89 in the UK and € 8.17 in Norway. Some European countries (France, Germany and the Netherlands) increased tobacco product taxes substantially in 2004, with a considerable effect on prevalence. However, the effect has been weakened as a result of cross-border shopping, so we recommend that the number of cigarettes that can be imported for personal consumption between EU countries, now at least 800 cigarettes, should be reduced to 200 per person.

According to *Morgan Stanley* again: "The other two regulatory environment changes that concern the industry the most are homogenous packaging and below-the-counter sales. Both would significantly restrict the industry's ability to promote their products" (19). Countries in the European Union have the option of requiring picture-based warnings on tobacco products (20). Pictorial warnings are a cost-effective way to inform smokers about tobacco products (21).

So far Belgium is the only EU country to require pictorial warnings on cigarette packets (since 1 June 2007). Picture warnings are under consideration in other EU countries. Pictorial health warnings should become mandatory on the two main sides of tobacco products for all EU countries. The pictures should be renewed on a regular basis, with the aim that the whole pack would become a platform for mandatory health promotion messages.

On the basis of the research reviewed in our introduction and our results, there are some serious short-comings in tobacco control in Europe at the moment. There is an urgent need for more investment. In the EU only the UK spent more than \le 2 per capita per year on tobacco control. The 2004 ASPECT report recommended that EU Member States immediately increase per capita spending by \le 1- \le 3 (22).

No European country had banned smoking in bars and restaurants by January 2004. By July 2007 ten countries had introduced smoke-free bars and restaurants, and more countries are planning to do so. The most comprehensive European smoke-free legislation (a complete ban on smoking at the workplace – including bars and restaurants – with no exemptions at all) has been introduced in Ireland, Scotland and England. Genuinely comprehensive smoke-free legislation, which includes a total ban in all work places (including bars and restaurants), public places (including health and educational facilities) and public transport, should be a priority for every European country.

Most European countries have adopted smoke-free legislation which does not comply with the guidelines agreed at the second Conference of the Parties (COP2) of the World Health Organization's Framework Convention of Tobacco Control (FCTC), held in Bangkok in July 2007 (23). The guidelines emphasise that effective protection of health requires the creation of 100% smoke-free environments and that ventilation and designated smoking rooms are not acceptable approaches.

Recommendations

On the basis of our results and the discussion above we have five recommendations for implementation by 2010.

- 1. Tobacco control programmes should be comprehensive and should include at least the six measures described in the introduction.
- 2. Countries should spend a minimum of € 3 per capita per year on tobacco control.
- Countries should introduce comprehensive smoke-free legislation in line with the guidelines of Article 8 of the WHO FCTC, adopted at the second Conference of the Parties in Bangkok, July 2007. It should include a total ban on smoking in work and public places, including bars, restaurants, health and educational facilities, and public transport.
- 4. Regular increases in tobacco taxes should be policy at EU and Member State levels, and the number of cigarettes that can be imported for personal consumption between EU countries should be reduced to 200 per person.
- 5. Pictorial health warnings on the two main sides of tobacco product packages should be mandatory for all EU countries. The pictures should be renewed on a regular basis, with the aim that the whole pack would become a platform for mandatory health promotion messages.

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