A National Approach for Reducing Access to Tobacco in Australia by Young People under 18 Years of Age

August 2000
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Submitted for endorsement through The National Expert Advisory Committee on Tobacco (NEACT) to the Intergovernmental Committee on Drugs (IGCD)

August 2000

An initiative of the National Expert Advisory Committee on Tobacco and the National Tobacco Policy Officers Group
Acknowledgments

This report was developed between 1998–2000 and represents a partnership between:

Commonwealth

Ministerial Tobacco Advisory Group (and subsequently National Expert Advisory Committee on Tobacco); and

The Tobacco Policy Officers Group (representing Health Departments in each State and Territory of Australia)

In particular, the contributions provided by Ms Kate Purcell and Ms Catriona O’Neill (NSW Health) are noted for their efforts in the production of earlier drafts of the National Approach.

This report and the accompanying package has been produced by Bev Carroll of Carroll Communications Pty Ltd, a consultant commissioned by the Commonwealth Department of Health and Aged Care to undertake the National Sales to Minors Project and to develop the National Approach Package.
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1. Background

The report, ‘A National Approach for Reducing Access to Tobacco in Australia by Young People under 18 Years of Age.’ was written with the purpose of seeking the endorsement of the Intergovernmental Committee on Drugs of a national best practice model to address young people’s access to tobacco. The development of this model was nominated as a priority under the National Tobacco Strategy endorsed by Ministers in 1999 (Commonwealth Department of Health and Aged Care 1999).

The report provides a model of best practice, based on a comprehensive review of the international literature, on documented and evaluated programs and on State and Territory experiences in Australia.

The legal age for purchase of tobacco products in all States and Territories of Australia is 18 years of age. The key components that make up best practice in prevention of sale and supply of tobacco products to young people under the age of 18 years are described. The resulting model is intended as a guide to inform Commonwealth, State and Territory Governments and their partners in tobacco control on effective development of responses to prevent access to tobacco products by young people under 18 years of age.

Research indicates that initiation into smoking behaviour is well established before the end of teenage years. Surveys of smokers show that approximately 90 per cent begin using tobacco by the age of 20 years (Australian Bureau of Statistics 1992). The earlier the onset of smoking, the earlier the risk of smoking-related disease and the higher this risk is likely to become in the smoker’s lifetime (US Department of Health and Human Services 1992). Also, the age of onset of smoking is an important predictor of success in quitting. The younger a person is when they start to smoke the less likely it is that they will ever cease (Bjartveit 1990).

It has been estimated that more than 276,000 secondary school students in Australia were current smokers in 1996 and that 38 per cent of Australian students who smoked obtained their cigarettes through illegal sales from retail outlets such as milk bars, corner stores, petrol stations and supermarkets.

In recent years governments have implemented a range of programs in an attempt to address this problem. All governments in Australia have legislative programs in place that:

• make it illegal for retail outlets to sell tobacco products to children and young people under 18 years of age;
• impose penalties on those selling and in some cases, supplying to minors; and
• restrict the location of vending machines (with the exception of the Northern Territory).

The National Approach provides jurisdictions in Australia with recommendations for a range of
EXECUTIVE SUMMARY

initiatives that aim to address the sale and supply of tobacco products to young people in Australia. All States and Territories are urged to examine the effectiveness of their current programs and consider the inclusion of these recommendations within future program activities.

2. Development of the National Approach

The National Approach has been developed collaboratively by the National Tobacco Policy Officers Group and the National Expert Advisory Committee on Tobacco. A draft report providing discussion of youth smoking and related youth access issues was tabled at a meeting of the National Tobacco Policy Officers in November 1999. At this meeting, a preferred approach was identified and the guiding principles and tasks for the development of the National Approach were outlined.

In developing the National Approach, the National Expert Advisory Committee on Tobacco and the National Tobacco Policy Officers Group recognised the following principles:

- the importance of building on achievements to date;
- the need for initiatives to be consistent with best practice and to be adaptable to the differing environments of the States and Territories in Australia;
- the importance of a national framework to enhance coordination and partnerships between States and Territories, the Commonwealth and non government organisations; and
- the need to ensure that a comprehensive evaluation process is identified and implemented.

The development of the National Approach involved undertaking a number of specific tasks. They were:

- Examining information relating to young people’s access to tobacco products and related issues from the 1996 Australian School Students’ Alcohol and Drugs Survey. This information is reported in Section 1.4 of the report.
- Examining the current level of program activities in each jurisdiction. A report on these activities is provided in Appendix A of the report and section 1.5 of the report provides a descriptive summary of these activities.
- Examining information from a range of studies conducted in Australia and in other countries that have explored youth access issues and the effectiveness of approaches in sales to minors programs. Issues relating to the supply of tobacco to young people from other non-retail sources were also examined. A discussion of this evidence is provided in Section 1.6 of the report.

It was also agreed that an important component of the developmental process for the recommendations for best practices was to seek the opinions of key stakeholder organisations in Australia and consider their achievements and experiences.

A consultation process involving key stakeholder organisations in each jurisdiction was
3. Key findings

Key findings in relation to these activities were:

- There have been some positive reductions in the number of young people purchasing cigarettes in Australia, however 38 per cent are still obtaining cigarettes through illegal sales from retail outlets.
- As young people’s access to cigarettes has become increasingly restricted the supply of cigarettes to young people from friends, parents and relatives or from others purchasing for them is increasing.
- All jurisdictions in Australia have initiated legislative strategies to address the issue of young people’s access to tobacco.
- A range of other programs such as enforcement, education and training has also been implemented to provide support for the legislative programs. There are variations in the nature of these activities and the extent to which they have been implemented.
- A number of jurisdictions have been undertaking compliance monitoring as a strategy for enforcing the legislation and for identifying retail outlets responsible for selling cigarettes to young people. Compliance monitoring activities involves youth volunteers in test purchases under the supervision of adults who wait outside the purchasing venue.
- There has been considerable discussion of the legal and ethical issues concerning the involvement of young people in these activities. It was found that:
  - Regular compliance checks involving the participation of young people are the most effective, least costly and practical means of monitoring illegal sales of tobacco to children, a position endorsed by authorities in the United States, the United Kingdom and New Zealand, and most States and Territories of Australia.
  - Legal advice indicates that, in Australia, the involvement of young people in test purchase operations does not constitute entrapment.
  - There have been no reports produced to date that have provided evidence that these activities are in any way harmful to the young people involved.
  - Anecdotal reports from those jurisdictions undertaking these programs indicate high levels of support from parents, young people and the local communities involved.
- In March 2000 the Victorian Supreme Court found that the involvement of young people under 18 years of age in test purchases was the only viable and effective practice currently available for addressing the illegal sale of cigarettes to young people by retail outlets. The decision was also based on public health grounds and the importance of protecting children from the hazards of smoking.

- The involvement of young people under 18 years of age in enforcement and monitoring activities must be undertaken in accordance with agreed standards and practices established by jurisdictions in the development and implementation of sales to minors programs.

• Strategies that address the demand for cigarettes by young people will be undermined if there is unlimited access to cigarettes and if there is complacency within the community and among retailers in relation to the sale of cigarettes to young people.

• Comprehensive and sustainable sales to minors programs are needed for addressing the illegal sale and supply of cigarettes to young people. Important components of effective sales to minors program are legislative strategies, retailer and community education and information programs, community involvement, enforcement strategies and the use of local media in publicising enforcement activity and prosecutions. These are necessary in order to achieve changes in retailer’s perceptions of the consequences associated with illegal sales of cigarettes to young people.

• A high rate of retailer compliance is necessary in order to achieve an impact on young people’s smoking rates.

• Programs that effectively reduce access to cigarettes through over the counter sales should be accompanied by strategies that address the sale and supply of cigarettes from other sources such as vending machines, friends and family.

• Programs in one community need to be consistent with and complement the initiatives and programs conducted in neighbouring communities in order to restrict the access to cigarettes from a mobile youth market.

The consultation process indicated a high level of support for the above findings and for action to be taken by all jurisdictions in the adoption of the best practice recommendations presented in the draft consultation report.
4. **Recommended components of the National Approach**

The National Approach identifies six key elements for best practice for a comprehensive and effective sales to minors program. They are:

- legislation;
- monitoring and enforcement;
- prosecution;
- education and training;
- community action; and
- evaluation.

The National Approach provides a tobacco control framework which jurisdictions have agreed to use as a basis for developing and implementing appropriate strategies. The approach provides leadership on the issue of cigarette sales to minors, while allowing flexibility for each jurisdiction to ensure its sales to minors demand and supply side strategies are appropriately given the needs and priorities of that particular jurisdiction.

The following provides a summary of the key components of best practice provided in the National Approach:

1. States and Territories should give consideration to including the following elements within their legislative programs:
   - levy significant penalties for retailers who sell tobacco to young people (for example, greater than $5,000);
   - develop a proof of age card or equivalent photographic ID scheme for tobacco purchases;
   - identify the authority responsible for enforcement;
   - provide for the prosecution of the seller, owner and/or manager (license holder);
   - include as an offence, the supply of tobacco to a person under the age of 18 years; and
   - penalties for those who supply tobacco to minors.

2. States and Territories should indicate their intention to prosecute retailers who sell cigarettes to young people under 18 years of age.
EXECUTIVE SUMMARY

3. Self service cigarette vending machines should be phased out.

4. Programs for routine compliance monitoring of tobacco retailers should be implemented involving young people in test purchases in order to monitor the rate of illegal sales of tobacco to young people.

5. An education strategy for the general public should be developed and implemented in order to raise awareness about the issue and to promote the community’s participation in local strategies to reduce young people’s access to tobacco.

6. Retailer education strategies should be developed and implemented in order to inform them of their obligations not to sell tobacco to young people under the age of 18 years.

7. States and Territories should indicate their commitment to:
   - ensuring that adequate capacity is provided for their enforcement and monitoring program;
   - providing training programs and resources for relevant enforcement bodies in collaboration with key stakeholders, enforcement agencies and health authorities; and
   - ensuring regular publicity and public relations programs are included as integral components of their enforcement strategies;

8. Strategies that address the supply of cigarettes to young people should be developed in order to compliment and operate in tandem with those aimed at reducing the sale of cigarettes to minors.

9. The National Tobacco Strategy and National Expert Advisory Committee on Tobacco should monitor the implementation of the National Approach.

10. A review of the National Approach should be coordinated by the Commonwealth to evaluate the effectiveness of this strategy and that a comprehensive report should be provided to Ministerial Council on Drug Strategy by 2004.

5. Information strategy for implementing the National Approach

In developing the National Approach a number of issues were identified concerning the adoption of best practice recommendations by jurisdictions in Australia. These implementation issues were examined further at a national Sales to Minors workshop held in June 2000 involving government officers and project personnel responsible for the development, implementation and evaluation of sales to minors programs in Australia.

At this workshop it was agreed that an information kit was important for assisting jurisdictions in adopting and implementing the best practice recommendations.
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The following kit was therefore designed with the purpose of providing:

• policy officers and other senior officers within States and Territories in Australia with supportive information that explains key issues relating to the best practice recommendations presented in the National Approach;
• officers with accurate responses to some commonly asked questions regarding these issues; and
• information that will assist jurisdictions in the preparation of briefs and reports for key stakeholders on sales to minors issues.

The information provided in this kit is based on:

• an examination of the evidence provided by Australian and international studies and discussed in the report, ‘A National Approach for Reducing Access to Tobacco in Australia by Young People under 18 Years of Age’;
• a review of resources currently available in Australia such as policy and procedures manuals, State-based protocols and guidelines and associated information pamphlets; and
• the identification of agreed responses to key questions relating to the adoption of best practice and implementation issues raised at the National sales to Minors workshop held in Adelaide 27–28 August 2000.

6. Components of the National Approach package

There are five components to the National Approach package.

They are:

i. ‘A National Approach for Reducing Access to Tobacco in Australia by Young People under 18 Years of Age’ August 2000

The report ‘A National Approach for Reducing Access to Tobacco in Australia by Young People under 18 Years of Age’ has been developed through a partnership arrangement between Commonwealth and State Governments. It was the aim of this process to ensure that the achievements and experiences of key stakeholders in Australia were considered and that the strategy developed reflected the efforts undertaken by them.

The report provides:

• information on young people’s access to tobacco in Australia;
• a discussion of initiatives and programs undertaken in States and Territories in Australia;
• an examination of research undertaken internationally and in Australia in order to
determine the key elements of a best practice model; and
• recommendations for a national best practice model for reducing young people’s access to
tobacco in Australia.

   ii. Appendix A
   State and Territory activities—a summary of programs undertaken by jurisdictions in
   Australia for addressing young people’s access to tobacco products.

Information is presented which outlines the legislative programs, enforcement and monitoring
activities, training and education programs and evaluation activities undertaken by States and
Territories in Australia.

   iii. Appendix B
   Case studies

Information on three approaches to addressing young people’s access to tobacco undertaken
within Australia is provided. These include:

• Case Study 1: New South Wales Health Department Sales to Minors Program
• Case Study 2: Western Australian Tobacco and Youth Access Program
• Case Study 3: Victoria’s Western Region Tobacco Project Report

   iv. Appendix C
   Information kit for the implementation of the National Best Practice model.

An information kit for government officers has been prepared in order to assist jurisdictions in
implementing the best practice recommendations provided in the National Approach. The
content and presentation of this kit were discussed at a National Sales to Minors workshop
conducted in June 2000.

The information provided in this kit is presented as a series of individual fact sheets in a
question / answer format. It is designed to assist officers in the preparation of briefs and
reports for relevant government departments and key stakeholders.

   v. Appendix D
   Contacts and resources in Australia

A list of contacts and resources available from States and Territories in Australia and New
Zealand is provided.
1. Overview of young people’s access to tobacco products

1.1 Introduction

This document was written with the purpose of seeking the endorsement of the Intergovernmental Committee on Drug Strategy of a national best practice model to address young people’s access to tobacco. The development of a national best practice model for reducing young people’s access to tobacco products was nominated as a priority under the National Tobacco Strategy endorsed by Ministers in 1999 (Commonwealth Department of Health and Aged Care 1999). The National Approach has been developed collaboratively by the National Tobacco Policy Officers Group and the National Expert Advisory Committee on Tobacco. Young people are defined as those under the legal age (18 years) for purchasing tobacco products.

Smoking is recognised as the largest single preventable cause of death in Australia. Many of the diseases associated with smoking are chronic and disabling, placing a large burden on the community. Active smoking alone is estimated to have killed more than 18,000 Australians each year from 1990–1995 (Commonwealth Department of Health and Aged Care 1999). Research indicates that initiation into smoking behaviour is well established before the end of teenage years. Surveys of smokers show that approximately 90 per cent begin using tobacco by the age of 20 years (Australian Bureau of Statistics 1992). The earlier the onset of smoking, the earlier the risk of smoking-related disease and the higher this risk is likely to become in the smoker’s lifetime (US Department of Health and Human Services 1992). Also the age of onset of smoking is an important predictor of success in quitting. The younger a person is when they start to smoke the less likely it is that they will ever cease (Bjartveit 1990).

Throughout Australia, youth smoking rates are causing increasing concern and research has confirmed that the decline in adolescent smoking rates seen in the late 1980s has stopped. This trend is not unique to Australia and reflects the trend in other western countries (Hill 1999). It has been estimated that more than 276,000 secondary school students in Australia were current smokers in 1996 and if they continue to smoke throughout their life, 138,000 will die prematurely (Hill 1999).

In 1996, it was reported that 38 per cent of Australian students who smoked obtained their own cigarettes through illegal sales from retail outlets such as milk bars, corner stores, petrol stations and supermarkets (Hill 1999). In recent years governments have implemented a range of programs in an attempt to address this problem. All Governments in Australia have legislative programs in place that:

- make it illegal for retail outlets to sell tobacco products to young people under 18 years of age;
- impose penalties on those selling and in some cases, supplying to minors; and
- restrict the location of vending machines.
It is the goal of the National Approach therefore to provide a framework for these efforts and enhance coordination and partnerships between States and Territories, the Commonwealth and non government organisations in Australia and in so doing, contribute to a reduction in young people’s access to tobacco.

The National Approach provides jurisdiction in Australia with recommendations for a range of initiatives that aim to address the sale and supply of tobacco products to young people in Australia. All States and Territories are urged to examine the effectiveness of their current programs and consider the inclusion of these recommendations within future program activities.

1.2 A National Approach for Reducing Access to Tobacco in Australia by Young People under 18 Years of Age

In developing the report, ‘A National Approach for Reducing Young People’s Access to Tobacco in Australia’ the National Expert Advisory Committee on Tobacco and the National Tobacco Policy Officers Group recognised the following principles:

- the importance of building on the achievements to date;
- the need for initiatives to be consistent with best practice and to be adaptable to the differing environments of the States and Territories in Australia;
- the importance of a national framework to enhance coordination and partnerships between States and Territories, the Commonwealth and non government organisations; and
- the need to ensure that a comprehensive evaluation process is identified and implemented.

1.3 Components of the National Approach package

There are five components to the National Approach package.

They are:

1. ‘A National Approach for Reducing Access to Tobacco in Australia by Young People under 18 Years of Age’ August 2000

The report ‘A National Approach for Reducing Access to Tobacco in Australia by Young People under 18 Years of Age’ has been developed through a partnership arrangement between Commonwealth and State Governments. It was the aim of this process to ensure that the achievements and experiences of key stakeholders in Australia were considered and that the strategy developed reflected the efforts undertaken by them.
The report provides:

- information on young people’s access to tobacco in Australia;
- a discussion of initiatives and programs undertaken in States and Territories in Australia;
- an examination of research undertaken internationally and in Australia in order to determine the key elements of a best practice model; and
- recommendations for a national best practice model for reducing young people’s access to tobacco in Australia.

ii. Appendix A

*State and Territory activities—a summary of programs undertaken by jurisdictions in Australia for addressing young people’s access to tobacco products.*

Information is presented which outlines the legislative programs, enforcement and monitoring activities, training and education programs and evaluation activities undertaken by States and Territories in Australia.

iii. Appendix B

*Case Studies*

Information on three approaches to addressing young people’s access to tobacco undertaken within Australia is provided. These include:

- Case Study 1: New South Wales Health Department Sales to Minors Program
- Case Study 2: Western Australian Tobacco and Youth Access Program
- Case Study 3: Victoria’s Western Region Tobacco Project Report

iv. Appendix C

*Information kit for the implementation of the National Best Practice model.*

An information kit for government officers has been prepared in order to assist jurisdictions in implementing the best practice recommendations provided in the National Approach. The content and presentation of this kit were discussed at a National Sales to Minors workshop conducted in June 2000.

The information provided in this kit is presented as a series of individual fact sheets in a question / answer format. It is designed to assist officers in the preparation of briefs and reports for relevant government departments and key stakeholders.

v. Appendix D

*Contacts and resources in Australia*

A list of contacts and resources available from States and Territories in Australia and New Zealand is provided.
1.4 Young people and smoking—the size of the problem

1.4.1 1996 Australian School Students’ Alcohol and Drugs (ASSAD) survey

The following provides a discussion of the findings from the 1996 ASSAD Survey undertaken by the Centre for Behavioural Research in Cancer concerning young people’s access to tobacco products and related issues.

This survey involved schools from all Australian States and Territories and a total of 31,529 students in Years 7–12 were surveyed.

Information presented has been derived from two sources:


b) Additional tables supplied by the Centre for Behavioural Research in Cancer for the purposes of this report.

1.4.2 Smoking prevalence among young people

Hill et al (1999) reported that in 1996 an estimated 131,000 male and 145,000 female students aged 12–17 years were current smokers. Research shows that the use of tobacco becomes more common as students progress through secondary school. Figure 1 shows that in 1996, 8 per cent of boys and 7 per cent of girls aged 12 years were current smokers. In older adolescents (17 years of age) the prevalence of current smoking was 28 per cent in boys and 34 per cent in girls. As well from the age of 14 years, girls were significantly more likely than boys to have smoked in the last week, month and year.

![Figure 1: Smoking among Australian students 1996 by age and sex](image)
1.4.3 Availability of cigarettes to young people

Hill et al (1999) reported that in 1996 the single most common source for obtaining cigarettes for young people aged 12–17 years who smoked was friends, with 35 per cent of males and 40 per cent of females obtaining cigarettes in this way. The proportion of students obtaining cigarettes from friends decreases with age particularly for females whilst friends remain an important source for the supply of cigarettes for older teenage males. However, for older male smokers and female smokers aged 16–17 years, the primary source of supply of cigarettes is through illegal purchases from retail outlets with 55 per cent of 16–17 year old males and 45 per cent of 16–17 year old females reporting purchasing their own cigarettes.

For younger age groups (12–15 years), the second most common source of obtaining cigarettes was from others who purchased for them. For older age groups, friends were the second most common source of supply of cigarettes.

It was also reported that in 1996, 38 per cent of all students aged 12–17 years who smoked purchased cigarettes themselves. The proportion of students who purchased cigarettes increased with age. Whilst 34 per cent of younger males and 25 per cent of younger females purchased cigarettes, this rose to 55 per cent of older aged males and 49 per cent of older aged females.

In 1996 the most common retail outlets for cigarette purchases by Australian students who smoked were milkbars, corner stores, supermarkets (particularly for older females) and petrol stations. The purchase of cigarettes from vending machines appears to provide an important source of cigarettes for young male smokers with 29 per cent of 12-year-old boys obtaining cigarettes in this way compared to 5 per cent of older aged teenagers.

Hill et al (1999) also reported that in 1996 single cigarettes were widely available with 21 per cent of male smokers and 12 per cent of female smokers reporting buying single cigarettes from shops despite the ban on their sale in most jurisdictions. The purchase of single cigarettes becomes less common with age with 29 per cent of 12-year-old smokers reporting purchasing single cigarettes compared with 5 per cent of 16–17 year old smokers.

1.4.4 Trends in youth access to cigarettes

A comparison of the results of the 1996 ASSAD Survey with those from the survey years 1990 and 1993 indicates that there have been some notable changes in the use and availability of cigarettes to young people. Since 1990 and particularly since 1993, all States and Territories in Australia have introduced a range of legislative programs and community education strategies to address the sale and supply of tobacco products to young people.

Whilst there has been no change in the number of young people who smoke between 1993 and 1996, there have been reductions in the number of cigarettes smoked by older aged occasional and regular smokers. This is illustrated in Figure 2.
Hill et al (1999) also reported that between 1993 and 1996 there was an overall reduction of 12 per cent in the number of students who purchased their last cigarette. This reduction occurred for both the younger and older age groups and is illustrated in Figure 3.

At the same time however, the supply of cigarettes from friends has become an increasingly important supply source of cigarettes for young people and in particular for younger females and older males. These trends are shown in Figure 4.
Of concern also is the increase over the period 1990–1996 in the number of young people who obtained cigarettes by getting someone else to purchase cigarettes for them. This was particularly evident for younger age groups as shown in Figure 5.

Figure 5: Proportion of students who obtained cigarettes by getting someone else to purchase for them, 1990–96

Similar trends have occurred between 1993 and 1996 in the purchase of single cigarettes. For all young people aged 12–17 years who smoked there was a decline in purchasing single cigarettes from shops and this was particularly evident for females between 1993 and 1996. Older female smokers reported the greatest decrease with 28 per cent of older females purchasing single cigarettes from shops in 1993 compared to 13 per cent in 1996. This trend is presented in Figure 6.

Figure 6: Proportion of students who purchased single cigarettes, bought from a shop, 1993–96

However, during the same period there were increases in the proportion of teenagers obtaining single cigarettes from a friend or relative. This is illustrated in Figure 7.

Whilst vending machines remain an important source of cigarettes for young males, there has been a 2 per cent reduction in the number of young males purchasing cigarettes from vending machines between 1993 and 1996. At the same time however, there were increases in other age groups and in particular there was a 4 per cent increase in young females purchasing cigarettes from vending machines. This is illustrated in Figure 8.
In conclusion, research among secondary school students in Australia has indicated that whilst there has been some positive reductions in the number of young people purchasing cigarettes, 38 per cent are still obtaining cigarettes through illegal sales. It is a concern as well that as young people's access to cigarettes becomes increasingly restricted the supply of cigarettes to young people from friends, parents and relatives or from others purchasing for them is increasing.

1.5 Activities in Australia

1.5.1 Introduction

In recent years activities to address young people's access to tobacco in Australia have included legislative initiatives and the development and implementation of enforcement and monitoring programs, community and retailer education strategies, training programs and evaluation studies.
To date, most of this activity has occurred at the State and Territory level with individual jurisdictions having responsibility for developing and implementing legislative strategies. Whilst all jurisdictions have been active in developing support programs for their legislative programs such as enforcement, monitoring, education, training and evaluation, there are variations in the nature of these activities and the extent to which they have been undertaken.

Appendix A provides a summary of State and Territory activities that have been implemented to address young people’s access to tobacco products.

The following table summarises key features of these activities:

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### 1.5.2 Compliance Monitoring Activities in Australia

Compliance monitoring is undertaken by many jurisdictions in Australia. This involves youth volunteers entering shops and other outlets where cigarettes are sold and attempting to purchase cigarettes. It is conducted under the supervision of adults who wait outside.

Responsibility for compliance monitoring activities varies within Australia with some states having formal arrangements with local health services or councils for undertaking compliance monitoring activities. In NSW for example, Area Health Services test at least 10 per cent of all tobacco retailers for compliance each year and prosecutions are initiated from these activities.

Compliance monitoring surveys are also included in the evaluation programs of most States and Territories. In Western Australia for example, biennial surveys of retailer compliance are conducted to assess the willingness of retailers to sell cigarettes to young people under 18 years of age. In Tasmania, South Australia and Victoria, compliance monitoring surveys...
have been undertaken to assess the impact of sales to minors programs on the sales rates in specific communities in these jurisdictions.

### 1.5.3 Western Australia

Under the *Tobacco Control Act 1990*, the sale and supply of tobacco to minors is prohibited. Responsibility for the monitoring and enforcement of the Act rests with the Health Department of Western Australia. The Health Department of Western Australia is proactive in its approach to reducing children’s access to tobacco. A comprehensive program has been adopted in Western Australia with key components including:

- monitoring and enforcing of the *Tobacco Act 1990* involving routine inspections, retailer education and investigations including surveillance in response to alleged breaches of the Act;
- undertaking prosecutions for breaches of the Act;
- publicising prosecutions;
- developing and distributing free signage, information and resource materials on the provisions of the Act (including NESB resources);
- establishing alliances with key health and regulatory authorities and community organisations;
- educating police and retailers;
- mobilising community support and action; and
- conducting research and evaluation activities (including biennial surveys of retailer compliance with laws prohibiting the sale of tobacco and youth access to vending machines).

### 1.5.4 New South Wales

In NSW a comprehensive Sales to Minors program was developed in 1996 following evidence of an increase in under age smoking and the ease of access to tobacco for young people.

Features of the NSW sales to minors program included:

- a policies and procedures manual was developed to support the activities of Area Health Services in NSW;
- legislative amendments in 1996 which strenthened the *Public Health Act 1991* requiring tobacco retailers to ask for proof of age to ensure that customers purchasing tobacco products are over the age of 18 years;
- regular training programs for health workers and other enforcement officers were conducted; and
• a comprehensive education strategy to increase awareness amongst the general community, tobacco retailers and young people about the Public Health Act 1991 and the proof of age requirements.

An increase in retailer compliance since 1996 has been observed in most Area Health Services of NSW following retailer education, regular compliance monitoring activities and the publicising of successful prosecutions. Environmental Health Officers in collaboration with Health Promotion Units, Drug and Alcohol Services and Community Health have responsibility for monitoring compliance with the Public Health Act 1991 and initiating prosecution proceedings when breaches are repeatedly detected. Area Health Services in New South Wales are required to conduct compliance monitoring activities involving 10 per cent of retail outlets in their communities and provide information as part of their annual reporting to the NSW Health Department.

1.5.5 South Australia

Activity in South Australia directed towards reducing the supply of tobacco products to young people has recently been supplemented with the introduction of the Tobacco Product Regulation Act 1997 and rounds of compliance testing of retailers involving trained young people in 1999. These initiatives were introduced following concern at the trends in young people’s smoking rates and access to tobacco products reported by young people. The South Australian legislation does not require the checking of proof of age as the only defence for selling tobacco products to a minor, as is the case in some other states. The South Australian program includes a comprehensive retailer education and awareness raising campaign.

1.5.6 Victoria

In Victoria, youth access to tobacco is addressed through a combination of legislation and local community projects. Local councils and environmental health officers are responsible for monitoring and enforcing the Tobacco Act 1987 and its provisions relating to cigarette sales to minors. Information packages and education resources have been produced to assist the monitoring and enforcement organisations and personnel in understanding the legislation and enforcement issues. Training programs have also been undertaken and QUIT Victoria assists in the provision of public and retailer education resources. Whilst there is no ongoing state wide coordinated compliance testing strategy, most councils do undertake some form of compliance monitoring. Recent amendments to the Tobacco Act include an increase in fines for breaches of the Act.

In 1998 the Victorian Department of Human Services funded the Western Region Tobacco Project. A key resource developed from this project is the Tobacco Act Enforcement Protocol, which provides local Government Environmental Health Officers with clear guidelines and consistent procedures for investigating reports of retailers selling cigarettes to minors.
1.5.7 Tasmania

The Tasmanian Government raised the smoking age to 18 years in February 1997 in response to the increasing number of young children smoking. The Public Health Act 1997 was introduced in Tasmania, which contained further provisions relating to tobacco product display and separated tobacco from confectionary. A feature of this legislation is the identification of an extensive range of persons who can be designated nominated officers for the purposes of enforcing the legislation. They may also initiate a prosecution against retailers or confiscate tobacco from under age children who are caught smoking though it is more acceptable for this to be undertaken by the police. The Tasmanian legislation does not however require the checking of proof of age as the only defence for selling tobacco products to a minor, as is the case in some other states. Compliance monitoring has been undertaken in conjunction with specific sales to minors initiatives to ascertain the level of compliance by tobacco retailers in relation to the sale of tobacco products to minors.

1.5.8 Northern Territory

In 1992 the Northern Territory Tobacco Act came into effect making it an offence to sell or supply tobacco products to young people under the age of 18 years with penalties of up to $10,000 if convicted of an offence. In 1996 and 1997 retailer compliance surveys were undertaken across the Northern Territory which found that around 22 per cent of retailers were prepared to sell to children of 15 years of age. In light of these results, comprehensive retailer education campaigns were undertaken in 1996, 1997 and 1999 to inform retailers of their obligations under the Tobacco Act. Included as part of these retailer campaigns were a range of multilingual resources to ensure that all sellers of tobacco products were aware of the law requiring them not to sell to young people under 18 years of age.

In conjunction with retailer education activities, the above campaigns have included a wider community focus which aimed to encourage members of the public to take an active role in reducing young people’s access to tobacco products. Such activities involved the use of mass media, schools and other community groups to put forward this message. Recent activity has involved the promotion of the QUITLINE telephone service as an avenue through which members of the community can report suspected offending retailers directly to enforcement authorities.

Enforcement activities at present seek the cooperation of police to assist in investigating reports of persons selling or supplying tobacco products to children. Further periodical compliance surveys and the use of compliance testing for prosecution are planned. In addition, amendments to existing legislation to further limit young people’s access to tobacco products are currently being planned.

1.5.9 Queensland

The Queensland Tobacco Products (Prevention of Supply to Children) Act 1998 was enacted as part of a larger project aimed at addressing the increasing rate of smoking by Queensland
children. The new legislation raised the legal age for sale and supply of tobacco products from 16 years to 18 years. To date, there has been one successful prosecution relating to the sale of a tobacco product to a minor in Queensland.

In conjunction with the legislation, Queensland Health also disseminated information kits for retailers and the community, provided free signage to retailers and access to a Hotline for retailers and employees, training and a procedures manual for enforcement officers.

**1.5.10 Australian Capital Territory**

Legislation in the Australian Capital Territory was amended in May 2000 as a strategy to address young people’s access to tobacco products. These amendments provide for increased enforcement capacity with authorised officers including public health officers provided with specific enforcement powers.

Other amendments include:

- proof of age as a defence to prosecute for a sale to a minor;
- offence to provide false document of identification; and
- definition of acceptable forms of identification in the Act.

Legislation pertaining to the location of vending machines was also amended to include the restriction of vending machines to casino and gaming areas and designated ‘bar rooms’ on licensed premises. As well, the amendments require the display of health warning notices at point of sale, provide increases in fines for breaches of the Act and provide for administrative sanctions to be incurred where breaches occur including suspension or cancellation of licenses to sell tobacco.

**1.6 Tackling the problem**

The National Tobacco Strategy 1999 to 2002–03 identified two concepts relating to the availability of tobacco products, accessibility and affordability. Where and how tobacco products are sold, along with the cost of purchasing them, are factors that determine the overall availability of these products in the community (Commonwealth Department of Health and Aged Care 1999). The National Tobacco Strategy recommended future strategies to address these two concepts including providing regular increases in the price of cigarettes, reviewing the feasibility and potential public health benefits of registration schemes for tobacco outlets and the development of a national best practice model in sales to minors programs. As well, strategies for reducing tobacco promotion and regulating tobacco have also been recommended within the comprehensive approach to future tobacco control presented in the National Tobacco Strategy.
The 1994 Report of the US Surgeon General *Preventing Tobacco Use Among Young People* concluded that an effective strategy to reduce tobacco use among young people must include:

- enforcement of minor’s access laws—to reduce the availability of tobacco to young people;
- tobacco tax increases—to influence the real price of tobacco, as young people are particularly sensitive to price changes;
- youth oriented mass media campaigns; and
- School based education programs—to inform young people about the facts and the health risks relating to tobacco use.

Limiting access alone is not sufficient to reduce smoking prevalence among young people. The implementation of mutually supportive interventions that target both the demand and supply for tobacco products by young people are needed to reduce tobacco use. Educational interventions are undermined when young people are easily able to purchase tobacco (Altman 1992).

### 1.6.1 Youth access and tobacco sales

An important contributor to the increase in adolescent smoking rates as seen in Australia and other Western countries in recent years is easy access to cigarettes (US Surgeon General 1994). This has occurred despite the fact that since the late 1980s there has been substantial developments in youth access laws and policies that involve age restrictions for selling tobacco in these countries (Altman 1992).

In Australia, several studies have reported the relative ease to which young people have been able to purchase cigarettes despite the introduction of laws that make it illegal to sell tobacco products to young people (eg. Andrews 1994; Chapman 1994; Carruther 1995; Wakefield 1992; Sanson-Fisher 1992).

This is similar to the results from studies conducted in the United States where high proportions of retailers selling cigarettes to minors have also been reported despite the presence of legislative programs that make such sales illegal (eg Altman 1989; DiFranza 1996; Feighery 1991).

### 1.6.2 Role of retailer education and prosecutions

For legislation to be effective in terms of reducing illegal cigarette sales to minors it is important that retailers have a good understanding of the law, have a favourable attitude towards it and a perception of the negative consequences associated with failure to adhere to it. In Australia, it has been found that despite positive attitudes towards sales to minors legislation by retailers, there has been a general perception of low enforceability of the legislation, low perceived compliance by other retailers with the legislation and low likelihood of enforcement or prosecution for breaches of the legislation. As well, it has been reported that many retailers
thought that it was acceptable to sell cigarettes to minors under certain conditions such as purchasing for their parents (Schofield 1995).

It can therefore be concluded that legislation alone banning sales of cigarettes to minors will not achieve any substantial effect on young people’s ability to purchase cigarettes. Other strategies need to support the legislative program to ensure that enforcement and prosecution are perceived as a real threat by retail outlets and deter retailers from selling cigarettes to young people.

### 1.6.3 Community attitudes

Research has also highlighted the need for community support for programs to reduce illegal sales of tobacco to young people. Community attitudes towards the sale and supply of tobacco to young people will impact on retailers’ actions in terms of responding to a minor seeking to purchase cigarettes (Mawkes 1997). Studies conducted in Australia have found very strong community support for programs to restrict the sale of cigarettes to young people.

A survey conducted in Western Australia in 1993 reported that 92 per cent of Western Australians supported measures to restrict the sale of cigarettes to young people (Mawkes 1997).

In New South Wales in 1997, it was found that:

- 72 per cent agreed that everyone in the community is responsible for making sure that retailers do not sell tobacco products to people under 18;
- 67 per cent agreed that health workers, police and local councils should arrange for people under 18 to visit shops to see if the law is broken;
- 72 per cent would report illegal sales of tobacco products to young people, increasing to 80 per cent amongst those respondents with people under 18 living at home; and
- 81 per cent of those interviewed believed that retailers who have been officially warned about selling tobacco products to minors should be revisited at a later date by an under age volunteer and prosecuted if a sale is made again.

*(NSW QUIT Campaign—unpublished 1997)*

Research conducted by the University of Queensland in 1997 also found substantial community support for sales to minors legislation. This study reported that:

- 79 per cent of Queenslanders agree it is a good idea to increase the legal age for buying cigarettes from 16 to 18 years;
- 84 per cent of Queenslanders support making it illegal for an adult to give cigarettes to a person under the legal age; and
- more than 90 per cent of Queenslanders support more strict enforcement of penalties for the sale of cigarettes to a person under the legal age.

*(Centre for Health Promotion and Cancer Prevention Research, 1997)*
InVictoria the Western Region Tobacco Project undertook two community attitude surveys in 1998–1999. These surveys found that nearly 90 per cent of the community were concerned about the impact of smoking on young people’s health and over 90 per cent of the community surveyed supported retailers being fined for selling cigarettes to minors (Human Services, Victoria 2000).

1.6.4 The impact of sales to minors programs on sales rates

Many studies have demonstrated that in order to decrease the proportion of shops that sell tobacco to minors multifaceted and sustainable programs are needed (eg Altman 1991; Feighery 1991; Jason 1991; Laugesan 1999; Tutt 2000). These include retailer education and information programs, community involvement, enforcement strategies and the use of local media in publicising enforcement activity and the consequences of non-compliance. Without these, there will be no change in retailer’s perceptions of the negative consequences associated with failure to adhere to sales to minors legislation (Sanson-Fisher 1992; Schofield 1995).

In 1988 in Liverpool, England, a program of compliance monitoring commenced involving sending supervised seven to 13 year olds into shops to make cigarette purchase attempts. In 1988 the results indicated young people were able to purchase tobacco illegally 100 per cent of the time. A program of warning letters, further compliance monitoring activities and enforcement was introduced resulting in 62 successful prosecutions. In 1994 compliance monitoring indicated that only three out of 100 shops in Liverpool were willing to sell to persons under the legal age of 16 years (Report to Consumer Protection Sub-Committee, City of Liverpool (1992–1994).

Altman et al (1989) reported on a study that examined the effectiveness of a six-month community and retailer education program on the selling rates of retail outlets in California. Prior to the program, 74 per cent of retail outlets visited by 14–16 year olds were willing to sell them cigarettes. Following the program the selling rate was reduced to 39 per cent of retailers. However, without continued interventions, monitoring and sanctions there was an increase in the selling rate a year later with 59 per cent of retailers prepared to sell cigarettes to minors. (Altman 1991).

Feighery et al (1991) reported on a study conducted in four northern California communities. This study found that education alone had a limited effect on reducing illegal cigarette sales to minors. Education plus enforcement decreased significantly the retail sales of cigarettes to young people. It was found that in 1988 and prior to any interventions, 71 per cent of retail outlets visited sold tobacco to minors. Following a community education program and law enforcement interventions, only 24 per cent of retail outlets sold tobacco to minors who visited the stores (Feighery 1991).

Jason et al (1991) undertook a study in Woodridge, Chicago to explore changes in retailer compliance following the introduction of stringent and comprehensive sales to minors programs. It was reported that after the passing of legislation and 1.5 years of active compliance checking there was a reduction in sales rates from 70 per cent to less than 5 per cent and a reduction of over 50 per cent in the prevalence of regular smoking by young people (Jason 1991).
Biglan et al (1995) conducted a study involving positive social and material reinforcements for retailers not selling to minors. A substantial reduction in sales rates from 62 per cent to 24 per cent was achieved and the study concluded that this strategy may be effective in communities where there were difficulties in mobilising support from law enforcement agencies (Biglan 1995).

In Australia, there have been a number of studies that have explored the impact of sales to minors programs on sales rates. Significant reductions have been reported following interventions that have involved media and community campaigns, publicity about enforcement, prosecutions and compliance monitoring activities (eg. Andrews 1994; Chapman 1994; Junck 1997; Mawkes 1997; Tutt 2000).

For example, Chapman et al (1994) found a 69 per cent reduction in tobacco sales to minors following an intervention that involved publicity and a letter about random compliance checks and threats of prosecution in Sydney, New South Wales.

Andrews et al (1994) reported a reduction of 21 per cent in cigarette sales to minors following a brief intervention that comprised of a publicity campaign and a letter to retail outlets about the program in a rural town of New South Wales.

In Western Australia, Mawkes et al (1997) found that youth access was effectively reduced following a comprehensive program that combined prosecution, education, enforcement, publicity and community involvement. This study reported a 68 per cent reduction in the number of retailers reported to be selling tobacco to minors (Mawkes 1997).

Junck et al (1997) reported a significant decrease in selling rates following a program incorporating compliance monitoring, retailer education, publicity, warning letters, staff training, extensive community discussion and prosecutions which was sustained over a ten month period in a metropolitan community of Sydney, New South Wales.

In Victoria, the Western Region Tobacco Project conducted compliance monitoring checks between 1998 and 1999 to measure retailer compliance with the Tobacco Act 1987. This study reported that where a program was introduced in a community that involved education and enforcement strategies, there was an increase in retailer compliance rates from 64 per cent (reported prior to the commencement of the project) to 78 per cent (reported in the middle of the project) with a decline to 71 per cent at the conclusion of the study. In one community involved in this study, the compliance rate increased from 58 per cent to 95 per cent. At the completion of the project, a compliance rate of 87 per cent was reported for this city. In this case there was significant publicity about two prosecutions prior to the second compliance check (Department of Human Services, Victoria 2000).

On the Central Coast of New South Wales an ongoing campaign aimed at increasing retailer awareness of their obligations under the law, and well publicised prosecutions has resulted in increasing retailer compliance. Prior to the commencement of the program, 31 per cent of retailers sold tobacco to minors. Following a highly publicised prosecution in that area, only 19 per cent of the sample of retailers sold cigarettes to minors. A survey of a sub-sample of retailers in the closest proximity to the prosecution who had previously sold tobacco on the
first purchase attempt revealed only 8 per cent sold cigarettes to minors. Ongoing efforts in this region have resulted in a compliance rate for 1998–99 of 100 per cent (Tutt 2000).

1.6.5 Restricting young people’s access to tobacco and smoking behaviour

Limiting young people’s access to cigarettes through regulations that restrict the sale of tobacco products have been considered an important strategy in the prevention of adolescent smoking behaviour (Forster 1998). The strongest effects of legislation are likely to be on those (mostly young adolescents) who are on the threshold of regular smoking. Making access to cigarettes more difficult for young people might limit the progression of cigarette smoking uptake or increase self-initiated adolescent smoking cessation (Forster 1998; Tang 1997).

Some studies have examined the relationship between high compliance rates and reductions in youth smoking prevalence rates. Reductions in smoking prevalence of up to 69 per cent have been achieved in communities where comprehensive and sustainable sales to minors programs have produced very high to complete compliance by retailers of local tobacco access laws and ordinances over extended periods of time (Jason 1991; DiFranza 1992; Tutt 2000).

Tutt et al (2000) reported on an Australian study conducted in a New South Wales Central Coast community. It was found that maintaining the rate of retail compliance with sales to minors legislation at 90 per cent or better over a number of years reduced adolescent smoking rates for all age groups in that community. This study reported that in the short term, high retail compliance rates impacted mainly on the smoking rates of younger age groups (12–13 year olds). However, sustained effort over six years was accompanied by a one third reduction in smoking prevalence in each age year in the 12–17 year age group. The study concluded that substantial effects on the smoking rates of older age groups would only be achieved if retailer compliance were sustained at a high level over a period of years (Tutt 2000).

1.6.6 Purchasing tobacco, smoking behaviour and demographic factors

There have been behavioural and demographic factors found to be associated with the sale of cigarettes to young people. Laugesan et al (1999) reported that students who smoked daily were ten times more likely to purchase weekly than students smoking monthly and that smokers who experience more difficulty in buying cigarettes (due to the effects of enforcement on retailers), do not, as a result, buy or smoke as many cigarettes as those who have less difficulty (Laugesan 1999).

In an Australian study, Tang et al (1997) also reported that perceived ease of access to cigarettes was associated with regular or current smoking behaviour and that current smokers were more likely to purchase cigarettes than triers were.
A number of demographic factors such as the age and sex of the buyer and the seller are associated with sales of cigarettes to minors. Older children are generally more likely to be sold cigarettes than younger children, and some studies have reported that girls find it easier to buy cigarettes than boys do (Schoenmakers 1997).

The Victorian Western Region Tobacco Project reported that retailers perceived to be under 18 years of age were more likely to sell cigarettes to minors than older aged retailers. This study did not report any significant differences between male and female retailers in terms of compliance (Department of Human Services, Victoria 2000).

As well, ethnicity appears to be a factor in the sale of cigarettes to minors. Schoenmakers et al (1997) reported on a study that found that English-speaking background minors were more successful in purchasing cigarettes from retailers than non-English speaking background buyers and that English-speaking background sellers sold significantly more often to minors than non-English speaking background sellers.

### 1.6.7 Proof of age

A number of studies have reported on the importance of education and legislative programs that encourage retailers to make requests for minors’ age and/or identification (proving themselves old enough to purchase cigarettes). For example, Landrine et al (1996) found that when age was asked, minors were refused cigarettes 95.8 per cent of the time, and when identification was requested, they were refused cigarettes 99 per cent of the time. Similarly, Rigotti et al (1997) reported on a study that found an increase in retailers’ requests for proof of age from young people and a reduction in sales rate following a retailer education program.

In Victoria, the Western Region Tobacco Project also found that minors seeking to purchase cigarettes who were asked for proof of age were significantly more likely to be refused a sale. This project also reported that 61 per cent of refusals were at retail premises where signs were displayed (Department of Human Services, Victoria 2000).

The success of interventions with retailers can be improved by enhancing efforts to increase their requests for appropriate proof of age identification (Landrine 1996; Sanson-Fisher 1992; Rigotti 1997; McMaugh 1998).

### 1.6.8 Supply of tobacco products to young people under 18 years of age

There is evidence that sales to minors programs need to incorporate specific strategies that address the sale and supply of cigarettes from other sources. Hill et al (1999) reported that in Australia decreases in purchasing cigarettes by young people corresponded with increases in the proportion of young people obtaining cigarettes from friends and family members. As over the counter purchases become more difficult, other sources (eg vending machines, adults, older children, single cigarettes) become increasingly important as alternate sources of cigarettes for young people (DiFranza 1996; Wolfson 1997).
Wolfson et al (1997) reported that adolescents obtained cigarettes from social as well as commercial sources. This study also reported that the provision of tobacco products to other adolescents was associated with being a heavy regular smoker (<30-day). Adolescents who were heavier smokers were most likely to purchase cigarettes and were most likely to provide cigarettes to other adolescents (Wolfson 1997).

Laugesan et al (1999) reported on a New Zealand study that examined changes in cigarette purchasing behaviour of 14 and 15-year-old students between 1992 and 1997 when there was increased enforcement against underage sales of tobacco. Self-purchasing decreased by 37 per cent from 1992 to 1997 while acquiring cigarettes from other people increased. Students who smoked only a few cigarettes a week were more likely to have difficulty successfully purchasing cigarettes than students who smoked more. This study also suggested that those students who have greater difficulty in purchasing cigarettes do not as a result buy or smoke as many cigarettes as those who have less difficulty and rely on other sources for obtaining cigarettes (Laugesan 1999).

Hill et al (1999) also reported on increases in the proportion of young people acquiring cigarettes by getting someone else to purchase for them during a period when reductions in over the counter purchases had occurred. At the same time there were reductions in the mean number of cigarettes smoked by older aged occasional and regular smokers (Hill 1999).

As well, it appears that young people will seek out retail outlets in neighbouring communities as alternate sources for cigarettes. In a United States study, it was reported that despite reductions in sales rates in a community following a two-year program of enforcement activities, young people’s perceived access to tobacco products and their smoking behaviour remained unchanged. This study reported increases in the proportion of students who purchased tobacco from retailers in other neighbouring communities and in those who reported having someone else purchase for them (Rigotti 1997).

An Australian study also highlighted the difficulty of restricting young people’s access to tobacco products in large metropolitan cities with mobile student populations particularly when enforcement activities are not undertaken (Staff 1998).

### 1.6.9 Access to cigarettes from vending machines

Despite reductions in over the counter sales achieved by community education and media campaigns, many studies report that there has been little impact on the sale of cigarettes through vending machines. An Australian study reported that even when vending machines were located in places with restricted access to young people, nine out of 10 attempts by young people to purchase cigarettes from these vending machines were successful (Western Australian Smoking and Health Program 1998). It has been concluded that a total ban on cigarettes sales through vending machines or fitting vending machines with lock out devices requiring the assistance of sales staff may be the only effective way of addressing this problem (eg. Altman 1989; Altman 1991; Feighery 1991; DiFranza 1996; Wolfson 1997).
The prohibition of self service vending machines has also been stated as a recommendation of the National Tobacco Strategy 1999 to 2002–3 (Commonwealth Department of Health and Human Services 1999).

1.6.10 Compliance monitoring

In many states of Australia, throughout the United States of America and the United Kingdom, the process used for monitoring retailers’ compliance with sales to minors legislation and in many cases for gathering evidence to validate a reported breach of sales to minors legislation has involved children in test purchases. This practice (compliance monitoring) entails young people entering a retail outlet to attempt to purchase cigarettes and is conducted under the supervision of adults who wait outside. The participation of young people in compliance monitoring activities has been shown to be the only effective strategy for the identification of retailers responsible for illegal cigarette sales to young people. It is also considered necessary in sales monitoring studies because of the impracticalities and expense involved in the use of other methods of monitoring such as ‘stake-out’ sales observation studies (DiFranza 1995).

A number of studies have examined the practice of involving youth volunteers in monitoring and enforcement strategies (eg. Chapman 1994; Rigotti 1997). Under Australian common law, there are no legal impediments to the engagement of young people in this way (Chapman 1994).

In March 2000, the Victorian Supreme Court upheld an appeal against a magistrate’s decision concerning the use of a child in a test purchase on public health grounds. The judge claimed that there are no other viable or practical alternatives to the involvement of young people in compliance monitoring for the successful prosecution of those selling cigarettes to young people (Supreme Court of Victoria Practice Court No. 7297 Rice v Tricouris).

Studies that have examined this strategy have suggested that compliance monitoring needs to incorporate repeat purchase attempts in order to categorise outlets as nonselling, occasional selling or regular/always selling, rather than the dichotomous selling/nonselling distinction derived from single buying attempts (Chapman 1994). As well, Staff (1997) reported increases in selling rates after further purchase attempts and concluded that it may be normal practice for minors to make multiple attempts to purchase from a retail outlet when their first attempt is unsuccessful.

Some researchers have concluded that compliance monitoring may overestimate the difficulty young people experience when trying to buy tobacco products and that underage youths that try to buy tobacco behave differently than do youths in compliance checks. They may, for example, lie about their age, use false identification, dress to appear older, be persuasive, or enlist an older teenager or adult to buy for them (Rigotti 1996; McMaugh 1998).

To address these issues and the issue concerning the participation of young people in compliance monitoring some states in Australia have developed policies, procedural guidelines and protocols which outline recommended processes for the selection, training, use and recruitment of young people in compliance monitoring activities and for obtaining parental
consent. These procedures are also included in the training programs for enforcement agencies and community education programs. (Eg NSW Health Department (1996) Policies and Procedures for the Enforcement of Section 59 of the Public Health Act 1991; Victorian Department of Human Services Tobacco Act Enforcement Protocol)

1.7 Conclusions

It can be concluded therefore that:

- Strategies that address the demand for cigarettes by young people will be undermined if there is unlimited access to cigarettes and if there is complacency within the community and among retailers in relation to the sale of cigarettes to young people.

- Sales to minors programs must also include initiatives that reduce young people’s access to single cigarettes through over the counter sales or from other sources such as friends and family.

- Comprehensive programs that involve the collaboration and support of retailers, the community, schools, enforcement agencies and the media are needed in order to reduce the sale and supply of cigarettes to young people.

- The implementation of comprehensive sales to minors programs can achieve substantial reductions in sales rates of tobacco to young people within short timeframes.

- These programs must be designed to be sustainable over long periods of time in order to achieve continual declines in sales rates.

- These programs should seek to maintain a retailer compliance rate of more than 90 per cent in order to achieve any impact on young people’s smoking rates.

- Important components of effective sales to minors program are legislative programs that are supported by a commitment to prosecute repeat offenders, retailer and community education and information programs, community involvement, compliance monitoring and enforcement strategies and the use of local media in publicising enforcement activity and prosecutions. These are necessary in order to achieve changes in retailer’s perceptions of the consequences associated with illegal sales of cigarettes to young people.

- Programs that effectively reduce access to cigarettes through over the counter sales should be accompanied by strategies that address the sale and supply of cigarettes from other sources such as vending machines, friends and family.

- Programs in one community need to be supported by similar initiatives and program commitment in neighbouring communities in order to restrict the access to cigarettes from a mobile youth market.
2. Key elements in a national best practice model for reducing young people’s access to tobacco

The National Tobacco Strategy identified the need for a national best practice model for reducing the availability and supply of tobacco to young people. The National Approach for Reducing Young People’s Access to Tobacco in Australia identifies six key elements for a comprehensive and effective sales to minors program. These have been developed from an examination of Australian and international literature discussed in Section 1.6 and following a process of consultations with a range of key stakeholder organisations within each Australian State and Territory.

These elements are:

- legislation;
- monitoring and enforcement;
- prosecution;
- education and training programs;
- community action; and
- evaluation.

2.1 Legislation

Strong legislation underpins an effective strategy to reduce the sale of tobacco to young people.

This legislation should:

- define the age at which a person can legally be sold a tobacco product;
- enable formal proof of age to be requested;
- identify the authority responsible for enforcement;
- provide for the prosecution of the seller, owner and/or manager (license holder);
- provide for significant penalties to encourage retailer compliance; and
- include offences for sale and supply of tobacco to children.
Some organisations have called for an offence for purchase, possession and use of tobacco by young people to be included in legislation. The tobacco industry has also advocated that minors should be penalised for the purchase and possession of tobacco. There is concern that this would have little public health benefit and would redirect limited resources available for enforcement efforts from the adult community to young people.

2.2 Monitoring and enforcement

Legislation alone will not ensure that young people’s access to tobacco is reduced. A systematic and comprehensive program of monitoring and enforcement is critical. Regular compliance checks involving the participation of youth volunteers are the most effective, least costly and practical means for monitoring illegal cigarette sales to children, a position endorsed by authorities in the United States, the United Kingdom and New Zealand, and most States and Territories of Australia. However, the practice of compliance monitoring remains a contentious issue for some Australian jurisdictions and to ensure that these activities are managed both appropriately and effectively, clear protocols must be provided. Western Australia, New South Wales and Victoria have developed policies, procedural guidelines and protocols which outline recommended processes for the selection, training and recruitment of young people in compliance monitoring activities and for obtaining parental consent. These procedures are also included in the training programs for enforcement agencies and community education programs.

2.3 Prosecution

There is a need for prosecutions to occur so that the retailers and the public can see that the law is being enforced. Prosecutions demonstrate that governments are serious about reducing the illegal sale of tobacco to young people. Prosecutions should be supported by other strategies such as retailer education, community action and warning notices. As well, publicity programs that inform the community and retailers of enforcement operations and prosecutions should be undertaken at the same time.

2.4 Education programs and training

Comprehensive sales to minors programs should include education and training activities for a range of key groups within the community. Sales to minors initiatives that include education programs and which support enforcement activities have been shown to decrease illegal sales of tobacco to young people significantly.
Key groups for education and training programs are:

- Agencies including health, police and local governments responsible for enforcement and monitoring activities. These groups should be provided with information resources and training in order to inform them about the legislation and procedures for appropriate enforcement activities and for ensuring that immediate and effective action is taken when non-compliance is detected.

- Key members of the judiciary system such as magistrates and prosecutors. These officers should be provided with information about public health issues relating to young people and smoking, youth access issues, compliance and monitoring practices and the community’s attitude and support for effective enforcement of sales to minors legislative programs;

- Retailers who sell tobacco products. It is important that tobacco retailers are informed about their obligations under the legislation and the penalties for non-compliance. As well, education programs should include publicity about compliance monitoring activities and prosecutions.

- Community members. It is important that the community is made aware of the current level of youth access to and use of tobacco in their community, the impact this issue has on the health of young people. As well, they should be provided with information about how to report breaches of the law and support the enforcement activities being undertaken in their community.

- Young people. Educational programs that target young people should be undertaken both within the school and the general community. These programs are important as they provide young people with information about tobacco control and public health issues, existing laws regarding the sale and supply of cigarettes to minors, and they provide information on how to report breaches of the law and support enforcement strategies.

### 2.5 Community action

Raising the public’s awareness and enlisting and maintaining their support are essential for a comprehensive enforcement strategy.

Important components of community action approaches are:

- involving the community in the design and implementation of local strategies to reduce tobacco use by young people;

- generating and disseminating regular publicity about the issue, compliance monitoring activities and prosecutions within the community;

- enlisting the support of key community persons and agencies that can make an impact on the issue within the community;
• involving young people in the development of local strategies; and
• obtaining the community’s support for the enforcement and monitoring initiatives undertaken by police, health services and others in their local community.

2.6 Evaluation

Sales to minors programs are only one component of a comprehensive approach to reducing youth smoking. Evaluating the effectiveness of the range of strategies used to reduce youth smoking rates is a critical long-term outcome.

The effectiveness of comprehensive sales to minors programs should continue to be evaluated against both immediate and long-term goals. Regular surveys that measure:

• youth smoking rates;
• youth access to tobacco products;
• the sources of cigarettes supplied to young people;
• the number of cigarettes smoked; and
• surveys that monitor sales through vending machines

are important indicators of the achievements of the program. As well, compliance surveys that monitor the illegal selling rates to young people, attitudinal surveys that involve retailers, young people and the general community are also important evaluation tools.

The effectiveness of individual components of the sales to minors program should also be assessed in order to track the influence they have on the overall program. Evaluation programs that provide regular reports on:

• the number of compliance checks undertaken by enforcement agencies;
• the number of training programs conducted;
• the number of resources produced and disseminated;
• the level of usage of resources and education program by schools, retailers and community groups;
• the amount of publicity generated; and
• the level of participation of the public in local community action strategies

are important process measures for measuring the effectiveness of components of sales to minors programs.
3. **Recommended key elements for a national best practice model**

The National Expert Advisory Committee on Tobacco and the National Tobacco Policy Officers Group recommend that jurisdictions consider the following specific initiatives during development of jurisdictional responses to reduction of access by young people to tobacco products.

1. Examination of the effectiveness of current legislation to prohibit the sale and supply of tobacco to minors under the age of 18 years and consideration of the following elements within legislative programs:
   - significant penalties for retailers who sell tobacco to young people (For example, greater than $5,000);
   - proof of age card or equivalent photographic ID scheme for tobacco purchases;
   - identification of the authority responsible for enforcement;
   - provision for the prosecution of the seller, owner and/or manager (license holder);
   - inclusion of an offence to supply tobacco to a person under the age of 18 years; and
   - penalties for those who supply (other than sell) tobacco to minors.

2. Indication of intention to prosecute retailers who sell tobacco to young people or to people who are known to be supplying cigarettes to young people.


4. Development and implementation of a system of routine compliance monitoring of tobacco retailers to monitor the rate of illegal sales of tobacco to young people by 2002.

5. Development and implementation of an education strategy for the general public to raise awareness about the issue and to promote community participation in strategies to reduce young people’s access to tobacco by 2002.

6. Development and implementation of retailer education strategies advising them of their obligations not to sell tobacco to young people under the age of 18 years or to people who are known to be supplying cigarettes to young people and the penalties for doing so by 2002.

7. Indication of intention to:
   - ensure that adequate capacity is provided for enforcement and monitoring programs to support sales to minors prevention programs;
• provide training programs and resources for relevant enforcement bodies in collaboration with key stakeholders, enforcement agencies and health authorities; and

• ensure regular publicity and public relations programs are included as integral components of enforcement strategies.

8. Development of strategies that address the supply of cigarettes to young people. There should be further monitoring of trends in the supply of cigarettes to young people from non-retail outlets and formative research undertaken to assist in the formulation of effective strategies such as communication programs to address this issue. Strategies such as advertising and community education programs, publicity and public relation programs, enforcement programs and community action strategies should complement those designed to reduce the sale of cigarettes to minors.

9. Monitoring of the implementation of the National Approach to prevent sale and supply of tobacco products to children to be included within the overall monitoring strategy developed for the National Tobacco Strategy.

10. A review of the National Approach to be coordinated and funded by the Commonwealth to evaluate the effectiveness of this strategy and a comprehensive report to be provided to the Intergovernmental Committee on Drugs by 2004.
4. Evaluation framework

4.1.1 Monitoring the National Approach

The National Approach recommends that the National Tobacco Strategy and the National Expert Advisory Committee on Tobacco should monitor jurisdictional activity in terms of the adoption and implementation of the National Approach best practice recommendations. The following framework has been designed therefore to incorporate this recommended approach to the monitoring of the National Approach:

4.1.2 The Australian School Students’ Alcohol and Drugs (ASSAD) Survey

Important indicators of the achievements of the National Approach are regular measurements of:

- youth smoking rates;
- youth access to tobacco products through illegal tobacco sales and supply;
- the sources of cigarettes supplied to young people;
- the number of cigarettes smoked; and
- the number of sales through vending machines.

The Centre for Behavioural Research in Cancer conducts surveys of school students from all Australian States and Territories in Years 7–12 every three years. The ASSAD Survey provides an opportunity to monitor the issues, behaviours and attitudes outlined above relating to the use of and access to tobacco products and therefore provides an excellent tool for monitoring the impact of the National Approach and the adoption of best practice recommendations by jurisdictions in Australia.

A report on the 1999 Survey will be available shortly. The next survey will be conducted in 2002 and therefore should provide the National Tobacco Strategy and the National Expert Advisory Committee on Tobacco with a valuable tool for monitoring the progress of the National Approach.

4.1.3 State and Territory annual reports

As part of the evaluation program of the National Tobacco Strategy an annual reporting mechanism for State and Territory governments in terms of monitoring the development of Action Plans has been proposed. It is proposed that the evaluation of the National Approach should therefore be incorporated into the evaluation process of the National Tobacco Strategy. The evaluation framework for the National Approach includes annual reporting from jurisdictions of the following:
The progress of the implementation of specific initiatives in terms of the timelines provided in the National Approach;

- compliance monitoring surveys undertaken to assess illegal selling rates in each jurisdiction;
- prosecutorial action taken by States and Territories in terms of addressing illegal cigarette sales to young people; and
- other evaluation programs such as representative population surveys and qualitative research programs.

The National Approach identified a range of research studies that have been conducted in Australia that have assisted in informing governments of the community’s opinion about specific issues relating to young people’s access to cigarettes.

Population surveys provide a useful measurement of the public’s opinion about specific issues such as the inclusion of mandatory checking proof of age in legislative programs, the imposition of penalties on retailers who break the law, the allocation of government spending on revenue from illegal tobacco sales to children and the use of young people in compliance monitoring activities.

As well, the National Approach identified the trend in the supply of cigarettes to young people from non retail outlets and in particular, the supply of cigarettes from friends and family members. Reports on qualitative research programs will assist in the monitoring of the National Approach and its impact on the supply of tobacco to young people from non retail outlets and contribute to the design of future communication and education strategies.

### 4.1.4 Long-term measures

The National Approach recognises that sales to minors programs are only one component of a comprehensive approach to reducing youth smoking. The implementation of mutually supportive interventions that target both the demand and supply for tobacco products by young people are needed to reduce tobacco use.

The evaluation of the effectiveness of the range of strategies employed for the purpose of reducing youth smoking rates is therefore a critical long-term outcome.
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