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Tobacco smoke: policy options at EU level

European Parliament resolution of 24 October 2007 on the Green Paper 'Towards a Europe free from tobacco smoke: policy options at EU level' (2007/2105(INI))

The European Parliament,

- having regard to the Commission's Green Paper 'Towards a Europe free from tobacco smoke: policy options at EU level' (COM(2007)0027),
 - having regard to the 2003 WHO Framework Convention on Tobacco Control (FCTC),
 - having regard to the 2004 WHO European strategy for smoking cessation policy,
 - having regard to the 2007 WHO policy recommendations on protection from exposure to second-hand tobacco smoke,
 - having regard to the Commission statement before the Parliament concerning tobacco additives in the context of the negotiations on REACH and concerning the European Parliament's amendments on tobacco additives¹,
 - having regard to Rule 45 of its Rules of Procedure,
 - having regard to the report of the Committee on the Environment, Public Health and Food Safety (A6-0336/2007),
- A. whereas tobacco smoke is a complex toxic mixture of more than 4 000 substances, including poisons such as hydrogen cyanide, ammonia and carbon monoxide, as well as 50 substances proven to be carcinogenic,
- B. whereas in the European Union alone at least 650 000 people die each year as a consequence of smoking,
- C. whereas it has been scientifically proven that tobacco smoke and smokeless tobacco products cause serious damage to health and premature death,
- D. whereas tobacco smoke damages the airways, resulting in irritations of the mucous membrane, coughing, hoarseness, shortness of breath, impaired lung function, the development and aggravation of asthma and of pneumonia, bronchitis and chronic obstructive pulmonary disease, and damage to the arteries is so severe as to cause heart attacks and strokes, and more than doubles the risk of blindness through age-related macular degeneration (AMD),
- E. whereas exposure to tobacco smoke in general or in the workplace is proven to substantially increase the risk of lung cancer and employees of catering establishments in which smoking is permitted are, for instance, 50% more likely to develop lung cancer

¹ Texts adopted of 13.12.2006, P6_TA(2006)0552.

than employees not exposed to tobacco smoke,

- F. whereas in the European Union an estimated 80 000 people die from passive smoking each year,
- G. whereas children are particularly vulnerable to tobacco pollution, e.g. in the home and in private transport,
- H. whereas exposure to tobacco pollution during pregnancy can result in a higher risk of deformities, miscarriages, still and premature births, stunted growth of the foetus, smaller head circumference and a lower birth weight and there is a link between passive smoking and middle ear infections, impaired lung function, asthma and sudden infant death syndrome,
- I. whereas the European Union and 25 of the 27 Member States have already signed and ratified the WHO Framework Convention on Tobacco Control (FCTC), in the preamble to which reference is made to the WHO Constitution which states that the enjoyment of the highest attainable standard of health is one of the fundamental human rights and Article 8 of which lays down an obligation to provide protection from exposure to tobacco smoke,
- J. whereas the most benefit for society and the economy will be best achieved when smoke-free areas are complemented with effective smoking cessation policies at EU and/or Member State level, such as: (a) effective cessation promotion programmes in educational institutions, health care facilities, workplaces and sporting environments and increased access to cessation therapies (both behavioural and pharmacological) for persons who wish to stop smoking, (b) diagnosis and treatment of tobacco dependence in national health and education programmes, and (c) collaboration to facilitate accessibility and affordability as agreed in Article 14 of the FCTC,
- K. whereas a responsible policy has a duty to create an environment in which smoking is no longer seen as normal, that encourages people to cut down on or give up smoking, that supports them in the cessation process and that prevents children and young people from taking up smoking,
- L. whereas only a full smoking ban in all enclosed workplaces, including catering and drinking establishments, and all public buildings and transport can protect the health of employees and non-smokers and make it considerably easier for smokers to give up,
- M. whereas the catering industry has not suffered any noticeable loss in revenue in the countries in which a full smoking ban has been introduced,
- N. whereas the World Bank has demonstrated the cost-effectiveness of taxation measures to reduce the demand for tobacco products and to reduce overall tobacco consumption, in its 1999 report 'Curbing the epidemic: Governments and the economics of tobacco control', and the WHO has also stressed that taxation has the greatest impact,
- O. whereas the WHO's European Strategy for Smoking Cessation Policy affirms that smoking cessation interventions (both behavioural and pharmacological) are an important and cost-efficient component of a comprehensive tobacco control strategy which will save health systems considerable expense in the future,

- P. whereas it is known that tobacco consumption costs European economies hundreds of billions annually,
- Q. whereas the costs to health systems resulting from tobacco consumption are borne by the population in general and not by those responsible for creating them,
- R. whereas it is unacceptable that certain Member States encourage the purchase of tobacco products by low taxation rates in their countries so as to increase their overall tax income,
- S. whereas almost 70% of the EU population are non-smokers, 27% smoke cigarettes, 5% smoke rolling cigarettes and 1% smoke cigars or a pipe,
- T. whereas 86% of EU citizens are in favour of a ban on smoking at work, 84% in other public places, 77% in restaurants and 61% in bars and pubs,
- U. whereas target-group-specific education, particularly of young people, pregnant women and parents, helps to reduce tobacco consumption,
1. Welcomes the Commission's Green Paper as a starting point for a responsible European policy to protect citizens from harmful tobacco smoke;
 2. Welcomes the action taken by those Member States that have already adopted effective measures to ensure protection from passive smoking;
 3. Renews its call to the Commission, as issued in its resolution of 23 February 2005 on the European Environment and Health Action Plan 2004-2010¹, to classify environmental tobacco smoke in the Dangerous Substances Directive² a class 1 carcinogen as soon as possible so as to bring environmental tobacco smoke under the scope of the Carcinogens and Mutagens Directive³;
 4. Calls on the Commission to list and quantify the concrete harmful effects of smoking among youth in the Member States with a view to subsequently formulating European objectives for Member States aimed at curbing the uptake and consumption of tobacco among young people, with Member States committing themselves to reduce smoking among youth by at least 50% by 2025,
 5. Without prejudice to any obligations imposed by Community legislation, stresses that the Member States are free to determine the form of the measures to be taken at national level, but that they should report to the Commission, both at the mid-point and at the end of the set period referred to in paragraph 4, on the progress made in reducing the harmful effects of smoking among youth,
 6. Notes that the Commission has a supporting role to play in the achievement of the European objectives by helping the Member States to exchange knowledge and best

¹ OJ C 304 E, 1.12.2005, p. 264.

² Council Directive 67/548/EEC of 27 June 1967 on the approximation of laws, regulations and administrative provisions relating to the classification, packaging and labelling of dangerous substances (OJ L 196, 16.8.1967, p. 1).

³ Directive 2004/37/EC of the European Parliament and of the Council of 29 April 2004 on the protection of workers from the risks related to exposure to carcinogens or mutagens at work (OJ L 158, 30.4.2004, p. 50).

practices and to carry out European research on combating the harmful effects of smoking among youth;

7. Calls on the Commission to submit a proposal for an amendment of the Framework Directive on Workplace Safety and Health¹ requiring all employers to ensure that the workplace is free from tobacco smoke;
8. Calls on the Member States to introduce, within two years, an unrestricted smoking ban in all enclosed workplaces, including catering establishments, and in all enclosed public buildings and transport in the European Union; calls on the Commission, if the objectives referred to are not attained by all Member States, to submit a proposal to Parliament and the Council by 2011 for rules on the protection of non-smokers in the field of employment protection, while recognising the Member States' existing national provisions;
9. Calls on the Member States that introduced a full smoking ban in public places, bars and restaurants to create and sign up to a voluntary charter declaring a 'European smoke free zone', thus creating a spearhead of Member States who have already adopted a full smoking ban on the basis of voluntary membership, and calls on the charter members to consider eventually giving this voluntary charter legislative status through the enhanced cooperation procedure;
10. Calls on the Member States to prohibit smoking on public playgrounds within two years;
11. Calls on the Commission to produce a report on the cost incurred by national health systems and the European Union economy as a result of smoking and the effects of tobacco smoke pollution;
12. Calls on the Commission to present a proposal, by 2008 if possible, for an amendment of Directive 2001/37/EC² on tobacco products, containing at least the following:
 - an immediate ban on all addiction-enhancing additives,
 - an immediate ban on all additives shown by existing toxicological data to be carcinogenic, mutagenic, or toxic to reproduction as such or upon pyrolysis (burning at a temperature of between 600 and 950°C),
 - the introduction of a detailed registration, evaluation and authorisation procedure for tobacco additives, and complete on-pack labelling of all tobacco additives,
 - an automatic ban on all additives for which manufacturers and importers of tobacco products do not have complete data sets by the end of 2008 (including lists of all ingredients by brand name and type, along with their quantities and toxicological data),

¹ Council Directive 89/391/EEC of 12 June 1989 on the introduction of measures to encourage improvements in the safety and health of workers at work (OJ L 183, 29.6.1989, p. 1).

² Directive 2001/37/EC of the European Parliament and of the Council of 5 June 2001 on the approximation of the laws, regulations and administrative provisions of the Member States concerning the manufacture, presentation and sale of tobacco products (OJ L 194, 18.7.2001, p. 26.)

- a requirement for manufacturers to make publicly available all existing toxicological data on the additives and ingredients in tobacco smoke, including pyrolysis products (public and in-house data),
 - the development of a compendium of tobacco additives and substances in tobacco smoke and the provision of consumer information in this respect,
 - introduction of a financing system that makes tobacco product manufacturers liable for all costs of developing and maintaining assessment and supervisory structures (e.g. independent laboratories, staff and scientific investigations),
 - application of product liability in respect of manufacturers and introduction of manufacturer liability for the financing of all health costs arising from tobacco consumption;
13. Calls on the Commission to support a comprehensive tobacco control and smoking cessation strategy and to examine further EU-wide measures towards a Europe free from tobacco smoke, such as:
- an EU-wide ban on the use of tobacco in the presence of minors in private transport,
 - an EU-wide ban on the sale of tobacco products to young people under 18,
 - the granting of a permit for the installation of cigarette vending machines only if the machines will be inaccessible to minors,
 - the removal of tobacco products from self-service displays in retail outlets,
 - a ban on distance sales of tobacco products to young people under 18 (e.g. over the Internet),
 - promotion of preventive measures and antismoking campaigns for young people,
 - a ban on Internet advertising of tobacco products,
 - encouraging Member States to introduce inflation-proof taxation on all tobacco products,
 - an EU-wide high minimum level of taxation of tobacco products,
 - stronger controls against tobacco smuggling;
14. Calls on the Commission to investigate what fiscal measures could help to reduce tobacco consumption, particularly by young people, and calls on the Commission to make a recommendation to the Member States on the basis of this investigation;
15. Calls on all Member States to stop encouraging the purchase of tobacco products by maintaining low taxation rates in their countries;
16. Welcomes Italy's decision to ban all transports of unlabelled cigarettes as a way to combat smuggling and facilitate determination of origin;

17. Calls on the Commission to submit proposals to amend Directive 2001/37/EC so as to remove the requirement to display tar, nicotine and carbon monoxide yields on cigarette packs, which currently provides smokers with a misleading comparison;
18. Calls on the Commission to submit proposals to amend Directive 2001/37/EC so as to include a renewed library of larger, hard-hitting picture warnings mandatory on all tobacco products sold in the European Union, and for such warnings to appear on both sides of the tobacco packs; considers that all warnings should also include clear contact details to help smokers quit such as a relevant free phone number or website;
19. In particular, calls on the Commission to recommend the inclusion of a warning on the link between smoking and blindness in its revision of Directive 2001/37/EC, since several recent scientific studies have produced robust and consistent evidence that smoking causes sight loss through age-related macular degeneration; such warnings should appear in the list of warnings for use on tobacco products with appropriate graphic images to support this message;
20. Calls on the Member States to help smokers who want to quit smoking by means of supporting measures, e.g. smoking cessation interventions such as:
 - increased access to cessation therapies - both pharmacological (e.g. nicotine replacement therapy) and behavioural (counselling) - through reimbursement and interventions of healthcare providers;
 - increased affordability of smoking cessation products (e.g. nicotine replacement products) through a reduced VAT rate;
21. Points out that according to the 2004 WHO European strategy for smoking cessation policy intensive counselling of more than 10 minutes by a physician has the highest success rate in achieving long-term abstinence; therefore calls on Member States to embed counselling to end nicotine dependence into the national health care system by encouraging and training primary care professionals to intervene by systematically asking patients about smoking, to advise smokers to stop, and to reimburse them for such intensive counselling;
22. Calls on the Member States to conduct information and education campaigns concerning healthy lifestyles tailored to all age ranges and social groups in order to enable people to shoulder responsibility for themselves and, where applicable, their children;
23. Considers that such smoking cessation measures should ensure that smokers, particularly the young and those economically less well off, have access to affordable smoking cessation products and treatments, including counselling, so as to ensure that there are no inequalities whereby less-advantaged members of society are discouraged from using them;
24. Considers that information on how to stop smoking, including free phone numbers or a website address, should be visibly available in all outlets where tobacco products are sold;
25. Encourages the Commission to continue to implement support measures at EU level, e.g. awareness-raising measures; considers that developing the skills of doctors and other health care personnel should be an important field, to which priority is assigned;

26. Calls on the Commission urgently to investigate the health risks associated with consumption of snus and its impact on the consumption of cigarettes;
27. Calls, as one arm of the budgetary authority, for the financing of these awareness-raising measures, which is currently assured by the Community Tobacco Fund, to continue to be guaranteed when the fund is phased out;
28. Calls on the Commission and the Member States to include tobacco control as a key priority in their health and development work and to work with low-income countries to ensure that all necessary funding and technical assistance is made available so that the EU's ACP partners are able to comply with their obligations under the FCTC; calls on the Commission to always promptly pay all financial commitments linked to the FCTC and related initiatives in the UN system;
29. Calls on Italy and the Czech Republic to ratify the FCTC as soon as possible;
30. Condemns the disregard shown by some Members and staff of the European Parliament for the restrictions on smoking in the European Parliament, e.g. by smoking in staircases or in the open Members' bar in Strasbourg;
31. Calls on the Bureau, in the light of its duty to set an example, to adopt a smoking ban with no exemptions in all parts of the European Parliament with immediate effect; calls for a rigorous enforcement of this ban;
32. Instructs its President to forward this resolution to the Council and Commission.