



Smoke Free Partnership Response to the Consultation on the Future “EU 2020” Strategy

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1. Introduction

The Smoke Free Partnership is a strategic, independent and flexible partnership between the European Respiratory Society (ERS at www.ersnet.org), Cancer Research UK (CR-UK at www.cancerresearchuk.org), the Institut National du Cancer (INCa at www.e-cancer.fr) and the European Heart Network (EHN at www.ehnheart.org). We aims to promote tobacco control advocacy and policy research at EU and national levels in collaboration with other EU health organisations and EU tobacco control.

The SFP takes the European Commission's invitation to respond to the Consultation on the future "EU 2020" Strategy very seriously, in the context of an overall vision of the future of the European Union. However, The SFP would like to point out that this consultation should have been organised differently to allow stakeholders to respond to it appropriately. Indeed, as specified in the 'General principles and minimum standards for consultation of interested parties by the Commission'¹, *consultation mechanisms form part of the activities of all European Institutions throughout the whole legislative process, from policy-shaping prior to a Commission proposal to final adoption of a measure by the legislature and implementation. Depending on the issues at stake, consultation is intended to provide opportunities for input from representatives of regional and local authorities, civil society organisations, undertakings and associations of undertakings, the individual citizens concerned, academics and technical experts, and interested parties in third countries.* We believe that it is essential for civil society's organisations and the European Parliament to discuss the Europe they want in order to generate ownership and public acceptance of the EU future strategy. Given the statement made by the Commission that it *wants the European Parliament to play a significantly greater role*, we are unsure how the view of the EP will be taken into account given the current time frame for adoption of this strategy.

The SFP considers that the minimum consultation period for this consultation was not long enough to prepare appropriate comments. In particular, The SFP feels that the Commission should have ensured:

- ✓ Planning of the consultation earlier or later and certainly not during the Xmas break.
- ✓ Engaging the right stakeholders, using the most appropriate timing, format and tools to reach them.
- ✓ Maintaining contact with stakeholders throughout the process.

We hope that the Commission will explain in its consultation report why it chose to launch its public consultation for such a short period and what step it took to engage the "right timing format and tools to reach all relevant stakeholders".

Finally, we look forward to the stakeholders' contributions analysis and detailed feedback on how the input was used.

2. Response to the Consultation

The SFP supports the European Union Health Policy Forum's response.

¹ COM(2002)704

In addition, we welcome the Commission's priorities of moving beyond the global economic crisis and into an economically sustainable and socially cohesive Europe. In this context, we would like to stress that achieving a 'high level of health protection' for all European citizens has been a clear objective of European Treaties since Maastricht (1992) and that health has a key role to play in achieving Europe's full potential for prosperity, solidarity and security. The health of the people living in Europe has profound practical implications for economic success in a highly competitive, globalised world.^{2,3} Further, Article 168 of the Lisbon Treaty gives direct reference to tobacco control, ensuring that the European Parliament and the Council have the legal discretion to adopt "measures which have as their direct objective the protection of public health regarding tobacco," among other things.

As the SFP is primarily concerned with the promotion of tobacco control, tobacco control advocacy and research, this response will give most attention to the areas of the consultation which touch on our areas of interest.

Policies should take into account the *total* cost of the tobacco epidemic to society. Indeed, the World Bank argues that, on economic grounds alone, tobacco should be controlled, and estimates that when all the costs of tobacco around the world are subtracted from all the benefits, the net result is a global economic loss of US \$200 billion each year.⁴ Furthermore, the cost to the EU of **tobacco related disease is estimated at €100 Billion⁵ – 1% of the EU's GDP, a sum almost equivalent to the entire European Union budget.** These figures should not be underestimated: whilst the consultation does not specifically reference smoking, or indeed health, it is essential that the Commission take this issue seriously and succeed in enabling good health for all.

3. The EU and FCTC obligations

The EU and Member States have obligations under the WHO FCTC and with Article 5.3 which seeks to ensure that the 'commercial and other vested interests of the tobacco industry' do not influence public policy making. To ensure transparency, the EU should commit itself to publishing the details of all meetings between the tobacco industry and any official including the names and titles of all those present, the issues under discussion and the date and times of any meeting. To this end, we suggest that the *general principles and minimum standards for the consultation of interested parties*⁶ could be revised in order to reflect the EC's obligation under the FCTC: the Communication was adopted in 2002, three years before the FCTC entered into force. The European Community is a signatory to the Treaty and is therefore legally bound by its provisions (the EU ratified the FCTC on 30 June 2005). We hope that the Commission will consider revising its consultation procedures in light of its new obligations resulting from FCTC ratification.

² Suhrcke, M, McKee, M, Arce, RS, Tsovala, S, Mortensen, J. "The contribution of health to the economy in the European Union". European Commission 2005

(http://ec.europa.eu/health/ph_overview/Documents/health_economy_en.pdf)

³ Suhrcke, M., Rocco, L., McKee, M. "Health: a vital investment for economic development in eastern Europe and central Asia". WHO 2007 (<http://www.euro.who.int/Document/E90569.pdf>)

⁴ "The Economic Burden of the Global Trade in Tobacco," by Howard Barnum. Tobacco Control, 1994

⁵ Aspect Report – Chapter 2:

http://ec.europa.eu/health/ph_determinants/life_style/Tobacco/Documents/tobacco_fr_en.pdf Smoking -

attributable costs for these two categories of diseases (respiratory diseases and cardiovascular diseases) provide a conservative cost of smoking estimate for Europe, which ranges between €105.83 billion and €130.31 billion, or between **€228 and €281 per capita**. The indirect costs represent about 2/3 of the total costs of smoking, and are between €70.55 billion and €86.87 billion

⁶http://ec.europa.eu/civil_society/consultation_standards/index_en.htm

4. Increasing government revenues by decreasing illicit trade

As pointed out in the consultation document, most EU member states' governments have been severely affected by the current economic crisis which has led to increasing levels of government debt. In this context, the illicit trade in tobacco products is a major international problem that requires an international solution – to reduce tobacco use and save lives, combat organized crime and recoup \$US billions in lost government revenue⁷.

The Commission points out that one of the first task for the EU will be to make a successful exit from the current crisis and that it is imperative that the member states' balance the continued need for fiscal support to keep up demand in their economies in the short run while not losing their focus on the need to restore sustainable public finances and macroeconomic stability. As cigarettes are the world's most widely smuggled legal consumer product, fighting smuggling and other forms of illicit trade in tobacco could save lives, help fight organised crime and raise money.

The Illicit Trade Protocol is the first agreement to be negotiated under the Framework Convention on Tobacco Control (FCTC), the first global health treaty. Since the opening of the first working group for the FCTC on 25 October, 1999, according to WHO estimates, 43,504,658 people will have died from tobacco-related diseases as of 9am, Monday June 29, Geneva time.

The SFP would like to propose that the "EU 2020" strategy should include recommendations to the Member States to co-operatively combat the illicit trade of tobacco products so as to increase EU governments' revenues.

More Information:

The illicit tobacco trade refers primarily to the smuggling, counterfeiting and other illegal manufacturing of tobacco products, as well as bootlegging.

Link to "How eliminating the global illicit cigarette trade would increase tax revenue and save lives":

http://www.fctc.org/index.php?option=com_content&view=article&id=291:inb3-report-saving-revenue-and-saving-lives&catid=222:meeting-resources&Itemid=230

Link to "Cost/Benefit Analysis of the FCTC Protocol on Illicit Trade in Tobacco Products":

www.ash.org.uk/illicittradeprotocol/CBA

⁷ http://fctc.org/dmdocuments/INB-2_Factsheet_How_to_save_lives_and_billions.pdf