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October 20, 2008

Select Standing Committee on Finance and Government Services
Room 224, Parliament Buildings
Victoria BC V8V 1X4
email: FinanceCommittee@leg.bc.ca

Dear Members of the Standing Committee:

SUBJECT: *INCREASED FUNDING DIRECTED TOWARD TOBACCO CONTROL ACTIVITIES*

On behalf of the Heart and Stroke Foundation of B.C. & Yukon and the BC Lung Association, which make up the Clean Air Coalition of B.C., we are writing to urge you to increase the funding of the Tobacco Control Program of the Ministry of Healthy Living and Sport. Specifically we ask that the funding be allocated toward smoking cessation and provision of subsidized nicotine replacement therapies (NRT). Currently the province is only spending a fraction on tobacco control compared to what it collects through tobacco taxes. In 2007/08, the province budgeted \$5.5 million for the Ministry of Health's Tobacco Control Program, while the Ministry of Finance collected over \$700 million in tobacco-related taxes that same year. This means that the government is spending less than 1% of the revenue it collects on making it harder for children and youth to start smoking and easier for those who smoke to quit. This is a funding deficiency that must be addressed.

The health risks of cigarette smoking and exposure to second-hand smoke are extensive, well documented and irrefutable. Tobacco is still the biggest public health problem in British Columbia. It is responsible for 6,000 deaths in British Columbia each year, an average of 16 people each day. The health care system is heavily burdened by the one-third of cancers caused by smoking and by other tobacco-related diseases that are difficult and expensive to treat. Even with the progress we have made to reduce the number of new people who smoke, tobacco will still claim more years of life and generate more health care costs than any other known behaviour or product.

In early 2008, the Clean Air Coalition of B.C. launched an advocacy campaign, which individuals and organizations may endorse, titled: *IMAGINE! A Smoke-Free BC*. There are 11 principles, which if implemented would further the goal of British Columbia being smoke-free and tobacco-free. One of the eleven principles explicitly states that monies from tobacco litigation court judgments or settlements should assist in funding tobacco control programs. Another principle states that subsidized NRT should be provided to those British Columbians who need it to quit smoking. To date, over 400 individuals and 20 organizations have declared their support for the principles of the campaign, including all five health authorities.

We highlight the issue of tobacco settlements as British Columbia will be receiving a windfall from recent settlements with tobacco companies on contraband and smuggling of tobacco products. In total, British Columbia is scheduled to receive a total of \$46.2 million, \$14.3 million of which it is set to receive by 2010.

It is important to direct these and other funds received through the sales of tobacco products toward effective tobacco control efforts. While BC can boast about having the

lowest smoking prevalence rate in Canada, that belies the fact that there are 638,000 people aged 15+ that still smoke daily or occasionally in our province. Only Ontario and Quebec have more absolute number of smokers than BC. These 638,000 people require supports to help them stop smoking. We applaud the government's efforts in tobacco control such as funding for QuitNow Services, but the numbers of smokers reveals that so much more needs to be done to decrease smoking rates.

Peer reviewed reports highlight the benefits of having a smoke-free workforce and thus providing cessation supports efforts to achieve this. The US Center for Disease Control and Prevention reports that smokers costs to the health care system are approximately 50% higher than for non-smokers.¹ From an employer's standpoint, the provision of a comprehensive tobacco cessation benefit is relatively low per individual (although total costs are dependent on use and actual coverage).² And tobacco cessation is more cost-effective than most other common and covered disease prevention interventions, such as treatment of hypertension and high cholesterol.³

These costs are important to highlight since smoking - direct tobacco use and exposure to second hand smoke combined – costs the BC economy more than \$2.7 billion annually in direct and indirect health care costs.⁴

The evidence is clear that increased funding would go a long way to help address the issue of tobacco use in British Columbia. Earmarking the funds received from the contraband settlements to tobacco control efforts will go a long way in meeting the government's goal of having British Columbia be the healthiest jurisdiction ever to host an Olympic Games. We must be vigilant in tobacco control efforts to achieve this publicly stated goal.

We would be pleased to discuss this issue with you further and ask that you contact Mr. Jack Boomer, Director of the Clean Air Coalition of B.C. to set up a convenient time. He can be reached in Victoria at 250-721-4268.

Sincerely,



R.F. Bobbe Wood, MA
President & CEO
Heart and Stroke Foundation
of B.C. & Yukon



Scott McDonald
Executive Director
BC Lung Association

cc. Hon. Mary Polak, Minister of Healthy Living and Sport
Jack Boomer, Director, Clean Air Coalition of B.C.

¹ Centers for Disease Control and Prevention (CDC). "Targeting Tobacco Use: The Nation's Leading Cause of Death 2005." U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Coordinating Center for Health Promotion, 2005. Available at: www.cdc.gov/nccdphp/publications/aag/osh.htm

² Curry S.J.; Grothaus M.A.; McAfee T.; Pabiniak C.; "Use and cost effectiveness of smoking-cessation services under four insurance plans in a health maintenance organization." *New England Journal of Medicine*. 339(10):673-79, 1998.

³ Fiore M.C., Bailey W.C., Cohen S.J., et al. "Treating Tobacco Use and Dependence: Clinical Practice Guideline." Rockville, MD: U.S. Department of Health and Human Services, Public Health Service, 2000.

⁴ British Columbia Healthy Living Alliance (BCHLA). *The Winning Legacy – A Plan for Improving the Health of British Columbians by 2010*. February 2005. Available at: http://www.bchealthyliving.ca/files/file/BCHLA_%20Winning_Legacy.pdf