Tobacco and Other Smoking Products (Dismantling Illegal Trade) and Other Legislation Amendment Bill 2025

Submission No: 30

Submitted by: Qld Network of Alcohol and other Drug Agencies (QNADA)

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Submitter Comments:



10 October 2025

Health, Environment and Innovation Committee
Parliament House
George Street
Brisbane QLD 4000

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Dear Committee

Thank you for the opportunity to provide feedback on the Inquiry into the Tobacco and Other Smoking Products (Dismantling Illegal Trade) and Other Legislation Amendment Bill 2025. The Queensland Network of Alcohol and other Drugs Agencies (QNADA) submission is attached.

QNADA represents a dynamic and broad-reaching specialist network within the non-government alcohol and other drug (NGO AOD) sector across Queensland. We have more than 55 member organisations, representing the majority of specialist NGO AOD providers. This submission is made following consultation with QNADA members.

QNADA is pleased to provide further information or discuss any aspect of this submission. Please don't hesitate to contact me at the submission or by calling

Yours sincerely

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CEO

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Submission to the Tobacco and Other Smoking Products (Dismantling Illegal Trade) and Other Legislation Amendment Bill 2025

October 2025

This submission has been prepared by the Queensland Network of Alcohol and Other Drug Agencies (QNADA). Its content is informed by consultation with QNADA member organisations providing alcohol and other drug treatment and harm reduction services across Queensland, as well as a review of relevant research and reports.

QNADA welcomes the opportunity to comment on the Tobacco and Other Smoking Products (Dismantling Illegal Trade) and Other Legislation Amendment Bill 2025. We acknowledge the importance of taking further action to respond to the rapidly growing unregulated (i.e., illicit) tobacco market, though we are concerned that the singular emphasis on law enforcement over demand and harm reduction approaches will have devastating consequences for individuals and communities, while simultaneously failing to reduce use¹. As such our submission focuses on the need for greater balance between the three pillars of harm minimisation – supply, demand and harm reduction².

"Australia's current approach is not only unsustainable but increasingly counter-productive"

We support effective responses to tobacco and other smoking products use which are evidence informed and likely to increase individual and community safety, as outlined in our policy position paper on effective responses to drug use. Contrary to the intention of the proposed amendments, research has shown that supply reduction measures alone, that is those that prohibit, criminalise and restrictively regulate access to substances has contributed to the rapid growth of the illicit tobacco market, the emergence of organised crime syndicate involvement, and consequently, more frequent reports of arson attacks and robberies against legal tobacconists^{4,5}. Additionally, the Australian Tax Office agrees that "despite these efforts and in contrast to a shrinking market, illicit tobacco is still increasing". At face value, it may seem that that more enforcement activity will be an effective mechanism to reduce tobacco use at a population level, however, it is likely we have reached a threshold where the current policy settings are pushing vulnerable populations towards harmful unregulated tobacco, as access to regulated tobacco and vaping products becomes less accessible and in the absence of other nicotine replacements and support. In this context, existing demand for illicit tobacco will likely overwhelm any enforcement and a focus on shopfronts will likely only displace illicit tobacco supply to less obvious locations, making it harder to detect and control.

The harmful health effects of tobacco use are well documented and serious, which is why supply reduction efforts – of both licit and illicit tobacco – must be complimented by demand and harm reduction strategies⁷. This is because law enforcement cannot address the challenge of illicit drugs alone, as recognised by the National Drug Strategy⁸. Yet, investment remains heavily skewed towards law enforcement efforts, with less than a third of allocated funding going towards treatment and harm reduction measures⁹. Sustainable and effective approaches to tackle illicit tobacco will therefore

¹ Martin J, Jegasothy E. Fanning the flame: analysing the emergence, implications, and challenges of Australia's de facto war on Nicotine. Harm Reduction Journal. 2025;22(1):42.

² National Drug Strategy 2017–2026 | Australian Government Department of Health, Disability and Ageing

³ <u>HRA-Tobacco-Harm-Reduction-Policy-Brief June-2025.pdf</u>

⁴ Martin J, Jegasothy E. Fanning the flame: analysing the emergence, implications, and challenges of Australia's de facto war on Nicotine. Harm Reduction Journal. 2025;22(1):42.

⁵ Puljević C, King M, Meciar I, Gartner C. Smoking out Australia's growing illicit tobacco market: Current trends and future challenges. International Journal of Drug Policy. 2024;127:104424.

⁶ <u>Latest estimates and findings</u> | <u>Australian Taxation Office</u> (2024).

⁷ Australia's illicit drug problem: Challenges and opportunities for law enforcement

⁸ National Drug Strategy 2017–2026 | Australian Government Department of Health, Disability and Ageing

⁹ Australia's illicit drug problem: Challenges and opportunities for law enforcement

require recalibration of efforts and investment to be more balanced between the three pillars of harm minimisation.

Despite the growing involvement of people with lived and living experience in policy and service design, current approaches in tobacco control do not consider adults with lived experience of smoking and vaping, who may choose – due to personal preference or circumstances – to continue to use despite our supply and demand reduction efforts. The provision of evidence-based tobacco prevention and cessation programs should be increased as part of routine care across all health and community services and in correctional settings, including within alcohol and other drug treatment and harm reduction services. In Queensland, tobacco cessation support is considered a key feature of effective alcohol and other drug treatment. However, the capacity of organisations to provide this assistance varies dependent on service context, delivery setting, and available resources. Our member services report that nicotine replacement therapy (NRT) can be cost prohibitive from both a service delivery and client perspective. In this context, it would be far more effective to work with service providers and clients to increase access to NRT and provide general training to help continued to build workforce knowledge and capacity across the health and community services sectors.