



Speech by

**Ray Hopper**

**MEMBER FOR DARLING DOWNS**

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## **HEALTH LEGISLATION AMENDMENT BILL**

**Mr HOPPER** (Darling Downs—NPA) (11.38 am): We have all heard what this bill addresses—dentists, doctors and so on—but the part that I would like to mention is where it addresses the banning of smokeless tobacco. I would like to make a few points in relation to this because I believe there is some misleading information out there that I do want to correct. I know this bill will go through, I cannot stop that happening; however, I want to put a few things on record.

I do not think a lot of people realise just how many people chew tobacco or dip snuff, as it is called. Most people who chew tobacco do not make it widely known. It is not something that we actually see them doing, whereas we see people smoking cigarettes and we can smell and see the smoke. Our new smoking laws have been brought in which we all definitely agree with.

One thing that concerned me is that the minister said yesterday that Nicorettes are even given out in hospitals. That says that the minister actually recognises that nicotine is a very strong addiction and that people need help to get off it. I have heard people say it is a stronger drug than heroin itself, and I think that is very true.

What will happen is that, because chewing tobacco will now be illegal, all the people who chew it will immediately start smoking because there will be no other way for them to get the drug they need and in the right amount. So we could actually create a lot more cases of lung cancer and a lot more issues. This is a right that people have had all their lives. People who chew tobacco have chewed it all their lives. They call it dipping snuff. A lot of people on rodeo circuits and camp drafts have little tins in their back pockets; that is chewing tobacco. That will now be taken away from them. They will not be able to purchase it.

The federal government actually stopped the sale of chewing tobacco in 1989 so everyone had to import it. The government has gradually put tariffs on that. People from customs talk about the headache caused by chewing tobacco. The tariff has been increased to \$250 a kilo and that has priced it out of the market; however, people are still so addicted that they pay the tariff. The chewing tobacco arrives at the airport, customs ring and they pay that tariff—all because of their addiction for the drug that is now going to be taken from them.

Chewing tobacco is exactly the same as Nicorettes and smoking aids and patches that can be bought in a chemist. We could have parents thinking that their children are chewing chewing gum when in fact they are having a cigarette and getting a nicotine hit. I cannot understand the emphasis put on abandoning chewing tobacco in Queensland, while Nicorettes are made so freely available. We have to seriously look at the whole health industry. Why doesn't the government get a bit fair dinkum? Look at the drinks that teenagers can now buy, such as vodka cruisers. What are they doing? They are promoting alcoholism; they are promoting the intake of a drug that is addictive.

We have to get serious here. If we are going to clean up every little aspect, let us tackle obesity. People are born with different metabolisms—there is no doubt about that—but what goes in the mouth affects people. They have the choice as to how much they eat and how big they get. That is exactly the same. This is a choice that is being taken away.

I have a few facts here. Almost everyone knows that smoking is unhealthy, but a lot of people still smoke to get nicotine from tobacco. Few people realise that it is the smoke—not the nicotine or the tobacco—that is so unhealthy. The dominant message to smokers is that they must quit or die; there are no other options. But there are options for people who cannot and will not stop using nicotine because it is such a powerful drug. Using modern smokeless tobacco products can reduce the risk of tobacco use by about 99 per cent compared to smoking.

These products include moist snuff—which is sometimes called by its Swedish name ‘Snus’—and chewing tobacco. These do not have to be chewed and then spat. Many modern products require no spitting and they are as easy to use as a breath mint. Using pharmaceutical nicotine products would probably provide a similar reduction, but unfortunately the available nicotine patches and gums are not designed to be good long-term alternatives to tobacco smoking. Of course, this does not mean that someone who does not use nicotine should start using smokeless tobacco. It is easier, cheaper and much healthier not to use nicotine at all, but if it is used the worst possible method of using it is smoking.

We can still go to a shop, a service station or whatever and buy a packet of cigarettes. The smoking laws have come into place in Queensland, but if we are going to get fair dinkum here, let us get fair dinkum. Why pick on this one little area? It will hurt a lot of people out there. The government will cause all those chewers to start smoking—that is exactly what they will now do. They need that nicotine hit, and the only way they are going to get it is by smoking cigarettes. Thus, death will be brought on a lot quicker. Switching from cigarettes to smokeless tobacco is almost as good as quitting entirely, and it is certainly much better than trying to quit and failing. Suggesting that nicotine users have an option other than quitting entirely is controversial, but it should not be.

Almost all of public health is devoted to reducing risks and harms, not eliminating them entirely. The term ‘harm reduction’ is most often used in the context of clean needles for injecting drug users or other things, but we think the best analogy is seatbelts. Instead of telling people they should quit driving—or at least minimise it and perhaps only drive to work but never go out for fun—we try to make cars and roads as safe as possible. Similarly, we do not tell people to quit playing hockey or cycling. Instead, we try to get them to wear helmets. Although we try to reduce the risk to recreational drivers, hockey players, heroin users and sex workers, most health officials single out tobacco users and tell them they simply must quit. They go so far as to tell them that smokeless tobacco is as bad as smoking. What I am trying to say is that it is not as bad as members may think, and people have to realise that.

I met with a federal member and we spoke about this at length. I took a lot of data that backed up what I was saying. That federal member suggested that we ask the health committee in the federal parliament to look into the actual effects of smokeless tobacco and the harm it actually does to people.

I have a letter here that a friend of mine, Dave Fullerton, who has chewed tobacco all his life, wrote to the minister for revenue and Assistant Treasurer. I will read part of this letter and it might help members see where these people are coming from. I want to represent these people today because they do have an issue. They will be forced to smoke cigarettes because of this legislation that is going through the House today—and most of them will do that.

**Mr Robertson** interjected.

**Mr HOPPER:** Minister, they are addicted to a drug that is exactly the same as smoking and it is the smoking that kills them. This letter says—

I have recently been shown a comment made by you in relation to smokeless tobacco and smoking tobacco being categorised as the same customs rate. I would like to take the opportunity of rebuttal as I believe the matter deserves further examination.

Firstly you said, “**There is a concern that there may not have been any sustainable tax policy reasons for the significant disparity between these rates.**”

Different sections of the Federal government have constantly had a hand in changing the laws on smokeless tobacco since 1989. This is simply because each year there are new employee and new positions created resulting in a lack of communication and understanding of how we arrived at the smokeless tobacco policy we now suffer.

I would suggest that the reason for the disparity of rates is as follows.

- Smoking tobacco and smokeless tobacco are similar as sheep are to a wool jumper. I say that because they are a different physical makeup and are used in a completely different manner resulting in many medical reports claiming that smokeless tobacco is up to 98% safer.

He then attached some web sites to look at. Mr Speaker, I table that letter here in parliament so that anyone can look at it.

*Tabled paper:* Letter dated 29 september 2006 from David Fuffarton to Ruth Gibson, Chief of Staff, the Minister for Revenue and Assistant Treasurer regarding smokeless tobacco and smoking tobacco.

**Madam DEPUTY SPEAKER** (Ms Jones): Order! Member for Darling Downs, can you please address the chair correctly.

**Mr HOPPER:** Madam Deputy Speaker, I beg your pardon. I apologise for that. Let me just say that there are probably more people out there who chew tobacco than most people realise. I would ask members to seriously consider what is happening here. These people will now be put in a situation where they have nowhere else to turn. They will buy cigarettes and they will start smoking and smoking will kill them a lot quicker than chewing tobacco.