

Brussels, 30 January 2007

Questions and answers on the Green Paper on a smoke-free Europe

Why has the Commission made promoting smoke-free Europe priority?

Tobacco is the single largest cause of avoidable death in the EU. About 650 thousand people die each year because of smoking. A further 79,000 adults are killed by second-hand tobacco smoke. Action on smoke-free environments would not only protect people from the harm of passive smoking but also contribute to the overall reduction of tobacco consumption.

In its Environment and Health Action Plan (2004-2010), the Commission committed itself to exploring both legal mechanisms and health promotion initiatives to promote the goal of a "smoke-free Europe".

At international level, the WHO Framework Convention of Tobacco Control, the first ever treaty on public health, obliges the Community and its Member States to provide for comprehensive protection from exposure to tobacco smoke.

What is the purpose of the Green Paper?

The aim of the Green Paper is to launch a broad consultation process and an open public debate, involving the EU institutions, Member States and the civil society, on the best way forward to tackle passive smoking in the EU.

In addition, the document seeks to support the current political momentum towards smoke-free areas in the EU. The Commission welcomes the excellent example set by Ireland and other countries, and encourages all Member States to quickly follow suit.

The Green Paper discusses the health and economic burden caused by passive smoking and takes stock of the initiatives that have been taken so far to promote smoke-free environments at national, EU and international level. It analyses the scope of smoke-free initiatives as well as the actions that could be usefully taken at the European Union level. EU Institutions, Member States and civil society are invited to submit their comments on the Green Paper by 1 May 2007.

What option does the European Commission favour?

The Commission notes the scientific evidence of the harm caused by second-hand smoke and the impact of clean indoor air policies on the overall reduction in tobacco use. Therefore, the Commission considers that the policy of the widest possible scope would bring the biggest benefit to public health. Several successful examples of comprehensive smoke-free policy now in force around the world proved that this option is viable and enforceable. The desirable level of EU involvement in promoting smoke-free legislation is an open question.

Are you sure passive smoking is harmful?

Scientists have been working on this issue since the late 1960s when the first studies of symptoms in families with smokers emerged. Further studies, first dealing with children's respiratory health, soon demonstrated the risks of exposure to tobacco smoke, and scientific evidence on the dangers of passive smoking is growing every year.

Several recent reviews have unequivocally confirmed that exposure to tobacco smoke causes death, disease and disability.

Environmental Tobacco Smoke (ETS) contains over 4,000 chemicals, including over 50 known carcinogens and many toxic agents. There is no safe level of exposure to ETS.

What exactly can exposure to tobacco smoke cause?

Chronic exposure to second-hand smoke has been established as a cause of many of the same diseases caused by active smoking. Those include cancer, heart disease and diseases of the respiratory system.

Second-hand smoke increases by 20-30% the risk of lung cancer and has been classified by the World Health Organisation as a carcinogen. Passive smoking also increases the risk of coronary heart disease among non-smokers by 25-30% – that is almost half the risk of smoking 20 cigarettes a day.

Passive smoking is associated with respiratory disease and is a major source of exacerbation for people with existing respiratory problems. Exposure to tobacco smoke is especially dangerous for young children and infants, being associated with sudden infant death, pneumonia, bronchitis, asthma and respiratory symptoms as well as middle ear disease. In pregnant women, exposure to tobacco smoke can cause lower birth weight, foetal death and preterm delivery.

Recent, conservative estimates indicate that passive smoking kills about 80,000 adults each year in the EU.

What is the financial burden of tobacco related diseases?

In 2003-2004 a team of health experts reviewed the cost of smoking-related diseases in the 25 EU Member States. Their conclusion, published in the ASPECT Report, was that every year smoking-related disease cost EU countries between €98 billion and €130 billion, the equivalent of 1% and 1.4% of GDP (Gross Domestic Product) respectively. The burden to the economy as a whole includes direct costs relating to increased healthcare expenditure and indirect costs linked to productivity losses and lost income tax and social security contributions.

What has been done so far to promote a smoke-free Europe?

Substantial steps have already been taken in that direction. In the early nineties, a number of EU health and safety at work Directives defined certain restrictions on smoking at work. A Council Resolution (1989) and the Recommendation on smoking prevention (2002) called on Member States to provide protection from exposure to ETS in indoor workplaces, enclosed public places and public transport. In addition to legislative measures, anti-tobacco media campaigns backed the efforts to fulfil the goal of a smoke-free Europe – "Feel free to say no" and "HELP: For a life without tobacco" highlighted, among other things, the hazards of passive smoking.

What already exists in EU legislation on smoking restrictions?

At EU level, the issue of smoke-free environments has so far been addressed in non-binding resolutions and recommendations which called on Member States to provide for comprehensive protection from second-hand tobacco smoke.

In addition, a number of occupational health and safety directives set out some specific restrictions on smoking in the workplace, e.g. banning smoking in areas where carcinogens and mutagens are handled, or requiring employers to protect pregnant and breast-feeding staff.

What do EU citizens want?

Almost seven out of 10 EU citizens do not smoke and studies demonstrate that the majority of smokers want to quit. Three quarters of Europeans are aware that tobacco smoke represents a health risk for non smokers, while 95% acknowledge that smoking in the company of a pregnant woman can be dangerous for the baby. It is therefore no surprise that the recent Eurobarometer Survey on the "Attitudes of Europeans toward Tobacco" indicated that smoke-free policies are popular among EU citizens. More than four out of five respondents are in favour of a ban on smoking in the workplace (86%) and any other indoor public place (84%). The majority is also in favour of banning smoking in bars (61%) and restaurants (77%).

What will be the next steps?

The Commission will thoroughly analyse the comments received and will report on the consultation outcome. If justified by the stakeholders' views and the developments and national level, the Commission could adopt a communication on the way forward in 2008. In parallel, the broader work on indoor air quality will be continued as a follow up to the Health and Environment Action Plan.

Where can I find out more?

More information can be found at the Commission's Health and Consumer Protection Directorate-General website, which includes a special section on tobacco:

http://ec.europa.eu/health/ph_determinants/life_style/Tobacco/tobacco_en.htm