SMOKEFREE CARS TOOL KIT

A guide for local health promoters and community members

He mutuka tupeka kore ka tika

www.aspire2025.org.nz/smokefree-cars-tool-kit
Having a tupeka kore waka will greatly improve the health of our tamariki for life. We all have a very important role to play in ensuring our tamariki have the best start. This tool kit will support whole communities moving to a place where smoking in cars is not our tikanga.

Dame June Mariu
Appointed Patron for Te Ara Hā Ora (National Māori Tobacco Control) by Kiingi Tuheitia.
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Introduction

Smokefree Cars Tool Kit: A guide for local health promoters and community members has been developed as a resource to support health promoters and community groups to advocate and promote smokefree cars within their communities and region.

It draws on the experiences of groups who have already undertaken successful smokefree car promotional and advocacy activities.

Key learnings have been documented and summarised so that communities have best practice tools to ensure the best possible chance of success.

Our aim is to eliminate smoking in cars carrying children/youth under age of 18. This is aligned to the New Zealand governments overall goal of a Smokefree 2025 alongside the Tupeka Kore 2020 Strategy and its priorities.

In the Tool Kit you will find information, templates, a project plan and evaluation to assist you and your communities to promote the smokefree cars message with your local community within your region.

We are encouraging all communities to support smokefree cars.

Reducing our children’s exposure to second-hand smoke and the visibility of smoking, we will increase the likelihood that future generations will remain smokefree.

Together, it is easy for you and your whānau to reduce children’s exposure to second-hand smoke.

Background and rationale

In March 2011 the Government adopted the Smokefree 2025 goal for New Zealand. This was in response to the recommendations of the landmark Parliamentary inquiry by the Māori Affairs Select Committee.

Recommendation 24 states: “That the Government investigate extending the Smoke-free Environments Act to legislate against smoking in certain areas, such as vehicles, vehicles carrying children, and specific public places”.

This toolkit has been developed to support this recommendation.

Tobacco use is the leading cause of preventable death and disease in New Zealand, accounting for around 4,300 to 4,700 deaths per year. When the deaths caused from exposure to second-hand smoke are included, this estimate increases to around 5,000 deaths per year.

Second-hand smoke kills up to at least 325 New Zealanders every year.

More than 100,000 New Zealand children a week are exposed to second-hand smoke in cars.

In 2014, New Zealand’s national survey of Year 10 students found 17.9% of 14-15-year-olds reported in-vehicle exposure to second-hand smoke over the last seven days.

There is a growing trend worldwide that has seen laws banning smoking in cars covering most Australian states, Canadian Provinces and some US States (see Appendix 2).

It would also be consistent with other actions to limit hazards and improve safety within cars: compulsory seat belts, compulsory car seats for infants, and bans on mobile phone use while driving.

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91% of people are in agreement that smoking in cars should be banned when children are in them. 82% of current smokers support banning smoking in cars with children younger than 18 years of age. 97% of Pacific Islanders and 89% of Māori support a ban on smoking in cars with children. There is a higher level of support among people with low income. This survey is consistent with the results from a different survey the previous year.

Smokefree cars would help reduce the burden of child illness, given the evidence for the role of second-hand smoke (SHS) in sudden unexpected death in infancy (SUDI), asthma, altered respiratory function, infection, cardiovascular effects, behaviour problems, sleep difficulties, increased cancer risk, and a higher likelihood of smoking initiation.

Ngā Manukura, Waiora, Toiora

Community leadership, environmental protection, healthy lifestyles

Tobacco is not a Māori tradition – before the arrival of Pakeha, the Māori world was tupeka kore (tobacco free), tobacco was not our tikanga. Today the tobacco free Māori world of the past has significantly changed and we are now faced with a greater proportion of Māori dying from smoking and the effects of second-hand smoke compared to non- Māori.

Currently, tobacco smoking is a leading cause of preventable death for Māori in New Zealand, with approximately 800 Māori dying every year from smoking-related diseases. A third of Māori deaths each year are attributed to tobacco-related disease and illness. One study showed the life expectancy for Māori men to be 69 years, compared to 73 years for non-Māori. For Māori women life expectancy was 74 years, compared to 77 years for non-Māori.

Smoking is responsible for around 10% of the gap in health disparities between Māori and non-Māori.

These early deaths from tobacco mean a significant loss of cultural knowledge and language. Smoking threatens the continuation of whakapapa, leadership and intergenerational transfer of Māori culture. Ngā Manukura or community leadership, health leadership, whānau leadership, alliances between groups as well as political leadership are seen as critical success factors in reversing the current situation.

The place of Māori children as taonga within whānau and the lifeblood of generations has always been a central focus of Māori society. The negative health impact on our tamariki from smoking in cars does not align with this traditional Māori concept of child rearing. Reclaiming our smokefree identity by being the leaders who push for change, who grow new leaders and who actively connect communities in a united voice to say NO to second-hand smoke in cars is a key part of the journey back to a tupeka kore Māori nation. It is our children that are the leaders of tomorrow – it is essential that they are healthy so they can lead us into the future.

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8 ASH New Zealand. (2014). UMR omnibus survey on smoking issues level of agreement.


12 Healey above; plus Glover, M., Scragg, R., Min, S., Kira, A., Nosa, V., McCool, J., Bullen, C. 2011. Driving kids to smoke? Children’s reported exposure to smoke in cars and early smoking initiation. Addict Behav 36, 1027-1031


17 Broughton, J. Puffing up a storm: ‘Kapai te tori ori’. Ngai Tahu Maori Health Research Unit, Dept. of Preventive and Social Medicine, University of Otago. Dunedin.

Key Messages

Key messages about smokefree cars should raise awareness, increase knowledge and promote positive behaviour change. They should be repeated often in written material and spoken comments. However, please use any of these as a basis to create a localised tag line for use in your community.

Our aim is to eliminate smoking in cars carrying children/youth under the age of 18 years.

Key messages:
- Second hand smoke is harmful to children’s health
- Nine out of 10 New Zealanders support a ban on smoking in cars carrying children
- Smoking in cars – NOT our tikanga.

Secondary messages:
- Children copy what you do
- Make your car smokefree at all times for everyone
  - Children are often not able to get away from the smoke in your car
  - Opening or winding down the window will not remove all of the poisons in second-hand smoke
  - The poisons will linger long after the smoke and smell have disappeared
  - Ask your family and whānau to support you by not smoking in your car.

Commonly Asked Questions

What is second-hand smoke?

Second-hand smoke harm occurs when you are exposed to tobacco being smoked near you. Second-hand smoke comes from the burning end of the cigarette and the smoke breathed out by smoker.

At least 325 New Zealanders die each year due to of exposure to second-hand smoke.\(^5\)

Second-hand smoke (SHS) contains a lethal mix of chemicals such as arsenic, hydrogen cyanide, ammonia and carbon monoxide. At least 98 of these chemicals have been identified as poisonous.\(^{21, 22}\)

Second-hand smoke is the leading environmental cause of death in this country.\(^{23}\) There is no safe level of exposure to second-hand smoke and those who are exposed may suffer from many of the same diseases as regular smokers, such as coronary heart disease, lung cancer, stroke, eye and nasal irritation and nasal sinus cancer.\(^{24}\)

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19 Health Promotion Agency “INFACT” acceptability of extended smokefree areas & smokefree cars. May 2013
Children are our most valuable asset and are particularly vulnerable to second-hand smoke due to their smaller lungs, higher respiratory rates and immature immune systems. Infants in particular ingest second-hand smoke from fabrics and other surfaces, as well as inhaling it. Children need to be protected from second-hand smoke as much as possible as it can cause:

- middle ear infections (including glue ear/otitis media)
- lower respiratory illnesses (including croup, bronchitis, bronchiolitis and pneumonia)
- the onset of asthma and worsening of asthmatic symptoms
- reduced lung growth
- sudden unexpected death in infancy (SUDI)
- meningococcal disease
- and may effect a child’s learning development and behaviour.

Exposure to second-hand smoke during pregnancy can reduce foetal growth and create complications.

**Why smokefree cars?**

The New Zealand Government recognises that second-hand smoke continues to impose health risks on non-smokers, and that children in particular are vulnerable to being exposed to second-hand smoke in situations outside their control.

Smoking around children and young people is harmful. They will be exposed to second-hand smoke, and children who breathe in second-hand smoke are more likely to develop illnesses such as chest infections, glue ear and asthma. Exposure to second-hand smoke increases the risk of sudden unexpected death in infancy (SUDI).

Research shows that young people who have friends / family / whānau who smoke and who are exposed to second-hand smoke are more likely to become vulnerable to starting smoking.

Children and young people are often not able to move away from second-hand smoke. Opening or winding down a window will not remove all of the poisons. The poisons will linger long after the smoke and smell have disappeared.

There is NO safe amount of second-hand smoke. New Zealand research indicates that second-hand smoke in a car can be as bad as a smoky pub even with the car windows down.

Besides second-hand smoke, when they are in cars where there has been smoking, children are exposed to third-hand smoke, which is the second-hand smoke that sticks to surfaces and is released. Poisons from second-hand smoke can linger in dust and on surfaces for days, weeks or even months after smoking has taken place.

**Who else has smokefree cars?**

Laws prohibiting smoking in vehicles carrying children have been adopted in: Australia all states, Canada in most provinces, United States in 6 states, South Africa, United Arab Emirates, Bahrain, Cyprus, Mauritius and Puerto Rico.

Smokefree cars are being considered in Finland, Ireland, Israel, Norway, Netherlands and Taiwan.

**See Appendix 2. Smokefree Cars an International Overview**

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Smoking in cars and road safety

Smoking in cars creates a driver distraction.

The acts of looking for, reaching for, even rolling a cigarette and then lighting cigarettes can cause the driver to be distracted. A burning cigarette that has fallen into a drivers lap can lead to panic like reactions.

Cigarette butts thrown out of a car window can pose a serious fire threat.

You can’t tell me what to do in my own car

When it is a health issue and a road safety issue the New Zealand Government has a responsibility to protect the public. We already legislate around driver licencing, car registrations, warrants of fitness, seat belts, child restraint car seats and cell phones.

As a driver distraction smoking in cars can be compared to using a cell phone while driving which is banned in New Zealand.

What about enforcement?

Roadside checks can be done during the over three million annual routine stops by police.

Smokefree car laws are effective. The Canadian experience indicates that there has been a reduction of exposure to second-hand smoke in cars after legislation.

Research shows that after a smokefree cars law has been introduced it generally becomes self-enforcing.

More than 80% of New Zealand’s adult population are smokefree, most smokers are considerate and don’t smoke around children or in their cars, so this would mean that there would be a minimal level of enforcement.

Smokefree cars would infringe on the rights of smokers

This argument assumes that the rights of an adult to smoke around a child outweigh the rights of a child to breathe clean air that won’t make them sick.

Surely the relatively minor inconvenience the ban would cause smokers – having to smoke before or after a journey with children, or to pull over on long journeys just as they would if they needed a break or refreshments – is worth it to protect children from illnesses that can result from second-hand smoke?

If the government starts telling parents they can’t smoke around children, soon they will telling them what they can feed them

Even though too much salt, sugar and fat is bad for children, a certain amount of each is actually necessary for their health.

This is not true with second-hand smoke, which is never good for children. It is therefore much clearer to say exposing a child to second-hand smoke in cars is wrong, and that we have a duty to do what we can to prevent it.

For many years New Zealand has waged expensive educational campaigns urging smokers not to expose children to tobacco smoke in vehicles and homes. While many smokers observe this advice, ultimately these voluntary measures fail to protect all children. A recent University of Otago

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1978495/
http://publichealthlawcenter.org/sites/default/files/resources/prc-policybrief-kidscarssmoke-2010_0.pdf
Wellington Study found that a well-resourced local smokefree cars campaign was only successful in halving the number of people smoking in cars carrying children. The researchers concluded that achieving fully smokefree vehicles would require national-level smokefree vehicle legislation.

Refer Appendix 1. Commonly Asked Questions
Refer Appendix 16. Supporting Research

Creating Smokefree Cars?

Our aim is to eliminate smoking in cars carrying children/youth under the age of 18.

The positive thing is that there is a very simple solution to help protect the health of our children and that is by making our cars Smokefree/Auahi kore at all times for everyone.

This can be achieved through:

Education

An educative campaign is about raising awareness, educating your local community about the importance of smokefree cars carrying children and creating positive change in behaviour.

Smokefree cars projects and campaigns undertaken by health promoters and community groups are designed to encourage smokers to protect their children from second-hand smoke, by not smoking in their car. As a result many smokers have already done this.

Advocacy

Advocacy is encouraging and influencing changes to policies and community attitudes that will benefit people as a group within society.

You can advocate at a local level with your community and to inform your local Member of Parliament or at a national level by writing a submission.

Legislation

Legislation is to encourage those who have not already engaged with the message or changed their behaviour.

More than 80% of adult population are smokefree, most smokers are considerate and don’t smoke around children or in their cars, so this would mean that there would be a minimal level of enforcement.

For more information on how a bill becomes law go to: http://www.parliament.nz/en-nz/about-parliament/how-parliament-works/laws/00CLOOCHowPWorksLawsHow1/how-a-bill-becomes-law

Process

Pulling your team together

Taking a team approach has several advantages.

- A wide range of your local community working together
- Shared idea’s and networks
- A clear indication that smokefree cars is well supported in the local community

Before developing a plan or event contact others who may be interested in getting involved.

Consider your local District Health Board health promoter, your local Cancer Society office, local Primary Health Organisation, Maori Health Provider, Aukati Kai Paipa service and other local quit smoking services. They may already be part of a wider group working on local smokefree initiatives.

Other organisation who may have a potential interest can also be important allies, e.g. Schools, Sports Clubs, Asthma Society, Plunket, Fire Service, Sudden Unexplained Death in Infants (SUDI) and Marae etc.

Consider your local mechanics, panel beaters, Warrant of Fitness providers, local Automobile Association branch, tyre retailers etc.

**Project ideas**

- Well Child Providers e.g. Plunket – work with your local Plunket car seat rental office and car seat restraint check clinic
- World Smokefree Day activity
- International Children’s Day/ Tamariki Ora Day activities 1st Sunday in March
- Warrant of Fitness Vehicle Testing New Zealand and your local mechanics
- Car sales yards
- Letter writing / postcard campaign
- Petition
- Survey
- Data collection/counting smoking in cars
- Advocate to your local Member of Parliament

**Refer Appendix 3. Smokefree Car Case Studies**

**Planning**

At the start of the project it is important to plan your approach. This will act as a ‘road map’ for the tasks that need to be carried out.

The plan should include:

- background to the project
- team members’ details
- aim
- rationale
- key messages
- risks
- media opportunities
- a timeline that includes who does what by when

**Refer Appendix 4. Project Plan Template**

**Identifying community champions**

Identify local community champions who support smokefree cars. People with a profile in the community can be invaluable in encouraging your community to make their cars smokefree. Community champions could include a well-known sportsperson who lives locally, a church leader, rangatahi, local GP, Kaumatua, Kuia or local Marae komiti or even your local Member of Parliament.

**Engaging your community**

Engaging your community to advocate for smokefree cars demonstrates a broad level of support. This Tool Kit contains sample letters, media release templates and other resources that the community could use as a starting point.

Utilise the community links of your team members and champions to engage with wider community.
Talk to your community to see if people are able to write supportive letters to your local Member of Parliament and media etc.

Refer Appendix 5. Sample Letters

Working with schools

Your local school/kohanga/kura can be a powerful voice for change in your community.

Schools are more than just ‘classrooms and lessons’ as other components of the school and wider community contribute significantly to making a school what it is.

Our children/tamariki are the ones most affected by smoking in cars, give them a voice for change by getting them involved in advocating for the cars they travel in to become smokefree. It is an activity that the whole school can participate in and fits well with the New Zealand school curriculum.

Identify your local Health Promoting Schools Advisor. The Health Promoting Schools process means that schools have structures in place to address health issues across the whole school community in a sustainable way.

To contact your local Health Promoting Schools Advisor go to your local District Health Board or http://www.tetaiherehauora.org.nz/contact.php

This Tool Kit contains some suggested activities and ideas for projects that have links to the New Zealand curriculum. They can be further developed by teachers to meet the needs of their schools.

We encourage students and staff to write their own letters to their local Member of Parliament capturing their personal stories and opinions. We have, however, provided sample letters. These provide some key messages that may be useful as a starting point for their own letters.

Schools may not be able to accommodate this issue. However, they can use the sample letters as a means of adding their school’s support.

Refer Appendix 6. Learning Outcomes for Schools

Media

Use the Media to Your Advantage

Working with the media can have its risks and challenges but, when managed well, a strong relationship with local media can be an incredibly valuable tool when it comes to raising awareness and informing the public. By developing relationships with local reporters and supplying them with factual information about smokefree cars you can make the media coverage of the issue positive, to raise awareness and create greater public support.

Reporters are always after news – anything novel or different, local stories, data and statistics, new events and issues, slice of life human interest stories etc. If you can help them see the news angle in an issue they’ll generally be interested in covering it.

Contact your local media and tell them about your story/event. Tell them what you’re trying to achieve, and why it’s important and/or topical and a good idea to cover your event/story. Be succinct and accurate; make it worthwhile and easy for them. Follow up the call by sending information about your event or details about your story.

Before you contact the media check your organisation’s policy on media releases and their process for approval/distribution. Use your organisation’s letterhead for a release and use yourself as the contact. If your organisation is unable to say something in the media, one of your local champions or another organisation might be able to.

Refer Appendix 7. Media
Resources

Print resources

**Ministry of Health** provide a number of *free* smokefree resources e.g. stickers and brochures (available in a number of languages) that can be used to raise awareness and educate your community around smokefree cars, below are some examples.

These are available on [https://www.healthed.govt.nz/](https://www.healthed.govt.nz/)

![Smokefree Resources](image)


**Smokefree car cut-out**

A freestanding Smokefree corflute car cut-out has been developed to promote the Smokefree cars message at events. Children can sit or stand behind the car for photographs.

If you would like to use the photographs in future Smokefree Car promotions a limited consent and release form is required from a parent or guardian.

Refer Appendix 8. Smokefree Car Cut-out Design Guidelines

Refer Appendix 9. Limited Consent and Release Form

**Merchandise**

A selection of smokefree merchandise is available for purchase through Signature Promotions. All merchandise and logos have been approved by the Health Promotion Agency (HPA) below are some examples.

[http://sigpromo.wip.co.nz/smokefree/](http://sigpromo.wip.co.nz/smokefree/)
Advertisements
To raise awareness of smokefree cars in your local community you may wish to place print or radio adverts with your local radio station, local community newspaper, on your website or in school newsletters.

Check out HPA latest Smokefree Home and Cars campaign.  

NB. There are conditions in place around the use of this campaign material. If you would like to use of any of this campaign material contact HPA Senior Account Lead, Wayde Beckman  
w.beckman@hpa.org.nz

Refer Appendix 7. Media

Tools

Petition
A petition is a document signed by at least one person asking decision makers to act on a matter of public policy or law. Anyone of any age can petition. For parliament your petition can only be accepted if it conforms to certain rules - the petition template provided meets these standards.

We recommend that a copy of the Key Messages and Commonly asked Question should accompany the petition.

Refer Appendix 1. Commonly Asked Questions
Refer Appendix 10. Smokefree Cars Petition

Survey
The information in this survey is designed to measure local community support for smokefree cars.

The survey results can also help you show community support when meeting with local MPs, letter writing campaigns and to support possible media opportunities.

To entice people to complete your survey you may want to offer them a prize draw. Complete this survey and go into win …

Refer Appendix 11. Survey Template

Counting smokefree cars
You will need some good observers as the observations should be undertaken when traffic is heavier, and with more children for example from 7:30am to 9.30am and 3:15pm to 5:15pm on weekdays.

The more vehicles observed the better. Try observational counting for at least 5 to 10 days or more for each location.

If only one observer is used, they would count the total number of vehicles that can be seen into (regardless of whether smoking is observed or not) with a hand counter/tally counter/clicker and for each vehicle with observed smoking, the observer would also record on a pre-formatted data sheet:

1. the presence of smoking,
2. the presence of adults other than the smoker and
3. the presence of children.

If two observers were used, one observer will count the total number of vehicles that can be seen into (regardless of whether smoking is observed or not) and will help the second observer by indicating cars with smokers, the observer would also record on a pre-formatted data sheet.
It is recommended that you have an observational practice session with your observers before they start as this enables you clarify any questions they may have.

Children are defined as occupants appearing to be aged 18 years or younger.

Smoking is defined as one or more people in a vehicle holding a cigarette, pipe or cigar in their hand or mouth.

Refer Appendix 12. Counting Smokefree Cars

Postcard
The postcard can be used by your community to show their support for smokefree cars. This may include:

- mail campaign to local member of parliament
- drop box at local events or Expos

Refer Appendix 13. Smokefree Cars Postcard

Talk to your local Member of Parliament
If you are meeting with your local Member of Parliament we suggest that you use this record sheet as a means of recording your discussion to inform future advocacy.

We suggest you provide your local Member of Parliament with a copy of the Commonly Asked Questions and The Toxic Truth Smokefree Cars Fact Sheet available on http://www.sfc.org.nz/documents/141128-sf-cars-fact-sheet.pdf and any additional supporting local information.

Refer Appendix 1. Commonly Asked Questions
Refer Appendix 14. Member of Parliament Meeting Record

Submission to Select Committee
Once a bill goes to parliament it has its first reading then it may go to a Select Committee. Select committees normally invite written public submissions and this is your opportunity to have your say either individually or as a group.

The Select Committee may hold public hearings to listen to some of those submissions. You can choose to talk to your submission in person, but it is not a requirement.

For more information on making a submission got to: http://www.parliament.nz/resource/en-nz/00CLOOCMakingSubmission1/263c1047d1e4d16913fb0c51b6692ca95631ee12

Refer Appendix 15. Submission Template
APPENDICES

1. Commonly Asked Questions

What is second-hand smoke?

Second-hand smoke harm occurs when you are exposed to tobacco being smoked near you. Second-hand smoke comes from the burning end of the cigarette and the smoke breathed out by smoker.

At least 325 New Zealanders die each year due to exposure to second-hand smoke.5

Second-hand smoke (SHS) contains a lethal mix of chemicals such as arsenic, hydrogen cyanide, ammonia and carbon monoxide. At least 98 of these chemicals have been identified as poisonous.35,36

Second-hand smoke is the leading environmental cause of death in this country.37 There is no safe level of exposure to second-hand smoke and those who are exposed may suffer from many of the same diseases as regular smokers, such as coronary heart disease, lung cancer, stroke, eye and nasal irritation and nasal sinus cancer.38

Children are our most valuable asset and are particularly vulnerable to second-hand smoke due to their smaller lungs, higher respiratory rates and immature immune systems.39 Infants in particular ingest second-hand smoke from fabrics and other surfaces, as well as inhaling it.40 Children need to be protected from second-hand smoke as much as possible as it can cause:

- middle ear infections (including glue ear/otitis media)
- lower respiratory illnesses (including croup, bronchitis, bronchiolitis and pneumonia)
- the onset of asthma and worsening of asthmatic symptoms
- reduced lung growth
- sudden unexpected death in infancy (SUDI)
- meningococcal disease
- and may effect a child’s learning development and behaviour.

Exposure to second-hand smoke during pregnancy can reduce foetal growth and create complications.

Why smokefree cars?

The New Zealand Government recognises that second-hand smoke continues to impose health risks on non-smokers, and that children in particular are vulnerable to being exposed to second-hand smoke in situations outside their control.

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Smoking around children and young people is harmful. They will be exposed to second-hand smoke, and children who breathe in second-hand smoke are more likely to develop illnesses such as chest infections, glue ear and asthma. Exposure to second-hand smoke increases the risk of sudden unexpected death in infancy (SUDI).

Research shows that young people who have friends / family / whānau who smoke and who are exposed to second-hand smoke are more likely to become vulnerable to starting smoking.\textsuperscript{5}

Children and young people are often not able to move away from second-hand smoke. Opening or winding down a window will not remove all of the poisons. The poisons will linger long after the smoke and smell have disappeared.

There is NO safe amount of second-hand smoke. New Zealand research indicates that second-hand smoke in a car can be as bad as a smoky pub even with the car windows down.\textsuperscript{41}

Besides second-hand smoke, when they are in cars where there has been smoking, children are exposed to third-hand smoke, which is the second-hand smoke that sticks to surfaces and is released.\textsuperscript{42} Poisons from second-hand smoke can linger in dust and on surfaces for days, weeks or even months after smoking has taken place.\textsuperscript{43}

**Who else has smokefree cars?**

Laws prohibiting smoking in vehicles carrying children have been adopted in; Australia all states, Canada in most provinces, United States in 6 states, South Africa, United Arab Emirates, Bahrain, Cyprus, Mauritius and Puerto Rico.

Smokefree cars are being considered in Finland, Ireland, Israel, Netherlands and Taiwan.

See Appendix 2. Smokefree Cars an International Overview

**Smoking in cars and road safety**

Smoking in cars creates a driver distraction.

The acts of looking for, reaching for, even rolling a cigarette and then lighting cigarettes can cause the driver to be distracted. A burning cigarette that has fallen into a drivers lap can lead to panic like reactions.

Cigarette butts thrown out of a car window can pose a serious fire threat.

**You can’t tell me what to do in my own car**

When it is a health issue and a road safety issue the New Zealand Government has a responsibility to protect the public. We already legislate around driver licencing, car registrations, warrants of fitness, seat belts, child restraint car seats and cell phones.\textsuperscript{44}

As a driver distraction smoking in cars can be compared to using a cell phone while driving which is banned in New Zealand.

**What about enforcement?**

Roadside checks can be done during the over three million\textsuperscript{45} annual routine stops by police.

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Smokefree car laws are effective. The Canadian experience indicates that there has been a reduction of exposure to second-hand smoke in cars after legislation. Research shows that after a smokefree cars law has been introduced it generally becomes self-enforcing.

More than 80% of New Zealand’s adult population are smokefree, most smokers are considerate and don’t smoke around children or in their cars, so this would mean that there would be a minimal level of enforcement.

Smokefree cars would infringe on the rights of smokers

This argument assumes that the rights of an adult to smoke around a child outweigh the rights of a child to breathe clean air that won’t make them sick.

Surely the relatively minor inconvenience the ban would cause smokers – having to smoke before or after a journey with children, or to pull over on long journeys just as they would if they needed a break or refreshments – is worth it to protect children from illnesses that can result from second-hand smoke?

If the government starts telling parents they can’t smoke around children, soon they will telling them what they can feed them

Even though too much salt, sugar and fat is bad for children, a certain amount of each is actually necessary for their health.

This is not true with second-hand smoke, which is never good for children. It is therefore much clearer to say exposing a child to second-hand smoke in cars is wrong, and that we have a duty to do what we can to prevent it.

For many years New Zealand has waged expensive educational campaigns urging smokers not to expose children to tobacco smoke in vehicles and homes. While many smokers observe this advice, ultimately these voluntary measures fail to protect all children. A recent University of Otago Wellington Study found that a well-resourced local smokefree cars campaign was only successful in halving the number of people smoking in cars carrying children. The researchers concluded that achieving fully smokefree vehicles would require national-level smokefree vehicle legislation.

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2. **Smokefree Cars an International Overview**

Laws Banning Smoking in Vehicles Carrying Children – International Overview

Canadian Cancer Society

February 3, 2014

**Summary**

Laws prohibiting smoking in vehicles carrying children have been adopted in 10 Canadian provinces/territories (British Columbia, Saskatchewan, Manitoba, Ontario, New Brunswick, Nova Scotia, Prince Edward Island, Newfoundland and Labrador, Alberta; and the Yukon Territory); 7 Australian states/territories (South Australia, Tasmania, New South Wales, Victoria, Queensland, Western Australia, and the Australian Capital Territory; 6 U.S. states (California, Maine, Arkansas, Louisiana, Utah and Oregon); as well as South Africa, Mauritius, Bahrain, and Puerto Rico. It may be that other jurisdictions have also adopted laws.

Listed below are the jurisdictions, the applicable age, the date of coming into force. Applicable age refers to under the age, thus “19” (for example) means that smoking is prohibited in a vehicle carrying someone under age 19.

Note: The listing below does not include laws adopted by municipalities.

**Countries**

1. Mauritius (18+ 49, Mar. 1, 2009)
2. South Africa (12, Aug. 21, 2009)
3. Bahrain 50
5. United Arab Emirates (2010)
7. Wales (2014)
8. Ireland (Dec. 2014)

**Canada**

10 of 13 provinces/territories

1. Nova Scotia (19, Apr. 1, 2008)
2. Yukon Territory (18, May 15, 2008)
3. Ontario (16, Jan. 21, 2009)
5. New Brunswick (16, Jan. 1, 2010)
7. Manitoba (16, July 15, 2010)
9. Newfoundland and Labrador (16, July 1, 2011)
10. Alberta (18, awaiting proclamation)

**Australia**

7 of 8 states/territories

1. South Australia (16, May 31, 2007)

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49 In Mauritius, the Regulations made by the Minister under sections 193 and 194 of the Public Health Act, Government Notice No.263 of 2008, provides in s.3(1) that “No person shall smoke a tobacco product . . . (c) while driving or traveling in a private vehicle carrying passengers.”

50 In Bahrain, Law Number (8), Year 2009, On the Matter of Controlling Smoking and All Forms of Tobacco, dated April 13, 2009, Article IV(16) bans smoking in “Private cars in case of those accompanying children” but does not define, at least not in this law, “children”. Article XXI states “The Minister shall issue the necessary announcements to implement this law within six months of the date of its issuance.”
2. Tasmania (18, Jan. 1, 2008)
3. New South Wales (16, July 1, 2009)
4. Victoria (18, Jan. 1, 2010)
5. Queensland (16, Jan. 1, 2010)
6. Western Australia (17, Sept. 23, 2010)
7. Australian Capital Territory (16, May 1 2012)

United States of America

7 of 50 states

1. Arkansas (if car seat required,\textsuperscript{51} July 21, 2006)
2. Louisiana (13,\textsuperscript{52} Aug. 15, 2006)
3. California (18, Jan. 1, 2008)
5. Utah (15, May 15, 2013)
6. Oregon (18, Jan. 1, 2014)
7. Vermont (1 Jul. 2014)

Other

- Puerto Rico (13, Mar. 2, 2007) US Commonwealth in Caribbean

Under consideration (March 2014)

1. England
2. Finland
3. Israel
4. Netherlands
5. Taiwan

Additional information

Americans for Non-smokers Rights

http://www.no-smoke.org/learnmore.php?id=616

\textsuperscript{51} In Arkansas, a car seat is required when a child is less than six years of age and weighs less than sixty pounds (per s. 27-34-104(b) of the Arkansas State Code). Originally, Arkansas law prohibited smoking in vehicles if a child requiring a car seat was present in the car, effective July 21, 2006. Effective July 27, 2011, smoking is prohibited if a person under age 14 is present in the vehicle.

\textsuperscript{52} Louisiana Revised Statue 32:295 sets out various rules for car seat and seat belt use that apply to all child passengers up to and including age 12. See: http://www.legis.state.la.us/lss/lss.asp?doc=68931
3. Smokefree Cars Case Studies

Smokefree Cars South Canterbury

<table>
<thead>
<tr>
<th>What was the purpose? (eg. issue, need, concern addressed etc.)</th>
<th>In 2013 our coalition was looking at environments that are frequented by children. We decided to focus on smokefree Cars. With playgrounds and sports fields already Smokefree in South Canterbury, smokefree cars was felt to be a natural progression. Children are particularly vulnerable to second-hand smoke due to their smaller lungs and lower body weight. Children need to be protected from second-hand smoke as much as possible to help reduce the burden of child illness, given the evidence for the role of second-hand smoke in a number of these illnesses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who was your audience?</td>
<td>Parents of under 5’s  General Community driving cars with children present</td>
</tr>
<tr>
<td>How does your project/initiative contribute to the smokefree Aotearoa 2025 goal?</td>
<td>Our children and grandchildren will be free from tobacco and enjoy tobacco free lives  Raising awareness of children’s exposure to second-hand smoke in cars.  Encouraging the public to take action and declare their car smokefree.</td>
</tr>
</tbody>
</table>
| What did you do? | A photo was taken with two children, aged 4 and 7 (Community & Public Health Smokefree Health Promoters children), wearing gas masks with smoke (dry ice machine) billowing from a car demonstrating the dangers of smoking in cars with young people. The aim was to begin a month long campaign featured in the Timaru Herald. Over the month of May data was collected, the committee visited 4 sites (1 site per week) and surveyed the community. The Warehouse, Pak n Save, Temuka New World and Waimate New World were chosen because of location and the demographics of the area in relation to smoking  A car and the dry-ice machine was sourced from the local Fire Service and provided a very visual display, a car covered with Smokefree 2025, general smoking and second-hand smoke information. The car contained two car-seats with teddy bears strapped in and the smoke machine was turned on simulating smoke from a cigarette within the car. Members of the public were asked to answer a very quick verbal survey around smoking in cars with children. Smokefree giveaways were provided including stickers that were designed locally which encouraged people to take immediate action and declare their car smokefree. Community & Public Health developed Smokefree home and car stickers which were offered to those people participating in surveys and also left for parents to collect at Early Childhood Centres. These proved very popular, the same graphics utilized that featured on the community’s Smokefree playground signage. Surveys were also delivered to all Early Childhood Centre’s within Timaru, Waimate and Temuka as parents of under 5’s were one of our target audiences. 410 parents surveyed. Comments from one member of the public indicated “I just roll down...
**What partners did you work with?**

South Canterbury DHB, Community & Public Health, The Cancer Society, Heart Foundation and the Fire Service lent their smokealyser.

**Outcomes**

**What were the outcomes of the project/initiative?**

There was an overwhelming response to the surveys - 946 people surveyed.

Of those, 908 supported legislation stating that you cannot smoke in a car carrying children. Some comments indicated support in principle but did not want another law to ‘tell us what we have to do’.

Of the 946 surveyed there were 144 smokers who were all asked if they wanted follow up quit advice. 39 people were interested and were then followed up in 3 days. This was a really positive result as the question around quitting was secondary to our promotion but points out how important it is to ask the question.

Although this promotion was dedicated to finding out public perceptions it was a fantastic opportunity to raise awareness of the Smokefree 2025 goal and talk about Smokefree cars in the media.

Locally the committee got some fantastic media coverage with 7 media articles attributed to Smokefree cars.

This campaign was run again in 2014 with very similar results. Although we chose not to re-do the surveys within Early Childhood Centres 550 people were surveyed in the same areas around town with support for smokefree car legislation from 96.5% of those surveyed. 101 of these people were smokers with 19 choosing to have follow-up quit support.

Community & Public Health Smokefree Health Promoter developed a postcard for the 2014 campaign with the same picture of the 4 and 7 year old on the front with ‘Second hand smoke kills our most vulnerable’ and on the back with information about second hand smoke and asking people to pledge their support to a change in law around smoking in cars where children are present by signing the postcard and sending it to the Health Minister. This did not go ahead. Being an election year this was too political for a DHB to get involved with.

Plunket Nurses in South Canterbury now distribute these smokefree home and car stickers to clients and are given out with every car seat hired within the region.

**Key learnings**

**What worked well?**

It is evident that there is support in our community around Smokefree cars and we need to be doing more to raise awareness of this. If we are to meet the Smokefree 2025 we need to be pushing for more Smokefree environments for our children.

**What could be done differently?**

Repeat the survey again to gauge growing support

Lobby the government for legislation stating that you cannot smoke in a car with children - visit to local MP’s.

Talk to local district council councillors and Mayors to gauge their support and encourage advocacy.

To take this message with the Smokefree stickers to include Plunket nurses distributing them to parents, the Plunket Car-seat Co-coordinator giving them out with every car-seat hired and ensure a
condition of use is that the seat is hired and must remain in a Smokefree car. There is also great opportunity to extend this to maternity wards and to Māori providers.

<table>
<thead>
<tr>
<th>Do you have any documents that you would like to share e.g. plans, evaluation, supporting material etc?</th>
<th>Project Report, Smokefree Car stickers and copies of media releases.</th>
</tr>
</thead>
</table>

| Is there anything else that you would like to add? | This concept has been picked up and utilised around New Zealand by several communities in varying forms ie: either utilising the whole concept or just the survey, or the stickers etc As a follow up to this campaign the results have been utilised to advocate at a ministerial level for Smokefree cars and also used within the media and at district council presentations to support the 2025 message and add value to arguments for further Smokefree areas within our region. It will be continued to be used as an argument that people within the South Canterbury region are ready to legalise Smokefree cars. |

For further information contact:
Leola Ryder - Smokefree Health Promoter, Community and Public Health, TIMARU
Tel: 03 687-2610 DDI
Email: Leola.Ryder@cdhb.health.nz

**Wainuiomata Smokefree Cars Campaign**

‘Riding Smokefree – That’s How We Roll’

**What was the purpose? (eg. issue, need, concern addressed etc.)**

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<tr>
<td>In April 2012, local community workers in Wainuiomata started to organise a campaign was to encourage Wainuiomata residents and drivers to make their cars Smokefree, especially when children are passengers.</td>
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</table>

“Smokefree Cars That’s How We Roll” is a short, simple tag line for the campaign. “We need to do our part to protect our children. Smokefree Cars - that’s how we roll is a small simple act that can prevent our children being exposed to second-hand smoke”.

To increase community awareness of the health risks to children caused by second-hand smoke.

To involve whanau/family participation to stop smoking in cars carrying tamariki/children.

To actively involve youth and young adult participation to help champion the campaign.

To utilise community services, social media networks and resources to promote the campaign.

To raise smoking cessation awareness.

**Who was your audience?**

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<tr>
<td>Wainuiomata residents and drivers</td>
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**How does your project/initiative contribute to the smokefree Aotearoa 2025 goal?**

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<tr>
<td>Our children and grandchildren will be free from tobacco and enjoy tobacco free lives</td>
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</table>

Smoking in cars is harmful to children due to second-hand smoke

**What did you do?**

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<tr>
<td>Use local role models to promote the Wainuiomata Smokefree Car message</td>
<td></td>
</tr>
<tr>
<td>What partners did you work with?</td>
<td>Aukati KaiPaipa, Grey Power, Wainuiomata Community Board, Hutt City Council, Wainuiomata Community Centre, Kokiri Marae Health &amp; Social Services, Wainuiomata Maori Wardens, Wainuiomata Rugby League Club, Whai Oranga O Te Iwi Health Centre, Footsteps, Pukeatua Primary School Te Whanau O Pukeatua, Wainuiomata High School and Regional Public Health, University of Otago. A group of youth known as the #TAGs. The original group have now gone on to further their careers and continue to help when they can; Year10 students are encouraged to join the #TAGs crew.</td>
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<tr>
<td>Key learnings</td>
<td>Educating local community about the importance of smokefree cars carrying children creates positive change in behaviour.</td>
</tr>
</tbody>
</table>
### What could be done differently?

The right community champions that are passionate are essential. Consider other people to partner with in your community; local mechanics, panel beaters, Warrant of Fitness providers, local Automobile Association branch, tyre retailers etc.

| What do you have any documents that you would like to share e.g. plans, evaluation, supporting material etc? | Smokefree car poster and support sign, “Smokefree Cars – That’s How We Roll” banners  
Billboard posters utilising #TAGs and other local role models  
Smokefree car peel off stickers |
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<tr>
<td>Is there anything else that you would like to add?</td>
<td>Smokefree car peel off stickers</td>
</tr>
</tbody>
</table>

**For further information contact:**
Leah Clark, Regional Public Health  
Tel:04 570 9002  
Email: leah.clark@huttvalleydhb.org.nz

### Plunket and Smokefree Cars Northland

<table>
<thead>
<tr>
<th>What was the purpose? (eg. issue, need, concern addressed etc.)</th>
<th>To reduce exposure of children to second-hand smoke, To change the behaviour of smokers in their homes and cars. To increase the awareness of Health Professionals about the harm of SHS, to provide training to improve knowledge and ability, to build confidence about discussing exposure and harm of SHS and to provide resources to support the message To increase public awareness of the harmful effects of second-hand smoke in the home and in the car.</th>
</tr>
</thead>
</table>
| Who was your audience? | Plunket staff, parents, care givers, families and the wider community  
Creating more environments where our children and grandchildren are free from exposure to tobacco and that encourage and support more people to quit. |
<p>| How does your project/initiative contribute to the smokefree Aotearoa 2025 goal? | In partnership with Plunket we worked to incorporate the Smokefree Cars messages into Plunket’s practice utilising the Car Seat Restraint Checking Clinics and the Car Seat rental Scheme offices One of the key areas the Plunket Society focuses on is child restraint. The Society provides restraints for hire from around 200 Car Seat Rental Schemes (CSRS) throughout New Zealand. The Smokefree Cars message sits well with the existing injury prevention and Plunket messages. Training was provided to all staff involved in both the CSRS offices and Restraint Checking Clinic around Smokefree, Smokefree Cars and some basic Quit smoking advice. All cars that were stopped at a Restraint Check Clinic were asked if they were Smokefree, Quit support was offered to people who smoked in their car and a brief discussion was held around the harm of smoking in cars carrying children. Every car received a SF Cars info pack containing a Smokefree car sticker, Northland Quit Smoking Directory, Smokefree key ring and ‘A guide to making your car Smokefree’ brochure. Every car seat that was rented through Northland’s 9 offices was |</p>
<table>
<thead>
<tr>
<th>What partners did you work with?</th>
<th>Plunket, Police, ACC and Road Safe Northland, safe Kid New Zealand</th>
</tr>
</thead>
</table>
| **Outcomes**                     | Plunket provided monthly reports showing how many seat were rented, how many cars were stopped at restraint checks and how many cars were smokefree. By the end of the project:  
  - 97.7% of car seats hired were used in smokefree cars.  
  - 91% of cars stopped as part of the Restraint Check Clinics were smokefree.  
  The Smokefree Cars message is now routinely given when car seats are loaned and during Child restraint checks/clinics and has been incorporated into their national forms. |
| **Key learnings**                | Talk with Plunket, go out and help them at their clinics see what they do and ask them how they think they can best deliver the messages. Then design and deliver the project and supporting training to suit their needs and ability. |
| Do you have any documents that you would like to share e.g. plans, evaluation, supporting material etc? | |
| Is there anything else that you would like to add? | Taking time to provide relevant resources in an information pack, they can be as simple as the free Ministry of Health resources, are appreciated by the community. |

**For further information contact:**
Bridget Rowse - Smokefree Advisor Northland District Health Board  
Tel: 021454976  
Email: smokefreecoordinator@northlanddhb.org.nz
4. Project Plan Template

Background

In March 2011 the New Zealand Government committed to a goal of New Zealand becoming smokefree by 2025. This will mean:

- our children and grandchildren will be free from tobacco and enjoy tobacco-free lives
- almost no-one will smoke (less than 5% of the population will be current smokers)
- it will be very difficult to sell or supply tobacco

What are the health issues specific to this project?

- Define the current situation by providing national/local data and relevant evidence including ethnicity data, (baseline data eg. statistics, research, surveys…)
- What issues have the community identified or prioritised?

Aim/Vision

Our aim is to eliminate smoking in cars carrying children/youth under the age of 18 years.

- What is the purpose/focus of this project?
- What do you hope to achieve?

Audience

- Who is your priority group/population?
- What region/locality/age group will you work with?

Objectives

1. What does this project aim to achieve?
2. When writing these objectives consider what direct benefits/improvements may occur
3. Also consider how you will measure these changes

Key Messages

Key messages:

- Second hand smoke is harmful to children’s health
- Nine out of 10 New Zealanders support a ban on smoking in cars carrying children
  53,8
- Smoking in cars – NOT our tikanga.

Secondary messages:

- Children copy what you do
- Make your car smokefree at all times for everyone
  - Children are often not able to get away from the smoke in your car
  - Opening or winding down the window will not remove all of the poisons in second-hand smoke 54
• The poisons will linger long after the smoke and smell have disappeared
• Ask your family and whānau to support you by not smoking in your car.

Potential Risks

What may impact negatively on this project and its outcomes?
1. People will continue to smoke in cars carrying children
2.

What you can do to mitigate risk:
1. Continue to raise awareness and educate community
2.

Implementation

Write a brief overview about how you are going to achieve your objectives/measures and how it should reduce inequalities. Tasks/activities are to be included in a Work Action Plan.

• Describe the proposed programme and how it will benefit Māori and the community
• Are your health promotion activities culturally appropriate?
• Who have you consulted with?
• How you will engage Māori communities?
• How will you encourage the community to take ownership of the project?
• Who you are working with (PHU/DHB, project partners, other organisations, community leaders, schools etc)
• What is the project going to do?
• How will you encourage change?
• How long will the project take?
• How does your health promotion activity consider impact on the environment?
• What will you do to make sure your project reduces/eliminates inequalities?

Media

Provide a brief overview of any intended media.

• Are your media activities appropriate for your intended audience?
• A separate Media/Communications Plan may be necessary
• Check your organisation’s policy on media releases and their approval/distribution

Refer Appendix 7. Media Tips, Advice and Templates

Methods of Evaluation

An evaluation asks “Have my objectives been met? What has changed as a direct result of this project and what would I do differently next time?”

• Provide a brief overview of what you will do to measure the project’s objectives (statistics, research, surveys, interviews, focus groups)
• How will you measure the benefits/improvements on the community?
• How will you celebrate the successes with the community?
• How will you know if inequalities have been reduced/eliminated?

5. Sample Letters

Generic letter

Dear Member of Parliament/Editor

The other day I was walking down our main shops when I noticed a lady in the car at the lights with a smoke in her hand….then I noticed something even worse, there were two young kids in the car. I felt really sorry for the kids. Having your kids trapped in a car with toxic cigarette fumes means that they have nowhere to get fresh air. It's hurting our kids.

But I also have to say – and this may shock some people – I felt for the lady who was subjecting her kids to the toxic fumes. It made it very clear to me that cigarettes are obviously such an addictive drug that people actually end up doing that to their kids – the worst thing is it is legal! Cigarette companies have done a great job of hooking people, they have done it so well that people are even putting their kids at risk.

I would fully support a ban on smoking in cars carrying kids.

Letter from a medical professional (Dr/nurse/GP)

Dear Member of Parliament/Editor

As a [doctor/nurse] I am constantly seeing the effects of smoking on the health of people in our community.

Smoking around children and young people is harmful. They will be exposed to second-hand smoke, and children who breathe in second-hand smoke are more likely to develop illnesses such as chest infections, glue ear and asthma. Exposure to second-hand smoke increases the risk of sudden unexpected death in infancy (SUDI).

Children are often not able to move away from second-hand smoke. Opening or winding down a window will not remove all of the poisons. The poisons will linger long after the smoke and smell have disappeared.

There is NO safe amount of second-hand smoke. Research has shown that due to the small enclosed space second-hand smoke in a car can be 20 x more toxic than a house 55

As a medical professional I would fully support a ban on smoking in cars carrying children/youth under the age of 18.

Letter from a kid who is exposed to smoking in a car

Dear Member of Parliament/Editor

I don’t like it when Mummy and/or Daddy smoke in the car. It smells and it makes me feel sick. I wish they would stop. Teachers at school say it’s worse than smoking.

Please make our car smokefree.

Māori

Tēnā koe e te rangatira

We the people of [insert name] Marae are writing to you [insert name] our local MP to ask for your support to get our community to reach the goal of a government supported smokefree Aotearoa 2025.

Our Marae are making every attempt to encourage our whānau to be Tupeka Kore (Tobacco Free). However outside of our marae in the wider community our attempts are often compromised by a lack of supporting legislation.

55 Ontario Medical Association 2004 Exposure to SHS: are we protecting our kids? A position paper by the Ontario Medical Association.
We see a number of actions that you could support to help our whānau to be free of tobacco. We would really value time with you to discuss what role you could play to help lower the rate of Māori dying from smoking related death and disease. Currently our smoking rates are nearly double that of non-Māori.

Banning smoking in cars with children would be the first item that we would like to discuss with you. Such a move would send a clear message throughout out all our communities that second hand smoke is hurting our children. The more we can do to protect our future generations from second hand smoke the more likely we are to have healthy adults that will continue paving the way to healthy and wealthy whānau, hapū and iwi.

There are other measures that would support a environment where reclaiming tobacco free lives is made easier for our whānau. These measures also sit at a legislative level. We look forward to further discussions with you.

Nāku iti nei, nā
Marae Board Chair
6. Learning Outcomes for Schools

The following can be provided to teachers as suggested activities and ideas for projects, with links to the New Zealand curriculum.

Background

Tobacco use is the leading cause of preventable death and disease in New Zealand, accounting for around 4,300 to 4,700 deaths per year. When the deaths caused from exposure to second-hand smoke are included, this estimate increases to around 5,000 deaths per year.

Smoking is a major drain on health sector resources, with significantly increased use of health services by smokers. Every year children as young as 11-years old take their first puff on a cigarette. 7.7% of students nationally smoke regularly.

Nicotine makes tobacco products highly addictive, and young smokers can show signs of addiction after only one cigarette.

Tobacco does not discriminate - it kills around half its users no matter what their age, gender or ethnicity.

Links to the Curriculum

There are a variety of projects and learning options available about tobacco and health. Potentially the most beneficial to both students and the community are those focused for projects focused on learning the background issues around the impact of tobacco on the community and developing an action plan to advocate to local community and decision makers at all levels for smokefree cars.

Health and Physical Education

- Healthy Communities and Environments
- Relationships with other people

Development, implementation and evaluation of a plan of action to enhance hauora/well-being in relation to an aspect of the school or community environment

Key Competencies

- Relating to others (initiating dialogue with local community and decision makers, what are their perspectives, sharing students' perspectives)
- Using language, symbols, and texts (principles of advertising and marketing using tobacco as examples)
- Participating and contributing (community members who make their cars smokefree provide positive health benefits for the children and whole community)

Tentative Links (depending on project undertaken)

- Social sciences – understanding how groups make and implement rules and laws (History of tobacco legislation, including tobacco advertising. Impact that members of the public have had on making tobacco control legislation and what may happen in the future)

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58 Ibid, 2
62 Regular smoking is the combined total of students who reported smoking daily, weekly or monthly
• English – writing; (composing letters and formulating reasons/argument for why cars should be smokefree, presenting these letters to decision makers at all levels)

Possible Projects
• Investigate the impact tobacco has had on individuals and the community
• Write letters to newspapers outlining the impact of smoking in cars, asking the community to make their cars smokefree
• Initiate dialogue with decision makers, at all levels, to assess their perspectives on the issue - what is the problem, what are potential solutions, what can be done?
• Design and conduct survey of students in relation to their exposure to smoking in cars, etc?
• Write letters to MPs about smokefree cars in support of Government’s goal of a Smokefree New Zealand by 2025
• Alert the local community to the issues surrounding smokefree cars and encourage calls to action to combat this
• Possible topics for classroom teaching sessions could include: background of tobacco, impact of tobacco on the community, impact of social policies and legislation, advertising of tobacco (product placement e.g. in movies), health promotion principles and tobacco

What support is available for teachers?
Information on accessing smokefree information/resources – written and web based
• Smokefree Schools www.smokefreeschools.org.nz
• Smokefree www.smokefree.org.nz
• Auahi Kore www.auahikore.org.nz
• Cancer Society of New Zealand www.cancernz.org.nz
• Ministry of Health www.moh.govt.nz/tobacco
7. Media

Tips and advice

Getting Organised

Planning - Plan when and how you want to engage the media. You can create much greater momentum through regular planned activity rather than just hoping for the best from sporadic, one-off approaches.

Sign-off - Ensure the relevant leadership/management of your organisation is aware of your media activity and any spokespeople have permission to speak on behalf of their organisation. Ensure they are well versed in the key messages you want to convey. Consider whether there are other organisations/partners/stakeholders that you should alert to your release.

Build relationships – Introduce yourself to the designated health reporter in your area. Ask if there are any particular areas of interest or focus they have and, wherever appropriate, invite them to key events and make photo opportunities available.

Getting Started

Think Creatively – You could take your story and messages and turn them into a news release and send it out to the newspaper or radio outlets. Or you could turn it into a letter and send it in as a Letter to the Editor (widely read and published). Alternately, invite reporters to come out and cover the story in person.

Before writing a release or making contact brainstorm any potentially difficult questions and prepare responses for these.

Contacting the media – You’ve got your key messages, you’ve got an exciting news angle and you can tell anyone the purpose of the story in two sentences. What next?

Contact your local media and tell them about your story/event. Tell them what you’re trying to achieve, why it’s important and/or topical and a good idea to cover your event/story. Make it worthwhile and easy for them. Follow up the call by sending information about your event.

Photo opportunities - You’re more likely to get near the front page of your newspaper if a photo backs up your story. Think about how your story/event will be interesting in terms of photo opportunities and call the local newspaper and invite their photographer to attend or offer to send a photo and a media release if they can’t make it.

If you are going to provide a photograph to the newspaper be sure it is of a high resolution. Photographs taken on a mobile/smart phone or iPad are often not of a high enough resolution.

Local Media

Print media - These can be as big as a daily newspaper or as small as the free weekly community papers

Broadcast media - Includes regional television and radio, Iwi, community and student radio stations. Ensure your audience is consuming the media channel; there’s no point in putting all your effort and/or budget into publicising or advertising with a particular station/publication if it’s not going to be seen/heard.

Community notice boards and newsletters - Send a short paragraph covering the who, what, when, where, why and how of your story to your newspaper, internet and radio community diaries/notice boards. Ask about the maximum word length and stick to it. Staff, school or worksite newsletters can also be great vehicles for messages.

Who else may be interested - Not only the health reporter may be interested. If you are doing a specific event, remember the general news reporter might be keen to cover it as a feature story. Always send your release to the chief reporter as well.
10 Tips for Success

**Key Message/s** - Stick to your key messages (3 to 4 is enough) and repeat them. Remember, an event itself isn’t the ‘reason’ for a story. What is the purpose and/or message behind the event – use the event to highlight that issue.

**Be succinct** - Before drafting a release or doing an interview, see if you can convey your key messages in two sentences. If you can do that, you’re ready. Give the media phrases they can pick up and use straight away (short, snappy quotes in everyday language, metaphors and humour where appropriate) – they’ll be less likely to rewrite your words.

**Accuracy** - Check all communications for spelling and grammar errors. Be careful to write abbreviations out in full, for example, write World Smokefree Day, not ‘WSFD’.

**Use data** - Figures and stats help put a story in context and give people a sense of the scale of an issue. News media love them. Make sure they are relevant and correct though.

**Say what you know** - If you’re asked about something you don’t know, just say so and offer to find out.

**Plain English** - Use plain English only, do not use jargon.

**Keep cool** - Remain professional and keep coming back to your key messages. This doesn’t mean you can’t disagree or correct statements, but do so firmly and clearly.

**Be helpful** - It is almost always better to comment than to say nothing. If you can’t, say so and offer suggestions for who can.

**Be responsive** - If the media respond, get back to them fast because they work to tight deadlines. Ensure there is a second contact person if you aren’t always around to take calls.

**Be reliable** - Always provide contact details of a spokesperson and ensure the details are correct and that they are the right person to speak on the topic or on behalf of an organisation. Ensure they are prepared and available for media calls.

**Drafting a media release**

Make sure your key points at the top beginning of your media release!

**Heading** – Find a catchy angle that matches the story.

**Short, punchy intro** – Convey the key facts and the point of the story in one paragraph. Then develop it over the following quotes and paragraphs.

**Quotes** – Put quotes from key people early in the release. This keeps the story feeling active, and alive.

**Supporting information** - After the initial quote/s add one or two paragraphs of supporting information to provide background people need to know.

**Further quotes** – Adding another punchy quote here can help keep the reporter engaged with your whole release and use more of your story.

**Close** with any last details – i.e. if the story is about an event, list where and when etc. This is the place to direct people to sources for more information etc.

**Media release templates**

**Keep Cars Smokefree**

Individuals and organisations in the [region] are being urged to support a smokefree cars campaign.

More than 350 New Zealanders die each year due to of exposure to second-hand smoke, said [Job Title] [Name], at [Organisation name].
“Locally we see [insert local data here],” he/she said. “Reducing exposure to second-hand smoke in cars is one way we can really make a difference to preventing smoking-related illnesses and deaths.”

“Children are particularly vulnerable to second-hand smoke due to their smaller lungs and lower body weight and often do not have the choice to move away from smoke,” [he/she said].

“Children need to be protected from second-hand smoke as much as possible as it can cause middle ear infections, lower respiratory illnesses and sudden unexpected death in infancy (SUDI also known as SIDS or cot death)”

[Mr/Mrs/Ms] [Name] said second-hand smoke was the leading environmental cause of death in this country. There was no safe level of exposure to second-hand smoke and those who were exposed may suffer from many of the same diseases as regular smokers, such as coronary heart disease, lung cancer, acute stroke, eye and nasal irritation and nasal sinus cancer.

Useful tips on keeping your car and home Smokefree are available at www.smokefree.org.nz/second-hand-smoke

For help to quit smoking call 0800 778 778 to speak to a Quit Advisor or visit www.quit.org.nz

For further information or comment contact [job title], [name] on [phone number].

Second-hand Smoke Particularly Harmful in Cars

A local community group is encouraging parents and care givers not to smoke in cars that children travel in.

“All parents want the best for their children and the purpose of this [event/promotion] is to inform parents of the very real dangers posed by smoking around their children in the confined spaced of their car,” said [Job Title] [Name], at [Organisation name].

Research has shown that due the small, enclosed space, second-hand smoke in a car can be more than 20 times more toxic than in a house. 65 Children are particularly vulnerable to second-hand smoke because their vital organs are still developing and they are often not able to move away from the smoke.

There is a common misconception that winding down the window will rid the car of cigarette smoke. The reality is that winding down a window is not effective in eliminating the harmful poisons contained in second-hand smoke. 66 Poisons from second-hand smoke can linger in dust and on surfaces for days, weeks or even months. 67 68

“The positive thing is that there is a very simple solution to help protect the health of your children and that by making your car smokefree at all times for everyone. The added bonus is that not only will young people be protected from the harms of second-hand smoke, but it may reduce the likelihood of them becoming smokers later in life”, added [Name].

Useful tips on keeping your car and home Smokefree are available at www.smokefree.org.nz/second-hand-smoke

For help to quit smoking call 0800 778 778 to speak to a Quit Advisor or visit www.quit.org.nz

For further information or comment contact [job title], [name] on [phone number].

65 Ontario Medical Association 2004 Exposure to SHS: are we protecting our kids? A position paper by the Ontario Medical Association.
Calls for Ban on Smoking in Cars with Children

Nine out of ten New Zealanders agree that smoking should be banned in cars when children are present.

The 2012 survey, conducted by researchers at the University of Otago, also revealed eight out of ten smokers this proposal.

[Your position] for [Your organisation], [Your name], said the combination of enormous community support and mounting evidence that the confined space of a car increases exposure to second-hand smoke meant it was timely for the Government to consider a ban on smoking in cars when children are present.

"Banning smoking in cars when children are present would be a significant step in protecting children against the harms of second-hand smoke."

"It sends a very clear message that the seriousness of exposure to second-hand smoke as a health issue should not be underestimated."

"Children and babies are unable to escape from the poisons contained in cigarette smoke when confined in a car with a smoker and they are particularly susceptible to illnesses such as pneumonia, middle ear infection and asthma attacks when exposed to second-hand smoke."

[Your name] said the community would embrace the move to make cars carrying children completely smokefree.

"There is such tremendous public support, from both smokers and non-smokers, for banning smoking in cars carrying kids, that we can be confident any legislative change in this area will be largely self-enforcing, and welcomed by the community."

"Several laws already exist to regulate the car environment with the safety of children in mind, including seatbelt use and special fittings for child passengers. Eliminating second-hand smoke in cars when children are present is a natural extension of this."

[Your name] said as well as protecting children against exposure to second-hand smoke in cars, a ban may also help to de-normalise smoking in the eyes of children.

Useful tips on keeping your car and home Smokefree are available at www.smokefree.org.nz/second-hand-smoke

For help to quit smoking call 0800 778 778 to speak to a Quit Advisor or visit www.quit.org.nz

For further information or comment contact [job title], [name] on [phone number].

Media clippings

This is not a comprehensive list.

ASH group aims to stop smokers lighting up in cars

Residents urged to back move for smokefree cars

Smoking in Cars Focus of World Smokefree Day

People urged to join smokefree cars and homes campaign

Cars next smokefree target

New campaign targets smoking in cars
http://www.3news.co.nz/nznews/new-campaign-targets-smoking-in-cars-2013022807
Still too many parents smoking in cars – study

Views on car smoking ban sought

Turia aims to make vehicles smoke-free

Kiwi kids exposed to second-hand smoke in cars

Push to outlaw smoking in cars

Smokefree cars next step, says lobbyist

Radio advertisements

If you have the opportunity to produce some radio adverts you can either utilise the Health Promotion Agency (HPA) latest Smokefree Home and Cars campaign, http://www.hpa.org.nz/Smokefree%20cars%20and%20homes, use the sample radio script below or develop your own.

NB. There are conditions in place around the use of this campaign material. If you would like to use of any of this campaign material contact HPA Senior Account Lead, Wayde Beckman w.beckman@hpa.org.nz

Sample radio script

Kids in car [driving noises] with Mum talking and laughing,

Mum: [lights up a cigarette noise]
Kids: [coughing noise]
Kid 1: Muuuuuum! That’s gross
Mum: I can wind down the window
Kid 2: That doesn’t work mummy, the poison still linger in the car seats my teacher said so!
Kid 1: and myyyyy teacher said that smoking in a car with children is really bad because we are breathing in your second-hand smoke

Voice over:

Keep your car smokefree/waka auahi kore and protect your most precious possessions – your children/tamariki.

Ask your family/whānau and friends to support you by not smoking in your car

Make a rule - your car is smokefree/Auahi kore at all times for everyone

[ends]

Other media

- Social media e.g. Facebook, Twitter and Instagram #smokefreecars #auahikorewaka #smokingincarsnotouurtikanga
- Newsletters e.g schools
- Websites
8. Smokefree Car Cut-out Design Guidelines

Please make sure colours are bright;

Wind Screen to be cut out, when kids stand behind it, they can see through;

Invisible folds

Car Cut Out:
Panel
Router cut shape from 6mm corflute panel, Side support panels to be attached to main front panel with velcro strips;
Graphical
Digital printed graphics directly onto routed shape;

SMOKEFREE CAR CUT OUT
9. **Limited Consent and Release Form**

**Organisation**

**Address**

**Address**

**REGION**

**PUBLICITY CONSENT FORM | LIMITED CONSENT AND RELEASE**

I give specific permission to [insert organisation] to use any photographs taken on this day for the specific use of promoting Smokefree Cars. I agree to the photo’s being used in the following ways

- Exhibit photo
- In printed material\(^{69}\) produced by [insert organisation].
- Use my photo on social media published by [insert organisation].

The permission granted herein is limited to the uses described above and for no other purposes, whether suggested or implied.

By signing this limited consent and release form I, the undersigned, represent that I am of legal age (16 years or above) and that before signing this document, I have read and understood it completely.

PARENT/GUARDIAN: I, the parent/guardian of the named person, represent that before signing this document, I have read and understood it completely.

**DATE** .................................................................

**NAME** ..............................................................

**SIGNATURE** ..........................................................

**SIGNATURE OF PARENT/GUARDIAN (where applicable)** ...........................................

**PHONE** ................................................................

**EMAIL** ................................................................

---

\(^{69}\) PRINTED MATERIALS includes magazine articles, newsletters, brochures, booklets, fliers, posters, media material, advertisements to be distributed within New Zealand and occasionally internationally.
10. Smokefree Cars Petition

Smokefree cars petition cover page

To
Insert name of local Member of Parliament

The petition of
Name of local group, network or coalition

Contact person
Name of person coordinating petition

Email address

Telephone

Signature Date

We your constituents are in full support of a ban on smoking in cars carrying children/youth under the age of 18-years.

Children are our most valuable asset and are particularly vulnerable to second-hand smoke due to their smaller lungs and lower body weight. Children need to be protected from second-hand smoke as much as possible as it can cause:

- middle ear infections (including glue ear/otitis media)
- lower respiratory illnesses (including croup, bronchitis, bronchiolitis and pneumonia)
- the onset of asthma and worsening of asthmatic symptoms
- reduced lung growth
- sudden unexpected death in infancy (SUDI also known as SIDS or cot death)
- meningococcal disease
- and may effect a child’s learning development and behaviour.

Children are often not able to move away from second-hand smoke. Opening or winding down a window will not remove all of the poisons. The poisons will linger long after the smoke and smell have disappeared.

We respectfully ask that you our elected representative communicate this support to your party and government.

Signature of Receipt Date

Member of Parliament
Smokefree cars petition

We your constituents are in full support of a ban on smoking in cars carrying children/youth under the age of 18-years. Children are our most valuable asset and are particularly vulnerable to second-hand smoke due to their smaller lungs and lower body weight. Children are often not able to move away from second-hand smoke. Opening or winding down a window will not remove all of the poisons.

We respectfully ask that you our elected representative communicate our full support of a ban on smoking in cars carrying children/youth under the age of 18-years to your party and government.

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<thead>
<tr>
<th>Name</th>
<th>Signature</th>
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This form should accompany a Cover Sheet or a similar sheet, addressed to local Member of Parliament, with the name and address of the person to whom communication concerning the petition should be addressed.
11. Smokefree Cars Survey

This survey is designed to measure local community support for Smokefree Cars.

1. Do you support a law change making all cars carrying children/youth under the age of 18 years smokefree?

   □ Yes  □ No  □ No response

   Comments: ........................................................................................................................................
   ........................................................................................................................................

2. Is your car currently smokefree?

   □ Yes  □ No  □ No response

   Comments: ........................................................................................................................................
   ........................................................................................................................................

3. Have you ever smoked tobacco?

   □ Current smoker  □ Ex-smoker  □ Never smoked  □ No response

   If current smoker, would you be interested in quit smoking support?

   □ Yes  □ No  □ No response

   I would like someone to contact me to talk about quitting smoking:

   Name: 
   Address: 
   Telephone: 

   NB: It is important to keep a total/tally of the number of people who refused to answer the survey, or else the results may show bias to those supporting smokefree cars, as those who oppose may be more likely to refuse to answer.

   Example

   [insert details of your prize draw and when it will be drawn]

   Your Smokefree Cars prize draw entry

   Name: 
   Address: 
   Telephone: 

## Results calculation sheet

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>No response</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Total Number of surveys: 
Total number of refused to answer:
12. Counting Smokefree Cars

Observational data collection

Use a new sheet per observation period (e.g. 7.30 – 9.30am)
- Put the date and time on each sheet
- Put the total number of cars for the observation period on the last sheet for each period

Exclude the following vehicles from the study:
- those where it was difficult to see inside (for instance due to window tinting);
- all buses, taxis and trucks

Children are defined as occupants appearing to be aged 12 years or younger. Smoking is defined as one or more people in a vehicle holding a cigarette, pipe or cigar in their hand or mouth.

<table>
<thead>
<tr>
<th>Date</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day of Week</td>
<td>Start time am/pm</td>
</tr>
<tr>
<td>the presence of smoking</td>
<td>the presence of other adults than the smoker</td>
</tr>
</tbody>
</table>

Example

<table>
<thead>
<tr>
<th>Total number of cars</th>
</tr>
</thead>
</table>


13. Smokefree Cars Postcard

Name of MP
Parliament
Private Bag 18 888
Parliament Buildings
WELLINGTON 6160

Our aim is to eliminate smoking in cars carrying children under the age of 18 years.
- Second hand smoke is harmful to children’s health
- Nine out of 10 New Zealanders support a ban on smoking in cars carrying children
- Smoking in cars – NOT our tikanga.

I support a law change making all cars carrying children/youth under the age of 18 smokefree.

Name:
Signature:
Date:

2. ASH New Zealand: 2014. UMR omnibus survey on smoking issues level of agreement.

For a high resolution copy please refer to separate Appendix 13. Smokefree Cars Postcard
14. Local Member of Parliament Meeting Record

If you are meeting with your local Member of Parliament we suggest that you provide them with a copy of the Key Messages, Frequently Asked Questions and The Stroke Foundation New Zealand Smokefree cars fact sheet [http://www.sfc.org.nz/documents/141128-sf-cars-fact-sheet.pdf](http://www.sfc.org.nz/documents/141128-sf-cars-fact-sheet.pdf)

<table>
<thead>
<tr>
<th>Name MP</th>
<th>Party – Electorate</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses</th>
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</thead>
<tbody>
<tr>
<td>Are you aware of the 42 recommendations made to the government by the Māori Affairs Select Committee inquiry into the Tobacco Industry and the consequences of tobacco use for Māori?</td>
<td></td>
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<tr>
<td>What is your party doing to advance these recommendations?</td>
<td></td>
</tr>
<tr>
<td>What is your party stance on Smokefree Cars?</td>
<td></td>
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<tr>
<td>What do you think personally about the Smokefree Cars issue?</td>
<td></td>
</tr>
<tr>
<td>At a local level there is much support for Smokefree Cars, how can we inform Government of this?</td>
<td></td>
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<tr>
<td>What can you do to help advance Smokefree Cars?</td>
<td></td>
</tr>
<tr>
<td>Given the Governments stated goal of a Smokefree NZ 2025 (less that 5% smoking), what steps are the government taking to advance this goal?</td>
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<tr>
<td>[Any other questions?]</td>
<td></td>
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<tr>
<td>[Any other questions?]</td>
<td></td>
</tr>
<tr>
<td>Outcome</td>
<td>Yes, No, Not clear, Did not discuss</td>
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<td>------------------------------------------------------------------------</td>
<td>-------------------------------------</td>
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<tr>
<td>At meeting</td>
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<tr>
<td>MP knows about the issue of Smokefree cars (I've heard about it)</td>
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<tr>
<td>MP appears to engage with issue (MP shows an interest)</td>
<td></td>
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<tr>
<td>MP shows an understanding of SF Cars</td>
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<tr>
<td>MP says they support legislation to make cars carrying young people under the age of 18 Smokefree</td>
<td></td>
</tr>
<tr>
<td>MP says their party support legislation to make cars carrying young people under the age of 18</td>
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<tr>
<td>MP shows a wider understanding of tobacco</td>
<td></td>
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<tr>
<td>MP is aware of governments Smokefree 2025 Vision</td>
<td></td>
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<tr>
<td>MP is willing to discuss Smokefree 2025 Vision</td>
<td></td>
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<tr>
<td>MP is supportive of Smokefree by 2025</td>
<td></td>
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<tr>
<td>MP willing to continue relationship</td>
<td></td>
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<tr>
<td>MP secretary shows willingness to be in contact</td>
<td></td>
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<tr>
<td>Post meeting</td>
<td></td>
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<tr>
<td>MP’s or their secretaries acknowledge they have received our information (if follow-up information requested by MP)</td>
<td></td>
</tr>
<tr>
<td>Has your MP mentioned any tobacco issues publically (blogs, TV, media releases)</td>
<td></td>
</tr>
</tbody>
</table>
15. Submission Template

[insert date]

To the [insert name of committee] Committee
Parliament Buildings
WELLINGTON

SUBMISSION ON THE [INSERT NAME OF BILL] BILL/INQUIRY

<table>
<thead>
<tr>
<th>Organisation Name</th>
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<tbody>
<tr>
<td>Organisation Address</td>
<td></td>
</tr>
<tr>
<td>Contact person</td>
<td></td>
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<td>Email address</td>
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Submission
I/we support/oppose the intent of this bill because [state reasons].

[If an organisation, give brief details of your organisation’s aims, membership and structure and the people consulted in the preparation of the submission].

Specific comments
I/we wish to make the following comments [insert your views].

Recommendations
[List any further recommendations or conclusions you wish the committee to consider. You may wish to restate recommendations mentioned earlier].

Signature: ……………………………………………………………………………………………………. .

Do you have any direct or indirect links to the tobacco industry? Yes  No
Are you submitting as an individual (not on behalf of an organisation) Yes  No
Are you submitting on behalf of a group or organisation(s) Yes  No
I/We wish to appear before the committee to speak to my/our submission. Yes  No
16. Supporting Research

Further evidence in support of smokefree cars, this is not a comprehensive list:

Second-hand smoke harms


Second-hand smoke exposure in cars


Advocacy


Smoking ban in cars will benefit disadvantaged children most. Laverty AA, Millett C. BMJ. 2014 Feb 25;348:g1720. doi: 10.1136/bmj.g1720. No abstract available.


http://www.cabdirect.org/abstracts/20103073777.html;jsessionid=BBE0B9CD96123275AF0A3C2146B26804


Overseas practice


