

Nicotine and tobacco control is trapped in problems of its own making

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Currently in Australia effectively all the vaping market and over half the cigarette market is being supplied through illicit channels. Parallel with this, vapes are now the preferred form of nicotine delivery among young people, mirroring the situation in comparable other countries, and of the increased preference for ANPs more generally in a wide range of countries. Efforts to tackle tobacco use are at a crisis point in Australia, although some recent prevalence data might suggest otherwise. The prevailing framework for tackling the tobacco problem is of a big tobacco industry marketing addictive products and addicting generations into smoking, with the solution seemingly being to eliminate the industry. I outline why Big Tobacco thinking cannot explain how the current reality has emerged and has contributed to the rise of the illicit market by advocating for, what has turned out to be regulatory overreach. It's solution is to increase enforcement without a plausible plan and in the face of advice that it is not achievable from law enforcement specialists. The simplistic, Big Tobacco framing needs to be abandoned. Society can no-longer afford to be bound by thinking that treats ANPs as an industry plot and thus irrevocably bad in the face of evidence that they are a viable alternative to smoking for many and are very likely to be much less harmful than extremely harmful long-term smoking. A more realistic systems-oriented framework is needed for understanding nicotine use that includes the roles of users, and the limitations of attempts at top-down regulatory control. This broader thinking has informed arguably more successful policy frameworks in other countries. Based on this analysis I suggest positive ways forward grounded in experiences of regulatory strategies in other countries. It focuses on efforts to constrain and ideally eliminate the mass illicit market while continuing to pursue policies and programs to minimize tobacco-related harms.