Basic information

2009/0088(CNS) CNS - Consultation procedure Recommendation	Procedure lapsed or withdrawn
Public health: smoke-free environments **Subject** 4.20 Public health 4.20.01 Medicine, diseases 4.20.03 Drug addiction, alcoholism, smoking	

Key players

Council of the European Union	
European Commission	Commission DG: Health and Food Safety — Commissioner: VASSILIOU Androulla

Key events

Date	Event	Reference	Summary
30/06/2009	Legislative proposal published	COM(2009)0328	Summary
14/07/2009	Committee referral announced in Parliament		

Technical information

Procedure reference	2009/0088(CNS)
Procedure type	CNS - Consultation procedure
Procedure subtype	Legislation
Legislative instrument	Recommendation
Legal basis	Treaty on the Functioning of the European Union TFEU 168
Stage reached in procedure	Procedure lapsed or withdrawn
Committee dossier	ENVI/7/00344

Documentation gateway

European Commission

Document type	Reference	Date	Summary
Legislative proposal	COM(2009)0328	30/06/2009	Summary

Document attached to the procedure	SEC(2009)0894	30/06/2009	
Document attached to the procedure	SEC(2009)0895	30/06/2009	

Other institutions and bodies

Institution/body	Document type	Reference	Date	Summary
EESC	Economic and Social Committee: opinion, report	CES1715/2009	04/11/2009	

Additional information		
Source	**Document**	**Date**
National parliaments	IPEX	
European Commission	EUR-Lex	

Public health: smoke-free environments

2009/0088(CNS) - 30/06/2009 - Legislative proposal

PURPOSE: to present a Council Recommendation on smoke-free environments.

PROPOSED ACT: Council Recommendation.

BACKGROUND: tobacco is the **single largest cause of avoidable death, disease and disability in the European Union**, claiming around 650 000 lives each year. Exposure to environmental tobacco smoke (ETS) – also referred to as second-hand tobacco smoke – is a significant additional source of mortality, morbidity and disability in the EU. According to earlier estimates, 7 300 adults, including 2 800 non-smokers, died as a result of ETS exposure at their workplace in the EU-25 in 2002. The deaths of a further 72 000 people, including 16 400 non-smokers, were linked to ETS exposure at home. This translates into a significant cost to the economy, including over 1.3 billion euro in direct medical costs and over 1.1 billion euro in indirect costs linked to productivity losses.

Great progress towards smoke-free environments has been made in recent years in some Member States. So far, comprehensive smoke-free laws covering indoor workplaces and public places have been adopted in over a third of EU Member States. However, significant differences in the level of protection from exposure to tobacco smoke persist both between and within Member States.

At EU level, the issue of smoke-free environments has so far been addressed in non-binding resolutions and recommendations, but these do not provide detailed guidance on how to achieve fully smoke-free environments. The subject is also touched upon in a number of occupational health and safety directives, in some cases only indirectly while in others the level of protection is not comprehensive.

At international level, Article 8 of the WHO Framework Convention on Tobacco Control (FCTC) – ratified so far by 26 Member States and the Community – obliges all Parties to ensure effective protection from exposure to tobacco smoke in indoor workplaces, indoor public places and public transport. According to the guidelines adopted by the second Conference of the Parties in July 2007, each Party should strive to provide universal protection within five years of the Convention's entry into force for that Party (i.e. by 2010 for the European Community and the majority of its Member States).

The consultation initiated by the Commission's Green Paper "Towards a Europe free from tobacco smoke: policy options at EU level"revealed significant support both for comprehensive smoke-free policies in all enclosed workplaces and public places and for further EU action to promote smoke-free environments throughout the Member States.

IMPACT ASSESSMENT: **five main policy options** are considered by the Commission:

Option 1: no change from status quo;

Option 2: open method of coordination (OMC);

Option 3: a Commission or Council Recommendation;

Option 4: combination of Commission or Council Recommendaiton and open method of coordination;

Option 5: binding EU legislation.

The Commission concludes that **option 4 is the preferred option** (Council Recommendation with elements of OMC) in the short term as that appears to be the fastest and most comprehensive means of helping Member States to implement binding smoke-free legislation at national level in line with their international commitments under the FCTC while providing a proportionate response to the problem.

CONTENT: the proposed Recommendation calls for:

1) measures to tackle ETS exposure among children and adolescents;

2) flanking measures such as effective policies for cessation of tobacco use and pictorial warnings on tobacco packages;

3) development of comprehensive multi-sectorial strategies and adequate instruments to implement them;

4) regular exchange of information and best practice as well as policy coordination among Member States through a network of national focal points. Given the relative novelty of some of these provisions, it is expected that Member States will cooperate closely among themselves and with the Commission on the development of common definitions, benchmarks and indicators for their implementation.

Member States are recommended to:

- provide effective protection from exposure to tobacco smoke in indoor workplaces, indoor public places, public transport and, as appropriate, other public places as stipulated by Article 8 of the WHO Framework Convention on Tobacco Control and based on the annexed guidelines on protection from exposure to tobacco smoke adopted by the Second Conference of the Parties to the Convention, within five years of the Convention's entry into force for that Member State, or at the latest within three years following the adoption of this Recommendation;
- develop and/or strengthen strategies and measures to reduce exposure to second hand tobacco smoke of children and adolescents;
- complement smoke-free policies with supporting measures, including: (a) taking effective measures to promote cessation of tobacco use and adequate treatment for tobacco dependence as outlined in Article 14 of the WHO Framework Convention; (b) introducing combined warnings (as defined by Article 2(4) of Commission Decision 2003/641/EC of 5 September 2003 on the use of colour photographs or other illustrations as health warnings on tobacco packagesand information on services supporting the cessation of tobacco use on the packages of smoking tobacco products in order to better inform consumers about the health risks of tobacco use and exposure to tobacco smoke, encourage cessation of tobacco use and deter initiation;
- develop, implement, periodically update and review comprehensive multi-sectoral national tobacco control strategies, plans and programmes which address, inter alia, the issue of protection from tobacco smoke in both public and private settings;
- provide adequate instruments to implement national strategies, tobacco control policies and programmes in order to ensure effective protection from exposure to tobacco smoke;
- establish and communicate to the Commission, if possible within 6 months after the adoption of this Recommendation, national focal points for tobacco control with a view to exchanging information and best practices as well as policy coordination with other Member States;
- co-operate closely among themselves and with the Commission on a coherent framework of definitions, benchmarks and indicators for the implementation of this Recommendation;
- monitor and evaluate the effectiveness of policy measures using the above mentioned indicators;
- inform the Commission of legislative and other action taken in response to this Recommendation and of the results of monitoring and evaluation.

Lastly, the Commission is invited to report on the implementation, the functioning and the impacts of the proposed measures, on the basis of the information provided by Member States.