

Tackling Illicit Tobacco for Better Health

Final Evaluation Report

January 2012



UK Centre for

Tobacco Control Studies

A UKCRC Public Health Research Centre of Excellence



fuse

Evaluation team

Professor Ann McNeill

UK Centre for Tobacco Control Studies, Division of Epidemiology & Public Health, University of Nottingham

Dr Andrew Russell

Smoking Interest Group*, Department of Anthropology, Durham University

Dr Manpreet Bains

UK Centre for Tobacco Control Studies, Division of Epidemiology & Public Health, University of Nottingham

Professor Linda Bauld

UK Centre for Tobacco Control Studies, School of Management, University of Stirling

Professor John Britton

UK Centre for Tobacco Control Studies, Division of Epidemiology & Public Health, University of Nottingham

Dr Susana Carro-Ripalda

Smoking Interest Group*, Department of Anthropology, Durham University

Dr Douglas Eadie

Institute for Social Marketing, University of Stirling & The Open University

Dr Serena Heckler

Smoking Interest Group*, Department of Anthropology, Durham University

Dr Rob Hornsby

Department of Social Sciences, Northumbria University

Belinda Iringe-Koko

Cancer Research UK, The Lynn MacFayden Studentship in Tobacco Control, University College London

Dr Sue Lewis

Smoking Interest Group*, Department of Anthropology, Durham University

Dr Andy McEwen

Health Behaviour Research Centre, Department of Epidemiology & Public Health, University College London

*Smoking Interest Group is an affiliate of FUSE, the Centre for Translational research in Public Health

1. EXECUTIVE SUMMARY

Background

In recognition of the role of illicit tobacco (IT) in undermining tobacco control strategies and in maintaining and encouraging tobacco use among deprived communities, the North of England *Tackling Illicit Tobacco for Better Health* Programme (the Programme) was launched in July 2009¹. The main aim of this pilot Programme was to increase the health of the population in three regions (North West, North East and Yorkshire and Humber) through reducing smoking prevalence by (a) reducing the availability (supply) of IT, thus keeping real tobacco prices high; and (b) reducing the demand for IT by building on existing tobacco control measures. Prior to the launch of this Programme, IT was largely the responsibility of the agency, Her Majesty's Revenue & Customs (HMRC), which focused predominantly on supply, so the Programme marked the first large-scale attempt of the health sector to reduce IT use.

The UK Centre for Tobacco Control Studies (UKCTCS)² was commissioned in September 2009 to evaluate the Programme up until March 2011. The evaluation team was multi-disciplinary and included researchers from the Universities of Nottingham, Durham (including researchers from FUSE³), Stirling, Northumbria and University College London.

Methods

The UKCTCS used a Theory of Change approach to the evaluation as the Programme was perceived to be a complex community initiative. A 'mixed-methods' approach was utilised involving document analysis, qualitative research interviews, ethnographic research and examination of relevant quantitative indicators: including external ones (such as calls to Customs Hotline and Crimestoppers and a national survey of trading standards services carried out by Local Government Association) and from other studies commissioned by the Programme (such as surveys of stakeholders, Trading Standards and market research by The Hub and NEMS). As the Programme could not be expected to have an impact on prevalence during the evaluation period, indicators to assess supply and demand factors needed to be identified and monitored.

Results

Process evaluation

It is important to take account of the context in which the Programme was operating between 2009 and 2011 which included: the recession and the likelihood of it stimulating demand for IT products; the change of government and the resulting disruption to the financing and staffing of the Programme as well as the restructuring of public health at the local level from 2010 onwards; the complex nature of the IT market which was dynamic and rapidly evolving; the government's freeze on all public health media campaigns. Collectively these factors can only have had a negative impact on the Programme.

¹ NoE *Tackling Illicit Tobacco for Better Health* Programme Action Plan 2009-2012.

² UKCTCS, UK Centre for Tobacco Control Studies www.ukctcs.org

³ FUSE, the Centre for Translational Research www.fuse.ac.uk

The Programme was complex and multi-faceted and only key milestones in its development are described here. During the initial stages, the Programme devoted time to developing a logic model to identify and track the impact of eight objectives on activities and outputs. Together with the UKCTCS, key performance indicators were agreed. The first objective of the Programme and an underlying theme throughout the Programme's work was 'partnership working'. Much time and energy was devoted to this in the early stages, including establishing a multi-disciplinary Governance Board (GB) which involved key stakeholders from HMRC and Trading Standards, Health and Marketing across the three regions. Three regional steering groups were also set up, staff were appointed to key positions and funding was leveraged from external sources for additional posts. A website was set up to act as the communication vehicle for the Programme. The Programme also commissioned market research (from NEMS market research) to understand its target audience: who used IT and why.

Stakeholder interviews enabled an understanding of the Theory of Change behind the Programme. They indicated that partnerships were developing well even at an early stage in the Programme's implementation and were identified as a key legacy of the Programme towards the end of the evaluation period. Nevertheless, issues were identified such as the ownership of the illicit tobacco issue, sharing of intelligence between local, regional and national enforcement bodies and the need for further development of the formal process for doing so. The Programme played a key part in the negotiations around a revised protocol for sharing intelligence and closer working between the different enforcement bodies. This was thought to be critical and underpinned all of the Programme's work, for example if the Programme raised awareness of the dangers of IT use which resulted in intelligence forthcoming about local traders, this intelligence needed to be seen to be acted upon for the Programme to have continued credibility. Discussions around the revised protocol permeated the early interviews with stakeholders and later resulted in a decision to use the Crimestoppers hotline rather than the Customs Hotline for intelligence reporting by the GB, although HMRC continued to promote the Customs Hotline.

A social marketing campaign, *Get Some Answers* (GSA), was developed to reduce demand for illicit tobacco, based on the Programme's research. This avoided discussion of relative health risks of illicit and licit tobacco (a strategy which had been used previously but which implies that licit tobacco is 'healthier'); instead, and for the first time in the UK, the Programme focused on aspects of criminality of illicit tobacco in local communities and the role it played in young people's smoking. The GSA campaign was only run in the North West (NW) and North East (NE) because of the Government freeze on media spend which affected Yorkshire and Humber (Y&H) which was solely funded by the Department of Health. The GSA campaign was implemented in June/July 2010 and again in January/February 2011 in the NW and NE regions.

The Programme had a high profile throughout and was perceived by stakeholders to have significantly raised awareness of illicit tobacco among the relevant agencies and national policy makers as well as consumers.

Outcome evaluation

The selection of 'higher-level' indicators to monitor supply and demand factors was not easy as it became apparent during the course of the evaluation that such indicators were not routinely collected and appraised. Without a control region, attributing any findings to the Programme is not possible. However we believe that all the indicators, from a variety of

sources, point towards the Programme having an impact on reducing demand and greater coordination of activities to reduce supply of IT in the region.

The two websites set up by the Programme attracted a great deal of interest. Hits on the main Programme website (www.illicitobacconorth.org) totalled 17,578 from April 2010 to October 2011 including 12,844 new visitors. The GSA website (www.get-some-answers.co.uk) received 16,038 hits from June 2010 to October 2011 including 12,991 new visitors; hits originated from 79 countries, but the vast majority emanated from the UK.

Among participants in the stakeholder surveys, 52% in the second survey in 2011 indicated that IT had been a higher priority than a year ago, and 85% of these said that this was because of the influence of the Programme. Awareness of IT and related issues was perceived to have been raised across stakeholders.

From the 2009 and 2011 NEMS surveys, the proportion of smokers who had brought back, or had others bring back, duty-free cigarettes from abroad fell substantially, from 33% and 27%, to 27% and 22%, respectively. The proportion of smokers purchasing IT also fell, from 20% to 18% and particularly among young smokers, as did the total market share of illicit tobacco, from 9.4% to 8.8%; this fall was more marked in the NE than in the NW. Awareness of IT among non-smokers increased from 54% to 69% and, importantly, the proportion of smokers who were comfortable with illicit fell, by four percentage points to 15%, with similar reductions recorded in both regions. The proportion 'uncomfortable' with illicit tobacco rose by four percentage points to 59%. The proportion of people reporting that they were likely to report someone selling IT increased by three percentage points to 29%, 76% reporting that they would report sales to children (as in 2009). A survey of young people's (aged 14 to 17 years) smoking behaviour by Trading Standards North West (TSNW) and NEMS data suggested a marked decrease in smoking among young people in the region.

There was a clear impact of the GSA campaign on Crimestoppers calls in the NE and NW regions which increased from 100 in the period April 2009 to March 2010 to 328 for the year April 2010 to March 2011 during which the campaign ran; calls in Y&H which did not run the GSA campaign fell from 33 to 19 across the two periods. Calls to Crimestoppers dropped off from April 2011 across the region onwards suggesting that the social marketing campaign would need to be continued to have a sustainable large effect. Calls to the Customs Hotline have increased steadily across the three regions during the evaluation period.

In summary, all of the selected indicators moved in a direction indicating that the Programme has played a key role in reducing the supply of IT and demand for it.

Key learning points

- The Programme was unique and very ambitious, endeavouring to tackle a complex and difficult issue which hitherto had almost predominantly been focused on reducing supply; the Programme also endeavoured to tackle demand for IT. Complexities were also brought about by the multidisciplinary nature of the partnerships involved, bringing together agencies that previously had not worked closely together and operated across three diverse regions in the North of England.
- The Programme has not been immune from the devastating cuts in funding during the period under review; however the government's preoccupation with revenue has helped shield this area from some of the cuts to other health programmes.
- The Programme's strategy was very comprehensive and logical; the GB developed a clear set of activities with pathways identified to reach the intended outcomes.

- No agreed indicators exist for assessing the supply and demand of IT at a local level and relevant data are not routinely collected nor readily available for study. For the future, we recommend routine electronic monitoring for any IT actions being carried out by local authorities. At a national level HMRC estimates the size of the market annually, based on General Lifestyle Survey data of smoking prevalence against revenue receipts for the sale of licit tobacco products.
- There is no doubt that the profile and importance of IT as an issue has been raised (several indicators point favourably in this direction and among a range of national, regional and local stakeholders, professionals and consumers). This, we believe is testament to the noticeable effort the Programme went to understand the target audience and disseminate findings and materials widely across the region.
- The Programme successfully avoided using messages around the relative harms of IT, instead focusing on criminality in local communities and the influence of IT on children's smoking. Addressing illicit tobacco is very difficult, particularly during a recession, as this requires a sensitive approach addressing very complex relationships within communities around smoking (such as local suppliers being seen as 'Robin Hood' characters but also a fear of reporting some dealers) which require 'buy-in' from frontline community and health workers. Whilst not all those observed were confident about focusing on criminality, the messaging generally had resonance with frontline workers and the research indicates that these messages have had some traction with the public.
- The indicators show that despite the recession, intelligence calls increased and reported demand for IT products has fallen during the lifetime of the Programme to date.
- The Programme brought together diverse stakeholders with what were initially very different philosophies/worldviews and priorities. Over time, these disparities have been partially ironed out such that it is now possible to see all stakeholders as sharing some more universal meta-values, such as health and the reduction of social harm (especially harm to children). Greater involvement of some professional groups such as the police could be beneficial in the future.
- A significant success of the Programme was to overcome many structural barriers to sharing intelligence, such as a legislative and policy context that was extremely restrictive of data sharing. The Programme successfully supported negotiations for on-going joint working that seemed to represent new levels of collaboration between enforcement agencies. All stakeholders interviewed reported a much better understanding of the remits, resources and areas of action of other agencies involved.
- By encouraging dialogue and joint working, these partnerships have also helped to raise the profile of tobacco control as a whole, thereby partially overcoming complacency after the implementation of the smoke free legislation in 2007. On the enforcement side, this joint working has also contributed to other work around age-of-sale, illicit alcohol and counterfeit goods.
- The Programme used its budget to leverage other funds, thereby increasing investment in the issue of IT beyond the confines of the Programme's fixed-term budget.
- The Programme had a high profile regionally, nationally and internationally, and was highlighted in various Government documents during the evaluation period.
- The Programme provides a blueprint for tackling the issue which was utilised by other regions and by the government pilot projects which utilised the Programme's imagery and ideas.

Conclusions

Despite the recession and significant disruption and cuts to staff and resources, all the available indicators show an increase in intelligence reports to the hotlines during the campaign period and promising reductions in demand for IT which are likely attributable to the Programme. It should be noted however that this innovative and unique pilot Programme, tackling a complex region-wide issue, is still at a relatively early stage of implementation and therefore this evaluation should be seen in that context.

The sustainability of the Programme is likely to rest on continued investment. This is necessary to enable: ongoing regional coordination; regular meetings of stakeholders to enable expertise and intelligence to be shared; a sustained social marketing campaign; and progress to be monitored. In moving forward, the Programme should continue to assess consumer views. As the recession continues, striking the right balance between avoiding a focus on tax losses and relative health risks, whilst concentrating on criminality and the influence of IT on children will require vigilance. The Programme trialled a new approach to this which appears to have had resonance with the target audience and the materials have been utilised and further developed by other pilot projects in other areas.

Illicit tobacco remains a serious and significant 'upstream' problem affecting health inequalities in countries worldwide. There is also evidence of continued collusion in illicit tobacco by the tobacco industry⁴. The Programme offers a blueprint for regional initiatives to reduce both the supply and demand for illicit tobacco; it is an exemplar of partnership working which is thought to be unique and deserves to be widely disseminated.

2. INTRODUCTION

The importance of tackling illicit tobacco

Smoking is the leading cause of preventable mortality and morbidity in the UK. Evidence-based tobacco control policies, in particular increased taxes, reduce smoking prevalence yet such policies are significantly undermined by the use of illicit tobacco. Illicit tobacco use is more common among socio-economically disadvantaged groups and hence exacerbates health inequalities as “it maintains smokers in their habit and encourages young people to start smoking”⁵. The prevalence of illicit tobacco is particularly worrying in disadvantaged communities, where “cheap” tobacco is often seen as a “bargain” and people have traditionally seen those involved in the “illicit” trade as latter-day ‘Robin Hoods’⁶.

Illicit tobacco use includes smuggled tobacco, bootlegged and counterfeit tobacco⁷. Within the UK, the latest figures indicate that approximately 10% of cigarettes and 46% of hand rolling tobacco are smuggled and tobacco fraud costs taxpayers around £2 billion per annum.⁸ Traditionally, responsibility for tackling illicit tobacco has resided within the agency that is now known as Her Majesty’s Revenue & Customs (HMRC) whose key endeavour is to

⁴ Organized Crime and Corruption Reporting Project (OCCRP) report: Big trouble at Big Tobacco is available at: <http://www.reportingproject.net/>

⁵ NoE *Tackling Illicit Tobacco for Better Health* Programme Action Plan 2009-2012.

⁶ Wiltshire S, Bancroft A, Amos A, Parry O. “They’re doing people a service”: qualitative study of smoking, smuggling and social deprivation’. *British Medical Journal*, 2001; 23: 203–7.

⁷ NoE *Tackling Illicit Tobacco for Better Health* Programme Action Plan 2009-2012.

⁸ HMRC. Measuring tax gaps 2011. September 2011.

ensure that appropriate duty on tobacco products is paid. Illicit tobacco therefore implies a significant loss of revenue for the Exchequer.

There were concerns about illicit tobacco use in all three North of England regions (North East, North West and Yorkshire and Humber) where there was evidence of a high incidence of smoking, “with some deprived wards in the North having a smoking prevalence of over 50%”⁹. Illicit tobacco is a significant problem particularly in the North of England, which is considered a “hotspot” due to its high levels of smoking prevalence and low levels of income.

Brief history, context, and aims of the Programme

The seeds of the North of England *Tackling Illicit Tobacco for Better Health* Programme (the Programme) were planted in December 2007, when Fresh Smoke Free North East (SFNE) hosted the *North of England Summit on Smuggled and Counterfeit Tobacco*, a one-day event co-organised with Smoke Free North West (SFNW – renamed Tobacco Free Futures from October 2011), Smoke Free Yorkshire and Humber (SFY&H), and HM Revenue & Customs (HMRC). This summit was the first time that a number of interested UK agencies with distinct remits and strategic priorities had gathered together to discuss and share knowledge on the topic of illicit tobacco (IT). About 200 people were in attendance, with good representation from health organisations, HMRC, and Trading Standards (TS). At this event, several representatives from health and enforcement organisations, local authorities, non-governmental organisations (eg ASH) and academia gave presentations regarding IT, and key issues were discussed and debated in workshops. The Programme’s vision and objectives emanated largely from the development of these original discussions, paired with the review of relevant research.

A further process of consultation took place between June and September 2008, which included the participation of the three Regional Tobacco Policy Managers (RTPM) for the North of England, and colleagues from the Department of Health (DH), HMRC, the UK Border Agency (UKBA), Local Authorities (LA), TS, the Association of Chief Police Officers (ACPO) and the Serious and Organised Crime Agency (SOCA). A consultant was hired to turn the outcomes of discussions into an Action Plan and from this came the eight Programme Objectives (see below) and the North of England (NoE) *Tackling Illicit Tobacco for Better Health* Programme Action Plan emerged¹⁰.

The formal public facing launch of the Programme was on 27th July 2009. The Programme, which was originally pump-primed by a grant from DH and covers the three North of England (NoE) regions, supports the DH *National Tobacco Strategy*, the HMRC *Tackling Tobacco Smuggling Strategy* and the joint DH/ HMRC *Illicit Tobacco Marketing Strategy*. The main aim of the Programme was to increase the health of the population in all three regions of the North of England through reducing smoking prevalence by (a) reducing the availability (supply) of illicit tobacco, thus keeping real tobacco prices high; and (b) reducing the demand for illicit tobacco by building on existing tobacco control measures. It aimed to raise awareness of the issue of illicit tobacco, to engage with relevant health and community workers, and to develop infrastructure to aid information sharing, identification of illicit markets, and enforcement action. The Programme intended to achieve the above broad aims through an effort of concerted action between health and enforcement agencies in the three northern regions. The Programme was the first real attempt by the health sector to develop activities to tackle illicit tobacco use.

⁹ NoE *Tackling Illicit Tobacco for Better Health* Programme Action Plan 2009-2012.

¹⁰ NoE *Tackling Illicit Tobacco for Better Health* Programme Action Plan 2009-2012.

Background and aims of the evaluation

This evaluation of the Programme was undertaken by the UK Centre for Tobacco Control Studies (UKCTCS), commissioned in September 2009. The evaluation team was led by Prof Ann McNeill at the UKCTCS, University of Nottingham. Academics from the Smoking Interest Group (SIG) at Durham University, led by Drs Andrew Russell and Sue Lewis, were in charge of the ethnographic strand, supervising research associates Drs Serena Heckler and Susana Carro-Ripalda. SIG is an affiliate of FUSE, the Centre for Translational Research in Public Health, which is based in the North East (NE). Other colleagues at the University of Nottingham (Dr Manpreet Bains and Prof John Britton), University College London (Belinda Iringe-Koko and Dr Andy McEwen), University of Stirling (Prof Linda Bauld and Dr Doug Eadie) and the University of Northumbria (Dr Rob Hornsby) were also involved. The period of the work of the Programme that was evaluated fell between September 2009 and March 2011 except where indicated.

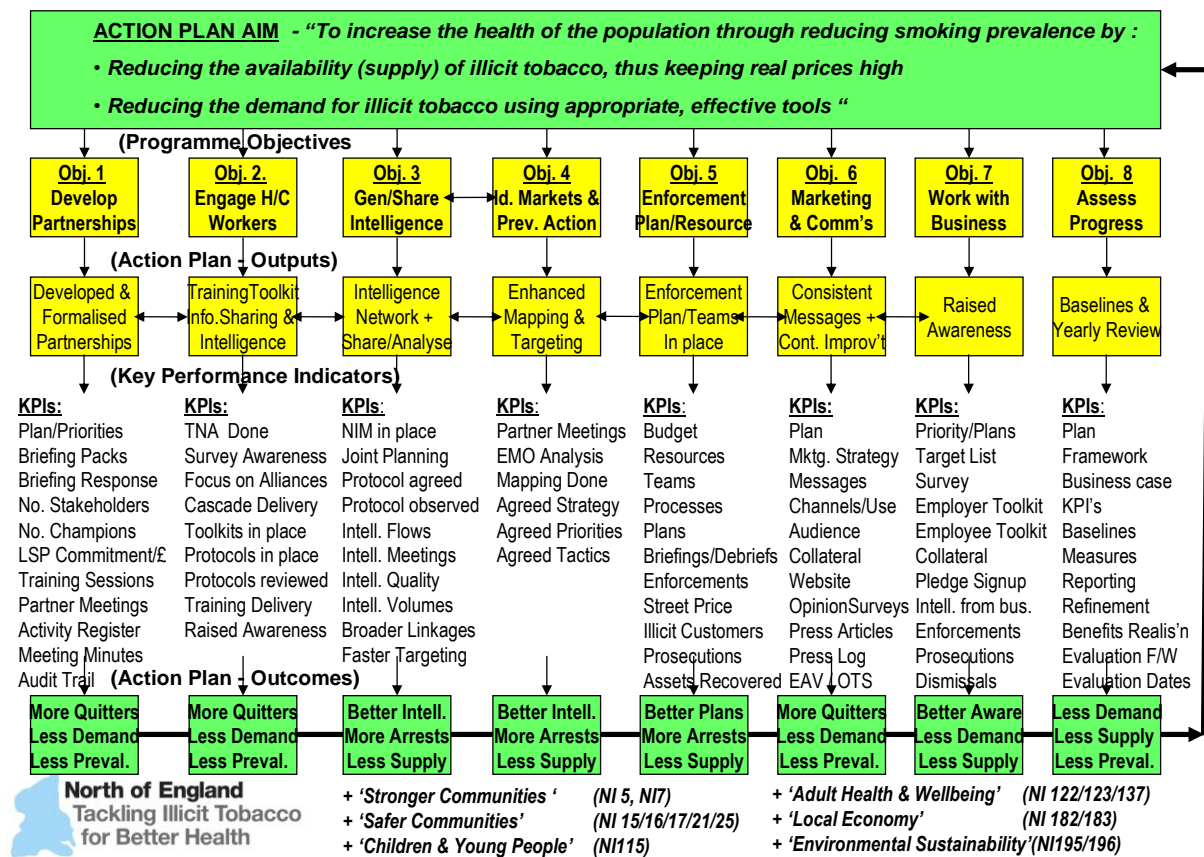
The UKCTCS believed that the Programme constituted a ‘complex community initiative’ as it aimed to promote positive changes among different groups and at different levels. The evaluation of complex community initiatives is not straightforward and doesn’t lend itself easily to experimental designs such as randomised controlled experiments. A further complexity was that the Programme operated across three regions of England which differed not only in size but in regional and local organisational structures and each region was therefore unlikely to implement the Programme in the same way.

The Governance Board (GB) requested that both a process- and outcome-oriented evaluation be considered. After the first Programme Manager was hired, the principles underlying this complex intervention were laid out by him in a Logic Model¹¹. The Logic Model illustrated the logical relationships that the stakeholders believed existed between the inputs of the Programme (the resources), the activities the Programme undertook and the changes or benefits that resulted from it. The GB had developed some draft Key Performance Indicators (KPIs) for the individual activities which they wished to agree upon and then monitor which the UKCTCS appraised (Annex 1 available on request). Figure 1 shows a summary of the Logic Model as applied to the Programme, together with the draft KPIs as developed by the GB as at October 2009.

Figure 1 Logic Model for the North of England Programme

¹¹ NoE *Tackling Illicit Tobacco for Better Health* Programme Action Plan 2009-2012.

NoE Programme – Logic Model + KPIs



The UKCTCS proposed a 'Theory of Change' approach to the evaluation of the Programme¹². This was defined as a 'systematic and cumulative study of the links between activities, outcomes and contexts of an initiative'¹³. Put more simply, the approach was about building a theory of *how* and *why* a project was supposed to work. This approach sat well alongside the Logic Model that had been used to develop the Programme.

As the overall aim of this Programme was to have an impact on smoking prevalence through reducing the supply and demand for illicit tobacco in the North of England (long term outcomes), it was important to identify how these outcomes were to be measured. It was recognized that in the lifetime of this evaluation it would not be possible to measure changes in prevalence because of the delay in the publication of prevalence data (a time lag of around two years). So assessing reductions in supply and demand would be the important outcomes to measure. However, to be of maximum value the evaluation needed to identify factors that played a role in the overall impact, so would need to identify those activities which worked well and contributed positively to the overall impact, and those that worked less well or made little contribution, and why. This would also be important learning for future development of the Programme (beyond year two) as well as for those seeking to replicate the Programme elsewhere. To do this, we needed to understand the links between the activities and the longer term outcomes as illustrated in the figure above.

¹² Evaluating the North of England Illicit Tobacco Programme, UKCTCS, September 2009.

¹³ Connell, J.P. & Kubisch, A.C. (1998) Applying a theory of change approach to the evaluation of comprehensive community initiatives: progress, prospects, and problems. In: Fulbright-Anderson et al. (eds) *New Approaches to Evaluating Community Initiatives*, Vol. 2: Theory, Measurement, and Analysis (Washington, DC, Aspen Institute).

In addition, we realised that, because many of the activities - such as building effective local partnerships - would be hard to assess quantitatively, qualitative research was required to supplement some of the KPIs to give a richer and more narrative description. Our approach was therefore to use a mixture of quantitative and qualitative research and would include what we refer to as an “ethnographic strand”. A brief outline of our approach to the evaluation is given below; our methods are described in Section 3.

Our evaluation

A Theory of Change approach to evaluation

As stated above, we suggested using a Theory of Change approach to the evaluation. The assumptions involved in the Programme were ‘articulated’ through document analysis and the qualitative research interviews and was then explored through the ethnographic research. Assumptions are the beliefs, principles and ideas about the programme and how it is envisaged to work, taking into account the environment and the participants. The programme consists of eight objectives: Developing partnerships; Engaging health and community workers; Generating and sharing intelligence; Identifying informal markets and preventive action; Deliver enforcement; Marketing and communications; Working with businesses; and, Assessing progress. For each objective, the Programme identified specific outputs and outcomes that support the aims using the Logic Model approach.

The Theory of Change was to be developed to explain why these projects were selected and how they were envisaged to contribute to the overall aim. To some extent this might appear self-evident but it is likely that the assumptions underpinning particular activities and expected outcomes will differ between stakeholders and it is important that these links be clearly articulated at the outset.

Interviews with stakeholders

Our first step was therefore to carry out in-depth interviews with the membership of the GB to get an overview of their expectations of the programme and the Theories of Change they thought applied to the Programme’s Projects. These interviews also provided a rich narrative of their understanding of the Programme and what factors they saw as important to the Programme’s success.

Towards the end of the evaluation period, we conducted repeat interviews with some of the same people interviewed at the outset and also interviewed a handful of external stakeholders. These interviews were to assess how the thinking of the key stakeholders had evolved or changed during the two years of implementation and assess outside perceptions about the Programme.

Monitoring long term outcomes and ‘Higher Level Indicators’

We proposed that ideally the evaluation needed to take into account the aim of the Programme. However, this could not be measured during the evaluation period (as stated above because of the time lag involved in the publication of prevalence data) but also because the Programme could not be expected to achieve a reduction in smoking prevalence in the short term. Given that the Programme aimed to reduce smoking: *‘through reducing the supply and demand for illicit tobacco in the North of England’*, it was therefore critically important to monitor supply and demand for illicit tobacco yet there were no agreed and accepted measures for doing this. One of the challenges of the evaluation was therefore to identify how best to measure supply and demand, complicated by the fact that these are inter-

related. We refer to these indicators as Higher Level Indicators, and we prepared a briefing for the GB on the options for measuring supply and demand (Annex 2 available on request). This involved assessing the availability of routine data and how these could best be accessed before recommending which indicators to monitor. The evaluation team's resources limited their ability to commission new research and so the evaluation was largely reliant on using existing sources of data.

Tracking progress

Whilst tracking the KPIs was the responsibility of the GB, the evaluation team identified and supported the development of these KPIs and through the ethnographic evaluation (see below) broadly assessed the progress for each objective and whether the intended consequences/outcomes were achieved. Again, whilst it would have been useful to get fine grained information on, for example, attitudes of pub landlords to the sale of illicit tobacco on their premises, retailers concerning the sale of 'below the counter' illicit tobacco, hauliers, ice cream van companies, etc., commissioning new research was not possible within the budget of the evaluation. Methods of working across the Programme and the three Regions were also tracked. This was important for understanding any differences in implementation across the Regions as well as why planned projects and activities may have differed from their implementation. Unintended outcomes would also be anticipated and measured.

Rationale of the ethnographic evaluation

The ethnographic research team used their experience of embedded and action research^{14,15,16} to carry out collaborative ethnographic research with the primary objective of elucidating gaps in the research undertaken by the other members of the evaluation team and to give a richer and more narrative description. The ethnographic strand of the evaluation has in part followed the eight Programme objectives and their associated activities. However, and after consultation with stakeholders, a specific set of research questions was set for the ethnographic evaluation. These questions were:

1. Is effective partnership working occurring?
2. What are the organisational and operational differences between the regions?
3. How is the programme working at the sub-regional level? Are its aims and justification clear? Is the Programme seen as successful?

Throughout the evaluation, the answers to these questions have been incorporated into the relevant sections.

3. METHODS OF THE EVALUATION

Understanding the context of the Programme

A key part of the evaluation was the need to understand the local, regional, national and international context in which the Programme was running. This was done through document analysis and interviews.

¹⁴ Reason, P and H. Bradbury (eds) *Handbook of Action Research: Participative Inquiry in Practice*. London: Sage, 2001.

¹⁵ Huxham, C and S. Vangen Researching Organizational Practice through Action Research: Case Studies and Design Choices. *Organizational Research Methods*, 6(3): 383-403; 2003.

¹⁶ Lewis, S. and A. Russell, Being Embedded: a Way Forward for Ethnographic Research. *Ethnography*, 12(3): 398-416; 2011.

Primary research carried out by the evaluation team

Stakeholder interviews I and II

'Baseline' Stakeholder interviews I

The Theory of Change places great importance in stakeholders' assumptions, therefore in-depth, semi-structured interviews of key stakeholders in the Programme were carried out to get an overview of their expectations and understanding of the Programme.

Specifically, we were interested in finding out about:

- Stakeholders' prior involvement with, and amount of time currently spent on, illicit tobacco
- Expected impact, and anticipated problems, of the Programme at the beginning of stakeholder involvement
- The reasons for stakeholders becoming involved and expectations of the Programme
- Current knowledge of the Programme and its objectives and the role stakeholders play within it
- Stakeholders' views on progress to date and how they think the Programme should develop

The interviews took place in November and December 2009, approximately six months after the public launch of the Programme.

Participants

It was recognised that the Programme has a large and varied number of stakeholders, but members of the Programme GB (16 stakeholders) were considered to be key and were therefore the focus of this evaluation. The GB consisted of representatives from local and national enforcement agencies, representatives from the regional health agencies and marketing and communication professionals. GB members were invited to attend an interview by email and all agreed. Fifteen interviews were conducted face-to-face at the workplaces of the stakeholders, four were conducted before and after a steering group meeting at another venue, and one of the interviews was conducted over the telephone.

Data collection

Semi-structured interviews were used to enable interviewees to talk about a particular area in detail and allow for areas to be explored that the interviewer had no prior knowledge of. The interview schedule focused on stakeholders' perceptions of the Programme, their knowledge and understanding of the Programme, their roles within the Programme, thoughts on the Programme's progress and finally their views on the future of the Programme. All interviews were recorded using a digital audio recording device. On average, the interviews lasted 45 minutes (range: 30-74 minutes).

Data Analysis

All interviews were transcribed verbatim and analysed thematically using the framework approach to qualitative analysis¹⁷. First, the interviewer cleaned the data to remove any identifiers and ensured that the transcripts were accurate representations of the audio recordings. The transcripts were then examined to determine important core themes based on *a priori* and emergent issues. These themes were then applied to all transcripts in order to

¹⁷ Ritchie J, Spencer I. Qualitative data analysis for applied policy research in: A. Bryman & R.G. Burgess (eds) *Analyzing Qualitative Data*. London: Routledge, 1994.

further develop and refine them. This was done by lifting data from their original context and arranging them under the appropriate thematic references, developing new themes as appropriate. The various themes and issues observed from the interview data were then grouped into a smaller number of main themes and placed in a framework. Analysis of the data was primarily conducted by one researcher and then second coded to enhance validity by another researcher. Quotes are placed where relevant in this report. To maintain anonymity, quotes are followed by the category of organisation to which the quote belongs.

Stakeholder interviews II

These interviews took place one year later in November and December 2010.

Participants

Semi-structured interviews were conducted with 14 individuals between November and December 2010. The sample comprised of nine stakeholders from the Programme GB, representing local and national enforcement agencies, regional and national health agencies and marketing and communications. Additionally, five individuals who were external to the Programme, but had some awareness of the initiative were also interviewed; these individuals came from regional and national health and local government agencies and two non-governmental organisations working in the UK.

Data Collection and Analysis

As with the first interviews, a semi-structured interview guide was developed which in this instance comprised of prompts which sought to explore the main strengths and weaknesses of the Programme and also covered the opportunities and threats, in terms of the future of the initiative. Interviews were conducted either face-to-face at the participant's place of work or via telephone in a private office and were digitally audio-recorded. Interviews lasted between 25 and 60 minutes. Interviews were transcribed externally, cleaned and analysed as above. On this occasion each transcript was read several times, where initial codes were noted each time, prior to using NVivo 8 (QSR International Ltd, Melbourne, Australia) as a data management tool.

Ethnographic evaluation

The main methods used to gather data for the ethnographic evaluation were as follows and additionally focused on two small localities for in-depth research:

1. Participant observation
2. Informal and semi-structured interviews
3. An analysis of other pieces of research commissioned by the Programme and related programmes
4. An analysis of documents, emails and other forms of written communication prepared for and by Programme stakeholders
5. An analysis of documents, research, websites and communication by other organisations and researchers on the topic of illicit tobacco or related topics.

It is also important to note that ethnographic research methods have evolved and adapted to changing circumstances during the course of the evaluation, as it is common in this type of qualitative research methodology.

Analysis involved reviewing and coding by themes the information contained in each of the sources. These themes were then cross-checked with other data sources to identify important and emergent meta-themes, to draw causal links and to highlight issues which might not have

been rendered visible by quantitative instruments. In this way, a mass of data was collected, analysed, triangulated and collated to form a well-rounded, detailed and rigorous overview of the Programme from its inception until March 2011.

Identifying KPIs and Higher Level Indicators

As discussed above, the evaluation team appraised the Programme's KPIs and made recommendations for those which the GB should monitor. The evaluation team also prepared a list of potential Higher Level Indicators which was discussed by the GB and decisions were taken as to which the UKCTCS should monitor. Some of these sources are discussed in more detail below.

Programme commissioned research and external data

As discussed earlier, the Programme was largely reliant on evaluation existing data. Efforts were therefore made to assess the findings of Programme commissioned research.

Peppermint research

The Programme made considerable efforts to understand their target audience. A research company, Peppermint, was commissioned during the early development of the Programme, before the Programme was launched and the evaluation began. Using in depth research in different areas, attempts were made to understand smokers' relationships with illicit tobacco. This research identified misconceptions and myths about illicit tobacco and sellers that needed to be addressed in order to challenge assumptions made by smokers about what they were smoking and who was ultimately responsible for illicit tobacco sales. It was anticipated that unpicking some of these misconceptions could be the tipping point for some smokers and result in quit attempts. This study also identified some possible communication routes for marketing campaigns on illicit tobacco.

NEMS

A survey of over 6000 people surveyed across the three regions by telephone or street interviews, was carried out by NEMS market research company in July 2009. This was repeated in 2011 in the NW and NE regions only (with similar regional sample sizes as previously). The methodology for this research is described in the results section for ease of comprehension.

Trading standards NW surveys

Trading Standards North West carry out a regular survey of nearly 14,000 14-16 year olds in the North West region. During the Programme, two surveys were carried out: in 2009 and 2011. The surveys followed similar methodologies and used similar questionnaires to enable the results to be compared. Questionnaires were distributed to young people via schools for completion and return.

Online stakeholder surveys

Two online surveys of a wide group of stakeholders took place, carried out by Porter Novelli; the first was implemented out in May/June 2009 with 497 participants (it was not made clear how many stakeholders were approached); the second in October/November 2010 with 346 participants (again the number approached was not given). Participants consisted of Primary Care Trusts (PCTs), Local Authorities (LAs) and others to gauge their prioritisation of illicit tobacco and any activities concerning illicit tobacco that they were involved in.

Trading standards survey

This questionnaire survey was implemented in March 2009 by the inaugural Programme Manager and assessed the tobacco related priorities of Local Area Chief Officers via Trading Standard leads.

Customs Hotline data

HMRC provided Customs Hotline data for 2007 to 2011. There are several caveats which we were requested to take into account with these data: the data refer only to intelligence where HMRC received a correct postcode and therefore do not include non-geographic and frontier-related intelligence; the data do not relate to results, only allegations received; and the data may also contain some duplicates where HMRC received multiple pieces of intelligence on one subject.

Crimestoppers data

Crimestoppers and regional Trading Standards contacts provided relevant data from 2009 to 2011. There are also a few caveats in relation to these data: Local Authority boundaries are not immediately identifiable from the partial postcode data. For example, 'BB' relates to Blackburn, but also areas of Lancashire; Salford has Manchester postcodes and most areas of Rochdale have Oldham postcodes but some have 'M' postcodes. Secondly, where a Crimestoppers report makes reference to several addresses, all addresses identifiable have been mapped in the data so the total number column will exceed the total number of reports sent into the region by Crimestoppers.

Website hits

Hits to the two websites used by the Programme (see below) were provided to the evaluation team by the Programme staff.

Trading Standards data

The evaluation sought to analyse data on illicit tobacco from trading standards services in councils¹⁸. However, there were gaps in the data that councils were able to supply. An alternative source of data was therefore sought. The Local Government Association (LGA) and the Department of Health (DH) undertake an annual tobacco control survey¹⁹; this survey contains data on illicit tobacco.

Permission was sought to obtain data for the North of England regions (the NE, the NW and Y&H) on illicit tobacco from the most recent survey (for the financial year 2010-2011). Ninety two per cent of respondents to the tobacco control survey in the North of England (46 out of 50) gave permission to use their data. These 46 councils equate to nearly one third of the total number of councils with trading standards services in England.

These data were then analysed examining the results of the LGA survey, alongside the results of a regional analysis for the North of England that the evaluation team undertook of the 46 councils that agreed to share data.

¹⁸ Councils with trading standards services are located in single tier and county councils only; there are 201 district councils in England who don't undertake this type of work.

¹⁹ Available at: <http://www.lacors.gov.uk/lacors/ContentDetails.aspx?id=25141>

4. RESULTS

(i) Context in which the Programme was operating

In this section we discuss some important developments that were happening outside of the Programme but which nevertheless would have a significant impact on the Programme's development. On the whole we believe that these factors collectively would have a negative impact on the Programme and its implementation either because they affected the Programme's infrastructure, staff, and/or resources or were a direct influence on smokers. We discuss these issues briefly here to give an overall context to the Programme, but some are discussed in more detail in later sections.

An evolving illicit tobacco market

The UK government has introduced strategies and agreements to reduce the supply of illicit tobacco. In 2000, the government introduced a new comprehensive strategy *Tackling Tobacco Smuggling*²⁰, which was updated and expanded in 2006²¹ and again in 2008²² and 2011²³. Legally binding agreements are now in place between the UK Government and tobacco companies on reducing illicit tobacco smuggling. During the course of our evaluation the announcement was made that British American Tobacco (BAT) was following in the footsteps of Philip Morris (2004) and Japan Tobacco International (2007) in signing an agreement with the EU to combat tobacco smuggling.²⁴ BAT agreed to pay the EU \$200m over 20 years to support the agreement.

The illicit tobacco market is complex, dynamic and rapidly evolving. The constitution of illicit tobacco has changed markedly in the last decade from smuggled legally manufactured tobacco to counterfeit, 'cheap whites' and hand rolled tobacco (HRT), with just under half the market in HRT in the UK now estimated to be illicit. Evidence also shows that the modus operandi of tobacco smugglers evolves in response to enforcement activity by the UK authorities and their counterparts overseas. Thus the Programme will not 'solve' the issue of illicit tobacco and will need to continue to evolve over time to ensure continued vigilance and activity in this area. In addition, given the established role of the tobacco industry previously in the smuggling of illicit tobacco we believe continuing vigilance towards the activities of the industry in this area is important. Vigilance is also needed in case the tobacco industry seeks to influence how resources are invested across different types of tobacco control activity. During the lifetime of the Programme, there were concerns that IT was being hyped by the tobacco industry. One example of this was a BAT video called 'Who's in Control' on various tobacco control measures including illicit tobacco which was discussed at one of the GB meetings.²⁵ Another more recent example is from JTI²⁶.

The recession

The current economic recession began around the same time as the Programme in 2008/2009 and hence coincided with the implementation of the Programme. Disadvantaged

²⁰ HMRC *Tackling tobacco smuggling*. 2000

²¹ HMRC *New Responses to New Challenges: Reinforcing the Tackling Tobacco Smuggling Strategy*, 2006

²² HMRC/UKBA *Tackling tobacco smuggling together*, 2008

²³ HMRC/UKBA *Tackling Tobacco Smuggling – building on our success*. 2011

²⁴ http://ec.europa.eu/anti_fraud/budget/2010/BAT-Main-Agreement.pdf [accessed 8-11-11]

²⁵ http://www.bat.com/group/sites/uk__3mnfen.nsf/vwPagesWebLive/DO89JF9G?opendocument

²⁶ Organized Crime and Corruption Reporting Project (OCCRP) report: *Big trouble at Big Tobacco* is available at: <http://www.reportingproject.net/>

communities, such as those in parts of the North of England, have been hardest hit by the recession as economic hardship particularly affects the more deprived groups in society. Unemployment levels are higher in these groups and during the Programme's implementation, unemployment rates have increased. Overall, the growing economic austerity might have been expected to have the effect of drawing tobacco users towards illicit sources as other demands on weekly budgets increased, and hence pulling in the opposite direction from the aims of the Programme.

Change in government and subsequent actions

The change in government in May 2010 impacted the Programme in a number of important ways. The main change was that the funding for the regional Department of Health tobacco programmes ceased in March 2011 and this clearly threatened the security of the three regional tobacco control programmes leading the Programme.

Another immediate impact of the change in government was as a result of the media spending freeze which has been in force since May 2010. This differentially affected the three regions involved in the Programme. The regional programmes were set up in different ways and only two out of the three had separate NHS collaborative funding and so were able to implement the planned marketing campaign of the Programme.

The government also announced a restructure of the NHS involving the dissolution of Primary Care Trusts (PCTs) and the Strategic Health Authorities. This caused considerable uncertainty and disruption to posts at a local level and was commented on regularly in stakeholder interviews. For instance, one commented:

This is the thing you see with the reshuffling and restructuring and cuts and this, that and the other, certain key individuals will no longer be in place and therefore where does this work go? [Health]

Furthermore, the government's comprehensive spending review affected local authorities, trading standard posts and other local partners who had been involved in the illicit tobacco work. As the role of public health is to move into local authorities, it became more important to take account of local authorities' priorities. For example, one possibility was that structures dealing with illicit tobacco and illicit alcohol control might merge in the future so that local authorities could continue to support intermediate tier work in this area in a cost effective way.

One thing that we've only touched on and there does seem to be varying levels of support for it is to make the Programme sustainable, it's okay so do we for instance think about widening out the scope of the Programme to include alcohol? That I think is a discussion worth having because you know if we have to demonstrate greater value for money, plus we know that alcohol amongst other products is regularly found certainly on the supply, disruption side [Management]

HMRC had also undergone various changes over the last decade with the development of the UKBA (UK Borders Agency) and Inland Detection Teams (IDTs). During the lifetime of the Programme, the government published two tobacco control strategies: the first, published by the then Labour government²⁷; the second, by the new coalition government²⁸. Both strategies, however, covered the importance of tackling illicit tobacco and highlighted the North of England Programme.

²⁷ H.M. Government. *A Smokefree Future. A comprehensive tobacco control strategy for England*. London, February 2010.

²⁸ H.M Government. *Healthy Lives, Healthy People. A tobacco control plan for England*. London, March 2011.

The potential impact of all the above changes on the Programme was enormous. The Programme Manager in March 2011 summarised them in his regular management report to the GB thus:

This report is written at a time of great uncertainty on many fronts within the public sector. Organisations supporting this Programme are going through major changes and budget cuts. Department of Health funding for the three Smokefree offices involved with the Programme is being withdrawn, and local PCT funding, where applicable, is being drastically reduced. Many trading standards departments are facing staff reductions, while the remaining members are expected to continue to deliver the portfolio of public protection activities. HMRC teams and police services are going through their own changes and / or budget reductions.

National marketing strategy and two pilots

During February to May 2009, HMRC and DH joined forces with the COI to develop a three year marketing strategy to reduce supply and demand of illicit tobacco, based on early scoping interviews and desk research and joint strategy development involving a wide range of stakeholders. This was published on 24th November 2009. The strategy was apparently built around the DH/HMRC budget available for 2009/10 marketing which was £400k, although it was indicated that there were opportunities for individual regions to augment the proposed activity with their own resources. The categorisation of consumers in this strategy built on research carried out in the North of England (see NEMS research section).

Following this, two pilot campaigns were undertaken in Liverpool and Portsmouth to test potential marketing strategies and materials, with the expressed intent of using the results to inform future local campaign strategies. The campaigns deployed in Portsmouth and Liverpool both used a mix of the same elements: posters; leaflets (distributed both door-to-door and by hand); events; PR; online banner advertisements; bespoke website. While the elements making up the two campaigns were the same, their mix and deployment differed, in an attempt to meet specific local objectives.

The Programme Manager reported working closely with Department of Health's Communications team to ensure alignment with the DH/ HMRC illicit tobacco marketing pilots in Liverpool and Portsmouth. The campaigns launched in September/October 2010. It should be noted that the creative look for the pilots drew heavily on the Get Some Answers campaign developed by the Programme and used the same brand as that campaign (bars logo), although delivery was more skewed to face-to face activity and the call to action was to call Customs Hotline, or a dedicated website (whereas as discussed below, the Programme used Crimestoppers as the principal call to action).

Pre and post campaign research was undertaken to evaluate the effectiveness of these campaigns. An unpublished report describes the findings of these campaigns. The pre-campaign research observed a higher volume share of illicit tobacco in Portsmouth than Liverpool (10% vs 6%) which was reflected in a higher proportion of respondents being comfortable with illicit tobacco in Portsmouth than Liverpool. It's not possible to say whether this difference is due to the presence of the NOE Programme in the Liverpool area as trend data are not available but there is no obvious other explanation for these differences.

The overall impact on the campaigns differed considerably between the two cities with the proportion having recently seen, heard or read anything about illicit tobacco increasing by 14% to 23% in Portsmouth, whilst in Liverpool there was no change. The different results were put down to the differing reaches of the two campaigns. Comments by stakeholders in our interviews indicated that they perceived the differences in the impact of the two pilots were due to the effectiveness of the North of England Programme. For instance:

The DH and HMRC produced a marketing strategy with the aim of reducing demand for illegal tobacco. Two pilot sites: one Liverpool and one in Portsmouth so Portsmouth's in my region and they did a whole series of some more usage and attitudes research before they developed material for a campaign and we were expecting to be running the same campaigns in the two areas but because people's attitudes in Liverpool were different to people in Portsmouth, the campaigns had to be different and in Portsmouth there was still very much a lack of awareness of the problem with them not understanding to the same extent the seriousness of the problem, really understanding what illegal tobacco was, the crime issues. Whereas in the north, in Liverpool because they've had this campaign and the Programme going it was much more around what to do about it. [External health]

South of England Illicit Tobacco Programme

The South of England Illicit Tobacco Programme was launched in February 2011. Considerable support was given to the South West and South East regions in the development of their materials and in the run up to the Programme launch by the North Of England Programme partners. In addition, the South of England coordinator was invited to attend the GB meetings.

Development of Scottish partnerships on Illicit Tobacco

Although a similar Programme has not yet been launched in Scotland, one of the external stakeholders involved in the second round of Stakeholder interviews mentioned how they were learning from the North of England Programme in terms of developing similar work in Scotland:

...one of the obvious things is simply the fact that so many people were brought together from both the health side of tobacco control and the enforcement side, for the first time to exchange information with each other and to learn about the way in which each side works and also get an understanding of the different objectives that they work to, so simply that joining up has been a really useful thing to see and we've looked at that and we've started to try and emulate that in Scotland, using some of the methodology that the North of England has used to bring people together and to ask people to make contributions towards, the development of a policy here in Scotland, so we've very much mirrored what's going on there although we don't have the same level of resources committed towards it. [External health]

(ii) Main Programme activities and process evaluation

Funding

The North of England Programme received an initial 'pump priming' grant of £1 million from the Department of Health in 2008/9. Our understanding is that this funding was divided equally between the three regions and it was used over the following two years for the following key areas: establishment of core baseline data through the commissioning of independent public opinion survey; the development (including consumer insight testing), implementation (in NE and NW) and evaluation of an integrated social marketing campaign- 'Get Some Answers', including fee to Crimestoppers; additional regional trading standards capacity for both strategic planning and enforcement delivery; dedicated programme management support; development and implementation of tailored training packages; running of three regional illicit steering groups and the pan-regional GB; and the commissioning of this evaluation. Some of these activities are described in more detail below.

In addition to this pump-priming grant, some localities also dedicated their own resources towards addressing illicit tobacco, particularly as the Programme was rolled out and key aspects of it became embedded into core local tobacco delivery. Some of these funds came specifically from within the local authority or PCT budgets, whereas some came from a

specific DH funded ‘Reducing Health Inequalities Through Tobacco Control (RHITC) Programme’. In addition, there was also additional funding available for regional trading standards activity, made available by the DH via the then Local Authority Coordination of Regulatory Services (LACORs) body.

The initial pump-priming grant helped to establish some of the fundamental components to the programme, and we understood that as these became embedded, the level of funding required to maintain activity was reduced. HMRC has also had a significant role to play in the Programme but their core central funding received for their illicit tobacco focus is not described here. The additional funds received by the Programme were not used to fund core HMRC delivery.

Initial activities

The early part of the Programme was devoted to the very ambitious tasks of developing the logic plan and activities, setting up the management infrastructure (the Governance Board) and developing the three Regional Steering Groups and other partnerships.

Concerns of how we will get everybody committed to it, concerns of how we will get it working across 3 regions, where each region is quite different and may have different priorities and approaches things in different ways [Health]

Yes at the moment informal relationships are working but now we are formalising them. We are still at the stage where some of them rely on personal relationships, but now working towards a structured systematic approach [Local enforcement]

Website

The Programme established a website www.illicitbaccanorth.org as the central point of focus for communicating with the field. For the Get Some Answers campaign, a separate website was set up (see below) and a blog.

Appointing key staff directly and through leveraging other funds

Appointments of staff at the pan-regional and regional level proved critical in ensuring success of the Programme by keeping IT high on the agenda locally. While some Programme funds were used directly to make local appointments, as described above, the Programme activity in itself contributed to an increase in the number of local and frontline staff devoted largely or entirely to illicit tobacco, thereby ensuring improved awareness and enforcement at the local level. The Programme also successfully leveraged other funding to support additional posts. Examples are given below. As described above, funding was not made available to increase HMRC capacity in IT.

At the pan-regional level, the decision to appoint a Programme manager was made relatively late in the planning process. This role proved to be key, however, in ensuring that someone was able to dedicate sufficient time to giving presentations, facilitating communication between the three regions, negotiating difficulties and raising awareness amongst a wide range of potential stakeholders. The importance of having dedicated staff supporting partnerships and keeping partners engaged has been pointed out elsewhere²⁹ and it has certainly proved important in this instance. Without his dedicated support, the Programme would not have been able to act in as timely a manner as it has. It would therefore probably

²⁹ Heckler, S., Russell, A. (2008) Emotional Engagement in Strategic Partnerships: grassroots organising in a tobacco control partnership in the North East of England. *Evidence and Policy*, 4(4): 331-54.

have lost much of the sense of dynamism and energy that has engaged partners and been attractive to stakeholders.

In each of the three regions, Trading Standards regional level posts were created whose role was to coordinate illicit tobacco enforcement across the region. Post-holders were able to provide support to localities and, through presentations, communications at meetings and on-going contacts, ensure that the issue remained on the agenda of local strategic partnerships, crime and disorder strategic partnerships, within councils and within trading standards departments. These regional staff also ensured that intelligence collected at the national level was passed on in a timely fashion to localities in support of raids and other enforcement activities. Finally, they also endeavoured to raise awareness of IT amongst magistrates and prosecutors in order to ensure that cases were successfully prosecuted and that penalties matched the severity of the offence. An example of this is from Smokefree North West which in March 2010 set up a specialist Trading Standards NW Illicit Tobacco Team, consisting of a manager and two enforcement officers, supported by an intelligence officer.

Programme partners also helped to secure funding to support local level enforcement officers, for instance in the North East, where North East Trading Standards Association (NETSA) staff were instrumental in securing Improvement and Development Agency (IDeA) funding for local activity. Approximately £50K was used to fund the regional enforcement officer post and related areas of activity. Similarly, in Y&H, regional Programme partners ensured that a proportion of IDeA funds were dedicated to illicit tobacco enforcement.

Media Sharing Protocol

Given the complexity and sensitivity of the issues covered by the Programme as well as the number and types of partners involved and the geographical area covered, it was agreed that it was necessary to develop a protocol for publicising news and events from the North of England Programme. In January 2010, a media sharing protocol was agreed.

Negotiation of the Closer Working Protocol

From the outset of the Programme, the partners endeavoured to improve the means by which intelligence could be shared among the partners who needed to act upon it. This was a critically important part of the Programme. Although a Memorandum of Understanding (MoU) existed between HMRC and LACORS enabling disclosure of information by HMRC for the purposes of criminal investigations under Section 19 of the Anti-Terrorism, Crime and Security Act 2001, this was deemed insufficient for tackling the range of intelligence emanating from illicit tobacco sales. Programme partners agreed that there would be little point in raising the profile of illicit tobacco and increasing the likelihood of people giving information on local sellers or users if the information was not subsequently seen to be acted upon. In addition, there was the need to streamline operations so that more than one team would not try to deal with the same situation:

And to be honest with you my biggest worry on all of this is what we term in the trade and the police use exactly the same as well is 'blue on blue'. What we are going to end up with if we are not very careful is trading standards take such a route on some intelligence they may have and customs going down exactly the same route and us colliding somewhere in the middle. And it tends to look terribly unprofessional' [National enforcement agency]

Signing the new protocol became one of the key challenges in the Programme's implementation. Although it was referred to earlier in the Programme using other terms, it came to be called the 'Closer Working' protocol. This new protocol, developed to guide how intelligence and information on illicit tobacco could be shared between different agencies,

had been under development for several years before the Programme was launched. However, during the Programme, negotiations continued involving a number of Programme players. The protocol was referred to throughout much of the evaluation by Programme partners and consumed considerable resources and time.

One of the main issues relating to this was what mechanism should be used as the conduit for information about illicit tobacco use in the community. Hitherto the Customs Hotline had been utilised. However, there was no mechanism by which Trading Standards officers and other local enforcement agencies could routinely access that information and they perceived that this “restricted comprehensive intelligence analysis and constrained their ability to undertake targeted, proactive and/or reactive enforcement programmes” (TS reports, April/May 2009). However, HMRC had serious concerns about transferring protectively marked information to Trading Standards officers many of whom did not have secure email or other secure systems of communication. HMRC believed that this placed some limitations on intelligence sharing.

A separate meeting was arranged for November 2009 which was organised by HMRC’s ‘PaceSetter’ team to which Programme partners were invited. In January 2010, it appeared that Trading Standards would be given regular access to HMRC intelligence data subject to some legalities and it also seemed likely that regular meetings would be needed to share information between the new HMRC Law Enforcement Coordinators (LEC) and a Trading Standards tobacco control specialist or Regional Intelligence Officer (RIO). Despite this meeting, the new protocol was not resolved. There remained concerns about the access to secure email for Trading Standards and the general security of the data. It was felt that giving a single point of contact (the RIOs) secure access to the information might be the best resolution. Despite ongoing negotiations, informal networks between trading standards and members of the IDT were in existence and there were a number of joint TS/HMRC actions in the regions. It is also worth noting that the Programme has catalysed closer working between TS and HMRC at a regional level both through individual relationships and, in the NW, a semi-formal agreement following on from the national protocol.

Customs Hotline or Crimestoppers

Other concerns were mentioned in relation to the Customs Hotline such as the willingness of the public to use it to report illicit tobacco sales.

I think the barriers that exist for the public in reporting through revenue and customs hotline are still there. And even if you put a neutral non branded front number on, when they get through and it is dial 1 for the revenue and customs hotline, I think that might still be a barrier for some people to report. So I'm still very concerned about that [Health]

If we go down the route of actively publicising this issue and actively seeking information, if that information then goes into the national enforcement agency system and then doesn't find its way to us then we will lose the confidence of the people that are supplying that information. And if we lose their confidence that would have impacts in a number of other ways as well [Local enforcement agency]

In April 2010 the three RTPMs, therefore recommended the use of Crimestoppers instead of the Customs Hotline number for the forthcoming social marketing campaign. This decision was reported not to have been taken ‘lightly’ but made after ‘*protracted and detailed discussions to resolve issues regarding the routine transfer of illicit tobacco related intelligence between HMRC and local authority trading standards departments*’. There was concern that some local authorities were already using alternative lines to the Customs Hotline and that a block of 10 local authorities were threatening to make their own

arrangements. Crimestoppers had assured the RTPMs ‘that they had the systems in place to share information received with appropriate agencies including HMRC and trading standards’. The cost of using Crimestoppers was around £5K. It should be noted that HMRC continued to promote the Customs Hotline for IT reporting. This included the two pilots the government ran (p17). Some local authorities also promoted Consumer Direct as a means of reporting IT but we have no data on this mechanism.

It is difficult to evaluate the decision of the GB to use Crimestoppers. As discussed later in this report (p19) the NEMS research found that the proportion of people stating that they were likely to report someone selling illicit tobacco increased by three percentage points to 29% during the campaign, suggesting that the advertised channels for reporting were seen as appropriate and not a barrier to reporting. In addition, when asked how they would report illicit tobacco sellers in the NEMS research in 2011, the most popular answer was the police (around 83%), with just under a tenth saying trading standards and only 5%, the Customs Hotline. On the other hand, calls to both Crimestoppers and the Customs Hotline increased suggesting that both routes were being used. Finally, however we did not assess the quality of the calls received by either helpline as the confidential nature of these calls, precluded us from doing so.

Signing of the Protocol

Nevertheless, negotiations continued, with involvement of Programme partners and others and the Closer Working Protocol was finally signed in June 2011. The Programme partners played a highly influential role in bringing the negotiations to resolution. The protocol spells out the procedures for sharing information between HMRC and Council Trading Standards Services. In particular, it focused on the sharing of information with a particular aim of avoiding ‘blue on blue’ situations as described above. Given the substantial difficulties in negotiating this Protocol, some early expectations about the timescale for implementation and impact were unrealistic.

Balancing Supply and Demand

Given the protracted nature of the negotiations, inevitably the focus of the early work and meetings was how to improve intelligence and data from the Programme on supply. This however seemed to disappoint some partners:

People tend to focus very much on sort of the quantitative type indicators—you want more intelligence, more seizures, more prosecutions. And I always turn it around completely the opposite way: we want more people to stop buying illicit tobacco, to be concerned that they might get caught, to be concerned that if they are selling tobacco in their workplace they risk the chance of losing their job, for their friends and family to frown upon the fact that they are buying clearly non-duty paid cigarettes...If we continue to get more and more seizures, all that is telling us is we still have a massive demand for illicit tobacco. And programmes like these are not sustainable in the long term. You cannot continue to invest huge amounts in enforcement activities. You have to look for a shift in public behaviour [National enforcement agency]

More discussion on this and the protocol follows throughout this report, but it’s important to reiterate that the programme played an important role in the protocol’s final form and acceptance.

How do you reduce demand for illicit tobacco?

Reducing demand for illicit tobacco was a largely new approach and there was no clear evidence-base on how to tackle this. The main message that had been used to campaign against illicit tobacco – that illicit tobacco was potentially more dangerous and of lower quality than regulated tobacco – was a problematic one that risked legitimising regulated

tobacco and the tobacco industry, thereby running counter to the highly successful tobacco control social de-normalisation agenda.

Several surveys (including some of the North of England commissioned research) suggested that the ‘greater harms’ message was complex with a range of contingencies affecting the way it was interpreted by target audiences³⁰. This was primarily because the majority of illicit tobacco smokers believed that their cheap tobacco was not counterfeit or inferior quality. They also believed that they could tell the difference and therefore generally avoided tobacco which was more harmful in all but the most desperate of occasions.

The Programme therefore was compelled to find different messages. Initially, this was an issue that some of the partners acknowledged, but felt uncertain about how to tackle. For instance, one Programme partner cited European tobacco smuggling authority Luk Joossens in arguing that it was much more difficult trying to reduce demand than supply. Such pessimism ran counter to the past record of public health campaigners, who had been highly successful at reducing demand for tobacco and other damaging substances through effective social marketing. There was also a delay in the implementation of the social marketing campaign in order to await the Department of Health/HMRC’s national marketing strategy:

We’ve been waiting for an awfully long time for the DH/HMRC national marketing strategy to be finalised [Marketing and Communications]

‘I think one of the stumbling blocks is that we really want to get going on the communication aspect of the initiative. We are waiting for the DH to decide. We don’t want to take forward our communication strategy if it doesn’t fit in with what is going to be happening at national level. Evidently the DH has been slow in deciding the national communication strategy’ [Health]

Once the green light had been given to go ahead, another problem arose. The Government freeze on media spend nationwide meant that the Y&H region could not implement the public facing part of the campaign. Whilst in the NE and the NW local PCT funding for the Programme was not affected by the freeze, in Y&H the moratorium by DH on budgets for public facing marketing campaigns meant that the region was unable to access the funds to execute the social marketing campaign. Y&H only implemented the part of the campaign that dealt with stakeholders.

Get Some Answers social marketing campaign

The key element of the communications strategy for the Programme was the social marketing campaign entitled ‘Get Some Answers’ which was therefore run in the NW and NE areas only. A social marketing company, The Hub, was hired to conduct research within the target audience and, on the basis of the findings and responses, to develop the best forms of communication and marketing and the most effective messages for the target population³¹.

The Programme commissioned The Hub to develop a campaign with two main elements: 1) a ‘public facing’ element (aimed in particular, at local people who were considered ‘moveable’ in their attitudes towards illicit tobacco); and 2) a ‘stakeholder’ element, for all professionals or public figures who might have a role in reducing the supply or demand of IT. Both elements were developed following “audience research” and discussions with Programme partners, and the messages were “*finely tuned [...] crafted to connect a specific audience with specific issues*”³². One part of the audience research was the NEMS survey described in

³⁰ Peppermint 2007a, b; NEMS 2008, 2009; ICM 2009

³¹ The Hub is also commissioned by the DH/HMRC national team to realise aspects of their national strategy (DH/HMRC Illicit Tobacco Marketing Strategy).

³² *Get some Answers Campaign Briefing*.

more detail in the next section. From this survey, six ‘attitude clusters’ were identified ranging from ‘cheap champions’ who were keen and regular IT buyers to ‘mothers against cheap’ and ‘concerned parents’ (NEMS 2009). The Hub, in developing their marketing strategy, decided to focus the campaign on those groups whose attitudes towards IT were not ingrained, particularly those people who are slightly uncomfortable with the issue of IT already. Their aim was to make these people ‘more uncomfortable’ by highlighting the links of IT with crime in the local community, with children being able to smoke and smoke more.

Initial ideas for the campaign were presented to the GB in January 2010 and in-depth pre-testing was undertaken in various localities across the region in February 2010, resulting in the selection of a brand for the campaign that centred around the concept of local people ‘getting some answers’ to key questions about the consequences of the illicit tobacco trade. The words ‘Illegal Tobacco’ were chosen over ‘Dodgy Fags’ because they were seen as more appropriate and conveying severity and there was no potential for misunderstanding or misinterpretation. Similarly ‘keep it out’ was seen as easier to understand and as more powerful than ‘not welcome here’ – the words with an image of bars was developed as the logo for the campaign. Two main messages were to be developed: illicit tobacco was making it easier for children to stop smoking and illicit tobacco was bringing crime into the community.

The campaign ran in June and July 2010 and was undertaken through a range of media including a website (www.get-some-answers.co.uk, still current and regularly updated), radio advertising and a range of printed media, including newspaper articles (accompanied by quotes from local councillors and others) posters, billboards and beer mats. All these materials were accompanied by information to partners and stakeholders about the rationale and main objectives of the campaign. Although the weight of the campaigns was similar in terms of spend, the larger area and population in the NW meant that the opportunities to see/hear would be lower than in the NE.

Evaluation of the Get Some Answers social marketing campaign

The GB commissioned an independent evaluation of key elements of the campaign from Progressive, a market research company based in Edinburgh and Glasgow. This study aimed to measure the effectiveness of the campaign through examining public perceptions via an in-street survey of the campaign’s target audience. The survey took place in August and September 2010, when the campaign had been in place for several months.

A fairly equal number of street interviews were achieved in each region (499 in the NW and 450 in the NE). The survey targeted primarily smokers (80%) those in social class C2DE and 25-55 year olds. Key findings of the survey were that³³:

- The campaign was estimated to have reached three quarters of the target audience in NE and over half in NW (just under half of those interviewed)
- The campaign had an impact in terms of:
 - Raising awareness
 - Shifting stated attitudes
- The advertising channel with the greatest recall was radio
- Beermats recalled by similar proportions to posters
- Respondents indicated that the posters were the most effective at grabbing their attention

³³ Progressive (2010) *Illicit Tobacco Campaign (North of England) Evaluation: Summary Findings October 2010*, Progressive, Edinburgh.

- Differences were identified between the stated attitudes of those who had previously seen the campaign and those who had not, and between buyers of illegal tobacco and non-buyers:
- Those who had previously seen the campaign were more likely to agree that the campaign had had an impact on their attitudes
- Illicit tobacco buyers were more entrenched in their views
- Non-buyers (smokers and non-smokers) stated similar attitudes
- Attitudes towards illegal tobacco were similar across the two regions
- The recall of the campaign was higher in the NE
- NW respondents were more likely to report sales of illegal tobacco

The evaluation was limited by its sample size and methods and more importantly by the fact that the campaign was executed differently in each region and the considerable variation in funding allocated to the campaign in each. It is also worth noting that recall of key themes or images from the campaign was considerably lower than stated awareness of communication around illicit tobacco in general. It may, therefore, be difficult if not impossible, to attribute knowledge of the topic directly to the campaign itself. This limitation is further supported by the fact that some respondents recalled TV ads on illicit tobacco when TV was not part of the campaign, and some images recalled (i.e. raids and ingredients of counterfeit tobacco) were not present in the campaign. However, such recall is common in surveys of this nature and there was some television reporting of the campaign such as on The One Show and regional news programmes.

Conclusion of evaluation

The Programme aimed to achieve a reduction in demand for IT through a combination of social marketing and outreach to raise the profile of the association of IT use with children and criminality within communities, rather than focusing on the message that had hitherto been used, that IT was more harmful. The Programme hoped to increase community concern about IT and hence reports of its sale and usage which could then be acted on by national and local enforcement agencies.

As long as the limitations of the external evaluation are acknowledged, the campaign does appear to have made a positive contribution to raising awareness of the causes and consequences of IT in the NW and NE. Additional appraisal of the campaign website including the local news articles on the site shows that the materials developed are engaging and the key messages are linked to appropriate evidence about the harms and consequences of illicit tobacco. In addition, we believe that the impact of the Get Some Answers social marketing intervention is best assessed as part of the number of activities that form part of the Programme as it is likely that there will be synergy between different elements.

Uplift/repeat of the Get Some Answers social marketing campaign

As the first phase of 'Get Some Answers' tested positively, a second phase was launched in January and February 2011, again in the NE and NW regions only, incorporating a more direct 'call to action,' encouraging members of the public to call Crimestoppers in addition to finding out more about the issues by logging on to the website. In this campaign, the supporting public relations activity highlighted the absence or foreign nature of health warnings as being indicative of illicit tobacco and this was positively picked up by the media (see for example Fresh SFNE website which has tackled the topic³⁴). On this occasion, a complaint was made to the Advertising Standards Authority (ASA) by a NE ice cream

³⁴ <http://www.freshne.com/News-and-Events/Press/Article/new-warning-over-health-messages-on-illegal-tobacco>

company about the creative execution depicting an ice cream vendor selling cigarettes to children. The ASA quickly rejected the complaint after Fresh NE provided evidence that successful prosecutions have taken place against such offenders.

Some local areas persisted with the campaign, for example, in March 2011, Tobacco Free Lancashire uplifted the 'Get Some Answers Campaign' activity, in recognition of the fact that IT was a major problem in their area. The aim was that people should see IT as a problem, hear about IT and talk about it in their communities. The short campaign needed to appeal to all senses, so the team worked on a four-week local radio campaign so that people could hear about the campaign, purchased bus rear advertising so people would recognise the visuals of the campaign and they also employed a 'tribe' of social marketing staff to talk to businesses and staff at local community centres about IT in their area.

During the ethnographic research, it was found that almost without exception, health and community workers to whom the evaluators spoke said that the Programme has raised their awareness about the scope and the significance of the IT Programme in their communities. There was occasionally however, some uncertainty about what to do with this raised awareness. Some frontline staff were worried about jeopardising the fragile trust that they worked hard to establish with their clients. Some felt that the greater harms message was an easier message to utilise and were left feeling tentative when it was suggested that this message should not be used. Opinions were also occasionally found to be divided about how effective criminality messages are at convincing members of the public that illicit tobacco is an issue worth acting upon. In general, however, they were willing and eager to help deliver the Programme in local communities.

Toolkit

Although this is being produced beyond the lifetime of the evaluation, it's important to mention this particular development of the Programme. The toolkit is intended to be used by a variety of partners for tackling IT, learning from the NoE experience. The toolkit will highlight strategic and tactical approaches to tackling IT and will cover: developing effective partnerships – pan regional, regional and local; generating intelligence and delivering enforcement; effective marketing and communications; and assessing progress. The toolkit is expected to be launched in spring 2012.

Community Activation Pilots

Community activation pilots were also set up to stimulate further dialogue within certain communities. The Hub was commissioned to run two community activation pilots, targeted at ward level. The areas targeted were Blackpool and Salford, and the Hub worked in partnership with NHS groups in those areas. The community action pilot in Blackpool focused on pregnant women (where smoking prevalence was high, particularly among pregnant teenagers) and the one in Salford, on two groups (routine and manual workers employed in a local shopping precinct, and child carers who attend a local 'stay and play' centre). The aim of the pilots was to endeavour to create solutions for IT use *with* the community, rather than the community having a solution imposed on them. The focus was on smokefree messages being disseminated through word of mouth by peers. Champions were identified and awareness raising exercises were carried out. NHS Blackpool contributed additional funding to the Blackpool pilot.

NHS Stop Smoking Service advisor questionnaires

During the Programme, the idea arose to try to capture intelligence from NHS Stop smoking service advisors gathered during their interactions with clients. There was much discussion around this during GB and other partnership meetings because of the sensitivity of acquiring

this information and the importance of client confidentiality. A working group was established to identify whether this was appropriate and to develop a mechanism for doing so based on existing procedures if they existed. This was followed by the Stop Smoking Services in the NE and NW trialling a short questionnaire with clients to gather ‘sort intelligence’ about buying habits, price paid, etc.

Mentions of NOE Programme in government strategies and other reports

The Programme was mentioned in several national strategy documents release during the evaluation period:

- Two national tobacco control strategies
- HMRC/UKBA strategy
- Included as a priority ‘serious acquisitive crime in Greater Manchester Against Crime Strategy
- The Programme was also mentioned in the Intellectual Property Crime Report 2009-10 *IP Crime Group, 2011.

In addition, GB members were invited to speak at numerous tobacco control conferences in England, Wales and Scotland and were selected for a special symposium in the World Conference on Tobacco or Health for March 2012.

Recognition by public sector and public health award schemes

The work of the Programme has been recognised in several award schemes:

- The Programme overall was ‘highly commended’ in the 2011 North West Public Health Awards
- It was also commended in Public Protection category of the Municipal Journal Awards
- The ‘Get Some Answers’ campaign was ‘highly commended’ in the not-for-profit category of the Northern Marketing Society awards and won Gold awards in the Chartered Institute of Public Relations 2011 ‘Pride’ events in the North East and North West.

Media coverage

The Programme has been highly successful in securing media coverage locally, regionally and nationally.

For instance, the first phase of the Get Some Answers campaign in the summer of 2010 generated almost 150 print, radio, on-line and TV stories in the NE and NW. This had a significant ‘PR value’ and ‘advertising equivalent value and generated substantial opportunities to see/ hear the key messages. In addition, the Programme sparked an item on BBC TV’s The One Show which has a national audience of approximately 3.5m people – The One Show visited the NoE regions. Panorama also covered the illicit tobacco issue and had some involvement from the Programme.

(iii) Qualitative interviews

Stakeholder interviews I

A full report of this part of the research is being written for publication as an academic paper. A summary of the key findings is presented here and the findings and relevant quotes are also embedded in the remainder of this report.

- The Programme was seen as exciting and challenging, particularly in terms of what multi-agency working could potentially achieve in this important area of public health.
- Stakeholders reported that a great deal of progress had already been made in terms of achieving the Programme's objectives, with the focus on tackling illicit tobacco already having been increased across the region and stakeholder knowledge of the issues involved significantly enhanced.
- Significant strides had also been made in relation to partnership working; in particular the Programme was perceived to have enabled a much greater understanding of the roles of the different partners involved in illicit tobacco work. However, at the time of the interviews the partnerships were not yet perceived to be operating optimally and some concerns were voiced about the different philosophies of the agencies and a lack of trust between some stakeholders.
- Nevertheless, there was strong commitment expressed to making the partnership work and stakeholders were striving to identify areas where their skills were complementary to enhance working relationships.
- Some stakeholders not represented on the GB (e.g. police forces) had been difficult to engage. Efforts were currently focused on engaging these stakeholders as well as involving local partnerships in the Programme.
- Most stakeholders thought the Programme was proceeding well but at the time of the interviews in November 2009, it was reaching a critical stage of implementation. This hinged on clarifying routes for intelligence sharing and linkages with the national joint DH/HMRC marketing and communications strategy on illicit tobacco.
- Indeed, a main theme permeating the interviews was that of intelligence sharing. At the time of the interviews the key mechanism for this was being negotiated and this may have therefore had an undue influence on stakeholders' views and perhaps also meant a predominance of comments were on controlling supply issues (such as responding to intelligence to disrupt illicit tobacco becoming available locally), rather than demand (such as the social marketing campaign which had not, at the time of the interviews been launched). Nevertheless, appropriate and efficient intelligence sharing was seen to be essential to the success of the Programme and therefore was believed to be a fundamental issue in need of quick resolution. It was apparent that the North of England Programme, and particularly the greater understanding of the roles of different agencies, and the regular meetings of the Programme partners, had facilitated the development of the new 'Closer Working' protocol.
- Limited resources, in terms of money, time and people, were seen to be a concern.

Stakeholder interviews II

A full report of this part of the research is being written for publication as an academic paper. A summary of the key findings is presented here and the findings and relevant quotes are also embedded in the remainder of this report.

- Stakeholders discussed the various ways in which the Programme had raised the profile of illicit tobacco in the North of England, among community members but also among stakeholders such as Trading Standards partners, the police and national policy makers. The difficulties of raising awareness in a segmented market (as per the NEMS findings) where messages needed to reach marginalised groups in society were noted.
- In relation to raising the profile of IT, the marketing and communication campaigns received many positive mentions. The majority of participants commended the standard of materials that had been produced and that the choice of messages that resonated with the public had been notably effective. The importance of avoiding the message that IT was more harmful than licit tobacco was also generally applauded.
- Some stakeholders thought that the Programme had exceeded their expectations, whilst others mentioned that given the dearth of evidence in reducing the supply and demand of IT, the Programme was probably overly-ambitious in its initial goals.
- The Programme was perceived to have been very successful in terms of partnership building. This had ensured that individuals from a variety of backgrounds and professions had a much greater understanding of the perspectives and roles of the different agencies involved in curtailing IT, both for those internal to the Programme and those external to it. The way partners referred to one another was generally very positive although a few isolated concerns remained particularly in relation to how the enforcement agencies worked together. Comments were again made about the need for greater involvement of the police.
- Although less of a focus than in the baseline stakeholder interviews, there were many mentions of the ‘Closer working’ protocol which had still not been signed at the time of these interviews. In the absence of this, it appeared that operationally individuals were sharing intelligence and as a result enforcement activity was productive, largely due to the way positive working relationships had been formed. It was envisaged that where these informal relationships worked less well, then the protocol would help ensure intelligence was shared appropriately and hopefully ensure that some of the Programme’s positive outcomes could be embedded in the structures and systems for future sustainability. However, there was also some indication that expectations about the protocol had been tempered, as it was unlikely to ensure access to all HMRC intelligence on IT would be shared. The decision to use the Crimestoppers hotline was generally favourably discussed.
- Other assets of the Programme were mentioned as the regional coordination, a dedicated Programme Manager and the regional and local networks which enabled a much greater sharing of resources and intelligence than hitherto. Other areas were emulating the NoE Programme when setting up similar initiatives and it was widely recognised that having some summary of the learning from the Programme to be disseminated would be very useful.
- In terms of weaknesses, a few stakeholders commented on the need for a greater focus on businesses and penalising employers who allowed IT sales on their premises. The tobacco industry’s role in IT was also thought to have been somewhat neglected, perhaps because of the different relationships the key players had with the industry. A few stakeholders commented that there were still some remaining issues in terms of division of responsibilities across the stakeholder agencies. One external stakeholder also wondered whether the success of the Programme in moving IT up the agenda might have been to the detriment of other parts of tobacco control.
- Several threats were identified which could undo the achievements to date, such as the challenging economic climate that was thought to result in smokers seeking cheaper

tobacco products and the available resources and staff for IT work becoming more scarce.

- Participants therefore spoke about the steps that needed to be undertaken to ensure that the profile of illicit tobacco remained prominent in the future, and views expressed focused on both supply and demand factors. For example, some stressed the continuing need to curtail demand through some continuity of the marketing campaign and for regional coordination to continue to ensure cost efficiencies in doing this and tackling supply. Others thought that a continuing focus on the supply chain and perhaps trying to cut off supplies at an earlier stage of the chain was important. Others thought that there might be cost savings if IT work was combined with work on reducing illicit alcohol use.
- If the Programme was to stop immediately, its legacy would remain in terms of improved relationships which were likely to be sustained at least in the short term. Nevertheless, there were concerns on the health side given the dissolution of the regional posts and the movement of public health into local authorities. The biggest legacy was likely to be the blueprint the Programme had provided for similar programmes in the future.

(iv) Higher level indicators, process and outcome evaluation

Website hits

Hits to the two websites used by the Programme (see below) were provided to the evaluation team. Hits on the main Programme website (www.illicittobacconorth.org) totalled 17,578 from January 2010 to October 2011 including 12,844 new visitors. For the Get Some Answers (www.get-some-answers.co.uk) website which was set up specifically for the GSA campaign, there were 16,038 visits from June 2010 to October 2011, including 12,991 new visitors. There were 50,833 page views averaging 3.17 pages per visit. Website visitors were greatest between July and November 2010 with a small peak in January 2011; these peaks coincided broadly with campaign activity although the initial campaign in June and July 2010 had a sustained effect for a few months after the campaign stopped. The visits originated in 79 different countries but with the vast majority from the UK.

Reducing supply

A number of indicators were available that could be used to measure the supply of illicit tobacco in an area. An inherent problem with each of these indicators was that they were all proxy measures as none could directly measure how much illicit tobacco was available. The indicators could change simply as a result of the Programme increasing the profile of illicit tobacco and its criminality, thus increasing awareness within the community and potentially resulting in increased reports of illicit tobacco trading. This needs to be considered when assessing the figures below.

Calls to the Hotlines

The main call to action by the Programme was to encourage people to call the Crimestoppers telephone line if they were aware of any illicit tobacco trading in their area. Hitherto, Customs Hotline had been the principal mechanism by which people reported illicit tobacco crimes so calls to Crimestoppers is therefore an indicator of the success of the Programme in communicating this message as well as being an indicator of local supplies of illicit tobacco (note that this does not take account of other sources such as information passed directly to Trading Standards). In order to ensure that we tracked calls to the Helpline resulting from the

Programme, we needed to ascertain that they were made from within the region. Individual callers to Crimestoppers are not asked to supply their own postcode/address (whereas those to Customs Hotline are); for Crimestoppers callers therefore the postcode of the supplier that was reported was used as a proxy for this. The number of calls was provided by Crimestoppers and the regional Trading Standards representatives but unfortunately historical data were not provided so long term trend analysis was not possible.

Given that the decision to use Crimestoppers was only made in April 2010 and HMRC continued to promote Customs Hotline, we have also assessed calls to Customs Hotline which had also traditionally been the route for communication around illicit tobacco sales in the regions.

Table 1 Calls to Crimestoppers and Customs Hotline on illicit tobacco

REGION	Jun' 08-Mar'09		Apr'09-Mar'10		Apr'10-Mar'11		Apr'11-Sep'11	
Postcode	CS	CH	CS	CH	CS	CH	CS	CH
North-West								
BB	13	NDA	7	15	37	26	10	16
BL	5	NDA	6	12	11	23	9	7
CA	9	NDA	8	16	20	21	4	6
CH	8	NDA	7	16	15	17	4	9
CW	1	NDA	2	3	15	14	3	3
FY	2	NDA	8	6	12	6	6	5
L	4	NDA	13	22	19	30	11	18
LA	2	NDA	4	7	7	12	3	6
M	8	NDA	8	23	28	51	9	30
OL	5	NDA	2	19	14	23	7	14
PR	3	NDA	6	7	17	15	10	6
SK	2	NDA	1	6	9	10	4	5
WA	10	NDA	5	12	16	14	7	8
WN	3	NDA	7	11	9	17	7	8
Total NW	75		84	175	229	279	94	141
North-East								
DH	0	NDA	2	8	14	19	4	5
DL	2	NDA	0	25	18	25	3	18
NE	2	NDA	7	54	32	68	0	46
SR	2	NDA	3	27	15	17	2	10
TS	7	NDA	4	52	20	49	0	20
Total NE	13		16	166	99	178	9	99
Yorkshire & Humber								
BD	1	NDA	1	11	0	20	3	13
DN	6	NDA	8	39	15	50	9	28
HD	4	NDA	1	9	0	3	2	2
HG	0	NDA	0	1	0	1	0	3
HU	2	NDA	1	32	2	28	7	14
HX	3	NDA	3	4	1	1	2	5
LS	0	NDA	4	17	1	28	2	17

S	3	NDA	13	70	0	71	9	41
S70	0	NDA	0	0	0	0	1	0
WKF	1	NDA	1	18	0	21	8	9
Y	1	NDA	1	11	0	19	1	3
Total Y&H	21		33	212	19	242	44	135
TOTAL	109		133	553	347	699	147	375

NDA = No Data Available

The above table shows a clear impact of the GSA campaign on Crimestoppers calls in the NE and NW regions particularly for the year April 2010 to March 2011 when the campaign ran. There was no increase in Crimestoppers calls in the Y&H region (the number of calls went down in the period April 2010 to March 2011 but has increased since this time). The call volume has however dropped off over recent months suggesting that the campaign needs to be ongoing to have a sustained large effect. Customs Hotline calls have been increasing steadily during the evaluation period, with a large increase in the NW. The increased calls appear to be sustained over recent months.

Combining Customs Hotline and Crimestopper calls, the call volume increased dramatically from 686 calls from April 2009 to March 2010 to 1046 calls from April 2010 to March 2011, the period when the GSA campaign was running. In the six months to September 2011, a combined total of 522 calls were received suggesting a sustained year-on-year increase overall. As discussed above, we have not done an analysis of the quality of the calls received.

Seizures

Whilst HMRC can provide information on fraud and seizures, there was a considerable cost attached to retrieving this information and a decision was taken not to utilise these data given that most seizures are made offshore, or at some point on the main thoroughfares through the UK (Birmingham and East Midlands Airport being notable hubs) and therefore do not give a reliable indicator of illicit tobacco availability in the region.

Local data on prosecutions, interventions, joint operations etc

Results from the LGA annual tobacco control survey in relation to IT are presented below for England, alongside the analysis of regional data from the North of England regions, undertaken specifically for this report. All findings reported refer to the financial year 2010-11.

Eighty seven per cent of all councils in England were conducting activities in relation to IT products. Within the North of England, all but one of the 46 (98% of those releasing data) were conducting activities in relation to IT. In England, 74% stated that they had a strategy in their region to tackle IT; 45 of the 46 (98%) North of England councils had such a strategy in place.

In terms of complaints and enquiries received, a total of 1,587 were received across England. For the 42 councils in the North of England receiving complaints and enquiries, 893 complaints or enquiries had been received; this represented 56% of the overall total for England.

Seventy three per cent of all councils in England had undertaken visits with trading standards officers to premises in relation to illicit tobacco products; a total of 3,897 visits had been achieved. In the North of England, 38 of the 46 (83%) reported visiting premises totalling 1,450 visits, 37% of the total for England. Of the visits, across England 72% said that some

of these resulted from complaints and enquiries, in the North of England this was 84% (32 out of 38).

Of the councils in England that reported making visits (110), 84% stated that some visits had resulted in the seizure of illicit tobacco products. Among the North of England councils, 87% (33 of 38) reported making visits that had resulted in seizures. In England, 81 councils reported the number of visits where illicit tobacco products had been seized; this was a total of 702. In the North of England, 31 councils reported the number of visits where illicit tobacco products had been seized which amounted to 313 (45% of the national total). This means that illicit tobacco was seized in 22% of all visits in the North of England compared with 19% nationally.

Table 2 illustrates the above findings across the three different regions in the North of England; this analysis was undertaken from data collected as part of the LGA/DH annual tobacco control survey.

Table 2 Analysis of data from the LGA/DH annual tobacco control survey for the North of England by region

Activity	North West	North East	Yorkshire and the Humber	Total for the North of England
No of complaints and enquiries	555	117	221	893
No of visits by trading standards officers	950	48	452	1,450
No visits in response to complaints and enquiries	167	21	165	353
No of visits resulting in seizures	204	15	94	313
Hand Rolling Tobacco (HRT) smuggled (kgs)	6,841	15	50,150	57,006
Cigarette smuggled (number of sticks)	568,085	14,150	247,310	829,545
HRT counterfeit (kgs)	7,398	108	7,924	15,430
Cigarettes counterfeit (number of sticks)	64,820	6,120	47,700	118,640
Formal actions taken (prosecutions, written/verbal warnings, simple cautions)	126	8	69	203
Base	23/23 councils	8/12 councils	15/15 councils	46/50 councils

In England, 63% of councils had carried out joint operations with the HMRC; 87% (40 out of 46) councils in the North of England had undertaken joint operations with the HMRC.

It is difficult to conclude anything definitive from these data without trend analysis comparing data in the North of England to the rest of England over time.

The following surveys give some indication as to the priority that relevant professionals are giving illicit tobacco and are therefore indirectly indicative of the focus on reducing supply in the area.

Online stakeholder surveys

In the online **Stakeholder Survey** on illicit tobacco, commissioned by the Programme and carried out May/June 2009 by Porter Novelli, nearly 500 stakeholders participated (the size of the population which was approached was not given) with participants being mostly from Health Authorities or Local Authorities. This survey indicated that little time was spent on tobacco control, and an even smaller amount of time spent on illicit tobacco. Nevertheless, a majority of the participants thought that illicit tobacco posed a significant problem locally. A small majority of participants wanted more guidance on dealing with intelligence on illicit tobacco, most believing a centralised resource to deal with such intelligence was required.

From the second survey, 52% of the respondents stated that illicit tobacco had become a higher priority in their organisation than it was over a year ago and 85% of these said that this was because of the influence of the Programme.

Increased priority and awareness of IT among stakeholders

This increased priority was also commented on in the stakeholder interviews. Participants felt that the Programme seemed to have raised the profile of certain agencies in relation to tackling IT and that this may have resulted in improved working relationships; for instance enforcement activity between Trading Standards and the police. Moreover, knowledge and recognition regarding the precise roles and powers held by various agencies may have resulted in increased enforcement activity, particularly for those from Trading Standards:

I think the police have become more aware of our role. I think, traditionally, they would have just thought it was the Customs that would deal with illegal tobacco and, certainly, I'm experiencing in [City] that now the police will come to us rather than Customs if they come across, you know, if they're looking for drugs or whatever and they come across illegal tobacco in somebody's house, they're more inclined to contact us rather than Customs... I mean, basically we'll investigate a complaint and probably go down the prosecution route. [Local enforcement agency]

Additionally, both internal and external participants spoke about how the Programme had raised awareness about the importance of addressing IT and how sophisticated the market was among agencies (e.g. stakeholders, tobacco control) and at higher public health and policy level; according to some participants this has resulted in pushing forward activity tackling IT. In particular, several participants commented on the way the Programme had raised awareness regarding the health impacts of IT among the agencies involved:

I think successes, they've certainly raised the profile of the issue substantially. Obviously I can't speak for the people in the north of England that live there but from an outside perspective I think they've raised the issue with the policymakers, with other public health, the wider public health community. It's certainly become a much more high profile issue and also got partnership working going with Customs and Revenue and Trading Standards and really just pushed boundaries. [External health]

As a result of improved understanding, participants suggested that agencies were more engaged in tackling the issue, perhaps in a more organised manner than previously:

I think the Programme has been very, very good, it's been excellent in raising awareness of

the health issues in relation to illicit tobacco, you know prior to this local authorities or the Trading Standards departments, it was very sort of ad-hoc and the extent to which Trading Standards got involved with tackling illicit tobacco, it was very much a brand protection issue you know occasionally they would get involved with an investigation concerning counterfeit tobacco. It's really been good in raising the profile, you know that actually it's a health issue, it's not a brand protection issue so it has been very, very good in that respect. [Local enforcement agency].

Trading standards survey

The questionnaire survey via Trading Standards to Local Area Chief Officers carried out in March 2009 yielded 39 responses from an expected 44 responses: 18 from NW, nine from NE and 12 from Y&H. Tackling counterfeit tobacco was rated within the top three priorities by 80% of respondents, other activities relating to illicit tobacco such as fag houses, smuggling, van/car illicit sales, organised crime linked to illicit were lower down the priority list for most respondents. Sixty percent of respondents reported that they had dedicated resources, the majority being funded through PCTs for specific roles of projects. When asked to rate a series of areas that they would like to see improved for future effectiveness of tobacco control activities, intelligence, funding and resources were seen as the most important areas for improvement. Five key recommendations were provided: improved inter-agency intelligence sharing; dedicated funding for tobacco control activities; increased partnership working; educating and informing the public; providing training for front line staff.

Reducing demand

The proportion of people using illicit tobacco is an indicator of demand but also reflects the availability and accessibility of illicit tobacco within a locality (emphasising the interrelationship between demand and supply measures). Measures of demand are therefore also to be treated with some caution and for this reason we recommended that a number of different indicators are used. In addition, given the Programme aim to increase the perception that the sale of illicit tobacco is a criminal activity, sources other than self-report should be used in case the campaign influenced people's willingness to self report illicit tobacco use. In this case, the only other source that could be used are data from HMRC estimating the market share of illicit tobacco use.

The main source of demand indicators that we used was the NEMS surveys and these are described in some detail below.

NEMS Market research study 2009

Objectives

Surveys of smoking behaviour to capture prevalence, type of tobacco used, source of tobacco, attitudes to illicit supply, incentives to stop using illicit supply and/or assist with measures to prevent others from using, and suggested channels and approaches for communication on illicit supply.

Methods

Telephone and street interviews, using stratified telephone number sampling (from published lists and random generation) and quota interview sampling, to recruit a minimum of 120 participants aged 14 and over from each of the 49 Local Authority Trading Standards Areas in the study regions (North West, North East, Yorkshire & Humberside), carried out in June and July 2009.

Results³⁵

A total of 6084 interviews were conducted. Overall smoking prevalence was 23% (2009 national average 21%). In the past year, 85% of smokers had purchased cigarettes, 21% hand rolling tobacco (HRT) and 6% both. Approximately 10% of tobacco was purchased duty free and brought home from abroad by smokers themselves (27% of smokers) or by others (32%). Over half of all smokers (54%) were aware of, and 20% purchased illicit tobacco other than duty-free, with illicit tobacco typically accounting for about a third (36%) of their total consumption. Around 19% of illicit tobacco comprised foreign brands not normally found in the UK, and 25% was considered by the purchaser to be counterfeit or fake. Awareness and purchase of illicit tobacco was most common in the North East region.

Those who bought illicit tobacco came from all demographic groups, but included a high proportion of males from lower socio-economic groups, and young smokers (aged 14-17). Illicit tobacco users tended to be heavier smokers (by 2 cigarettes/day); and 64% reported that the low price of illicit tobacco made it possible for them to continue smoking. Price and convenience of supply were the main motivators for purchase. Sellers of illicit tobacco tended to be young, unskilled or unemployed males, individually making around £3000-£3500 per year from illicit sales.

Based on responses to four attitude statements, 57% of the population were classified as

“very uncomfortable” with the sale and purchase of illicit tobacco, 27% said that they would be likely to report someone they suspected of selling illicit tobacco, but this increased to 76% if sale was to children. Classification by attitude responses identified six groups (Table), of which three (mothers against cheap, concerned parents and conscious indifferents) were estimated to account for 38% of all illicit tobacco purchase and to be key target groups for intervention.

Cluster Group	General Attitude	Demographic Skewness
1 – Cheap Champions	Largely favourable towards cheap tobacco. In particular see them as ‘no big deal’ and see no connection with criminality	Male 14-34 DE Unemployed
2 – Concerned Parents	Perceive cheap cigarettes as harmful and a particular danger to children	14-34 C With children
3 – Unconcerned	See no harm to anyone in cheap tobacco, but some reservations on criminality	45-54 DE Unemployed
4 – Mothers Against Cheap	Show wide concern for all issues around cheap tobacco	Female 35-54 AB
5 – Conscious Indifferents	Perceive the harm and criminality, but still see buying cheap tobacco as ‘no big deal’	Male 55+ C2DE Retired
6 – Child Insensitive Singles	An ‘average’ group, except do not see cheap cigarettes as a danger to children	35-44 AB Working

Nearly two-thirds (63%) of adults agreed with the statement ‘*Illicit tobacco brings crime into the local community*’, 46% of smokers and 31% of purchasers of cheap tobacco.

The main sources of advice likely to change smoking behaviour were doctors, and close family or friends.

NEMS Market research study 2011

Objective

The 2011 survey was carried out with the same objectives as in 2009, and for comparison with the 2009 data.

Methods

Methods were largely the same as in the 2009 survey, with the following exceptions: that Yorkshire & Humberside region was not included in 2011 because funding was not available as explained earlier; sampling was weighted to include a relatively high proportion of smokers; and in line with changes in ethics policy, interviews with 14-15 year-olds were

³⁵ www.illicittobacconorth.org

carried out through sampling in local schools and youth clubs with parental/guardian consent, rather than street interviews. The sample therefore included 36 areas also studied in 2009. It was carried out in March/April 2011.

Results

Interviews were carried out in 4,111 adults (aged 16 and over) and 358 14-15 year olds. Overall smoking prevalence was 22% (2 percentage points lower than in the same regions in 2009). The proportion of smokers who had brought back, or had others bring back, duty-free cigarettes from abroad fell substantially, to 27% and 22% respectively. The proportion of smokers purchasing illicit tobacco also fell, from 20% to 18% and particularly among young smokers, as did the total market share of illicit tobacco, from 9.4% to 8.8%; this fall was more marked in the North East than in the North West. Sources of illicit supply were similar in the two surveys, with the exception of shops, which increased from 8 to 14% of total. There was a reduction in the proportion of counterfeit, and an increase in the number of foreign brands. Much illicit purchasing was opportunistic.

Awareness of illicit tobacco increased from 54% to 69%. The proportion of smokers who were comfortable with illicit fell however, by 4 percentage points to 15%, with similar reductions recorded in both regions. The proportion 'very uncomfortable' with illicit tobacco rose by four percentage points to 59%. The proportion of people reporting that they were likely to report someone selling illicit tobacco increased by around 3 percentage points to 29%, 76% again reporting that they would report sale to children.

Among the 14-15 year-old sample, smoking prevalence fell from 32% in 2009 to 19% in 2011, and average consumption from 11 to 4 cigarettes per day. However, the proportion of smokers ever purchasing illicit tobacco increased from 31% to 46%. Over a third (34%) of those purchasing illicit tobacco did so from a private address (fag house), a significant increase on the 15% in 2009. Purchase prevalence in shops remained similar for this age group (22% in 2009 and 25% in 2011). The proportion of this age group that is very uncomfortable with illicit purchase increased from 34% to 44%.

In support of the above findings, stakeholders believed that the programme had significantly raised awareness of IT among community members. It was suggested that the Programme had gone some way in changing individuals' attitudes about IT and had moved people away from prior beliefs relating to how interest around the matter was motivated by monetary factors, namely financial loss in terms of duty and tax evasion. Instead, participants spoke about how communities were becoming increasingly aware of the impact of IT on their children and the wider implications associated with such activity, such as the crime that IT activity perpetuated. Increased awareness of illicit tobacco and problems associated with illicit tobacco usage was identified in the stakeholder interviews as one of the main legacies of the Programme:

So I think that will be the main legacy, actually people thinking yes, this is a problem, we don't want these gangs in here, these gangs which are involved in illicit tobacco, maybe involved in drugs and other criminal activities as well, so I think that would be probably the highlight really. Just people being more vigilant and aware and willing to call, hopefully [Health]

A great deal of awareness raising, very successful awareness raising, particularly relating to the contribution to health and how tobacco crime fits in with other criminality' [Local enforcement agency]

Further analysis of NEMS data

In 2011, NEMS were commissioned by the Programme to synthesise and appraise the different research projects that they had conducted on illicit tobacco. The data included regional studies in seven of the nine English regions and the two pilot evaluations – this amounted to over 20K interviews; over 11K with smokers and over 2.5K with illicit tobacco buyers. The data suggested that the availability of illicit tobacco (using reports of visibility and/or offers) differed markedly between the regions and that there was a strong link between this and the amount of illicit tobacco consumed. Among smokers, those in the NE and NW stood out as being the most uncomfortable with the issue of illicit tobacco and this had increased over the two years of study, with the proportion being ‘very uncomfortable’ increasing by 9% in both regions. Awareness of illicit tobacco was also highest in the NW and NE (using 2011 data for these regions) and in these regions there were also much higher proportions of people who recalled seeing, heard or read anything about IT; however likelihood of reporting someone was lowest in these regions despite increasing during the period of study.

NEMS used a range of models to quantify the components of change in the North of England over the two years of study. Their analysis suggested that for the NW a 2% decrease in the proportion of smokers buying illicit could be attributed to the shift in comfort whilst the small decline in the average illicit proportion among buyers could be attributed to a small reduction in availability. The larger reductions recorded in the NE could be attributed to reductions in both comfort and availability. Radio and local press advertising proved effective in increasing opportunities to see, hear or read about the campaign. The authors argued that the ‘causal impact of shifting attitudes is irrefutable’. We agree that the results appear promising but attributing causality is difficult without randomised trials. Hence we believe it is important to triangulate these data with other sources.

HMRC and NEMS estimates of illicit tobacco market share

The survey combined the prevalence of buyers of illicit tobacco with measures of how much of their tobacco use was illicit to calculate a share of the tobacco market which was accounted for by illicit tobacco. As discussed above, this estimate decreased slightly over the two years (estimated market share 9.4% in 2009, 8.8% in 2011; in the NW, the figures remained similar: 7.2% in 2009 and 7.6% in 2011; whereas the market share dropped by 2.5% in the NE where levels were overall much higher: 15.3% in 2009 to 12.8% in 2011).

Estimates for the HMRC figures for illicit tobacco market share for manufactured cigarettes and roll-your-own are given below. As can be seen the HMRC estimates are considerably higher overall – slightly higher for manufactured cigarettes but very much higher for roll-your-own. NEMS and HMRC use very different methods for calculating the illicit market share. HMRC has suggested that there is a risk of subjectivity in the responses to questions asking individuals to report their illicit consumption and combined with a tendency for individuals to under-report their overall tobacco consumption, has suggested that may contribute to under-reporting of illicit consumption in the surveys.

Overall, both the HMRC and NEMS data show a decrease in the market share for IT during the evaluation behavior. The NEMS report shows increasing awareness of illicit tobacco and some positive trends emerging in public attitudes and behavior in the North of England region.

Table 3³⁶

	2005-6	2006-7	2007-8	2008-9	2009-10
Manufactured cigarettes	16%	15%	14%	13%	10%
Roll-your-own	60%	56%	50%	50%	46%

Trading Standards young people's survey in the North West

Trading Standards North West interviewed 13,902 young people in the region in 2009 and showed that illicit tobacco is a significant source for young people. Just over a fifth (22%) reported being smokers. This survey found that nearly one in five bought from street sellers, vans, neighbours or private houses; 60% had bought packs of cigarettes with health warnings in a foreign language, up to 50% reported buying fake cigarettes. There had been a significant fall since the 2007 survey in the proportion purchasing cigarettes from off-licences and newsagents, which was attributed to the introduction of the law banning sales to under 18s. However, those surveyed still cited such shops as one of their main sources of tobacco.

Between January and April 2011, this survey was repeated with a sample of 13,051 14 -17 year olds from across the North West representing children from 21 North West Local Authorities. Although there are some shortcomings with the way the survey was carried out, the size of the sample enables comparisons to be made with the previous survey. The proportion of 14-17 year olds who identified themselves as smokers had decreased by 4% since 2009 (18%) and there had been an 8% increase in the proportion of young people claiming to have never tried smoking (54% vs 46% in 2009). Consistent with the previous survey most purchased their cigarettes from off licences or newsagents although there had been a decline in reported purchases from these sources. The sale of fake cigarettes had decreased since 2009 (28% vs 32% in 2009) as had the sale of cigarettes with foreign health warnings (50% vs 60% in 2009).

These surveys whilst not representative random samples do indicate a reduction in purchases of illicit tobacco and promising reductions in smoking among young people.

Discussion and Conclusions

Despite the recession and significant disruption and cuts to staff and resources, this pilot Programme implemented a variety of activities in accordance with its Action Plan. It should be noted however that this innovative and unique pilot Programme, tackling a complex region-wide issue, is still at a relatively early stage of implementation and therefore this evaluation should be seen in that context.

Stakeholder interviews showed that partnerships across local, regional and national enforcement as well as health and marketing agencies had been developed. During the lifetime of the evaluation period, the 'Closer Working' Protocol was being negotiated and it

³⁶ HMRC: <http://www.hmrc.gov.uk/stats/mtg-2011.pdf>

was not signed until June 2011. During this period however, informal relationships developed which enabled many joint operations to take place.

Stakeholders identified that the programme had increased awareness of IT among relevant agencies (both locally and nationally) but had also increased awareness of IT among the target audience and impacted favourably on behaviours indicating a reduction in demand for IT which was likely to be attributable to the Programme. This was borne out by the NEMS market research data. This impact was thought to be sustained at least in the short term:

And I do genuinely believe that if we did disappear tomorrow, that the level of priority this would have at local and regional level is significantly higher than it was previously. [Health]

I think yeah, definitely sustainable impact in terms of people's awareness and people not just the public but us in public health and policy as well. [External health]

Available indicators also show an increase in intelligence reports to the hotlines during the campaign period.

In terms of moving forward, there were a few instances where stakeholders felt that altering beliefs and attitudes towards IT would remain a challenge and that altering the social norms of individuals and communities most likely to use IT would continue to be a challenge.

I think what you can do is, you can have an impact, you're much more likely to be able to have an impact when the smuggled market share has got down to a certain point, at a sort of tipping point where it become denormalised. And we saw that happen, in a very different way, in a way, on smoking in pubs and bars. Now, I don't think we're at that tipping point in illicit tobacco, and it's much more segmented as well, so buying illicit tobacco, you know, people like you and me, if we were still smoking, we're unlikely to buy illicit tobacco. We might, but we're unlikely to do, whereas if you're poor or young, you're much more likely to and, therefore, it's segmented as a market, and that makes it more difficult to change attitudes as well, because you're talking about trying to change attitudes within groups who may see themselves as marginalised anyway and not part of mainstream society... [External NGO]

Indeed, several people voiced the need for continued coordination and funding to keep the momentum going and continue to impact on joint operations, intelligence sharing and influencing attitudes and behaviour.

If the Programme had been stopped today, obviously there's always a turnover in personnel and eventually you would lose pretty much all the benefits that you had accrued through bringing people together, putting in place some of the personal contacts to this type of work and the further you went on in time, the less impact clearly the Programme would have so I think it would possibly very quickly, you would lose a lot of the benefits and any long term impact you might have generated from the Programme. [External NGO]

If it goes, you know and things were to stop, I think there would still be small pockets of activity taking place but in terms of pulling it all together, that just wouldn't happen, there wouldn't be even the person there and it would very quickly fall off the radar, that's sort of my view on you know how things are at the moment. [Local enforcement]

So as far as I can see the biggest threat is if there's lack of funding to take this forward. [Health]

In addition, the continuing restructuring of public health will also require vigilance, if the partnerships that have been set up are to be maintained:

If, in the transition of public health to local authorities, if the activities in relation to illicit tobacco are embedded within the call of duties to Trading Standards then you know some of the work would continue and there would be some partnerships on a more informal basis that would continue but you know the formal arrangements that have been established, then no I don't think they would continue. [Local enforcement agency].

We're going to have, at the local level, a ring-fenced Public Health budget but my understanding is there will not be a ring-fenced tobacco control budget within the Public Health ring-fence and there's always a danger that people will go and put more emphasis on illicit alcohol or drugs or guns or all these other areas and I think that's the key, is how do we ensure that this remains a priority throughout every area of the country? I think that might be very difficult...I think just a lack of funding, a lack of momentum, a lack of marketing literature, materials and awareness could stop, I guess. [Health]

The sustainability of the Programme is therefore likely to rest on continued investment to enable: regional coordination; regular meetings of stakeholders to enable expertise and intelligence to be shared; a sustained social marketing campaign; and progress to be monitored. In moving forward, the Programme should continue to assess consumer views. As the recession continues, striking the right balance between avoiding a focus on tax losses and relative health risks, whilst concentrating on criminality and the influence of IT on children will require vigilance. The Programme trialled a new approach to this which appears to have had resonance with the target audience and the materials have been utilised and further developed by other pilot projects in other areas.

Even though several threats were outlined that made it difficult to envisage the future of the Programme, most participants recognised, as stated above, that it would leave a legacy, come what may. In terms of the Programme itself, participants felt that it had had a positive impact, in general. More detailed discussions indicated that the Programme seemed to have improved working relationships, for example between HMRC and Trading Standards. The most commonly reported legacy of the Programme was that it had attracted the attention of other regions and nations and that it had been mentioned in the *Tobacco Control Plan* and the *HMRC Tackling Tobacco Smuggling Strategy Together*. Moreover, examples were provided about how the North of England Programme was and should be used as a blueprint:

I would maybe expect – and it has certainly been the case to date – that they would share the learning from what's been going on in the North of England, that they would make materials available, would be willing to share pieces of work which they have done. So we've been able to adapt the action plan, we've adapted the usage and attitudes survey. I don't know about the materials for the advertising campaign because we're not there yet so I haven't had to ask them about those yet. But certainly we are able to use their learning to develop our own programme which I say has been working well; to date we've been doing that. [External health]

In conclusion, illicit tobacco remains a serious and significant 'upstream' problem affecting health inequalities in countries worldwide. There is also evidence of continued collusion in illicit tobacco by the tobacco industry³⁷. The Programme offers a blueprint for regional initiatives to reduce both the supply and demand for illicit tobacco, and is an exemplar of partnership working. It has shown great promise in terms of finding impactful consumer messages about the harmfulness of IT to communities, raising awareness of the issue, increasing intelligence and changing behaviours and therefore deserves to be widely disseminated.

Acknowledgements

We would like to express our sincere gratitude to all members of the North of England Tackling Illicit Tobacco for Better Health Programme who participated in the Stakeholder Interviews, informal ethnographic interviews and who tolerated and responded to our various questions for information. More broadly, we would like to extend our thanks to the various professionals who shared their opinions and expertise through which we acquired the crucial information for our report. We are grateful to HMRC for the Customs Hotline data, to Crimestoppers for sharing their data and the local Trading Standards representatives and the Local Government Association for provision of data from the National Tobacco Control Survey for England 2011.

³⁷ Organized Crime and Corruption Reporting Project (OCCRP) report: Big trouble at Big Tobacco is available at: <http://www.reportingproject.net/>