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Your Ref:
My Ref: RS/GB/JS
Contact: Gilbert Wilson
Telephone: 0141 840 3102
Fax: 0141 840 3233
E-mail: Gilbert.Wilson/Environmental_Services@renfrewshire.gov.uk
Web Site: <http://www.renfrewshire.gov.uk>
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John Glen
Scottish Executive Health Department
Tobacco Control Division
3E (R)
St Andrew's House
Regent Road
EDINBURGH
EH1 3DG

Dear Colleague

**CONSULTATION ON SMOKING PREVENTION WORKING GROUP REPORT:
TOWARDS A FUTURE WITHOUT TOBACCO**

I refer to your letter of 7 December, 2006, and the papers which accompanied it, and the invitation to provide comments in the above consultation on the Smoking Prevention Working Group's (SPWG) report "Towards a Future Without Tobacco". Our comments follow and reflect the views of the Council's inter-departmental Joint Health Improvement Group, especially from a health improvement perspective.

In general terms, the report is welcomed, as are the recommendations within it. These represent a comprehensive package of measures which it is hoped would help to reduce the numbers of people smoking in Scotland. We would make the following observations on a number of specific recommendations.

Recommendation 1 - Targets

The proposed new targets differentiate between 13 and 15 year olds as opposed to the present targets for 12 to 15 year olds. They also differentiate between boys and girls. These changes appear to be sensible given the marked differences in smoking rates between 13 and 15 year olds and the variations between boys and girls.

However, we have a concern in relation to the targets themselves. The new targets for 15 year old boys and girls for 2010 (12% and 20% respectively) are both higher than the targets are at present (11% for both sexes for 12-15 year olds). These new targets may be considered to be more realistic but we think them a backward step and feel that more challenging targets need to be set.



Recommendation 2 - Targets

The introduction of a specific target for the 16-24 age group is welcomed given the relatively high smoking rates in this age group. As with the under 16's, it is important that efforts are made to prevent this age group taking up smoking or continuing to smoke if they have started. As suggested in Chapter 6 of the report, it is important that universities and further education institutions are supported and encouraged to play a bigger part in discouraging young people from smoking.

Recommendation 3 - Research

It is important that effective systems are in place in order to allow performance against the range of targets specified in the report, to be regularly monitored and reported upon. The Scottish Executive should, therefore, ensure that these systems are established and that information is regularly available at a meaningful level, i.e. for each Community Planning Partnership and Community Health Partnership.

Recommendation 5 and 6 - Accessibility and Retailing

The figures on where young people are accessing tobacco highlight the need for greater and concerted efforts to be made in relation to the enforcement of the prevailing age of purchase. As suggested, these should include the use of proof of age; active test purchasing and the prosecution of heavy fines. The suggestion of new negative licensing arrangements also appears sensible in the light of the evidence of retailers continuing to flout the law.

The education of retailers is also an important strand in these types of measures and has been an approach adopted within Renfrewshire as part of a recent multi agency Health Promoting Retailers initiative. This involved the production and dissemination of good practice guidelines on the sale of age restricted products and the delivery of associated training to small and medium sized retailers.

Recommendation 7 - Raising the age restriction on the sale of cigarettes and tobacco products

This is the subject of a separate consultation to which we are making a positive response. We agree that the age of purchase of tobacco products should be raised to 18 and comments upon this proposal are contained in the separate consultation on the draft order under the Smoking Health and Social Care (Scotland) Act, 2005.

Recommendation 18 - The Media

Smoking continues to be featured in popular television shows such as soaps, which arguably has the effect of continuing to normalise and to an extent, glamourise smoking. This is an area which the government should address at a national level.

Recommendation 20 – Discouraging smoking by young people

Evidence clearly indicates that smoking is a particular problem amongst females, 16-24 year olds and disadvantaged groups. It is important that any future media campaigns recognise the differences between these target audiences and are tailored specifically to them.

Recommendation 21 – Education

The suggestions for strategic reassessment and reform of education on tobacco, alcohol and other drugs in Scottish schools is welcomed and should provide schools with useful advice and guidance. It is important, however, that schools are adequately resourced to take forward our recommendations which arise from this review. This will include any regular communication with parents as is suggested in relation to tobacco, alcohol and drugs.

Recommendation 27 – Health inequalities and smoking

It is important that steps are taken to address the health inequalities evident in the disproportionately high smoking rates in deprived communities. The suggestion to commission research to test ways of protecting and dissuading young people in such areas from starting to smoke is, therefore, welcomed.

Our comments on these recommendations should be seen in context and not viewed in isolation. We are particularly pleased that the need for parental involvement is recognised in much that is proposed and we see strong clear links to the approach that we are taking with health promoting schools.

I trust that these comments are of assistance and I will be pleased to assist you with further information if you require it.

Yours faithfully,



Gilbert Wilson
Head of Regulatory Services