

Smith L (Lee-Anne)

02-29

From: Glen J (John)
Sent: 28 February 2007 10:14
To: Smith L (Lee-Anne)
Subject: FW: Towards a future without tobacco - consultation response..
Importance: High

JOHN GLEN
Tobacco Control Team
Public Health & Substance Misuse Division
Area 3 E
St Andrew's House
EDINBURGH
EH1 3DG

-----Original Message-----

From: Bridget Doogan [mailto:B.Doogan@LTScotland.org.uk]
Sent: 28 February 2007 09:21
To: Glen J (John)
Cc: LD-Health Promoting Schools Unit (HPSU)
Subject: Towards a future without tobacco - consultation response.
Importance: High

This email has been received from an external party and
has been swept for the presence of computer viruses.

Dear John.

Please find attached consultation response which is self explanatory.

Best wishes,

Bridget Doogan

PLEASE NOTE: THE ABOVE MESSAGE WAS RECEIVED FROM THE INTERNET.
On entering the GSI, this email was scanned for viruses by the Government Secure Intranet (GSI) virus scanning service supplied exclusively by Cable & Wireless in partnership with MessageLabs. In case of problems, please call your organisational IT Helpdesk.
The MessageLabs Anti Virus Service is the first managed service to achieve the CSIA Claims Tested Mark (CCTM Certificate Number 2006/04/0007), the UK Government quality mark initiative for information security products and services. For more information about this please visit www.cctmark.gov.uk

TOWARDS A FUTURE WITHOUT TOBACCO

The report of the Smoking Prevention Working Group

The comments below are views expressed by members of the National Health Promoting Schools Unit at a network meeting held on 23rd February 2007. The network is made up of Quality Improvement Officers (or their equivalent) from all local councils and Senior Health Promotion specialists from all NHS boards. The members have strategic responsibility for Health Promoting Schools at Council or NHS board level. The network heard a presentation by Anne Kerr of Health Scotland and then took a short time to discuss the report. This discussion was held as concern had been raised regarding lack of representation of education colleagues, by a network member who had attended one of the consultation events.

The comments, in the main, will apply to the recommendations which apply to education 3-18 i.e. 6.3-6.8 although there was some discussion on the raising of purchase age. I hope they are helpful.

THE COMMENTS

- **RAISING PURCHASE AGE:** parity with alcohol was seen to be a good thing however questions were raised about the current 16-17 year olds who have started smoking - if change happens will they be supported? Also it needs to be recognised that many young people start smoking much earlier than 16 - it is not usually based on a 'oh I'm 16 now I can start smoking' basis. Some members thought programmes for primary schools needed beefing up while others thought scare-mongering works with younger children (this view was not the view of all in the room)
- **TONE OF THE DOCUMENT:** This was a concern as it was felt it has the feeling of being 'done to' young people as opposed to 'done with' which would be the participative approach supported by Health Promoting Schools. It was felt that much more could be done to provide Young People with the skills and knowledge to support and encourage each other and younger pupils. Experience in the room suggests that they will listen far more readily to peers than to adults. It was felt that a bottom up approach with full involvement of young people would be effective.

- There needs to be a holistic social marketing approach.
- Mental and Emotional health and well-being should be seen as the underpinning concept for approaches to smoking prevention. There is a need for a fully integrated approach - not a single issue approach. It is not about simply providing services around smoking. It should be about offering services where young people can come and talk about a range of issues e.g. walk the Talk, counselling in schools...
- There needs to be a targeted approach for the most vulnerable children and young people.
- School buses are a problem - how does the driver stop YP smoking on bus while his attention is on the road? Supervision on school transport?
- The report seems to have a lack of imagination and innovation - need to be thinking out of the box - and there **MUST** be links made with A Curriculum for Excellence which will be the vehicle for all Learning and Teaching in schools around Health and Wellbeing - no separate programmes please - let's make the links before it hits schools. There is a need for all those who want schools to 'do' their agenda to think about how this impacts on schools. Schools are willing to play their part but cannot be constantly 'landed' with solving the ills of society.
- **SCAREY PICTURES:** there was a debate about whether showing pictures of the health effects of smoking e.g. a diseased lung etc. were effective. There was concern that we would be adding another layer of stress on ch and yp who may then worry more about parents/grandparents who smoke. It was also felt however that as people learn and are affected in different ways all methods should be considered. It is also down to the sensitivity and training of the teacher.
- Need to look at other effects of the smoking ban e.g. more smoking in the home? 'Smirting'.

- There needs to be links with sexual health and relationships - yp see the connections between a range of risk taking behaviours - they do not box things in...
- It was generally felt that there was a lack of representation from education staff both on the working party and at the consultation events and this is reflected in the language used in the report e.g. 6.8 'such pupils'... It was also felt that the report does not reflect work already going on in schools.

Comments collated by Bridget Doogan Scottish Health Promoting Schools Unit who facilitated the discussion.