

**REPORT TO: POLICY AND RESOURCES COMMITTEE - 14 JUNE 2004**  
**REPORT ON: REDUCING SMOKING IN CHILDREN AND YOUNG PEOPLE**  
**REPORT BY: ASSISTANT CHIEF EXECUTIVE (COMMUNITY PLANNING)**  
**REPORT NO: REPORT NO 439-2004**

## **1 PURPOSE OF REPORT**

To advise the Council of Smoking Prevention and Cessation Initiatives targeting children and young people. These initiatives are put forward as Quality of Life projects to improve opportunities for children and young people and maximise health gain with local authority resources (Report No 352-2003). These projects will meet one of the Health & Care objectives highlighted in the Dundee City Council Plan 2003-2007 (Report No 685-2003).

## **2 RECOMMENDATIONS**

2.1 It is recommended that the Council:

- approve the Smoking Prevention and Cessation Initiative which progresses Local Authority corporate priorities and joint health improvement with partner organisations and health alliances
- remits the Assistant Chief Executive (Community Planning) to produce an update report in June 2005 stating progress made in achieving agreed targets with partner organisations and setting output targets for Phase 2 of Cessation Initiative

## **3 FINANCIAL IMPLICATIONS**

The additional cost of introducing these initiatives will be £75,000 in each of the years 2004/05 and 2005/06. Revenue funding is available from Quality of Life monies which have been approved for joint health work with young people for the period 2004-2006.

## **4 LOCAL AGENDA 21 IMPLICATIONS**

Addressing health inequalities and improving public health is consistent with the theme or protecting health and preventing illness.

The report is consistent with the Council's Anti-Poverty Strategy, in particular through delivering services that help reduce health inequalities.

## **5 EQUAL OPPORTUNITIES IMPLICATIONS**

The report highlights the importance of local authorities and their partners continuing to address inequalities in health.

The proposals also reflect the priorities and commitment of the Council to equal opportunities.

## 6 BACKGROUND

### 6.1 Smoking Prevention and Cessation Initiatives Targeting Young People

6.1.1 In December 2002, the Scottish Executive allocated Quality of Life funding to Dundee City Council spread over three financial years for the period 2003-2006. The aim of the funding is to:

- Improve the local environment, and
- Increase opportunities for children and young people

In June 2003, a special meeting of the Policy & Resources Committee pledged £200,000 of Quality of Life monies for joint health improvement work targeting young people. Within that context, the proposed Smoking Prevention and Cessation Initiatives meet the above aim of increasing opportunities for children and young people.

6.1.2 In 2003, the Chief Medical Officer for Scotland stated that smoking remains the biggest single cause of preventable illness and premature death nationally. Evidence shows that smoking lowers life expectancy, reduces quality of life through heart disease, respiratory problems and a variety of other conditions. There is also a recognised association between poverty, social exclusion and smoking, particularly smoking among children and young people. Within this context, there is a national drive to focus on the period of teenage transition, the important period during which attitudes and habits can be framed for life.

6.1.3 Locally, the Tayside Health Inequalities Strategy highlighted that more than half of the city's children live in areas of high deprivation. Given the recognised association between poverty, social exclusion and smoking, the Dundee City Council Plan 2003/07 has targeted reducing smoking in young people as a corporate objective. This is reinforced in the Dundee Joint Health Improvement Plan 2004/05 where smoking is an agreed priority. In addition, the NHS Tayside Health Improvement Committee has endorsed targeting smoking among young people as a health improvement priority.

### 6.2 Smoking Prevention Initiative

In a major report in 2003, 'Reducing Smoking and Tobacco Related Harm in Scotland', NHS Health Scotland recommended among other things a more intensive phased approach to smoking prevention at school. Within this context, a peer-led smoking prevention initiative has been developed by Dundee City Council and Tayside NHS Board. Available evidence supports the effectiveness of a peer education approach as this draws on the credibility that young people have with their peers.

6.2.2 In Dundee since 2002, a partnership involving Council departments and Tayside Police has been delivering a peer education project focusing on alcohol and drug misuse. This project has supported and trained S2 pupils from Morgan and Lawside Academies who in turn have delivered a programme to P7 pupils in their respective feeder primary schools. The project provides young people with the opportunity to increase their knowledge of drugs and related issues as well as equipping them with the skills to deal with different situations. Large numbers of young people have volunteered for the project and evaluation of the process in August 2003 has highlighted how highly effective this method of working can be.

6.2.3 The proposed peer education initiative targeting smoking prevention will draw on the experience and build on the work of the current peer-led project targeting alcohol and

drug misuse. Within this context, the smoking prevention project will target Morgan and Lawside Academies and their related cluster primary schools:

<b>Secondary School</b>	<b>Primary Cluster Schools</b>
Morgan Academy	Cleington, Dens Road, Glebelands
Lawside Academy	St Clement's, St Columba's, St Fergus', St Margaret's

These schools are being targeted because the smoking prevention initiative will deliver a range of specific smoking and lifestyle interventions that will be integrated within the existing process of peer education in these schools. This approach will add value by offering additional opportunities for young people through combined developments that would not be possible if smoking prevention was a stand alone project.

In addition, it is proposed to work with staff in Child and Family Centres targeting 8-12 year olds in a range of after-school activities. Targeting of Child and Family Centres is also likely to increase the involvement of children or young people who may be vulnerable or 'looked-after' by the Local Authority. Other community venues will also be targeted via health roadshows. The initiative will be delivered over two years, 2004-2006 and evaluation will be developed jointly with Tayside NHS Board.

6.2.4 The new smoking prevention proposals to be integrated with existing peer education process are:

- S3 Peer Education trained to train S1's
- S1's trained by staff and S3's to deliver smoking and lifestyle sessions to P6
- P6's receive sessions focussing on smoking and lifestyle issues
- S3 Peer Educators deliver smoking and lifestyle programmes to young people in Child and Family Centres
- Combination of smoking prevention and existing peer education process to deliver Smoking Prevention Healthy Roadshows across Dundee

Over year one it is anticipated the following numbers of children will be involved:

<b>Groups</b>	<b>Numbers</b>
S3	20 recipients and trainers (out of school time)
S1	40 recipients and trainers (out of school time)
P6	370 recipients (approx)
Child & Family Centres (8-12 yrs)	10 recipients per session (6 sessions)
Community based events	6 Health Roadshows

6.2.5 The cost of the project is ascertained to be £75,000 over two years for 2004-2006. The breakdown of costs for the project are:

	(1 year)	Total Costs
1 full-time Development Worker	(£27,000)	£54,000
Training in partner organisations	(£1,000)	£2,000
Admin, resource development, sessional activity, project overheads	(£9,500)	£19,000
<b>Total</b>	<b>(£37,500)</b>	<b>£75,000</b>

### 6.3 Smoking Cessation Initiative

6.3.1 NHS Health Scotland also highlight in their report 'Reducing Smoking and Tobacco-Related Harm in Scotland' that around 25% of girls and 16% of boys are regular smokers by the time they are sixteen. The report also states that many young people become addicted to cigarettes within weeks of starting to smoke and find it difficult to stop. Nationally children and young people are identified as a key target group, yet NHS Health Scotland acknowledge that currently there are no evidence-based interventions effectively tackling smoking cessation among children and young people. In 2003, the Scottish Executive funded eight different smoking cessation projects across Scotland to establish a national evidence base.

6.3.2 Locally, Dundee City Council and NHS Tayside have come together in developing a project that will actively address smoking cessation among children and young people in Dundee. This initiative has been informed by joint working and experience of working with young people in the city through the Better Neighbourhood Services Fund, Xplore Social Inclusion Partnership and The Corner. This project aims to:

- target young people in the priority age range of 14-18 years
- involve young people in the development of resources, publicity materials and the ongoing evaluation
- support young people to deal with pressures from peers, family and media and promote alternative lifestyles that will improve health, confidence and self-esteem
- support low cost alternative activities for young people to reduce/stop smoking e.g. alternative therapies, physical activity sessions
- provide multi-disciplinary smoking cessation training for professionals working with young people
- develop a referral process involving youth workers, social workers, school nurses, GP practices, teachers and others as appropriate. Young people will also be able to self refer
- explore options with NHS Tayside of developing a referral process for young people regarding Nicotine Replacement Therapy

6.3.3 The initiative will be delivered in two phases over two years. In the first phase, four models of delivery will be piloted, monitored and evaluated. The most effective

interventions will then be identified and developed into phase two of the project. An important part of the undertaking is the involvement of young people in the design and evaluation of the different models of delivery. Their input is vital in developing intervention that will be effective.

The four models of delivery and target groups of young people are:

#### **Model 1**

Target Group	Young women aged 16-18 years who have babies/young children
Number of Session	One 2 hr session per week for 6 weeks
Number of Participants	6
Routes of referral	SAYF Project (Support and Advice for Young Families)
Venue	Church Hall
Facilitators	Cessation Worker, SAYF Worker

#### **Model 2**

Target Group	Young people aged 14-16 years
Number of Session	One 2 hr session per week for 8 weeks
Number of Participants	10
Routes of referral	Xplore Social Inclusion Partnership and BNSF Initiatives
Venue	Community Based
Facilitators	Cessation Worker plus Youth Worker (BNFS)

#### **Model 3**

Target Group	Young women aged 14-18 years (Priority target 3-9 months pregnant)
Number of Session	One 2 hr session per week for 4 weeks
Number of Participants	8
Routes of referral	The Corner, Primary Care, Council Departments
Venue	The Corner
Facilitators	Cessation Worker and Corner Staff Member

**Model 4**

Target Group	One peer group
Number of Session	One 2 hr session per week for 10 weeks
Number of Participants	Up to 10
Routes of referral	Communities Department Youth Work Staff
Venue	Centre for Youth facility
Facilitators	Cessation Worker and Youth Worker

6.3.4 The cost of the project is identified as £75,000 over two years for 2004-2006. The breakdown of costs for the project are:

	(1 year)	Total Costs
1 full-time Cessation Worker	(£27,000)	£54,000
Cessation training in partner organisation	(£1,000)	£2,000
Admin, resource development, sessional activity, creche, low-cost incentives for young people, project overheads	(£9,500)	£19,000
<b>Total</b>	<b>(£37,500)</b>	<b>£75,000</b>

**7 CONSULTATION**

The Directors of Education, Social Work and the Head of Communities have been consulted in the preparation of this report.

**8 BACKGROUND PAPERS**

Reducing Smoking and Tobacco-Related Harm - NHS Health Scotland and ASH Scotland 2003

Tayside Health Inequalities Strategy - NHS Tayside 2003

Dundee City Council Plan 2003-2007

Dundee Joint Health Improvement Plan - Dundee Community Planning Partnership 2004-2005

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