

## **Smoke-free Bolton Strategy: One year on from the introduction of smoke-free legislation.**

**Report for Health Overview and Scrutiny committee, 4<sup>th</sup> November, 2008.**

### **Introduction**

This report sets the response to the smoke-free legislation introduced on 1<sup>st</sup> July, 2007 in the context of our local Smoke-free Strategy – ‘Making Smoking History in Bolton’. It highlights the preliminary work which helped make the introduction of the legislation such a success, describes the impact of the legislation and the implementation of the strategy and discusses what needs to happen next to reduce smoking prevalence and associated inequalities even further.

### **Background**

Bolton’s Smoke-free strategy ‘Making Smoking history in Bolton’ was launched in 2003 in recognition that reducing smoking prevalence was, and still is, the single most important factor in improving health and reducing health inequalities. At that time 29.6% of the adult population smoked compared to 27% nationally and there were huge differences in prevalence rates across the Borough reflecting areas of deprivation.

The strategy aims and objectives were:

Aims:

- To protect non-smokers from exposure to environmental tobacco smoke
- To reduce the prevalence of smoking among children and adults in the Borough.

Objectives:

- To increase the provision of smoke-free public places
- To provide effective stop smoking services to help people stop smoking
- To reduce illegal sales of tobacco products
- To develop and evidenced based tobacco education programme for children and young people

Most of the emphasis in the implementation of the strategy was placed on increasing the provision of smoke-free public places in response to the overwhelming evidence showing the health damaging effects of passive smoking by non-smokers and also the likely impact of smoke-free environments on stimulating adults to quit smoking and making it much less likely for young people to take up smoking. However the importance of the other strands of the strategy cannot be underestimated. The lack of effective support for those motivated to quit by the legislation and the availability of cheap sources of tobacco have the potential to undermine reduction in

prevalence rates particularly in more deprived areas.

In 2003, when the strategy was first launched, the health damaging effects of breathing in other people's smoke was hardly discussed, public awareness and concern was minimal and the thought of national legislation on the issue was inconceivable. Yet just four years later, national comprehensive legislation was introduced making it illegal to smoke in the majority of indoor public places with widespread public support and extremely high levels of compliance. This could not have happened without the local and national coordinated and concerted lobbying and awareness work that took place in the intervening period together with the significant support provided to workplaces to ensure their readiness to comply.

### **One year on from the legislation – where are we now?**

#### **Smoke-free Public Places**

##### **a) Environments covered by legislation**

In Bolton as in the rest of the country, levels of compliance with the new legislation have been very high.

A programme of proactive and reactive interventions has been carried out to determine compliance with the new legislation. Enforcement officers incorporated smoke-free checks into their existing work programmes. Additional officers funded by the Department of Health grant provided an additional resource to provide advice, support and to check compliance with local businesses.

In the year following the introduction of the legislation, over 2500 visits were made to check compliance. The majority of premises have been compliant for no smoking however officers identified almost a quarter of premises were not displaying the no smoking signage. Generally those premises not displaying the correct signage were already smoke free premises and were not aware they needed to display the signage, from 1<sup>st</sup> July 2007.

The vast majority of businesses have complied with the smokefree legislation. The former licensee of one licensed premises in Bolton Town Centre appeared before magistrates in January 2008 and was found guilty of failing to prevent smoking in a smoke free premises. The former licensee was fined £750 for four offences, £3,000, and the Council was awarded costs of £7,000. The premise has since been sold and is now fully compliant.

Officers have worked closely with representatives of Bolton Wanderers Football Club as they experienced some difficulties on match days. Joint operations have been carried out with the club's stewards, and Greater Manchester Police to ensure the compliance with the legislation.

A number of fixed penalty notices have also been issued to taxi drivers who have been found to be smoking in their vehicles.

In the first twelve months a total of 39 warnings have been given; 14 fixed penalty notices issued; one person convicted of smoking in a smoke free place; and one person convicted of failing to prevent smoking in a smoke free premises.

#### b) Environments not covered by legislation

One of the groups most susceptible to the effects of environmental tobacco smoke are children who are often most exposed in their own homes or in cars. In response, Bolton has developed a 'Smoke-free Homes' initiative which encourages householders, especially those with children living with them, to voluntarily make their home a smoke-free zone. To date over 1,000 households have signed up to the scheme.

#### Supporting people to quit

The Smoke-free legislation caused an increase in the number of people accessing the Stop Smoking Service during the period April – July 07. During this period 781 people accessed the service compared to 356 during the same period in the previous year, an increase of 119%. From this 685 people went on to be quit at four weeks compared to 499 the previous year, an increase of 37%. However, fairly quickly after the introduction of the legislation, the numbers accessing the service dropped to levels comparable to the previous year.

By the end of 2007-2008, there were 2320 four week quitters against a target of 2109, some 10% over the set target, this compares with the previous year where there were 2149 four week quitters 3% above the set target, this is a year on year increase of 171.

The experience this year is showing that number of people accessing the service is now comparable with 2006. There was a slight reduction in the percentage of people quitting during the first quarter of the year but this has now been addressed and quit rates for the service are now within the government set targets.

It is well known that although people from poorer socio-economic groups are just as likely to try and quit smoking as those from more affluent backgrounds, they are much less likely to be successful in their attempts. An equity audit of the Stop Smoking Service carried out in 2008 has however shown that there is now very little difference in success rates between areas in the different deprivation quintiles within Bolton.

#### Illegal sales

##### a) Under-age sales

A programme of test purchase exercises is under-taken each year by trading standards officers. New legislation in October, 2007 saw the age of legal sale increase from 16 to 18 years. Whilst compliance with legislation on under-age sales is generally good in retail outlets, young people's access to vending machines continues to be problematic

#### b) Sales of counterfeit and smuggled tobacco

Whilst there is no local intelligence on the size of this problem, evidence from other areas such as the North East and from HM Revenue & Customs suggest that there is a growing problem with access to cheap illicit forms of tobacco. Much of the action to address this is being taken at a national level and has been made the number one priority for HM Revenue & Customs.

Research undertaken in the North East suggest most people (usually on low incomes) who smoke illicit tobacco are unaware that it is counterfeit or smuggled and have a perception that smuggling tobacco is a bit of a 'Robin Hood crime'. Trade in illicit tobacco is however strongly linked to organised criminal gangs who also trade in drugs, guns and people.

#### Smoking education and prevention with young people

The Healthy Schools Programme continues to be the main vehicle through which smoking education and prevention work is delivered. Research has shown that schools which adopt the 'health promoting school' philosophy and have good teacher-pupil relationships have lower smoking take up rates. To achieve the National Healthy Schools Standard, schools must demonstrate that they are delivering a comprehensive programme of 'Personal, Social and Health Education' including Sex and Relationship Education (SRE) and Drug Education (including alcohol, tobacco and volatile substance abuse) which provides children and young people with the knowledge, understanding, skills and attitudes to make informed decisions about their lives.

Specifically in relation to smoking schools must ensure:

- The school is a smoke-free site (with the exception of the caretaker's house)
- Children, young people, staff, parents/carers and governors have been involved in the development and implementation of a smoke-free site
- The school is proactive in providing information and support for smokers to quit e.g. promoting access to smoking cessation classes

Obviously the smoke-free legislation has had a significant part to play in supporting schools to achieve the required standards for Healthy Schools Status and this was supported locally by the commissioning of a theatre – in –education production 'Whatever' which was delivered in secondary schools.

To date 82 schools in Bolton have achieved Healthy Schools status with all but 2 of the remainder actively working towards it.

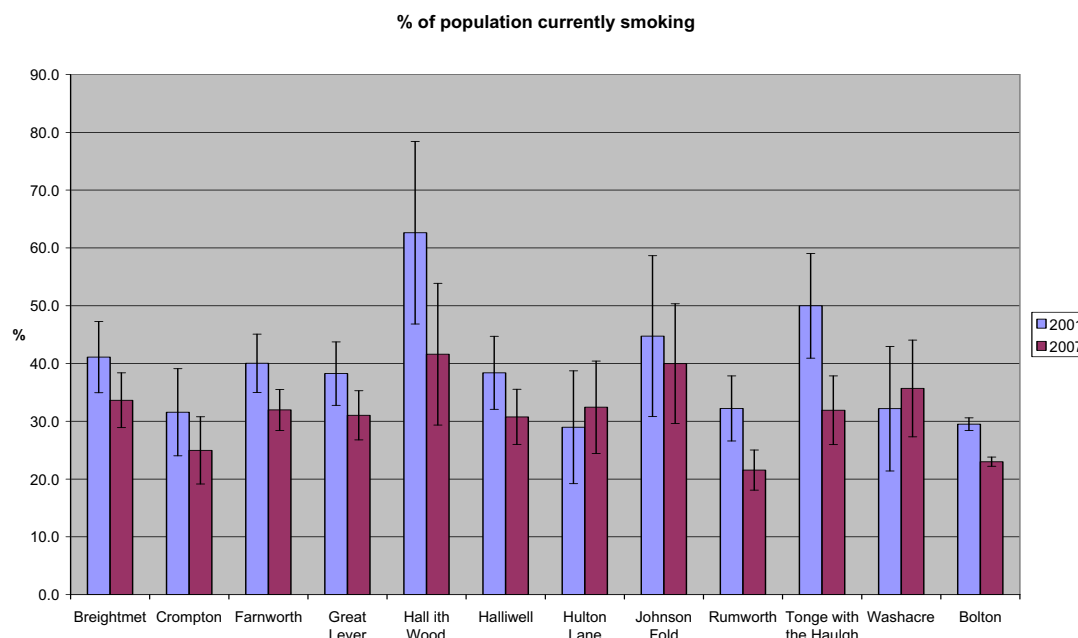
More recently two initiatives aimed at developing peer advocacy and lobbying activity by young people themselves have been initiated.

- BKATs (Bolton Kids Against Tobacco) is aimed at primary aged children through which it is hoped smoke-free homes and cars can be actively promoted along and adults encouraged to quit.
- A young peoples' lobbying and advocacy group modelled on D:MIST in Liverpool is currently recruiting members and it is hoped they will be come a powerful force for change in the future and help engage young people in the tobacco control agenda.

### **Impact on smoking prevalence**

The latest data available on adult smoking prevalence in Bolton comes from the Bolton Health Survey, 2007 which was carried out just prior to the introduction of the legislation. At this point prevalence had fallen from 29.6% in 2002 to 23% in 2007.

The decline in smoking prevalence has occurred across all parts of Bolton including Neighbourhood Renewal areas. Because of the relatively small number of respondents from specific areas, the reductions are not necessarily statistically significant however they do provide us with an indication that prevalence has fallen in these areas.



Nationally, the Smoking Toolkit Study, funded by Cancer Research UK, McNeil, Pfizer and GlaxoSmithKline found that the law has had a dramatic effect on smoking prevalence, with a 5.5% decline in the nine months after its introduction, compared with a 1.6% fall in the previous nine months. This is the largest fall ever recorded and the effect has been similar across the social

spectrum (West, 2008). It is fair to assume that smoking prevalence in Bolton will reflect this national trend.

### **Next steps**

Although the introduction of the smoke-free legislation in 2007 has had a significant impact on smoking prevalence, there is no room for complacency. To reduce smoking rates further and to ensure we address health inequalities we need to:

- Continue to promote smoke-free environments not covered by legislation
- Find ways of understanding the local situation with regards to counterfeit and smuggled tobacco and take appropriate action
- Ensure compliance with legislation on sales of tobacco to under 18s and lobby for further action on vending machines
- Further engage and support young people in the tobacco control agenda and encourage non-smoking social norms.

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