



Smoking and young people: 1st April 05 to 31st March'06

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Introduction

The report is based on monitoring forms, relating to the report period 1st April 05 to 31st March '06, returned to the Manchester Stop Smoking Service by Specialist Stop Smoking Advisors and Stop Smoking Service trained intermediate advisors. The report also details prevention and cessation initiatives that have been commissioned to support schools and other youth organisations.

Background

Smoking is the largest avoidable cause of premature death and in the UK, around 300 people die every day from a smoking-related illness (ASH, 2001).

Research studies have found that smoking causes thirty per cent of all cancer deaths, including at least 80% of lung cancer deaths (Peto et al., 1992). Furthermore, cigarette smoking has been firmly established as being the “most important known modifiable risk factor for coronary heart disease”, according to the US Surgeon General (Bartecchi et al., 1994). Indeed, evidence suggests that a smoker has two to three times the risk of having a heart attack than a non-smoker (ASH, 2001). Smoking not only causes fatal diseases, it has also been associated with over 50 other medical disorders, including reproductive and respiratory problems (BMA, 2004).

For young people the majority of these symptoms will not materialise until later in life and are less likely to occur if they cease their habit. However, young people are still physically developing and can be greatly affected on a daily basis by health hazards that smoking brings. Regular smoking can result in chronic low grade respiratory symptoms, such as coughs, bronchitis and asthma. This can result in absenteeism from school and can affect performance in sports.

The earlier a person starts smoking, due to the addictive nature of nicotine, the more likely he or she will become a heavy smoker and suffer a greater risk of diseases caused by smoking (Shatter, 1999). According to Demsey (1998), 50% of today's young smokers will die prematurely from smoking related diseases.

In addition, children are more susceptible to the effects of second hand smoking. “Cotinine levels found in the saliva of children whose parents smoke indicate that in households where both parents smoke, the children are receiving a nicotine equivalent of smoking 80 cigs a year”. Furthermore, 17,000 children under the age of 5 are admitted to hospital every year with illnesses resulting from second hand smoke.

In Great Britain about 450 children start smoking everyday. 3 out of 4 children are aware of cigarettes before they reach the age of 5 whether their parents smoke or not. (ONS, 1999). By the age of 11, 1/3 of children, and by 16 yrs old 2/3 of children have experimented with smoking (National Statistics, 2000).

Smoking rates in young people are strongly related to age, with 1% of 11 yr olds smoking compared to 23% of 15 yr olds being regular smokers (Health Survey, 2002). Given this evidence it is important that targeted prevention and cessation work is carried out to prevent uptake. Furthermore, it is important to note that girls are consistently more likely to smoke than boys. Indeed, in 2002, 11% of girls compared to 9% of boys smoked. The gender difference is not present among 11 and 12 yr olds but appears in over 13's. Given the stark

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health inequalities in Manchester the number of young smokers is likely to be much higher than national statistics.

Government targets have been set for reducing the prevalence of smoking in young people as follows; By the year 2010, a fall from 13% to 9% of 11-15 year olds smoking at least 1 cigarette a day.

In order to achieve the prevalence targets, the following national strategies have been put into place;

- Total ban on all tobacco advertising
- Toughened enforcement on under age sales
- Proof of age cards
- Strict rules on siting cigarette vending machines

On a local level, Manchester Stop Smoking Service has made a commitment to providing prevention and cessation work for young people. This report details the support available for young people to quit, the number accessing the service and evaluates the prevention initiatives that the service supports and commissions.

A. Analysis of young people (under 18's) monitoring returns

One of the principal roles of the Stop Smoking Service is to train health professionals across Manchester to deliver smoking cessation support to individuals that wish to quit smoking. Intermediate training is available free to all health professionals in Manchester. At present there are over a thousand (1088) trained intermediates across Manchester, 334 of whom were active in 2005 - 06. All intermediates are capable of supporting young people (under 18's) to quit smoking from the standard intermediate training. All intermediates are required to complete monitoring forms for clients that they have supported.

In addition to the standard intermediate training, specific two day training for health professionals that work specifically with young people have been delivered in the past (e.g. to school nurses, youth workers etc..). However, due to a lack of interest on recent training sessions, these health professionals have been encouraged to book on the standard 1 day intermediate training. A follow up session or one-to-one is offered to allow them to explore specific young people's issues and look at the smoking prevention and cessation resources available.

Below details the number of young people that have accessed the intermediate or specialist advisors for help to quit smoking. The Stop Smoking Service collects monitoring forms from all specialist and intermediate advisors which record information from clients setting a 'quit date' i.e. the day on which they are going to stop smoking. Data from these forms is returned to the Department of Health. The monitoring forms record the client's age.

i) Number of young people (under 18's) setting a quit date and quitting through the Manchester Stop Smoking Service '03 – '06

Table 1: Young people (under 18's) setting a quit date by PCT '03 - '06

	03 - 04	04 - 05	05 - 06
North PCT	56	42	34
South PCT	22	34	36
Central PCT	21	21	27
City-wide	99	97	97

The number of young people (under 18's) setting quit dates has remained consistent over the last 3 years despite targeted cessation work and more health professionals being trained. All clients who set a quit date are contacted four weeks later to see whether they have quit. Specialist Advisors verify this with a carbon monoxide monitor reading.

Table 2: Percentage of young people (under 18's) quit at 4 weeks by PCT '03 – '06

	03 - 04	04 - 05	05 - 06
North PCT	20%	33%	24%
South PCT	23%	9%	44%
Central PCT	9%	33%	30%
City-wide	18%	25%	33%

The percentage of young people (under 18's) quit at 4 weeks has continued to rise. The figures show that the service is becoming more successful, in terms of supporting young people (under 18's) to quit, particularly in the south of the city. However, this must be considered in the context of the relatively small number of young people through the service.

ii) Numbers of young people (under 18's) setting a quit date and quitting through the Manchester Stop Smoking Service '05 – '06

Table 3: Number of young people (under 18's) setting a quit date and quitting through the Manchester Stop Smoking Service '05 – '06

	Number of clients	Quit rate
North PCT	34	24%
South PCT	36	44%
Central PCT	27	30%
City-wide	97	33%

Although the number of young people accessing the service is relatively small, the quit rate is encouraging. The lack of activity could be indicative of young people's reluctance to access health services and the perception that the health problems associated with smoking are long term and will not affect them. Furthermore, the lack of activity may actually be an indication that monitoring forms are not being completed for young people (anecdotal evidence) because young people are reluctant to be monitored.

iii) Analysis of who is supporting young people to quit (05 - 06)

Table 4: Activity levels of advisors in '05 – '06'

Occupation of advisor	Number of clients	Occupation of advisor	Number of clients
Pharmacists	31	Midwives	12
Health visitors/health care assistants	19	Stop Smoking Specialist Advisor	7
Practice Nurse	16	GP	6

The majority of young people accessed stop smoking support through their local pharmacist or health visitor. No school nurses or youth workers trained as intermediates were active (with under 18's) in 2005-06, despite the large number trained (53% of school nurses trained). However, school nurses and youth workers have returned monitoring forms for over 18's. The school nurses have been trained to run groups and deliver one-to-one support with young people. Despite the school nurses not being active in supporting young people to quit smoking directly, it is evident that they are involved in smoking prevention activities in schools, mostly in the form of health days and supporting lessons.

Conclusions/ the future

It is apparent that despite the large number of health professionals that are trained as intermediates (including health professionals that specifically work with young people), the number of young people accessing stop smoking support is relatively small. There are a number of possible reasons for the lack of activity as discussed briefly above. In addition, one explanation given by health professionals in the past was that it is difficult to help young people to quit smoking without offering them some sort of intervention (such as NRT) other than pure motivational techniques. However, the change in NRT license that came into force in December 2005 should have an impact on the number of young people accessing NRT to help them to quit. The new license allows anybody from the age of 12 to access NRT, prior to this change, under 18's could not use NRT unless they got a GP's consent. The change in license provides the opportunity for under 18's to access NRT directly through the pharmacy scheme or using a prescriber that is not necessarily a GP.

Section B: Smoking Prevention/Cessation schemes

Manchester Stop Smoking Service utilises a variety of methods to try and prevent young people from starting smoking and encourage those that do smoke to quit. The methods used to raise awareness of smoking and young people this year included;

1. Drama workshops in schools (Act On Info).
2. 'Smoke Free City' schools programme (Man City FC).
3. Smoke Free Schools Poster Competition.
4. Other smoking prevention/cessation activities;
 - Promotion of website – wrist bands
 - Resource support and training
 - Promotion of Smoke Free Homes scheme

Each initiative is evaluated at the end of each financial year. Details of the initiatives and evaluations are listed below;

1. Drama workshops in schools (Act On Info)

Background

Act on Info a theatre group have been commissioned since 2000, to deliver 60 days of smoking prevention/cessation drama workshops in Manchester schools. Act on info are an established team of professional actors and writers, who have worked alongside Manchester Healthy School Partnership for several years, their aim is to promote important health messages using the creative medium of drama.

Act on info run Smoking Prevention workshops on behalf the Manchester Stop Smoking Service. The aim of the workshop is to give young people an objective view of smoking, enabling them to make an informed judgement. The workshops are extremely interactive and last between 50-60 minutes to fit in with any schools timetable.

The objectives of the team are:

- To raise awareness of specific health issues

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- To encourage participants to have the ability and skills to make informed choices about their health
- To work along each school to complement existing strategies, PSHE and citizenship curriculum, healthy schools targets and policy development
- To encourage an emotional connection by making learning fun
- To incorporate a range of learning styles to develop interpersonal skills in a safe environment

Methods

The drama workshop is performed to primary school aged children (year 5/6) and secondary school aged children (year 7, 9, 10). Each session is tailored to the specific age group. The primary school performances are mainly prevention based and involve fun interactive activities. The secondary school performances are more cessation based and takes the form of a debate. The drama workshop is delivered by 4 actors.

The administration for the scheme is carried out by the theatre group and includes direct mail outs to all of the schools, follow up telephone calls and the formulation of a theatre group performance timetable. A contract between the theatre group and the school was sent to all schools that wanted to book the theatre group. The contract stated the minimum requirements required for the theatre group to perform, including room requirements. It is also detailed the cancellation procedure, including a requirement to provide more than 48 hours notice and also a requirement that the teacher must complete a staff evaluation form of the theatre group.

Promotion of the scheme was carried out through the direct mail outs carried out by the theatre group and through all of the work carried out by the Senior Public Health Development Advisor/ Tobacco Control and Young People.

The number of schools, pupils and staff observing the theatre group was recorded. Furthermore, a staff evaluation form was completed by the member of teaching staff that booked the theatre group.

Results

Table 5: The number of people observing the theatre group

Type of school	No. of schools	No. of classes	No. of children	No. of staff
Primary	32	76	2339	87
Secondary	7	73	1704	n/a
Special	n/a	n/a	n/a	n/a
Overall	39	149	4043	87

Staff evaluation of the theatre group

Primary school evaluations

The staff evaluation of the theatre group's performances was extremely positive. All of the staff completing the forms expressed that they felt that the theatre group was an effective way for young people to learn about smoking and the majority rated the information passed onto pupils as excellent.

All of the staff also indicated that they felt the material and style of the drama workshop was age specific and that the duration of the session was the right length.

Encouraging 78% of the staff indicated that the session was going to be followed by another session on smoking or a drugs awareness strand of work and that the workshop was not going to be used in isolation. The teachers mentioned the following ways in which they were going to follow up the workshops;

- Getting the children to design anti-smoking posters
- Through PSHE and Science links
- Circle time discussion
- Lesson around "making informed decisions". Questions on how smoking, drugs and alcohol affects friends, family and self.
- Drugs education and healthy living week
- Science: alongside the effects of other drugs (solvents & alcohol)
- Drug awareness discussion on bad and good drugs, legal/illegal

High school evaluations

The staff evaluation of the theatre group's performances was extremely positive. All of the staff completing the forms expressed that they felt that the theatre group was an effective way for young people to learn about smoking and the majority rated the information passed onto pupils as excellent or good.

The majority of staff felt that the drama workshop was the right length, although 2 teachers felt it was too long. Likewise, the majority felt that the drama workshop was age specific, although two felt it was pitched too young and one felt it was too old.

85% of staff indicated that the session was going to be followed by another session on smoking, drugs awareness or cancer and that the workshop was not going to be used in isolation.

Conclusions/the future

The use of drama workshops to raise awareness of the dangers of smoking continues to be an effective medium. The theatre group workshops have continued to be well received by both the children (of all ages) and teachers. The theatre group is also a useful way of getting smoking prevention lessons into schools. The theatre group is an effective medium in primary and high schools but is relatively costly. Consequently, given the success of other smoking prevention/cessation initiatives, such as the Smoke Free City programme in primary

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schools, the use of the theatre group needs to be reduced to minimise costs. Therefore, it is planned that the theatre group will be used to target high schools only. The rationale for this, is that it is notoriously difficult to engage high schools, so this will be an effective strategy to engage with the schools. Furthermore, the high school theatre group workshops are based more upon cessation, which is the principal focus of this years Smoke Free Manchester campaign.

2. 'Smoke Free City' Schools programme (Man City FC)

Background

A new smoking prevention programme targeting school children aged 9 and 10 years old (Year 5) was launched in September 2005. 'Smoke Free City' is a joint initiative between the Manchester Stop Smoking Service and Manchester City Football Club and aims to deter youngsters from smoking by explaining its adverse effects on fitness, the dangers of the chemical contents of cigarettes and the cost of smoking.

The programme is open to every primary school in Manchester and is the latest health awareness initiative to be introduced as part of Manchester City's award winning football in the community scheme 'City in the Community', in which young people participating in the programme are rewarded with a football session the following week.

Methods

During the academic year September 2005 and July 2006 'City in the Community' (CITC) provide:

Smoking education sessions at 140 primary schools in Manchester. The 'Smoke Free City' programme is delivered by Manchester City Football Club coaches. Full training for CITC staff was provided by Manchester Stop Smoking Service.

Each school receives two visits – the first being classroom based and the second being a football based session.

An educational booklet was produced through the MCFC marketing department. Manchester Stop Smoking Service designed the format and content of the booklet.

A minimum of four smoking topic areas are covered in the class room session, they are: what is in a cigarette, pros and cons of smoking, cost of smoking, smoking and the effects on fitness. The booklet contains 9 topic areas, the others include: an A-Z smoking quiz, don't start smoking – word search, smoking and the environment, second hand smoking, addiction and stopping smoking.

Evaluation questionnaires were completed by teachers and pupils from each participating school. Teachers are asked questions regarding how well the programme was delivered, how professional the programme is, their perception of how valuable the young people found the programme and whether they would recommend the 'Smoke Free City' programme to other schools. Pupils were asked questions regarding whether they enjoyed the project, how much did they learn from the project, do they think smoking is cool and a good thing to do and whether they thought they would smoke when they are older. Both questionnaires required

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participants to circle responses on a scale (e.g. ranging between excellent – poor). There was also additional space for comments.

Quantitative statistical information is also recorded for each school, including number of contacts, gender and ethnicity of all of the participants.

In the event of not all the schools taking up the offer, CITC will offer additional sessions to schools which have taken part.

Results

Table 6: Analysis of the schools taking part in the ‘Smoke Free City’ Scheme

Category	Numbers
No. of schools	39
No. of sessions	90
No. of children	2560

*Sept 05 – 31st Mar 06 only – to be added Apr –Sept (school year)

Over 2500 children have taken part in the ‘Smoke Free City’ scheme from 39 schools in Manchester between September 2005 and 31st March 2006.

Table 7: Demographics of the children taking part in the sessions

Category	Numbers
Gender	
Boys	1219
Girls	1341
Ethnicity	
White British	1734
Asian	439
African Caribbean	387

The children taking part in the ‘Smoke Free City’ programme reflected the mixed ethnicity and gender of the children in the schools utilising the scheme.

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Children's feedback

Children were asked their views on smoking after the two sessions and 98% of the young people said that they thought smoking was uncool and that they wouldn't smoke.

Teacher's feedback

Teachers were asked their views of the programme as a whole. 99% of the teachers stated that they thought the programme was excellent and the remaining 1% said it was very good.

Wider impact: Publicity

The 'Smoke Free City' programme has generated media attention and raised awareness of the link between smoking and fitness. The publicity has included;

1. Advertised in Manchester City Match Day Programme (full page) – (Manchester City vs Everton – 02/10/05). It also advertised the Stop Smoking Service number and the type of support available.
2. Full page article on the National Professional Football Association (PFA) website and on Manchester City Football in the Community website.
3. Manchester Evening News Launch – 1/3 of page with Alex Williams. Also covered by Channel M TV station and the METRO newspaper. Launch event held at Chorlton CE Primary School.

Conclusions/ the future

The 'Smoke Free City' Football in the Community Scheme has proved to be popular with schools and has received positive feedback from both the teachers and children. The booklet produced to work alongside the programme has particularly been well-liked and has been disseminated to other age groups via health days. The programme appears to be effective in getting across the smoking prevention message. However, further evaluation is required to identify learning outcomes and to ensure that the programme is consistently reviewed. The programme was successful in gaining media attention locally and nationally (through the PFA website). Furthermore, it is important to mention the importance of linking smoking and fitness levels. The coaching session is of an additional benefit to the children in terms of fitness and is a fun activity.

3. Smoke Free Schools Poster Competition (2005)

Background

Manchester Stop Smoking Service in conjunction with Manchester Healthy Schools wanted primary school children to design a poster to help promote the Smoke Free Manchester campaign. The competition was to design a poster that shows what being Smoke free means to the pupils. The competition was aimed at Year 5 and 6 pupils but there were incentives for the school, class and pupils to get involved. Alongside the prizes on offer there was also the incentive that the successful posters will be displayed across Manchester to help publicise the Smoke Free Manchester Campaign, with the successful school and pupils name displayed on the posters.

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Smoke Free Manchester is a campaign being run in partnership between Manchester Primary Trusts and Manchester City Council to push for Manchester to be totally Smoke Free. This will mean that all enclosed public places and workplaces will be Smoke free (allowing no smoking to take place indoors). The aim of the campaign is not to force people to quit smoking but to reduce people's exposure to second hand smoke (the smoke of other people) and to help people who wish to quit smoking.

The initiative was backed by Manchester Healthy Schools Partnership, the Manchester Stop Smoking Service, Manchester City Football Club and Key 103 radio station.

Smoke Free Manchester is working towards eliminating of environment tobacco smoke in public places by raising awareness amongst school children it hopes to reduce smoking in young people and adults.

Methods

Poster design guidance

The competition was to design a poster that shows what being Smoke Free means to the pupils. Ideally, we were looking for designs that fit in with the Smoke Free Manchester Campaign, expressing the positives of becoming Smoke Free rather than using confrontational or negative images. However, we did not want to suppress the feelings or creativeness of the children taking part on this emotive topic area.

To help guide the children and to help the teachers to judge their class's top 2 posters the background and key messages of the Smoke Free Manchester Campaign were given to the participating schools.

Entry requirements

The poster competition was open to Year 5 and Year 6 primary school aged children in Manchester.

Each poster should have been produced on A4 plain paper and should have the child's name, address, year group and school name on the back.

Each school should have sent there top 2 poster designs for both year groups (maximum 4) to Manchester Stop Smoking Service prior to the deadline of Friday 23rd December 2005.

Choosing the winners

A panel of judges (including representatives from the Stop Smoking Service, City Council and Healthy Schools) chose the winning three entries. The panel decided upon the winning three entries in January 2006 and the winners will be presented with their prizes at the Smoke Free Homes Event to be held in February 2006.

The winning design will be produced and disseminated across Manchester.

Results

Table 8: Information on schools taking part in the poster competition

Category	Numbers
No. of schools taking part in the competition	35
No. of children registered taking part	2336
No. of poster entries received	74
No. of winning posters produced disseminated	2000

A total of 35 primary schools registered to take part in the poster competition, with over 2300 children participating. Seventy-four poster entries were received by the Manchester Stop Smoking Service. The poster entries were initially judged by the Manchester Stop Smoking Service to get them down to a manageable level (12 posters). The Smoke Free Manchester Working group formed a judging panel, including City Councillors, Environmental Health Officers, Leisure Services and Public Health representatives to choose the winning posters. The judging panel chose one winning poster and two runner up posters.

The winning poster was reproduced and disseminated across Manchester to schools, health centres and city council premises. A total of 2000 posters were produced. The children who won the poster competition also recorded sound bites of their poster slogans for Key 103 radio station to form a series of adverts.

Wider impact/publicity

The 'Smoke Free Poster' competition has generated media attention and raised awareness of the Smoke Free Manchester Campaign. The publicity has included;

1. Posters disseminated to all Primary schools in Manchester
2. MEN article mentioning the Smoke Free schools poster competition
3. Dissemination of 2000 of the winning poster to all schools, Sure Start centres, health centres and city council premises.
4. Award ceremony (February 9th 2005) – publicity of the event and exposure in the media (celebrity presentation).
5. Key 103 radio station – Radio adverts involving sound bites of the children's winning poster slogans and answers to simple questions about being smoke free and smoking.

Conclusions/ the future

The school poster competition was an overwhelming success with a large number of children taking part in the competition from across Manchester. The poster competition also gained lots of local media attention and helped to raise the profile of the Smoke Free Manchester campaign. Due to the success of the poster competition, another is planned for 2006/07 which will focus on designing a poster highlighting the harms of smoking and why people should quit. The poster competition was useful in engaging with schools and showed clear evidence that children are being taught smoking prevention education.

4. Other smoking prevention/cessation activities

The three main initiatives that were implemented and evaluated in schools across Manchester were the theatre group workshops, ‘Smoke Free City’ programme and the Smoke Free Schools poster competition. All three of these have been evaluated above in isolation, however it is interesting to assess the uptake of the initiatives overall.

Table 9: Analysis of the schools uptake of the three smoking prevention initiatives

Category	No. of schools	% of all schools
Schools taking advantage of one initiative only	61	35%
Schools taking advantage of 2 initiatives	23	13%
Schools taking advantage of all 3 initiatives	8	5%
Total no. of schools utilising one or more initiatives	92	53%
Total no. of schools not engaged in the initiatives	84	47%

It is encouraging that 53% of schools took advantage of at least one of the smoking prevention initiatives on offer in Manchester. The table also shows that different types of initiatives were taken up by the schools providing evidence that a number of options are required to engage schools directly.

In addition to the three smoking prevention/cessation initiatives detailed a number of other support resources and promotional materials targeting young people have also been produced and disseminated.

- Resources produced and disseminated included;
- George’s Tobacco Challenge CD Rom (contains an interactive quiz and lessons plans)
- Suggested lesson plans for primary and high school teachers
- Stop Smoking Service website
- Model policy and guidance

Promotional materials included;

- Stop Smoking Service wrist bands
- Smoke Free Manchester yo-yo’s
- Young people leaflets
- Posters (targeting young people)
- Smoke Free Homes leaflets (dissemination to targeted schools)

None of the above has been formally evaluated.

Conclusions/the future

A number of different smoking prevention initiatives are required to optimise the number of schools that get engaged. This report highlights that introducing one or two different initiatives is not sufficient in increasing the number of schools that get involved. Future smoking prevention initiatives should continue to utilise a variety of methods and resources to

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optimise the number of schools engaged. New innovative initiatives and resources need to be continually developed to improve existing provision and increase long-term sustainability.

Section C. School Tobacco Control Policy audit

Background

According to the government white paper “Choosing Health”, schools should have a regularly reviewed smoking policy in place and be totally smoke free by December 2006. Therefore it is essential that schools consider implementing comprehensive tobacco control policies in the near future. Alongside this, in October 2004, Manchester City Council committed itself to working towards achieving smoke free city status. As part of the Council’s own action towards achieving this, they recently adopted a revised Tobacco Control Policy that prohibits smoking on all Council premises.

While obviously schools are free to set their own policies in this matter, the City Council policy specifically recommends that “school Governing Bodies and Head Teachers adopt a Tobacco Control Policy that prohibits all smoking in school premises and school grounds.” (Paragraph 3.9)

Making all schools completely smoke free would be a major contribution towards a smoke free city, and to improving the health of pupils and staff. It also helps to change young people’s perception that smoking is an acceptable behaviour.

In the light of these national and local developments Manchester Stop Smoking Service produced new guidance. In order to assist schools with this, a model school policy and guidance notes were developed in partnership with the Manchester Stop Smoking Service, Manchester Healthy School Award Scheme, Manchester Environmental Health Department and the Manchester Education Partnership. The model policy was endorsed by Mick Waters (Former Chief Education Officer)

Schools can currently decide what type of tobacco control policy they want to put into place in Manchester. Consequently, there is a need for an up-to-date audit of the current smoking policy status in Manchester schools post the revised policy guidance.

Methods

A model school tobacco control policy and guidance document was produced by Manchester Stop Smoking Service in partnership with the City Council.

After several drafts and consultations, the policy and guidance document was disseminated to all schools (Head teachers/School clerks/ governors) in February and June 2005. The policy and guidance documents were also disseminated to all Healthy School link workers. Furthermore, the documentation was downloadable via the Manchester Stop Smoking Service website.

The model policy could be adapted to fit the individual needs of the school. The guidance document detailed all of the stages required to successfully implement a tobacco control policy in schools. It included information on the detail and rationale for Smoke Free policies, how to consult and inform staff, dealing with issues of enforcement, content of policies and support available for staff and visitors.

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The policy was promoted in the Manchester Healthy Schools Partnership Newsletter (summer term 2005) and has also been advertised on the Manchester Stop Smoking Service website.

To analyse the impact of the of the model tobacco control policy launched in 2005, a new audit was carried out to assess the current status of tobacco control policies in Manchester schools. To avoid duplication and additional workload for schools, this data was extracted from the National Healthy Schools Audit that all schools had to complete by March 2006. For purposes of comparison, the results of this audit were compared to the findings from the schools smoking behaviour audit conducted in Manchester schools in autumn term 2003 (Manchester Stop Smoking Service, 2003).

Results

Table 10: Tobacco Control Policy status in Manchester schools

Policy status	2003 Smoking Behaviour Audit			2006 Healthy Schools Audit		
	Primary	Secondary	Special	Primary	Secondary	Special
Smoking allowed inside school buildings (No.)	8	9	3	N/A	N/A	N/A
Smoking allowed in the school grounds (No.)	40	6	2	N/A	N/A	N/A
Total no. of schools NOT at gold standard or Working towards by Summer 07.	48	15	5	28*	7*	3*
Totally No. Smoke Free in buildings and grounds (Gold standard)	89	10	9	100*	16*	9*
Totally Smoke Free in buildings and grounds (%)	65%	40%	64%	73%*	64%*	64%*
Working towards going Smoke Free (Buildings and Grounds) by Summer 2007.	N/A	N/A	N/A	109*	18*	11*

N/A – Information not recorded in the Healthy Schools Audit 2006.

* Subject to change: preliminary data is shown – some schools did not reply to audit, to be updated in October 2006.

In the 2003 smoking behaviour audit, 65% (89) of primary schools, 40% (10) of secondary schools and 64% (9) of special schools achieved the gold standard – Smoke Free buildings and grounds. Schools achieving silver standard (no smoking in buildings only) was achieved by 94% (129) of primary schools, 64% (16) of secondary schools and 79% (11) of special schools. In total, 20 schools in 2003, allowed smoking inside their school buildings.

In comparison, the 2006 Healthy schools audit revealed that the following progress had been made; The percentage of schools that are at gold standard has increased particularly in

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primary schools (8% increase) and secondary schools (24% increase). Furthermore, there has been an increased commitment to going smoke free in buildings and grounds in schools by summer 2007, which goes beyond the proposed smoke free legislation. Overall, 71% of all schools have achieved gold status (smoke free buildings and grounds) and a further 7% have committed to achieving that level by summer 2007.

Conclusions

The introduction of the model tobacco control policy and guidance documentation, launched in 2005, has resulted in an increase in the number of schools that have gone smoke free in buildings and grounds. However, not all schools have implemented new tobacco control policies that achieve this gold standard. Consequently, a number of schools need further support and encouragement to go Smoke Free prior to legislation and persuade them to include the school grounds in their policy. Targeted work is required in these schools to help support them.