

# Youth and Tobacco Forum Newsletter

January 2009

SCOTTISH TOBACCO  
Control Alliance  
co-ordinated by  
ashscotland



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## Young People and NRT

Youth Forum members came together on 11 September with a specific interest in the use of NRT to support young people to stop smoking.

The afternoon aimed to explore the challenges and share experiences on the access and use of NRT with young people. It was envisaged that what came out of this meeting would help generate further discussion and allow members to share practice with those supporting young people.

### Attendance

The discussion was enhanced by those present in the field of health promotion, youth smoking prevention and cessation advisors, school nurses, pharmacists, a school health assistant, a community learning and development officer and a youth project worker.

Many of the challenges highlighted by members were similar to the findings of the NHS Health

The next STCA Youth and Tobacco Forum will be on:

**Thursday 26th February 2009**

Millennium Hotel, Glasgow  
0930 - 1600

The agenda so far:

- Informal updates from across Scotland
- Informative discussion on tobacco and cannabis issues
- Presentation - Cheryl Irvine, West Lothian Tobacco and Cannabis Worker

If you would like to attend please contact

**Jennifer Black** on 0131 220 9462

[jennifer.black@ashscotland.org.uk](mailto:jennifer.black@ashscotland.org.uk)

Scotland/ASH Scotland Smoking Cessation Pilot Programme 2006.

[see page 8 for link to report](#)

### Overall consensus

Overall there was consensus from the group that NRT should not be the first step in helping young people quit but should be part of the support offered to young people.

Young people should be informed about what NRT is, how it works, where it can be accessed and types available to them, so they can make an informed choice about whether or not to use it when trying to quit.

### Assessing young people's readiness for NRT

In order to identify if a young person is suitable for NRT or not, there was agreement that assessments should consider the young person's pattern of use:

**When do you smoke?** (*throughout the week, only at weekends*)

**Do you smoke with friends/alone?**

**How many cigarettes do you smoke a day/week/month?**

An important point highlighted by the group for anyone supporting a young person to stop smoking and assessing their suitability for NRT should be to ensure that each young person is assessed on an individual basis.

### **Accessing NRT**

Those offering NRT as part of a support programme accessed NRT from pharmacists and GPs, either via vouchers or prescription requests, going with the young person to collect from the pharmacist or collecting it on behalf of the young person. A few young people were reported as going direct to the pharmacist or GP themselves, although there were a number of reports that young people did not often want to do this. Despite potential routes of access, there were a number of challenges:

#### **Pharmacists**

- some don't prescribe to under 18s
- access to pharmacists in rural and isolated areas
- not having a youth friendly approach.

#### **GP**

- Reluctant to go to their GP
- previous bad experiences
- perceived confidentiality issues especially in rural and isolated areas
- in some areas under 16s need a prescription request, while over 16 do not.

### **Positive access of NRT**

When the experiences of accessing NRT via pharmacists/GPs were considered positive there were good relationships between those supporting young people and the pharmacist/technicians or GPs providing NRT. They were young people friendly and were aware of the support being offered in addition to the access of NRT.

There was strong consensus from the group that the response and attitudes towards using NRT with young people by GPs and pharmacists varied. This impacted heavily on the ease of access of NRT, concluding that it was essential to build relationships, inform and work with pharmacists and GPs to make NRT more accessible for young people.

### **Challenges for using NRT with specific groups**

**Looked After and Accommodated Children/ Young People:** The length of time which it can take to access NRT due to the requirement of

a prescription request from a GP.

### **16 - 18 year olds on training schemes:**

Fresh Air-shire has experienced difficulties with young people aged 16-18yrs who are in certain types of training and not eligible for free prescriptions. As this is one of their main target groups, this may cause a barrier for young people accessing support to stop smoking. Fresh Air-shire feel it would be beneficial to cover the cost of the prescription for this target group and are currently working with local pharmacy to set up a protocol for this, although it is proving to be very difficult in line with new national pharmacy changes due in February.

### **Challenges for supporting young people in schools and use of NRT**

- Due to time limitations the opportunities to discuss NRT and provide the necessary monitoring and support is not always possible
- School's attitudes to young people's smoking and use of NRT can cause problems
- Some schools view NRT under their medicine procedures whereby parental consent is required, causing confidentiality issues
- Those working with under 13s are concerned regarding child protection issues in relation to giving NRT.

### **Young people's views on accessing and using NRT (raised by project workers)**

- Some young people see NRT as a magic wand or that they need it to stop
- Confidentiality is an issue for young people in rural and isolated areas when trying to access NRT
- Young people do not always want to go to their GP or a pharmacist to access NRT
- Accessing NRT is not always felt to be an easy task by young people
- Young people view an unsuccessful quit attempt as failure which then impacts on young peoples motivation to quit in the future and perceived usefulness of NRT.

*(Continued on page 3)*

### **Using NRT with young people in practice**

- Every young person is different so their needs should be assessed for NRT on an individual basis
- Young people need to be educated about NRT, what it is and what it does and where it is available etc. Therefore this should be included in the support programme delivered with young people
- There is a need to work with schools to enable young people to stop smoking in a supportive environment
- There is a need to build up good relationships with pharmacists/GPs where young people will be signposted to ensure they are more accessible, young people friendly and aware of the support/service being provided to a young person who has shown motivation to quit
- Linking in with the technician of a pharmacy can be a positive inroad if there have been issues with directly linking in with the pharmacist
- School nurses, if bound by time restraints, could build links with local pharmacies so that young people can be signposted to access NRT if they have shown interest to use it
- Young people need to understand the difficulties of giving up, how NRT should be used and can help and be encouraged to not see an unsuccessful quit attempt as failure
- NRT should not be the first step of support and it should be acknowledged that some young people may need to develop their confidence and building motivation towards stopping in the future, when NRT may be more beneficial to them
- Young people have complex needs therefore stop smoking support needs to be linked up with other services. Therefore focusing solely on quit attempts with young people is unlikely to mean young people will stop.

[see page 8 for further information links](#)

### **Smoke-free policy development in schools**

A unique meeting took place on the 3 October 2008 when three STCA groups (*Tobacco Control Issues Group, Youth and Tobacco Forum and the Research Group*) met at the Tollbooth in Stirling to discuss the Smoking Prevention Action Plan.

This meeting provided an opportunity to explore the key areas for action from the Smoking Prevention Plan and how they could be addressed by working together in partnership across organisations and disciplines. The two main actions considered on the day were:

9) To encourage schools and all youth work/ community settings where young people gather to adopt clear smoking policies and in addition we ask that they reinforce messages concerning the addictiveness and health risks associated with smoking

14) To encourage all organizations and agencies who come into contact with children and young people, including NHS organisations, local authorities and care providers, to have a health leadership role and be at the vanguard of changing smoking culture in Scotland, by, for example, introducing smoke-free policies in external areas frequented by children and young people such as playgrounds.

Actions 9 and 14 provided the basis for the workshop scenarios which had been developed using information from people working across Scotland. Each of these scenarios highlighted different challenges that can arise within a school and were told from a particular professional's viewpoint (smoking cessation advisor, environmental health officer, primary school head, school nurse).

The workshop groups were tasked with identifying:

- the main issues within the scenario
- the key people and organisations that could help
- how those identified stakeholders could be encouraged to get involved
- what outcomes the workers should be aiming for.

[see page 8 for the links to the full report](#)

## 2008 ASH Scotland AGM



Sian Carlin



Sarah Barclay



Fraser Keir



Laura Martin



Rachel Cameron



James Lees



On 24 September ASH Scotland hosted its most successful AGM to date.

One hundred people attended to debate how best to stop the tobacco industry in its tracks and prevent a new generation from getting hooked on smoking.

Six young people from the Dundee Peer Education Project gave a confident presentation, quizzing the audience of professionals to test their knowledge on tobacco effects on young people and showing a range of examples of how they raise the issue of smoking with their friends and family.

Sarah Lindsay from Smoke-free Youth Services presented on the new Greater Glasgow and Clyde Youth-Led Pilot project, which aims to give young people the opportunity to lead on elements of tobacco control,

which they take an interest in.

Short films and photography displays showed us how strongly young people feel about the tobacco industry's attempts to co-opt youth culture. Young people's groups from across Scotland exhibited hard hitting images of smoking and its effects. (Save the Children, Bridges Project, Castlepark, Health Scotland/Young Scot).

*"It is more important than ever to involve young people in smoking prevention and education. As we know, every year 15,000 young people start smoking in Scotland – that's a 41 a day habit for the tobacco industry."*

Sheila Duffy, Chief Executive, ASH Scotland



[see page 8 for link to Peer Educators feedback on their involvement in the AGM](#)

## Scottish Smoking Cessation Conference 08

Health Scotland/ASH Scotland and the STCA hosted the second smoking cessation conference in Glasgow on 24 November. There was an impressive agenda featuring names such as Professor Robert West and Professor Peter Hajek along with speakers from across Scotland. For the first time young people and smoking cessation featured on the agenda giving delegates the opportunity to hear four speed presentations and engage in discussion.

Feedback from the conference will be circulated when its made available.

## Youth and Tobacco Forum 11 December 2008, Edinburgh



The Scottish Government have indicated in the Smoking Prevention Action Plan, Action 21:

**To consider issues arising from sale of cigarettes in packs of less than 20, as part of the planned legislative review on statutory controls on the sale of tobacco products.**

ASH Scotland has begun taking steps, using the existing Scottish Tobacco Control Alliance network, to ask those working in the field to what extent they know of adult smokers and young people buying packs of ten.

Philippa Bonella (Information and Communications Director, ASH Scotland) facilitated discussion with the youth forum members at the last meeting on 11 December to gain their views on the following questions:

**Do you think young people buy 10 packs? Do you have any evidence of this?**

- Down to how much cash young people have – some will buy 20 and sell them on, some will buy 10
- ASH Wales has done research to show that children do often buy 10 packs
- Many young people sell to their friends during the week to make money to buy cigarettes for the weekend. Can be as much as 50p a stick
- Many young people are 'binge smokers' and only smoke at certain times when in social settings, rather than every day. They will chip in with their friends to buy in preparation for a night out.

**Do you think adult smokers buy 10 packs? Do you have any evidence of this?**

- Adults buy 10s when trying to quit or when in denial about how hard it is to quit
- Single mums/new mums nearly always smoke 10s because they don't have much

cash and often feel guilty about smoking.

**Do you think banning 10 packs would lead to fewer young people taking up smoking? Would other cheaper avenues take their place?**

- Anything that makes it harder for kids to access cigarettes is a good thing
- May lead to kids buying more smuggled cigarettes at cheaper prices
- In one set of classroom discussions, kids were horrified at the idea of banning 10 packs - so it would have an impact on them
- Young people will just buy 20 and sell them on
- If they buy 20, they will probably smoke more, especially at weekends
- Ban may have a positive impact on addicted young people; less so on social smokers.

**Do you think banning 10 packs would have an impact on adult smokers? Positive or negative?**

- Could lead to single mums smoking more
- Would have greatest impact on poorer adults but not clear whether it would help them to quit.

**Conclusions**

- Need to tackle attractiveness of packaging first i.e. plain packaging
- See Irish example where the ban just led to new packaging innovations which were even more appealing to young people
- Need to tackle smuggling also. Need to know smuggling figures for Scotland and how many young people buy illicit tobacco
- Targeting 10 packs feels like targeting poor smokers/those who smoke less. We should be targeting the industry.

*see page 8 for links to the Smoking Prevention Action Plan and ASH Scotland's briefing papers on, young people, legislation advertising*

## Minimum Dataset and young people

The Minimum Dataset (MDS) is for recording the core data required for anonymous national reporting of clients who access Scottish NHS Board specialist smoking cessation services, take part in a smoking cessation intervention, and who set a quit date with the service during the course of the intervention.

One of the 2008 priorities for the youth forum was to discuss using the Minimum Data Set (MDS) when working with young people.

Rory Morrison, ASH Scotland, facilitated the discussion acknowledging some of the key concerns raised previously by forum members:

- gathering the data
- who should be included
- should young people be included
- will inputting data on young people have a negative effect on local and national targets.

### **Barriers to using the MDS**

- Young people can be reluctant to provide information, especially in a school setting
- Young people do not always set a quit date like in adult services
- If young people are in a service but do not quit at four weeks are recorded as a smoker even if they quit after that time
- There are major issues around the follow-ups at six and 12 months due to loss of

contact, mobile phone/number changes, concern about parents or teachers finding out if they are contacted.

### **Overcoming barriers to using the minimum dataset for young people**

- In light of the new HEAT targets for NHS Health Boards, those working with young people should be encouraged to submit information on any young people trying to quit. The HEAT targets refers to supporting 8% of each boards smoking population to quit at one month, which includes young people
- Including young people in the MDS to reach this target
- A local youth friendly document could be designed to include all 31 core questions to later be updated into the MDS
- Follow ups can be done any way the services sees fit, one option may be to use texting

### **Importance of local monitoring and evaluation**

The electronic database, which allows services to record beyond the core 31 questions, could be a valuable tool for those working specifically with young people to collect additional information.

*see page 8 for the link to information on how to use the Minimum Dataset*

One of the key priorities previously identified by youth forum members was around monitoring and evaluation of tobacco work with young people.

A brief discussion was held on 11 December to identify what members would like the youth forum to do in order to explore this issue further.

Forum members were issued with a copy of the *Evaluation Journey: An evaluation resource pack for community groups*, on 11 December, which gives those working in the health setting some guidance on how organisations and groups can monitor and evaluate their work. This journey does provide good guidance as to the overall evaluation process, however, discussion at the last meeting demonstrated that forum members need to have an opportunity to explore key challenges to monitor and evaluate their work with young people and identify how practically it could be done.

It was suggested that a useful exercise would be to gain support from the Research Group to explore scenarios based on forum members' work with young people. This exercise would open dialogue between academics and practitioners' to identify practical ways of monitoring and evaluating tobacco work with young people and explore existing methods used by practitioners.

Heather Gillespie and Emma Cepok will therefore take the necessary steps to approach the Research Group and deliver this proposal to see how best to take this priority forward.

*see page 8 for the link to the Evaluation Journey*

**Monitoring and evaluation of youth and tobacco work**

## Youth and tobacco work in Wales



Daniel Clayton (ASH Wales) visited the Youth and Tobacco Forum on 11 December and talked about the youth and tobacco work in Wales.

Ffaith (meaning fact, in welsh) is a youth-led anti smoking project working to help stop young people becoming replacement smokers. The idea is that young people, in Wales, hear the truth and facts about tobacco, the duplicity by Big Tobacco, their targeting of children as replacement smokers and lack of concern for the environmental damage they cause etc. The sort of issues that really get young people angry but enthused.



**(500 shoes) 500 people....dead every month in Wales from smoking related illnesses**



**'We don't smoke the SHIT, we just sell it. We reserve the right to smoke for the YOUNG, the POOR, the BLACK and the STUPID.'** Al- leged quote by RJ Reynolds Executive (the company that brought us Joe Camel)

**Ffaith youth project website:** The Ffaith website will launch shortly and is pretty much finished in its 'shell' design (it will become bi-lingual and fully interactive dependent on ASH Wales bid for funding from Big Lottery). The Fagerstrom Test will go live shortly, which will allow young people to assess their own smoking and print off their results to take to a local GP. [www.ffaith.org](http://www.ffaith.org)

**2Tuff2Puff: Smoking Cessation Training for Youth Workers:** ASH Wales has received funding for training of youth workers from The Pfizer Foundation. As part of this funding ASH Wales will train 100 youth workers from across Wales (but concentrating in 7 areas of deprivation in South Wales) and further a field (training outside of Wales will operate on a cost recovery basis) if within capacity of the organisation. 2Tuff2Puff is an excellent resource developed by Smokefree Cardiff and adapted by ASH Wales. Training will take place over one whole day and as part of the training each trainee receives a copy of the manual. The manual and CD Rom (for print offs) will be made available online in PDF format available to download, for free, to all who commit to reducing smoking for young people.

**Kick Butts:** On Kick Butts day ASH Wales is launching a black tie event and auction to raise money for Ffaith. Further details will become available on the website. [www.kickbuttsday.org](http://www.kickbuttsday.org) for information about kick butts day, where you can register and sign up for a pack to help with fundraising, press enquiries or events.

**Welsh Tobacco Control Alliance:** The launch of the Welsh Tobacco Control Alliance is documented on our website <http://ffaith.org/2008/12/10/ffaith-help-launch-wtca/>

**British American Tobacco (BAT) AGM:** Ffaith are no longer able to campaign at the Imperial AGM because it falls between funding but they will be taking some young people to the BAT AGM due in late April. Further information will be sent to ASH Scotland in regard to this please contact Emma (Youth Development Officer, ASH Scotland 0131 220 9465) for more information.

**For more information on youth and tobacco work in Wales contact Daniel Clayton at [daniel@ashwales.co.uk](mailto:daniel@ashwales.co.uk).**

**Contact Sally Good [Sally.Good@nphs.wales.nhs.uk](mailto:Sally.Good@nphs.wales.nhs.uk) (at National Public Health Service) for further details on Assist, Smokebugs and Smokefree Classes .**

Information and links	News
<p><b>NRT and Young People</b></p> <ul style="list-style-type: none"> <li>• NICE (2008). <a href="#">Smoking Cessation Services</a></li> <li>• NHS Health Scotland/ASH Scotland (2007). <a href="#">Smoking Cessation Guidelines update 2007</a></li> <li>• NHS Health Scotland/ASH Scotland (2006). <a href="#">Smoking Cessation Pilot for Young People</a></li> <li>• NHS Health Scotland/ASH Scotland (2004). <a href="#">Smoking Cessation Guidelines for Scotland: 2004 Update</a></li> </ul> <p><b>Smoke-free policy development in schools: Partnership Working</b></p> <ul style="list-style-type: none"> <li>• Scottish Government (2008). <a href="#">Smoking Prevention Action Plan</a></li> <li>• Full report from the STCA meeting on 3 October in <a href="#">The Link</a></li> <li>• <a href="#">Local Alliance pages</a> on the ASH Scotland website</li> </ul> <p><b>ASH Scotland Policy briefings</b></p> <ul style="list-style-type: none"> <li>• Key facts about young people and smoking</li> <li>• The Myths and Realities of Tobacco Point of Sale Display Bans</li> <li>• Tobacco Retail Licensing</li> <li>• Promotional display of tobacco</li> </ul> <p><b>Minimum Dataset</b></p> <ul style="list-style-type: none"> <li>• <a href="#">Resources</a> to help services use the MDS.</li> </ul> <p><b>Monitoring and Evaluation</b></p> <ul style="list-style-type: none"> <li>• McKie, L., Barlow, J. and Gaunt-Richardson, P. (2002). <a href="#">Evaluation Journey: An evaluation resource pack for community groups</a></li> </ul>	<p><b>ASH Scotland website redesign</b></p> <p>The redesigned ASH Scotland website was launched on 21 January. All the information on the previous site (media links, information service, training and development programme and more) has been retained on the new site, just in an easier to navigate format. Check it out to see for yourself! <a href="http://www.ashscotland.org.uk">www.ashscotland.org.uk</a></p> <hr/> <p><b>New study into young people's reasons for smoking</b> <i>Liverpool Longitudinal Study</i>  <a href="http://www.roycastle.org/research/lssr.htm">http://www.roycastle.org/research/lssr.htm</a> 20/01/09</p> <p>Those who took part in the study reported that they smoked out of their own desire and curiosity and not because of "peer pressure". Smoking among families was also found to influence uptake.    Scotsman – 20/01/09, p.3  <a href="http://news.scotsman.com/scotland/Young-smokers-feel-no-pressure.4892022.jp">http://news.scotsman.com/scotland/Young-smokers-feel-no-pressure.4892022.jp</a></p> <hr/> <p><b>A quarter of shops sell cigarettes to underage children</b></p> <p>Test purchasing exercises have revealed that a quarter of shops sell cigarettes to underage children. Over 800 test purchasing exercises were carried out by trading standards teams since October 2007.    Scotsman – 09/01/09, p.13 <a href="http://news.scotsman.com/scotland/Quarter-of-shops-break-law.4859215.jp">http://news.scotsman.com/scotland/Quarter-of-shops-break-law.4859215.jp</a></p> <hr/> <p><b>Scottish Government publishes Early Years Framework 29/12/08</b>  <a href="http://www.scotland.gov.uk/Publications/2009/01/08095849/0">http://www.scotland.gov.uk/Publications/2009/01/08095849/0</a></p>

**ASH Scotland Information Service**

- a free national enquiries service providing free advice, assistance and information about smoking and tobacco-related topics
- a current awareness service supplying [daily and weekly bulletins](#) by free e-mail subscription
- a listing of all the latest Scottish Parliamentary activity related to tobacco
- [a tobacco-focussed library collection](#)
- and an online archive of recent tobacco-related [research articles](#)

ASH Scotland: 8 Fredrick Street, Edinburgh EH2 2HB 0131 225 4725 [enquiries@ashscotland.org.uk](mailto:enquiries@ashscotland.org.uk)

**Contact the Youth Development Officer, ASH Scotland**

If you have any queries relating to this newsletter, any thing you would like to discuss in relation to your work on smoking and young people or to be put in touch with someone doing similar work please feel free to contact Emma on **0131 220 9465** or e-mail [emma.cepok@ashscotland.org.uk](mailto:emma.cepok@ashscotland.org.uk).