Developing tobacco policies for youth projects

Guidance and support for implementing smoke-free policies

NHS Greater Glasgow and Clyde Smokefree Services and ASH Scotland
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Preface - Why is developing a tobacco policy so important? & Introduction
Preface - Why is developing a tobacco policy so important?

While smoking rates for 13 and 15 year olds in Scotland are at the lowest since reporting began in 1982\(^1\), the uptake of smoking over the age of 16 remains a concern, with smoking rates rising from 13% among 15 year olds to around 24% among 16-24 year olds\(^2\). We therefore need to do more if we are to achieve our vision where no young people start to smoke.

Evidence shows that the younger an individual starts to smoke, the more likely they are to be an adult smoker, the more heavily they are likely to smoke during adulthood and the more likely they are to fall ill and die early as a result of smoking\(^3\).

We know that most smokers take up smoking as a young person. Around two thirds of smokers in the UK started smoking under the age of 18 and over a third (39%) started under the age of 16\(^4\). We also know that young people from the most deprived areas progress to regular smoking more rapidly than those in the least deprived areas\(^5\). Smoking rates are also disproportionately high amongst certain groups of young people, such as looked-after children and young offenders\(^6\).

We also know that health behaviours do not exist in isolation. The most recent Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS) results show that around 4% of 13-year-olds and 19% of 15-year-olds had tried cannabis and that around 44% of 13-year-olds and 77% of 15-year-olds had tried alcohol. Action to support young people to negotiate decisions about tobacco must also take account of the potential interactions between smoking and other health-damaging behaviours.

Smoking and tobacco need to be seen as a priority on an equal footing with issues such as alcohol, sexual health and drugs. We know that protecting and promoting the health and wellbeing of young people is fundamental to the role of any youth worker. We also know that people who work with young people are seen as role models for many young people. Evidence shows that young people are more likely to become smokers if parents smoke, friends smoke or people they see as role models smoke. Under such circumstances, addressing smoking and tobacco with young people needs to be seen as a core priority of the role of a youth worker.

Having an effective tobacco policy that actively promotes healthy behaviour is vital when considering the health and well-being of the young people that your organisation works with. This guide has been produced by NHS Greater Glasgow and Clyde Smokefree Services and ASH Scotland to help your organisation develop and implement a tobacco policy that will suit the young people who use your services.
Introduction

Background

Youth organisations and their staff play an important role in helping and guiding young people in their transition to adulthood. Young people often seek to legitimise their own behaviour by replicating the behaviour of those around them, meaning that staff working with young people on a regular basis have an obligation to act as positive role models. In addition to this, youth work staff should mirror an organisational ethos that aims to support and encourage young people to make positive behavioural choices.

Aim and purpose of the tobacco policy support guide

This support guide has been informed by consultation with third sector organisations that regularly come into contact with vulnerable and disadvantaged young people. The tobacco policy guide aims to encourage and support organisations to extend their tobacco policies and to more formally recognise their role as health educators and having a lead role in influencing positive life choices for young people. Organisations which are involved in improving the lives of young people or promoting positive health have a moral and an ethical responsibility to adopt a tobacco policy that promotes prevention and early intervention. This would help organisations to develop tobacco policies that go beyond simply stating where staff and young people can and cannot smoke and instead focus on:

- organisations having clear no smoking policies;
- a plan for how organisations address tobacco use including staff smoking behaviour as well as cultural and contextual changes such as health promotion e.g. smoke-free events;
- clarity on the short and long term effects of smoking to young people and staff, including reinforcing messages concerning the addictiveness and health risks associated with smoking and second-hand smoking;
- tobacco education to influence a change in culture around the social norms of smoking and tobacco use;
- ensuring that stop smoking support is included and provided as a key component of the tobacco policy for each organisation.

The fieldwork conducted to inform this tobacco policy support guide highlighted a wide range of local circumstances and experiences that have challenged or facilitated the development of tobacco policies in different ways. Many organisations see the circumstances that have shaped their tobacco policy development and attitudes towards tobacco as being quite specific, almost unique to them.

This tobacco policy support guide aims to accommodate these different experiences and circumstances by supporting individual
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policy development rather prescribing a ‘one size fits all’ approach. It provides practical information and advice that has been informed by consultation with third sector youth organisations across the NHS Greater Glasgow and Clyde area. It makes suggestions for developing tobacco policies that support health promoting youth work settings whilst recognising that not all policy development ideas and options may be suitable or viable for all circumstances.

Fieldwork objectives and methodology

In order to inform the development of the tobacco policy support guide, a series of research and consultation elements were completed:

- a brief literature review to identify examples of good practice policies/activities around tobacco use and smoking policy development and implementation;
- a survey for staff from a range of third sector youth organisations and groups across the NHS Greater Glasgow and Clyde area, with results compiled and reported upon;
- a survey for young people accessing services from a range of youth organisations and groups across the NHS Greater Glasgow and Clyde area, with results compiled and reported upon;
- focus groups with staff from third sector youth organisations both at team and role levels (practitioners, managers);
- focus groups with young people accessing youth services;
- one-to-one managerial level interviews.
Developing tobacco policies for youth projects

Case Studies

This tobacco policy support guide includes a series of case studies that highlight the quite specific circumstances and considerations that have shaped the development of tobacco policies across a range of different youth organisations and groups operating in the NHS Greater Glasgow and Clyde area.

Generally, the broad and diverse range of services that youth organisations and groups deliver are very much shaped by the needs of their young people, the vision of each organisation and the specific expectations of funders and partners.

The case studies show that for some organisations and groups, the on-going development and support of smoking and tobacco policies is extremely important and relevant to the work that they do. Some organisations have developed clear, well-supported tobacco policies that act as a powerful catalyst and support for developing a smoke-free youth environment and sustained healthy behaviour change amongst staff and young people.

The case studies also show that for other organisations, while there is clear recognition of the importance of addressing smoking and tobacco, several significant circumstantial factors mean that they have not yet used their tobacco policy to support a completely smoke-free youth environment.

Whilst it is important to recognise the clear and broad differences in tobacco policies and approaches to tobacco highlighted within the case studies, it is equally encouraging to note that they show a general agreement that smoking and tobacco use by staff and young people is an issue that should be addressed as part of the work that youth organisations and groups are involved with.
Section 1: Reasons for developing a more comprehensive tobacco policy
Reasons for developing a more comprehensive tobacco policy

Recent research carried out by local NHS Greater Glasgow and Clyde Smokefree Services in the former East Glasgow CHCP, into the role of settings in young people’s smoking behaviour, indicated that smoking policies in a setting-specific context can substantially affect the smoking behaviour of young people. The research showed that smoking behaviour was partly dependent on the terms of the policy, partly on the extent of enforcement, and partly on the organisational structures or provision for smokers within the setting.

Smoke-free as a foundation

Smoking has been banned in public places since 2006 by virtue of the Smoking, Health and Social Care (Scotland) Act 2005, meaning that youth work staff and young people need to go outside if they want to have a cigarette. In youth work environments however, tobacco policies need to go beyond simply highlighting where staff and young people can and cannot smoke.

Youth organisations and the staff that work within these settings play an important role in helping young people in their transition to adulthood. This may be through their opportunities to act as positive role models, minimising the mimicking of smoking behaviour or having an organisational ethos that supports and encourages young people to make positive behavioural choices.

Policy Drivers

The Scottish Government’s policies to ensure children have the best start in life through the Early Years Framework, Getting It Right for Every Child, the Parenting Strategy and the Children Services Bill; to tackle poverty through Achieving Our Potential and the Child Poverty Strategy; to promote employability through Working for Growth; to improve educational attainment through Curriculum for Excellence and to reduce offending through the Strategy for Justice are all relevant to tackling youth health inequalities in Scotland.

The ability and willingness of young people to adopt the sorts of healthy behaviours that will redress health inequalities, such as a tobacco-free lifestyle, depend significantly
on their wider life circumstances. In order to respond to this challenge, the Chief Medical Officer for Scotland, supported by the Scottish Government and COSLA, advocates an “asset-based” approach to health improvement.

“Assets can be described as the collective resources which individuals and communities have at their disposal, which protect against negative health outcomes and promote health status.”

Asset-based approaches, by definition, require a local approach. Reducing the number of people who take up smoking is key to reducing overall prevalence rates and, as such, should be a key feature of local tobacco control strategies. Since the publication of Scotland’s Future is Smoke-Free,17 NHS Boards have received annual prevention funding to deliver local initiatives that support young people to not smoke. Working with local partners is key to getting the most out of this investment.

**Scottish Government’s Tobacco Control Strategy**

One of the core elements of the Scottish Government’s new tobacco control strategy18 is smoking prevention, with the key aim being to create an environment where young people do not want to smoke. In order to deliver this key aim, the new strategy focuses on several actions that are specifically relevant to third sector organisations which work directly with disadvantaged and vulnerable young people. These actions include:

- Local Authorities and Health Boards should work with partners in the third sector and local communities to develop local tobacco control plans. These plans should be used to help Community Planning Partnerships reduce health inequalities as set out in 2013 Single Outcome Agreements;
- Following the success of the Youth Commission on Alcohol, the Scottish Government will commission Young Scot to deliver a Youth Commission on Smoking Prevention. The Commission will recruit young people aged 12-21 from a range of backgrounds to provide the Scottish Government and local delivery partners with a series of recommendations and solutions which support young people to choose not to use tobacco;
- Work with learning establishments and partner agencies to identify good practice and high-quality resources which will be shared on the GLOW schools intranet site;
- Local tobacco control plans should take account of the potential interactions between tobacco and wider health behaviours. These plans should explicitly focus on vulnerable young people such as young offenders and looked-after children;
- Work with the youth sector to support peer-led smoking prevention programmes;
- In conjunction with relevant bodies, including higher and further education and vocational training providers, explore what measures can be developed to support young people between 16-24 in making decisions about smoking and other health behaviours;
Health-promoting tobacco policies - benefits for young people

Potential benefits for young people of introducing a health promoting tobacco policy could include:

- improved physical health and well being;
- provide factual information to young people on the short and long term effects of tobacco, including nicotine addiction;
- preventing young people from starting to smoke;
- reduces young people’s exposure to second hand smoke;
- safer youth work environment;
- increased sense of self-esteem;
- improvement in finances;
- more integration between staff and young service users due to reduction on segregation of smokers;
- increased chance of early intervention for young people who smoke and easier access to services to support them.
Health-promoting tobacco policies - benefits for organisations and staff

Potential benefits for organisations and staff of introducing a health promoting tobacco policy could include:

• improved physical health and wellbeing for staff;
• help staff to display healthy role model behaviour;
• presents the positive image of a health-promoting organisation;
• reduces staff exposure to second-hand smoke;
• makes it easier for staff to display healthy role model behaviour;
• cleaner and safer work environment for staff;
• provides staff who smoke with an environment conducive to making successful quit attempts.

Smoking on the same level as other key issues

For many youth organisations, issues such as funding, programme structure, resources and staffing can mean that they are often unable to give tobacco use and smoking the same level of attention as issues such as alcohol, drugs, sexual health and physically activity.

Taking steps to develop a more formal health-promoting tobacco policy will enable organisations to effectively embed smoking and tobacco issues into the core elements of the work that they do.
Section 2: Contexts and Backgrounds
Many organisations see the circumstances that have shaped tobacco policy development and attitudes towards tobacco within their organisation as being quite specific, almost unique to them. The organisations that assisted with the fieldwork in this project provide a diverse range of services shaped by the needs of their service users, the vision of the organisation and the expectations of funders and partners.

While it is important to recognise the clear and broad differences in tobacco policies and approaches to tobacco between organisations, it is equally encouraging to note most organisations clearly view smoking and tobacco use by staff and young service users as an issue that they should address as part of the work that they do.

Under such circumstances, it is important to highlight the key barriers and opportunities that shape current policies, attitudes and approaches to tobacco across third-sector organisations working with disadvantaged and vulnerable young people.

### Barriers

- Developing an effective tobacco policy is not easy - it takes time
- Time and flexibility of programmes
- Access and availability of tobacco-specific resources and support
- Too easy for smoking to become a ‘rights’ issue rather than a health issue
- Setting and location

### Opportunities

- Smoking gives an opportunity to build a bond and rapport with young people
- Tobacco is not a priority
- Staff not comfortable with addressing smoking and tobacco issues
- Perception that tobacco is a ‘tough nut to crack’- why bother?
- Consistency between organisations

### Health Promoting Tobacco Policy

- Having a policy in place boosts confidence
- Developing an effective tobacco policy is not easy but it can be done
- Partnership working provides information, fills the gaps and offers support
- Education sessions need to complement existing programme priorities and structures

- Understand the needs and background of a young client group
- Tobacco is a health issue, not a ‘rights’ issue
- Policies need buy in at staff and managerial level
- Role model behaviour and the de-normalisation of smoking and tobacco
Section 3: Potential barriers to tobacco policy development
Potential barriers to tobacco policy development

Developing an effective tobacco policy takes time

Quickly implementing and imposing a tobacco policy without due consultation or input from staff and young people has the potential to result in failure. Developing an effective tobacco policy takes time and resources that many smaller organisations often feel that they simply do not have.

Setting and location

The setting and location of services can have a direct impact on how staff approach smoking and tobacco as an issue with young people and the relevance that a formal tobacco policy would have on the work being carried out.

Tobacco is not a priority

Policies such as GIRFEC and Curriculum for Excellence highlight that the continual promotion and protection of young peoples’ health and well-being is a key aim for any youth worker or organisation working with young people, particularly vulnerable or disadvantaged young people. Despite this, developing a health promoting tobacco policy is often not viewed as an immediate priority by some organisations.

Time and flexibility of programmes

While youth organisations and groups generally recognise the need to offer and provide tobacco education sessions for young people as part of a holistic health promotion element of their work, some organisations and groups question where they would find the time within their programme for tobacco education sessions to be effectively introduced.

Availability of tobacco specific resources and support

Many organisations, particularly smaller youth groups and organisations, feel that their group/organisation either does not have the resources to effectively address smoking and tobacco issues or does not really know who to contact in order to gain access to the resources that they need.

Staff not comfortable with addressing smoking and tobacco issues

Youth workers often find it difficult to encourage colleagues or young people to think about their smoking behaviour. Staff who do smoke sometimes feel hypocritical.
about addressing smoking issues with young people, particularly if they feel that they would be challenged about their own smoking behaviour.

**Too easy for smoking to become a ‘rights’ issue rather than a health issue**

Workers sometimes do not feel comfortable with discussing or addressing tobacco use with colleagues that smoke because these discussions can often become debates about an adult’s legal ‘right’ to smoke rather than focussing on tobacco as a health issue and a youth worker’s role as a healthy role model.

**Perception that tobacco is a ‘tough nut to crack’ - why bother?**

Some youth workers question the worth and the impact of offering tobacco education sessions and stop-smoking support for the young people that they work with, particularly for young people who have easy access to tobacco and for whom smoking is the ‘norm’ at home.

**Smoking gives an opportunity to build a bond and rapport with young people**

Some youth workers still use smoke breaks as an opportunity to communicate more informally and build rapport with some of the young people that they work with.

Protecting and promoting the health and wellbeing of young people is a key element
of the role of a youth worker. Youth workers need to see tobacco as a priority on an equal footing with issues such as alcohol, sexual health and drugs.

Youth workers are role models for many young people and evidence shows that young people are more likely to become smokers if parents, friends or people they see as role models smoke. Addressing smoking and tobacco needs to be seen as a core priority of the role of a youth worker.

Consistency between organisations

For some groups and organisations, the nature of the work that they are involved with means that they often work with young people who have been referred to them from other organisations or they refer young people on to other organisations, creating inconsistencies in policy and approach to tobacco issues.
Section 4: Opportunities that support the development of tobacco policies
Opportunities that support the development of tobacco policies

Having a policy in place boosts confidence

Simply having a well-enforced tobacco policy in place can be enough to give staff and young people the confidence to encourage behaviour change amongst their colleagues and friends.

Developing an effective tobacco policy - it can be done!

While it is clear that developing an effective tobacco policy can often be difficult, the experiences of organisations that have taken the time to put a robust, health-promoting tobacco policy in place shows that it can be done and can be successful.
Partnership working provides information, fills the gaps and offers support

Effective partnership working really helps to fill some of the knowledge and resource gaps that can make the development of an effective tobacco policy seem daunting at the outset.

Education sessions need to complement existing programme priorities and structures

Youth groups and organisations operating across NHS Greater Glasgow and Clyde offer a range of programmes, projects and sessions, many of which are relatively inflexible in terms of time, resources and priorities. Whilst there may be limited scope for tobacco education sessions to be added or extended onto existing programmes, there is certainly scope for tobacco education to be integrated into existing structures and sessions.

Understand the needs and background of a young client group

Developing a health-promoting tobacco policy should be seen as vital in addressing the complex needs and circumstances of the young people that organisations work with.
Tobacco is a health issue, not a ‘rights’ issue

While adult youth workers (those over 18) are entitled to smoke, such an ‘entitlement’ does not mean that they can smoke anywhere, at any time and it certainly should not circumvent or undermine their role as a youth worker, a role model and a carer.

Policies need buy-in at every level - young people, staff and managers

In order for tobacco policies to be successful, policies need to complement and enhance the general work practices and role of youth workers. Simply imposing a policy and expecting staff to enforce it without support and input from managers would be unlikely to succeed.
Role model behaviour and the de-normalisation of smoking and tobacco

Staff that work with young people are role models to young people. They are often able to help young people to take decisions, follow them through and take responsibility simply through the way that they behave and interact with the young people that they work with.

We know that youth work takes place in a variety of settings including community venues, uniformed groups, schools, youth cafés and on the street. We also know that youth organisations and groups adopt numerous approaches such as outdoor pursuits, drama workshops, health initiatives, peer education and single issue and single gender work.

Irrespective of setting, approach, or formal tobacco policy, if staff that work with young people simply choose to consistently make the de-normalisation of smoking and tobacco (as is already done with alcohol and drugs) a normal part of their everyday working practices, this will have a significant impact on the health choices that young people make.
Section 5: Developing a health promoting tobacco policy
Developing a health promoting tobacco policy

The Smoking, Health and Social Care (Scotland) Act 2005 places a legal imperative on groups and organisations to clearly state where staff, visitors and young people are not allowed to smoke. It is also important for local tobacco policies to be seen as a formal manifestation of an organisation’s overall attitude and approach on how it intends to address tobacco issues with their staff and young people.

The research fieldwork that has informed this support guide has highlighted that issues such as setting, client group, priorities, funding and programme structure are clearly very different across groups and organisations. The development of health-promoting tobacco policies needs to support and enhance current practices and operational procedures, rather than inhibit them. Under such circumstances, expecting organisations and groups to develop tobacco policies that are broadly similar in structure and content is simply unrealistic and impractical.

In this section we provide a series of suggestions that can support the development of a health-promoting tobacco policy.

These suggestions are not a rigid ‘blueprint’ for developing a health promoting-tobacco policy. They are simply a range of options that can help organisations reach a balance between legal obligations, the health-promoting duties and expectations highlighted by policy drivers such as GIRFEC, Curriculum for Excellence and the new tobacco control strategy, and the contextual backgrounds of an organisation’s own unique circumstances.

Rationale - why do it?

Organisations need to consider the reasons behind the development of a more effective tobacco policy. Do they want to encourage staff and service users to make positive health behaviour choices? Is it simply to comply with the law or do they want to address working conditions within their organisation?

Implementing a strong tobacco policy is also likely to provide staff and young people with a positive health message about the attitude that they should have with regard to tobacco. This message, supported by effective community-wide prevention programmes, may help to dissuade young people from taking up smoking in the future.
Reinforce the core values and objectives of your organisation and support current human resource policies.

Organisations considering developing an effective tobacco policy need to make sure that their tobacco policy supports the organisation’s current strategies and long term goals.

If young people are to feel safe, healthy and nurtured, then organisations working with them need to proactively incorporate smoking prevention initiatives and strategies to inhibit smoking uptake. However, there is little value in trying to influence the attitudes of young people with regard to healthy life choices without similarly affecting the outlook of the adults that work with them. This means that messages presented in youth-centred environments need to be meaningful, consistent and adopted by staff and young people alike. Young people follow social trends. If they receive a consistent positive health choice message from organisations and staff, then they are more likely to replicate that message.

Support and complement existing policies and practices

Any new tobacco policy needs to consider other policies that may already be in place and how it links with these. For example, does the policy complement any Healthy Working Lives or health and well-being policies?

Does allowing staff or young people to smoke in a designated area conflict or complement lone working, safe working ratios, child protection and supervision policies? In short, it is important that any smoking policy operates in harmony with the existing policies of an organisation.

Decide what your policy will include

It is important to ask what your organisation can do to address tobacco and smoking proactively within the realistic context of the work that you do. For some organisations, issues such as settings where work is carried out and the young people that you work with might mean that simply making sure that staff receive ‘Raising the Issue of Smoking’ training is as far as you can go.

For other organisations, their circumstances may mean that they can look to develop a more in-depth tobacco policy that includes formal education sessions for staff and young people, available stop-smoking support etc.

The policy needs to be effective but it also needs to be realistic.

How should your policy be framed?

Irrespective of specific content or actions, it is important to frame your policy in upbeat terms and emphasise the positive outcomes that the policy aims to deliver. These might include:

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1. Healthy Working Lives is a project co-ordinated by NHS Health Scotland. They offer practical information and advice to help improve the health, safety and wellbeing of staff and service users.
• improving health of young people;
• improving health of staff;
• improving the image of the group/organisation;
• links with wider policy drivers such as GIRFEC, Curriculum for Excellence or the new tobacco control strategy;
• emphasise healthy role model duty for staff.

Encourage buy-in at managerial level

The effective implementation and enforcement of a new tobacco policy needs buy-in and backing from management at a senior level, both for development and enforcement. Care needs to be taken to ensure that the correct people are involved at the development stage. For a tobacco policy to be robust and effective, it needs to be fully supported by those who have the authority within an organisation to develop, implement and enforce it.

Timescales

The development of positive health behaviour choices takes time and this needs to be reflected in the timescales for implementation of a new tobacco policy. Organisations developing an effective tobacco policy generally allow around 4-6 months for developing their policy before it is implemented.

Consultation

Effective two-way consultation between staff, young people and management should help to ensure that there is little ambiguity with regard to responsibilities, expectations and enforcement. If staff and young people have played a willing and significant role in shaping a tobacco policy, then it is far more likely that they will fully understand what is expected of them and willingly comply with the terms of the new policy. Ways of doing this could include:

• surveys;
• regular meetings with staff and young people;
• internet, intranet;
• notice boards;
• posters and banners;
• e-bulletins.

Communication

For tobacco policies to be successful, managers, staff and young people need to believe that the policy will be beneficial. Lack of knowledge, confidence and support amongst staff and young people for a policy will very quickly erode the effectiveness of it. For any tobacco policy to be developed successfully, staff and young people need to be kept fully informed of what is being planned, what is expected of them and what the terms of their tobacco policy will be. Therefore, ensure that:

• staff and young people are aware of a new policy;
• staff and young people understand what is expected of them;
• staff and young people learn about the smoking prevention activities and stop
smoking services available to them;
• staff and young people become comfortable with the policy;
• staff and young people have time and routes to feedback on the implementation process;
• partnership organisations and key stakeholders are made aware of the new policy.

Responsibilities, expectations and enforcement of the policy

While it is clear that a tobacco policy should not focus solely on defining responsibilities and expectations, formalising the terms of a new tobacco policy in writing will help to ensure clarity, with all staff and service users receiving the same information. This gives an organisation a point of reference if someone is in clear breach of the policy. It will also help to make sure that changes to the tobacco policy are fully implemented and applied.

Policy launch

Once the staff consultation has been completed and the policy formulated, the policy should be launched. The organisation needs to highlight the importance of this by setting a clear date and making staff and young people aware of it.

Organisations should again think about the core rationale behind their policy and use this to emphasise its importance. In order to shape and support the launch, organisations should encourage locally relevant groups such as local stop smoking services and Healthy Working Lives groups to become involved.
Section 6: Implementing a health promoting tobacco policy
Implementing a health promoting tobacco policy

As with tobacco policy development, it is important that tobacco policy implementation is shaped by the quite specific, almost unique circumstances and practical realities faced by staff and young people within organisations.

These specific circumstances and practical realities will largely underpin the level, nature, style and content of tobacco education provision, stop-smoking support and tobacco policy enforcement activities within each organisation.

Advanced tobacco policy

For some organisations, the ongoing development and support of smoking and tobacco policies is extremely important and relevant to the work that they do, and this has been formalised in their tobacco policy. These organisations have developed clear, well-supported tobacco policies that act as a strong catalyst and support for attaining a smoke-free youth environment and sustained health behaviour change amongst staff and young service users.

Intermediate tobacco policy

For other organisations, while there is clear recognition of the importance of addressing smoking and tobacco, several significant circumstantial factors could mean that they have not yet used their tobacco policy to support a completely smoke-free youth environment.

Basic tobacco policy

For some organisations, the type of work that they do and the location/sites where that work is carried out means that they do not have a formal tobacco policy or perceive that a formal tobacco policy, is not particularly relevant to the core work that they do. However, this should not undermine the point that smoking and tobacco issues are still very important in the work that they do with young people.

Education

An effective and proactive tobacco policy should incorporate clearly-defined prevention activities. It should not simply be a charter highlighting where and when people cannot smoke.

While the content and tone of smoking prevention activities will understandably vary significantly between different organisations, it is important that smoking prevention messages are delivered clearly, consistently and adopted in equal measure both by young people and staff within organisations. Traditionally, youth smoking prevention activities take up a small proportion of the lifestyle messages that young people receive;
when compared with messages on healthy eating, drugs, alcohol and safe sex, the continuity of the tobacco message is poor. Young people are generally urged not to start smoking, while most tobacco messages for adults focus upon support for quitting, giving a suggestion that starting to smoke is almost inevitable. Organisations need to make sure that staff and young service users receive a co-ordinated and clear message with regard to smoking prevention.

Training

Often youth workers find it difficult to encourage colleagues or young people to think about their smoking behaviour. Staff who do smoke sometimes feel hypocritical about addressing smoking issues with young people, particularly when they feel that they would be challenged about their own smoking behaviour.

ASH Scotland offer “Raising the Issue of Smoking” training for youth sector staff and organisations around addressing tobacco use with young people. NHS Greater Glasgow and Clyde Smokefree Services offer a generic “Health Related Behaviour Change” training course which introduces health behaviour change approaches and encourages the development of brief negotiation skills to support individuals to address specific health and wellbeing needs. The course is delivered as a half-day training course at venues throughout NHS Greater Glasgow and Clyde and can also be delivered as a shorter course. A one day “Young People and Tobacco” training course is also offered which is designed to improve confidence and skills for those working with young smokers.

The courses provide awareness of the purpose, benefits and process of delivering brief interventions in relation to smoking, tobacco use and young people. They also provide knowledge around tobacco, communication skills and how to refer colleagues and young people on to local stop-smoking services for support.

**Partnership working provides information, fills the gaps and offers support**

Simply copying and pasting a tobacco policy from the internet and expecting that to work effectively is not enough. The written policy document needs to be backed up by informed support, pathways, guidance, training and support. Working in partnership (with organisations like NHS Greater Glasgow and Clyde Smokefree Services, ASH Scotland and other youth work groups and organisations) can help to fill knowledge gaps, enabling ones to use their skills and knowledge in youth work to deliver effective and relevant tobacco education sessions as part of their health-promoting tobacco policy.

Development of education session resources and the delivery of education sessions can put a strain on time and finances for some organisations, particularly smaller ones. Partnership working with NHS Greater Glasgow and Clyde Smokefree Services can help organisations to incorporate education sessions and stop smoking support into their existing programmes.

In particular, organisations which have
been able to negotiate the development of effective tobacco policies have stated that they are more than happy to share their experiences and knowledge with other organisations as part of a process to support and stimulate the development of similarly successful policies with other groups and organisations.

**Education sessions need to complement existing programme priorities and structures**

The broad range of youth groups and organisations operating across NHS Greater Glasgow and Clyde offer a range of programmes, projects and sessions, many of which can be quite strict in terms of time, resources and priorities. This means that while there may be limited scope for tobacco education sessions to be added or extended onto existing programmes, there is certainly scope for tobacco education to be integrated into existing structures and sessions.

**Link with cannabis prevention sessions**

While further research needs to be done on the specific health effects of cannabis, we know that rates of smoking amongst people who misuse drugs and alcohol are higher than in the general population. Given that most young cannabis users tend to use cannabis by smoking it with tobacco, there is clear scope and potential for tobacco education sessions and stop-smoking support services to be integrated into existing cannabis sessions.

**Employability and personal development**

NHS Greater Glasgow and Clyde Smokefree Services are able to support tobacco education sessions that focus on employability and personal development issues, such as money management. In the North East area, NHS Greater Glasgow and Clyde Smokefree Services work in partnership with organisations to provide tobacco education sessions that complement and support core employability and personal development aims. This type of support varies according to area within NHS Greater Glasgow and Clyde.

**Stop-smoking support**

With reference to stop-smoking support, tobacco policies should include guidance on how staff and young people can access support services and information. Whilst employers and organisations are not legally obliged to provide stop-smoking support, those that do reduce non-compliance, both in terms of the law and their own tobacco policies – and improve the health and work conditions of staff and young people.

Organisations that encourage and support employees and young people to quit are likely to have a healthier workforce, whilst staff and young people may enjoy higher morale as the result of working in a healthier, smoke-free environment.

Organisations should be responsive to the individual needs and preferences of staff and young people and either provide appropriate on-site stop smoking support or refer
staff and service users to appropriate local services. Training and mentoring in line with NHS Greater Glasgow and Clyde policies and guidelines, along with national best practice is available from NHS Greater Glasgow and Clyde Smokefree Services to support any organisation wishing to deliver stop-smoking support. These also ensure consistency across organisations and for young people. Staff should be able to attend stop-smoking services during work time and, where possible, these services should be available in the workplace. Adopting such a supportive attitude also helps to minimise the likelihood of non-compliance with a tobacco policy.

Different types of tobacco users need different types of stop-smoking support. If organisations make a variety of stop-smoking support strategies available then it is likely that more staff and young people will get involved in organisation-based programmes. Organisation-based stop-smoking support could include:

- identifying a lead person within an organisation to provide guidance and support;
- providing training for staff and service users so that they feel more comfortable about raising the issue of quitting smoking with colleagues and young service users;
- mechanisms via which smokers looking to quit can be referred on to local stop-smoking services;
- identifying a resource room where stop-smoking information and leaflets are available;
- developing links with local stop-smoking services to provide sessions during work time, if possible;
- providing staff and service users with the Smokeline number (0800 84 84 84).

**Enforcement - roles and responsibilities**

An effective tobacco policy needs to set out and clarify who the policy applies to - for example, all staff, service users, contractors, volunteers and visitors. The ‘application’ section should also clarify who is responsible for enforcing the policy, the powers that they have and the procedures that will be used if non-compliance occurs.

A good example of such an effective tobacco policy is Glasgow City Council and NHS Greater Glasgow and Clyde’s Smokefree care placements policy for Glasgow City Council’s looked after and accommodated children and young people. The policy clearly highlights what is specifically expected of staff, social workers and carers and residential unit staff. The policy prohibits staff from smoking in front of children and young people and specifically states that staff should actively promote the benefits of not smoking to young people.

An effective tobacco policy should clearly highlight how and by whom the policy will be enforced and monitored. This could include creating a warning system, raising the issue in support and supervision meetings or, in more serious cases, using existing HR grievance and disciplinary procedures. It is equally important to emphasise that all staff have a role to play in terms of enforcing and complying with the policy.

Of course, tobacco policy enforcement needs
to be about more than simply disciplining people who do not comply with the policy. Useful tips for enforcing smoking policies include providing training on enforcement, creating links between the policy and organisational HR policies, raising awareness of the consequences of breaching the policy and letting staff know that action will be taken if they breach the policy.

**Monitor, evaluate and review the process**

It is important to monitor and evaluate any new tobacco policy in order to measure effectiveness and keep it up-to-date.

Suggested mechanisms for monitoring feedback include:

- periodic staff and young people surveys;
- feedback mechanism via the organisation’s website/intranet;
- suggestion boxes;
- meetings with staff and service users.

An evaluation of a smoking policy, carried out 6-8 months after implementation, provides organisations with an opportunity to measure the results of the policy and make improvements in order to sustain the effectiveness of the policy. Organisations can measure the health impact of their policy by determining the number of smokers involved with the organisation and their interest in quitting before and after policy implementation.

Operational impact could be measured by using confidential surveys to check that the policy is being applied equally to staff, young people, managers and visitors. Staff and young people’s satisfaction could be measured by using surveys and focus groups to highlight levels of satisfaction with the policy, the implementation of the policy and any stop smoking support programmes or services provided under the terms of the policy.
Section 7: Useful contacts and resources
Useful contacts and resources

**NHS Greater Glasgow and Clyde Smokefree Services**

NHS Greater Glasgow and Clyde Smokefree Services are responsible for a wide range of tobacco projects aimed at reducing the damage done by tobacco to young people in and around Greater Glasgow and Clyde. For more information:


E-mail info@nhsggcsmokefree.org.uk

Telephone 0141 201 4890

**W-WEST**

W-WEST (Why Waste Everything Smoking Tobacco?) is Scotland’s first ever pro-choice smoking information group led by and for young people. The group aims to give young people the information they need to make choices about smoking.

Funded by NHS Greater Glasgow and Clyde, the group is made up of both smokers and non-smokers. It aims to provide young people with easy access to the real facts about smoking, so that they can decide what is best for them.

For more information on the work of W-WEST and the resources that they have available, visit: [http://www.w-west.org.uk/](http://www.w-west.org.uk/)

**ASH Scotland - Young People’s Team**

ASH Scotland works closely with a wide range of organisations and services which promote young people’s health and well-being and encourage young people not to take up smoking or using tobacco.

ASH Scotland’s Young People’s Team supports the development and implementation of national tobacco control policies. In partnership with the Scottish Tobacco Control Alliance (STCA) they organise regular Youth and Tobacco Forum meetings, where current and relevant youth and tobacco issues are discussed.

ASH Scotland’s Young People’s Team also directly engages with young people in order to reduce tobacco and smoking related harm in Scotland. Through accreditation frameworks like Dynamic Youth Awards and funding provision via the Crofton Award, they recognise young people’s achievement in tobacco control and education.

In addition, ASH Scotland’s Young People’s Team provide and maintain a comprehensive tobacco resource and information hub designed to help professionals and young people access the information and resources that will help them stimulate debate on current tobacco issues:

ASH Scotland’s Young People’s Team is happy to answer any questions you might have. Simply email: 
enquiries@ashscotland.org.uk

Connie Bennett, Development Officer (Young People) CBennett@ashscotland.org.uk

**NHS Health Scotland and ASH Scotland: A guide to smoking cessation in Scotland**

Comprising two main parts, the guide covers how to deliver interventions, pharmacotherapy, monitoring and training. Helping smokers to stop is aimed primarily at healthcare practitioners, and is accompanied by a desktop ‘Brief intervention’ flowchart. Planning and providing specialist stop smoking services is for providers and commissioners of intensive stop smoking support, including those involved in the national pharmacy scheme.


**Smokeline**

Smokeline is Scotland’s national stop smoking helpline, available seven days a week on 0800 84 84 84.

**Can Stop Smoking website**

This website provides support and a range of useful information and tips for people that would like to quit smoking, including details of how to access local stop-smoking services.

Visit http://www.canstopsmoking.com/

**Healthy Working Lives**

Healthy Working Lives is co-ordinated by NHS health Scotland. They help organisations create a safer, healthier and more motivated workforce. Healthy Working Lives work with all kinds of businesses, completely free of charge, offering practical information and advice to help improve health and safety and the wellbeing of everyone at work.

For more information visit:

http://www.healthyworkinglives.com/
Section 8: Acknowledgments / Appendices - Case Studies / Examples of tobacco policies
Acknowledgements

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Sandie Armstrong - Innerzone
Stacey Bradley - PEEK
Katie Smillie - Royston Youth in Action
Gerry Baldwin - Fuse
Liz Mitchell - Parkhead Youth Project
Melanie Owens - NHS Greater Glasgow and Clyde Y-TAG (Youth Tobacco Action Group)
Case Study A

What do they do?
Organisation A is a voluntary managed youth activity programme that offers a wide range of educational, physical and diversionary activities for young people. They work in partnership with organisations across the East End of Glasgow using local drop-ins and youth clubs to provide structured and supervised sports and leisure programmes, health and social education guidance programmes and IT training.

These programmes are designed to provide young people with the skills and confidence to make positive decisions about the issues and influences they may face when growing up in the East End of Glasgow. Each programme is accredited using structures such as Dynamic Youth Awards, Youth Achievement Awards and Duke of Edinburgh Awards. As a result, programme participants gain formal and meaningful recognition as they learn skills, giving them the opportunity to potentially develop as a leader and role model for other young people in their local area.

Tobacco picture
Organisation A has recognised that promoting and protecting the health of young people should be a fundamental element of the role of any youth worker and that youth workers have a vital part to play as healthy role models for young people. In order to bring smoking into line with other issues such as alcohol and drugs, staff and young service users are simply not allowed to smoke at any Organisation A project, programme or activity. While Organisation A recognises that taking and implementing such a strong stance on smoking and tobacco has not been easy, the work that they have done in the three years since they chose to become smoke-free has definitely been worthwhile and has led to significant health behaviour change amongst both staff and the young people that they work with.

Prevention and education
If youth workers are provided with appropriate and up-to-date materials, resources and information on a subject then they are far more likely to deliver meaningful sessions. Organisation A has worked directly with local NHS Greater Glasgow and Clyde Smokefree Services in order to learn from their expertise on smoking and tobacco issues. They then used their knowledge and awareness of youth work in order to develop a range of smoking and tobacco-related resources, packs and session plans that would support their youth work team.

In order to further emphasise the importance of addressing smoking and tobacco use with young service users, Organisation A has incorporated smoking and tobacco sessions into several related projects and programmes, including money management, cannabis training and child safety.
Partnership relationships with other youth organisations and groups now mean that Organisation A offer and deliver smoking and tobacco prevention and education sessions across the East End of Glasgow.

Stop-smoking support
Organisation A offers stop-smoking support for staff and young service users alike. The development of their relationship with local NHS Greater Glasgow and Clyde Smokefree Services has led to two members of staff being trained in the Maudsley stop-smoking programme. This means that they are able to provide personalised stop-smoking support directly to colleagues and young service users and effectively direct colleagues and young services to access local NHS stop-smoking services.

Tobacco policy
Organisation A recognised that while developing a formal tobacco policy would not be the ‘be all and end all’ a formal tobacco policy could be a strong catalyst for change if developed in the correct way. As a result, staff and young service users were regularly consulted on the development of ‘their’ tobacco policy. Giving staff and young people a meaningful and on going input into the development and implementation of the tobacco policy meant that they were far more likely to ensure that the terms and aims of the policy were supported and met.

From the outset, Organisation A sought to make sure that their tobacco policy quickly became a core element of the role that they expected all of their youth workers to carry out. For example, young people are not allowed to go outside for smoke breaks because this would mean that they were not being directly supervised by their youth worker. Making their tobacco policy a key element of their child protection practice has really helped to ensure that staff and young service users remain aware that they cannot smoke while involved with Organisation A programmes.

Future considerations
If protecting and promoting the health and wellbeing of young people is a key element of the role of a youth worker, then tobacco needs to be seen as a priority on an equal footing with issues such as alcohol, sexual health and drugs. Youth workers are role models for many young people. Evidence shows that young people are more likely to become smokers if parents, friends or people they see as role models smoke. Addressing smoking and tobacco needs to be seen as core priority of the role of a youth worker.

A lack of knowledge on smoking and tobacco can potentially lead to a fear of raising the subject, meaning that organisations simply deal with legal requirements rather than actively look to fully address the issue. Partnership working and the sharing of knowledge, experience and education resources helped Organisation A to implement an effective smokefree policy and provide their staff with the confidence to support and maintain that policy.
Case Study B

What do they do?
Organisation B works with some of Glasgow’s most disadvantaged, vulnerable and harder-to-reach young people (aged 16-24) in order to deliver employability and personal development programmes within some of Glasgow’s most deprived areas.

Groups of 10-12 young people come together and work as a team to develop a group-based challenge or task that will be delivered in their local community. Each team member is supported through a personalised programme of activities and challenges over a period of 16 weeks. These personalised activities and challenges are designed to improve confidence, motivation and self-esteem, whilst challenging and stimulating each participant to improve their employability prospects.

Organisation B recruits young people from a wide variety of areas. Some young service users either self-refer or hear about the service from friends who have benefited from working with them. Organisation B also receives referrals from a wide variety of third-sector and statutory service providers, including Skills Development Scotland and Glasgow Life, along with similar employability and personal skills providers including Prince’s Trust/Fairbridge and Venture Trust.

Tobacco picture
Employability and personal development are the key core focus for Organisation B. Although health and wellbeing sessions are included within each 16 week programme, these sessions have tended to focus primarily on alcohol and drug issues because these are seen as key issues that could quickly and directly inhibit a programme participant’s ability to find and maintain employment.

Prevention and education
Organisation B has started to recognise that smoking and tobacco use can be as important an issue for employability and personal development issue as alcohol and drugs for some of their young people. Aware that some of their staff may not be comfortable with addressing smoking issues or may not have in-depth tobacco knowledge, Organisation B have started to work closely with NHS Greater Glasgow and Clyde Smokefree Services in order to develop the delivery of smoking and tobacco education sessions within each 16-week programme.

Stop - Smoking support
While Organisation B does not directly offer stop-smoking support, the development of smoking prevention and education sessions with NHS Greater Glasgow and Clyde Smokefree Services should help direct staff and young service users to appropriate local stop-smoking services.

Tobacco policy
Although Organisation B does have a formal, written tobacco policy, the focus of that tobacco policy seems to be more about making sure that they comply with smokefree legislation by highlighting where people can and cannot smoke rather than pro-actively looking to enforce their tobacco policy. Whilst Organisation B staff are actively encouraged
and reminded not to smoke within sight of young service users, programme participants are free to smoke during their breaks, as long as they smoke outside.

Participation in Organisation B’s employability and personal development programmes is completely voluntary. Young service users are free to leave the programme at any time if they are not happy with how things are going for them. One of the barriers to Organisation B choosing to implement a completely smokefree policy is the fear that if they did do so then some of their young voluntary participants might choose to quit the programme.

**Future considerations**

Employability and personal development issues are clearly Organisation B’s ‘bread and butter’; however they also recognise that taking steps to support the current (and future) health and wellbeing of programme participants should be important for any organisation that regularly works with disadvantaged and vulnerable young people. For a variety of reasons, many of the young client group that Organisation B work with may not have received education and prevention sessions on issues such as smoking and tobacco, drugs and alcohol or sex education whilst at school. Organisation B are looking beyond their core remit and are considering ways to make sure that these sessions are provided within their current programme structure and timescales.

Organisation B has recognised that a formalisation of their relationship with NHS Greater Glasgow and Clyde Smokefree Services will help to ensure a consistency of provision of smoking and tobacco education sessions within the 16-week employment and personal development programme. Further training or awareness-raising sessions could also help staff to feel more equipped to question or challenge the smoking behaviour of colleagues and/or young service users.

Organisation B both refers on and receives young service users from a wide variety of other statutory and voluntary sector organisations. Lack of consistency in approach, attitude and policy across these agencies often means that staff and young service users receive confusing and conflicting messages with regard to smoking and tobacco. Broad agreement on approaches and attitudes to smoking and tobacco use, underpinned by a consistent enforcement of health-promoting tobacco policies, would be extremely useful.
Case Study C

What do they do?

Organisation C is one of Scotland’s oldest charities and is a specialist provider of care and support services for young people. They work directly with young people aged from 12 to 24, and offer an integrated array of services. This includes residential services, day and community services, secure services, full educational curriculum, fostering, and training and employment opportunities. The core aim of Organisation C is to offer young people with whom they work a place of safety, structure and stability, opening up new possibilities for young people to play a useful part in society and prepare them for a happy and fulfilled adult life.

Tobacco picture

Given that one of Organisation C’s key aims is to offer young people a place where they can develop safely, it is not surprising that they operate a policy designed to ensure that their main site and premises are completely smoke-free. With the majority of Organisation C’s programmes and activities being delivered centrally at their own campus, it is easy to see the implementation and rationale of their smoke-free policy as being fairly straightforward. Young people are not allowed to smoke or be in possession of tobacco or cigarettes while on campus, or while involved in any of Organisation C’s off site activities. Staff are not allowed to smoke while on shift, and any members of staff seen smoking within sight of any young people will be spoken to by senior management and could face disciplinary action for repeated infringements.

Although cigarettes are regarded as contraband on campus, the range of aggressive, inappropriate or harmful behaviours that are often displayed by young people will sometimes mean that they will still seek to challenge authority and have a cigarette or try to have a cigarette as a perceived means of stress relief. As a result, it can be difficult for Organisation C to consistently achieve their stated aim of providing a completely smoke-free environment.

Although Organisation C may enjoy success in attempting to ensure that their campus is smoke-free, they often have little impact or control over choices that their young people make when they return home. Parents, siblings and friends can be a key source of tobacco, meaning that young people will often return to using tobacco even after making successful quit attempts while in the care of Organisation C.

Prevention and education

Organisation C works closely with local NHS Greater Glasgow and Clyde SmokeFree Services in order to provide smoking and tobacco prevention and education sessions on campus for both day and residential service users. Materials such as smoking prevention posters, pens and mouse mats are on display and are available throughout the campus. Several staff from Organisation C have been provided with ‘Raising the Issue of Smoking’ training and regularly have informal chats with groups of young service users about their
Developing tobacco policies for youth projects

Smoking behaviour during lunch breaks.

Stop - smoking support

Each young person is assigned a key worker who will develop a personalised care plan for them. If a young person is a smoker their care plan will always include a personalised quit plan.

The effectiveness of Organisation C’s smoke-free campus policy is enhanced by the fact that four staff members have received Maudsley stop-smoking support training, meaning that they can directly provide stop-smoking support for members of staff and young people alike. Organisation C recognises that working with their young client group can be particularly stressful, making it even more difficult for staff members who do smoke to remain completely smoke-free while on duty. Providing empathetic stop-smoking support for staff really helps staff to comply with Organisation C’s stated smoke-free policy, meaning that they are generally able to display healthy role model behaviour to their young service users more regularly.

Tobacco policy

Organisation C introduced their smoke-free campus policy approximately three years ago. The policy was largely motivated by a need to ensure that young people did not try to leave the campus for a cigarette and for staff to be able to directly supervise all young people at all times. As a result Organisation C introduced a smoke-free campus policy.

Although the introduction of the smoke-free policy may not have been initially motivated by a clear desire to improve the health of staff and young people, the continual implementation of the smoke-free policy has certainly led to several key benefits. Organisation C now enjoys an excellent working relationship with NHS Greater Glasgow and Clyde Smokefree Services; as a result they are able to offer tobacco education sessions and stop-smoking support services for staff and young people alike. Additionally, the on-going success of the smoke-free policy has enabled Organisation C to win several national health promotion awards.

Future considerations

The success of Organisation C’s smoke-free policy owes a great deal to staff recognising that they have an obligation to comply with the policy, and to provide a clear example of healthy role model behaviour for their young people. Senior management recognise that compliance with the policy is extremely important, and make sure - in a firm but empathetic way - that staff are aware of what their role should be. Continued support from staff and senior managers will be vital for the ongoing development of Organisation C’s smoke-free policy.
Case Study D

What do they do?

Organisation D works with a range of community-based partners in order to provide street work, thematic group work and diversionary activities for young people aged 12-19. These services are offered in any area where there are high levels of social deprivation, crime, drug and alcohol dependency and recognised violent gang culture. This means that Organisation D works predominantly with young people who are often described as ‘hard to reach’ and who have either been excluded from mainstream youth facilities or see such facilities as having little relevance to them.

As a starting point for their street work activities, organisation D aims to help young people access information, advice and support in a local community setting. From there, young people are provided with a wide range of individual and group programme options that are designed to divert them away from anti-social behaviour and the criminal justice system by focusing on social capital and personal development.

Tobacco picture

Issues such as alcohol, drugs and smoking are all ‘risky’ behaviours that can have a significantly detrimental impact upon the physical and mental wellbeing of young people. For organisation D, no single issue is viewed as being more important than another and none is treated or approached in isolation. As a result, adopting an holistic and co-ordinated approach to improving the physical and mental welfare of each individual young person is a key element within all of the programmes offered by Organisation D.

Prevention and education

Workers at Organisation D increased their tobacco knowledge via NHS Greater Glasgow and Clyde Smokefree Services’ ‘Young people & tobacco’ training course. This one-day course is designed to improve confidence and skills for those working with young smokers and is for anyone who works with young people and has the opportunity to raise the issue of smoking. This training has helped workers to raise, discuss and address smoking behaviour with young people in an appropriate, discreet and supportive manner.

Smoking education and prevention sessions are regularly included in group elements of the programmes that are delivered by Organisation D. These sessions are often facilitated by members of staff from local NHS Greater Glasgow and Clyde Smokefree Services and are usually delivered in a manner that complements similar education sessions relating to drugs and/or alcohol.

Stop smoking support

The individual and tailored nature of the programmes offered by Organisation D means they will seek to direct or ‘road map’ young people to specialist stop smoking services provided by NHS Greater Glasgow and Clyde Smokefree Services as and when a young person identifies a need to stop smoking.
Tobacco policy

Organisation D’s workers meet directly with disengaged young people in their local community to work with them in order to reduce and halt their involvement in anti-social behaviour. The success of Organisation D’s street work programme is largely underpinned by their workers’ ability to quickly build rapport and relationships based upon mutual trust and respect with the young people that they work with. Adopting a completely smoke-free policy would significantly undermine the ability of workers to build trust and rapport with young people. At the same time, however, Organisation D clearly recognises that promoting and protecting the health of young people should be fundamental to the work that they do.

The programmes and activities delivered by Organisation D are very much driven by the needs of individual young people, meaning that workers adopt what is generally seen as a reasonably informal, ‘common sense’ approach. Workers who smoke are regularly reminded not to do so in view of the young people that they work with and are asked to make sure that they discourage young people from smoking whenever possible and practical.

Future considerations

Protecting and promoting the physical and mental health and wellbeing of each young person that they work with underpins the work of Organisation D. This means that while Organisation D regard smoking as a ‘risky’ behaviour on an equal footing with alcohol and drugs, the level of priority it is given is very much shaped by the needs of local communities and the individual young people that they work with. Organisation D provides their workers with the skills and knowledge to address smoking and tobacco as and when there is a need or demand for it. Such a demand can change from area to area, person to person and that very much mirrors the work that Organisation D does.
Examples of tobacco policies

Issues such as setting, client group, priorities, funding and programme structure vary significantly across different groups and organisations that work with young people. Whilst these tobacco policy examples provide useful guidance on the potential structure and content of an effective health promoting tobacco policy, it is vital that all organisations and groups develop and implement health promoting tobacco policies that enhance their own current practices and operating procedures.

Example 1- Health-promoting tobacco policy

Smoke-free Policy

Who does this policy apply to? All Organisation 1 staff, volunteers and secondees, all people visiting premises young people on Organisation 1 activities and programmes.

Delivery Partner Note:

Delivery Partners will use their own policies but should check that these at least meet the standards of Organisation 1’s policies.

The Policy:

Smoking is not permitted in any enclosed or substantially enclosed Organisation 1 premises, or premises being used for Organisation 1 activities, including vehicles. This includes entrance and exits, permanent structures and temporary ones such as tents and marquees. This is applicable to any person on Organisation 1 premises including staff, visitors and young people.

- Smoking is not permitted near any flammable liquid or gases.
- Staff must not purchase tobacco or tobacco related products for young people under 18.
- Staff must not offer/accept cigarettes to or from young people under the age of 18.
- Where possible, under 18s should be encouraged not to smoke.
- Where possible staff are not to smoke in front of young people.

Changes since previous policy:

None.

Why we have this policy

This policy protects any person on Organisation 1’s property from the harmful effects of second-hand smoke. Organisation 1 is committed to ensuring it provides a healthy working and smoke-free environment, without promoting or condoning smoking in any way.

Where is smoking permitted?

Smoking is only permitted outside in areas identified as safe and appropriate for smoking (e.g. away from entrances, flammable materials and vehicles) and designated as smoking locations by the building.
Developing tobacco policies for youth projects

- External smoking locations will be appropriately signed or clearly identifiable.
- All staff and young people will be informed verbally during their induction about the smoking arrangements, including when using hired premises for the purpose of programmes.

Visitors

All visitors are required to abide by the no-smoking policy. If necessary, the policy should be verbally explained by staff to all visitors.

Signage

The law states that an A5 sized sign must be displayed at ALL entrances containing the international no smoking symbol and the words: “No Smoking. It is against the law to smoke in these premises”.

“No Smoking” signs and symbols should also be displayed in the front and back of all vehicles including minibuses.

Signs can be ordered from DIY shops/online. Signs can also be made by young people as part of educating them about the dangers of smoking.

Working with Young People under 18

Staff must not purchase tobacco or tobacco related products for young people under 18, this is to abide by UK law and also to discourage smoking.

Staff must not offer/accept cigarettes to or from young people under the age of 18.

There is no age restriction on the possession and consumption of tobacco, so you cannot confiscate these items from a young person aged under 18 purely because of their age.

Where possible under 18s should be encouraged not to smoke, educated on the effects of smoking and given information on how to stop. Smoking should not be seen as a barrier to a young person being on programme with The Trust.

Staff who smoke

Staff must adhere to this policy at all times.

Staff who smoke must consider the appropriateness of their actions; both with regard to the messages that are being given to young people and the image of the organisation that is being presented to the public.

Where possible staff are not to smoke in front of young people.

If a staff member breaks the policy

Staff must only smoke in designated external smoking areas. Staff may be subject to disciplinary procedures if they do not adhere to this policy (see Disciplinary Procedure).

If a young person breaks the policy:

Staff should remind them of the requirements to stop smoking until they are in an appropriate location.

If a young person continues they should be informed that non-compliance may result in them being excluded from Organisation 1’s programme.

Any decision to exclude the young person
should follow Organisation 1’s Exclusion Policy.

Related policies Health and Safety guidance note on smoke-free environments.

Support:

There is a wide range of advice and guidance available to support young people to stop smoking including:

The young person’s GP.

Free information is available at [http://smokefree.nhs.uk/](http://smokefree.nhs.uk/) or on 0800 022 4 332

Tips on how to give up smoking: [http://www.patient.co.uk/health/Smoking-Tips-to-Help-you-Stop.htm](http://www.patient.co.uk/health/Smoking-Tips-to-Help-you-Stop.htm)
Example 2- Health-promoting tobacco policy

Tobacco at Work Policy

Introduction

Staff will be aware of the medical evidence that smoking and passive smoking can be a serious health hazard. The purpose of this policy is to protect our staff and the young people that we work with. This policy was drawn up following a staff survey on smoking at work.

Policy Statement

It is the policy of Organisation 2 that staff will not smoke while at work. Good practice would dictate that this includes any situation that they may be in for the fulfilment of their work including situations where young people, tenants and others with whom we work may be smoking.

- Staff may take reasonable time out from work to smoke, similar to, for example, a coffee break.
- Staff and young people are not permitted to smoke anywhere in the Organisation 2 office. Smoking is permitted in the garden at the rear of the building or the basement at the front. Access to these areas must not disrupt or interfere with service delivery activities. Smoking is not permitted outside the front door. This is not for health reasons but rather for the image it portrays to visitors, the public etc.
- Smoking is not permitted in any company vehicle.
- The above applies equally to young people, except where in the professional judgement of staff a young person should be permitted to smoke.

- Staff are recruited into a field of work where a smoke free environment cannot be guaranteed, but individual preferences will be met where possible. Particular attention will be paid to any ongoing health issue that a member of staff may have which makes it preferable to avoid exposure to smoke (e.g. Asthma).

Responsibility for the implementation and operation of this policy will lie with managers for the locations and staff which they are responsible for. Breaches of the Smoking at Work Policy will be viewed seriously and dealt with under the disciplinary procedure.
Example 3 - Health-promoting tobacco policy

Smoking Policy

1.0 Purpose
The purpose of this policy and procedure is to express the Organisation 3’s compliance with the Smoking, Health & Social Care (Scotland) Act 2005 and the Prohibition of Smoking in Certain Premises (Scotland) Regulations 2006.

2.0 Policy Statement
Organisation 3 takes seriously its responsibility to maintain a smoke free environment and to protect all staff, students and visitors (including external contractors/suppliers) by enabling them to operate within a smoke free environment (with the exception of designated smoking areas) whilst on Organisation 3’s property or travelling in Organisation 3 vehicles.

3.0 Scope
3.1 This policy covers all staff, young people, contractors, suppliers and visitors to Organisation 3.
3.2 This policy applies to all premises and property with the only exception being the external designated smoking areas.
3.3 This policy applies to all vehicles.
3.4 This policy should be read in conjunction with Organisation 3’s Equality, Diversity and Inclusion Policy and its separate Disability, Race and Gender Equality Schemes.

4.0 Responsibilities
4.1 The Chief Executive and the Health & Safety Manager are responsible for the management of this policy.
4.2 Organisation 3’s Management Team is responsible for the implementation of this policy.
4.3 The Facilities Service Manager is responsible for the provision and maintenance of signage and designated areas.
4.4 All staff, students, contractors, suppliers and visitors are responsible for ensuring they comply with this policy.

5.0 Implementation
5.1 Young people and staff, under the age of 18, are not permitted to smoke on Organisation 3 property or in Organisation 3 vehicles under any circumstances.
5.2 All staff, young people, visitors and contractors are prohibited at all times from smoking within Organisation 3 buildings and vehicles.
5.3 Smoking is permitted in the designated smoking areas only.

6.0 Non Compliance
6.1 Staff are enabled to ensure that smoking only takes place in the designated areas. For young people, violation of this policy is a breach of the Code of Conduct and as such is a booking offence under the Young People Disciplinary Policy and Procedures.
6.2 A breach of this policy by staff, young people or residents will be subject to disciplinary action in accordance with the relevant disciplinary procedure.
6.3 Any visitor or contractor found in breach of the policy will be instructed to comply or leave the premises or vehicle.

6.4 Any complaint in respect of non-compliance should be referred to the Health & Safety Manager or General Manager.

7.0 Appeals Procedure

7.1 For young people and staff the sanctions associated with non-compliance with this policy are set out in the relevant Disciplinary Policy & Procedures which include appeals procedures.

7.2 For all other categories the appeal will be treated as a complaint which will be considered within the Complaints Procedure.

8.0 Communications

8.1 This policy and procedure will be brought to the attention of all staff and young people.

8.2 Explanation and information regarding these policy and procedures will be included in induction programmes, as well as staff and young person handbooks.

9.0 Support to Stop Smoking

9.1 Sources of support include:-
- Your local GP/Healthcare Surgery
- Pharmacists
- Smokeline 0800 848484

10.0 Review of Policy

This policy and procedure will be reviewed as necessary to ensure compliance with legislation.
References
References


11. Scottish Government Consultation on Children and Young People Bill 2012: www.scotland.gov.uk/Topics/People/Young-People/legislation/consultation-2012/stakeholders


17. Scottish Government Scotland’s Future is smoke free: a smoking prevention action plan 2008: www.scotland.gov.uk/Publications/2008/05/19144342/0
ASH Scotland’s vision is of a healthier Scotland free from the harm and inequality caused by tobacco. We work closely with a wide range of organisations and services who promote young people’s health and well-being to discourage young people from taking up smoking.

Follow us on Twitter: @ashscotland
Find out more, and get in touch, at www.ashscotland.org.uk/youth
Send your enquiries on any aspect of tobacco or smoking to our free public enquiry service: enquiries@ashscotland.org.uk

NHS Greater Glasgow and Clyde Smokefree Services are responsible for a wide range of tobacco projects aimed at reducing the damage done by tobacco to people in and around Greater Glasgow and Clyde. For more information:

Visit www.nhsggcsmokefree.org.uk
E-mail info@nhsggcsmokefree.org.uk
Telephone 0141 201 4890