

ASH Scotland viewpoint: March 2017

Helping children and young people who are 'looked after' to grow up free from tobacco

Introduction

Under the provisions of the Children (Scotland) Act 1995, looked after children and young people are defined as those in the care of their local authority as a result of a supervision requirement from the children's hearing system. Depending on the conditions of the requirement, the child/young person may be '*looked after at home*' with regular contact from social services, or they may be '*looked after away from home*' by foster or kinship carers, prospective adopters, or in residential care homes, residential schools or secure units.

The Scottish Government and local authorities have a parental responsibility for the health and well-being of looked after children. Yet children and young people who are looked after have some of the worst health outcomes of any group.

There is limited national data on the extent to which looked after children and young people (LACYP) smoke, or are affected by second-hand smoke. The last survey, conducted in 2004, indicated that 44% of LACYP across Scotland smoked. However our recent freedom of information requests indicated that smoking prevalence among LACYP was still as high as 49% in some health board areas.

ASH Scotland's view

ASH Scotland believes that looked after children deserve all the support, protection and opportunities set out in Scotland's Charter for a Tobacco-free Generation:

1. every baby should be born free from the harmful effects of tobacco;
2. children have a particular need for a smoke-free environment;
3. all children should play, learn and socialise in places that are free from tobacco;
4. every child has the right to effective education that equips them to make informed positive choices on tobacco and health;

5. all young people should be protected from commercial interests which profit from recruiting new smokers;
6. any young person who smokes should be offered accessible support to help them to become tobacco-free.

The Charter principles require that carers do not tolerate or accept children taking up smoking as the norm, help prepare children to make positive decisions on their own health and well-being and ensure that they protect children from second-hand smoke.

Settings: kinship care, foster care and prospective adoption

To protect the health of the children they care for, all kinship carers, foster carers and prospective adoptive parents should be advised of the [benefits of a smoke-free home](#) and, if they smoke, be encouraged to take their smoking completely outdoors. Children who grow up in smoking households are more likely to smoke themselves, so recognising the risks associated with role-modelling smoking behaviour is another reason why carers who smoke should only do so away from children.

ASH Scotland does not believe that kinship carers, foster carers or prospective adoptive parents should be forced to quit smoking, rather we believe the focus should be on ensuring carers' homes are completely smoke-free and supporting carers to achieve this. Policies should therefore avoid excluding 'all smokers' from becoming kinship carers, foster carers or adoptive parents. While exposure to tobacco smoke is unhealthy, this must be part of a wider consideration of recruiting and maintaining the best and most appropriate carers for any child or young person.

We know that there are some parents or carers, for example who do not have a garden or balcony, who find it difficult to leave their children to smoke outside. If temporary abstinence (i.e. not smoking for a limited period of time while indoors), or use of nicotine replacement products, is not an option then we believe it is preferable to use an [e-cigarette or vape](#) within the home, rather than to continue smoking tobacco. While some people are concerned that e-cigarettes still exhibit role-modelling behaviour, we believe this is still preferable to modelling smoking. While we know that e-cigarettes and vapes are not entirely safe, we are confident that they are much less harmful than smoking tobacco and expect that exposure to e-cigarette vapour will be significantly less harmful than exposure to second-hand tobacco smoke.

Settings: residential care homes, residential schools or secure units

Due to the nature of these residential settings also being a workplace (with employees), the approach taken needs to be slightly different.

We believe in creating a tobacco-free culture throughout residential care settings. This includes both indoors and outdoors grounds and a consistency in approach for all staff, visitors, children and young people. Residential care staff should avoid an acceptance that young people living with them will smoke and that it is the '*least of their worries*'. Tobacco use is the biggest cause of preventable illness and death compared to any other substance, as well as imposing social and economic costs.

Based on advice from the Care Inspectorate and residential providers, we believe that e-cigarettes should also be included within any tobacco-free culture or approach within residential care settings for LACYP and the use of such products by either staff and young people discouraged. This approach links in with forthcoming legal restrictions on sales of e-cigarettes/nicotine vapour products to young people under the age of 18 and also the unique position the staff play in terms of positive role-modelling and parenting the young people they care for.

The use of licensed medicines (such as nicotine replacement therapies) by either staff or young people should not be prevented; rather the use of these should be encouraged as a supportive measure where this is to facilitate temporary abstinence or stopping smoking.

Future developments

We support the introduction of clear guidance that tobacco has no part to play in the lives of children who are looked after. We understand that it is not always easy to have full implementation and that organisations should be supported as they head towards a tobacco-free culture. The creation of a tobacco-free culture should be realistic, and for some providers this will likely take the form of a stepped approach to full implementation.

For further information please visit www.ashscotland.org.uk