
To: Cabinet – 12 July 2010

**By Alan Marsh, Cabinet Member for Public Health
Meradin Peachey, Kent Director of Public Health
Allan Gregory, Tobacco Control Manager**

**Subject: “Towards A Smokefree Generation”
Kent Tobacco Control Strategy 2010-2014**

For decision

Summary:

This strategy enables Kent partners to acknowledge the importance of supporting a comprehensive approach to tobacco control; for their own organisation and the communities that they serve, by incorporating tobacco control measures into their strategic plans and commissioning intentions.

1. Introduction and Background

- i. Tobacco Control incorporates a range of activity to reduce the effects of smoking, preventing young people starting to smoke, NHS smoking cessation services, reducing exposure to secondhand smoke and reducing availability of tobacco products.

2. Why do we need a Tobacco Control Strategy?

- i. Tobacco use cannot be viewed as just a health issue – it is everyone’s priority because of the toll of death and disease that smoking causes. For tobacco use to be effectively tackled, a range of people need to take action and work together. Tobacco control that is a focused, sustained and coordinated action on a number of fronts by a wide range of agencies, organisations and individuals is vital if the significant achievements of recent years in the fight against tobacco are to be built on.
- ii. Successful tobacco control interventions will not be achieved without high-level support and leadership. To achieve success the infrastructure and resources necessary to implement a comprehensive tobacco control programme must be made available. The strategic and operational aspects of tobacco control go hand in hand, but one working without the other is unlikely to see the results that a joint effort could produce.
- iii. The clear message of a comprehensive approach to tobacco control is aimed at influential local leaders such as Local Authority Leaders, Directors of Public Health, Commissioning leads and local politicians. They, and indeed anyone who has a leadership role within local communities, can play a crucial role in ensuring that this strategic approach to tobacco control is achieved.

3. The challenge to Kent Partners

- i. The actions recommended within this strategy have the potential to reduce the harmful effects of smoking and reduce prevalence within local communities, but only if they are implemented with the energy, vitality and backing of senior level personnel who have the ability to:
 - put in place a sound local infrastructure and dedicated resources;
 - drive capacity building where required;
 - identify the overlap between national targets and local aspirations, translating tobacco control evidence into prioritized local action;
 - ensuring that tobacco control aspirations are embedded within Local Area Agreements;
 - promote inter-agency collaboration by sponsoring activity at organisational level;
 - provide the political will, strategic thinking and high-level recognition that tackling smoking is a priority;
 - show a willingness to help overcome issues that arise as part of local tobacco control work;
 - demonstrate unquestionable commitment to a comprehensive tobacco control programme.

4. The potential benefits

- i. We can reduce the massive burdens that tobacco use inflicts on our communities. Comprehensive tobacco control efforts can impact on health inequalities, reduce the economic burden on society and reduce the death, disease and disability that people throughout the country suffer because of smoking. Prioritising tobacco control will create many benefits.
- ii. The recommendations in this strategy:
 - are based on evidence of effectiveness and represent the actions that will have the most impact on reducing smoking prevalence, improving health and wellbeing and reducing health inequalities;
 - will support the achievement of other PSA, LAA and local targets;
 - can help Local Authorities to promote the economic, social and environmental wellbeing of communities.

5. The Burden of Tobacco in Kent

- Smoking is the most significant cause of preventable ill-health in Kent.
- Damage to health caused by smoking does not discriminate between class or wealth. When it comes to the county, smoking is the leading cause of inequalities in Kent.

- Over 2,000 Kent residents die prematurely each year due to smoking and the average smoker loses more than seven years of healthy life. More men than women die of smoking-attributable illness – smoking is a big contributor to the gap in life expectancy between men and women, and between the poorest in society and the better off.
- There are over 10,000 admissions to our hospitals each year which are due to smoking. This is estimated to cost NHS Eastern and Coastal Kent £12m and NHS West Kent £10m each year. The annual outpatient activity costs associated with smoking in East and West Kent are estimated to be £1.3m and £860,000 respectively.
- The wider economic impact of smoking is substantial. Each year in Kent, cigarette breaks and smokers' sick days cost employers around £215million. The average smoker spends £1000 a year on tobacco, regardless of their socio-economic status. Fires due to smoking cost £3.3million each year in consequential and response costs.
- In addition to the direct health benefits, strong action in tobacco control and in supporting smokers in stopping is likely to be highly cost effective across the Kent economy. These benefits will not be fully realised in the short term, but will be significant in the medium to long-term.
- Despite sustained education about the health effects of smoking, adolescents continue to smoke, suggesting that traditional approaches may educate, but they do not influence. Young people tend to respond to social trends. Evidence from youth advocacy forums show they want 'just the facts' to allow them to make up their own mind about tobacco, rather than being told the 'rights and wrongs' of tobacco use. Social influence is probably therefore the best intervention.

6. Kent Alliance on Smoking & Health (KASH) continues to drive action

- The role of the Kent Alliance on Smoking & Health (KASH) is to engage all partners in making an active contribution to reducing the impact of smoking on health and health inequalities. The Kent Tobacco Control Strategy finished in 2008. It was highlighted by the DH Tobacco Control National Support Team as good practice.
- The Tobacco Control Steering Group was re-established in January 2009, with a renewed and heightened level of partner engagement
- KASH reports to the Kent Public Health Board to increase the breadth of influence of the Alliance, raise its profile, endorse senior level engagement from the Kent Partnership and to contribute its activity to the Local Area Agreement
- The Kent Director of Public Health as the chair of the Public Health Board reports to the PCTs
- The Alliance continues to report on project work undertaken, directly to the DH

7. Strategy Development

- In 2009/2010, KASH has been focusing on:
 - Continuing to develop effective partnerships and to tackling the public health issue of tobacco as a shared priority.
 - Developing a comprehensive Kent Tobacco Control Strategy

- Implementing a strategic tobacco control programme with a specific focus on Young People
 - Wider support for improving smoking cessation targets for the PCTs.
- ii. As a result of this exercise, a Kent Tobacco Control Strategy has emerged as follows:

Aim
<ul style="list-style-type: none"> • Tackle the Health Inequalities caused by tobacco. • Reduce the harm caused by tobacco • Reduce the prevalence of smoking in Kent
Vision
<ul style="list-style-type: none"> • It is hard for anyone to start using tobacco • It is easy for anyone to stop using tobacco • There is no exposure to second hand smoke • Action is based on evidence and best practice • Partners are exemplars in tobacco control • This vision is communicated effectively

8. Impact on the Kent Partner organisations

- i. The main impact of this strategy is the promotion of commissioning decisions to support tobacco control programmes as well as stop smoking services.
- ii. If there is a failure to support, then the infrastructure required to deliver the tobacco control programmes that will deliver the potential savings identified, will be lost.
- iii. The commitment to the partnership approach, and leadership through the alliance, enables Kent partners to acknowledge the importance of supporting a comprehensive approach to tobacco control; for their own organisation and the communities that they serve, by incorporating tobacco control measures into their strategic plans and commissioning intentions.

9. Implementation Framework

- i. It is proposed that the Kent Tobacco Control Strategy is clearly formatted to ensure that partner organisations are clear about their role in tobacco control. This will serve as a way of monitoring the delivery of the Kent Tobacco Control Strategy.
- ii. Smoking creates major health, economic and social burdens within our communities, which is why tobacco control needs to be elevated to a high level within organisations that can play a role in reducing smoking rates. A proposed Kent Tobacco Control Framework will:
 - provide everyone involved with local tobacco control with new ideas for making a difference in their areas – showing what can be achieved, and how to do it;
 - help organisations work towards their next priorities. (Tobacco control has not ended with the Smokefree legislation of July 2007 and while more than one in five adults are smokers in England, there is much more to be done);

- brings together in one place both the evidence and relevant practical experience on local comprehensive tobacco control, providing ideas and robust evidence to justify the case for focusing on comprehensive tobacco control action;
 - will be structured around the 'vision' workstreams;
 - will promote the focus on protecting young people in Kent as a priority.
- iii. This approach is supported by the Kent Partnership. KASH will formally support and drive this process by providing workshops, seminars and events as appropriate.

10. Conclusions

- i. This strategy addresses the proportions of our population that remain exposed to the significant health risks from smoking, and are concentrated in our more deprived communities. Beyond the well-recognised effects on health, tobacco also plays a role in perpetuating poverty, deprivation and health inequality.
- ii. Tobacco control – not just Stop Smoking Services or media campaigns in isolation, but an integrated package of interventions – has enormous potential to tackle health inequalities and the ongoing burden of disease caused by smoking. The driving ethical principle of tobacco control is that of fairness:
- A fair chance for children and young people to grow up in an environment where smoking is not seen as the norm;
 - for smokers to get help to quit (as the majority wish to do); and
 - for people to live and work without being exposed to the hazards of secondhand smoke.
- iii. This strategy advocates how smoking prevalence can effectively be further driven down in our communities. The practical recommendations in this document, particularly those aimed at protecting young people from the dangers of tobacco; set out a systematic approach to delivering an effective and comprehensive tobacco control programme for Kent.
- iv. This strategy enables Kent partners to acknowledge the importance of supporting a comprehensive approach to tobacco control; for their own organisation and the communities that they serve, by incorporating tobacco control measures into their strategic plans and commissioning intentions.
- v. Tobacco use cannot be viewed as just a health issue – it is everyone's priority because of the toll of death and disease that smoking causes. For tobacco use to be effectively tackled, a range of people need to take action and work together. Tobacco control that is a focused, sustained and coordinated action on a number of fronts by a wide range of agencies, organisations and individuals is vital if the significant achievements of recent years in the fight against tobacco are to be built on.

11. Recommendation:

- i. Cabinet is asked to give its support and approval to this strategy.

Background documents: 'A Smoked Free Future' - report by the Department of Health February 2010 and 'Smoking in Kent – Death, Disease and Economic Impact Attributable to Smoking – May 2009 – published by the Kent and Medway Public Observatory.

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