



Scottish tobacco use – the challenge of achieving change

**Sheila Duffy, Chief Executive, ASH Scotland
SCPN, 6th February 2017**

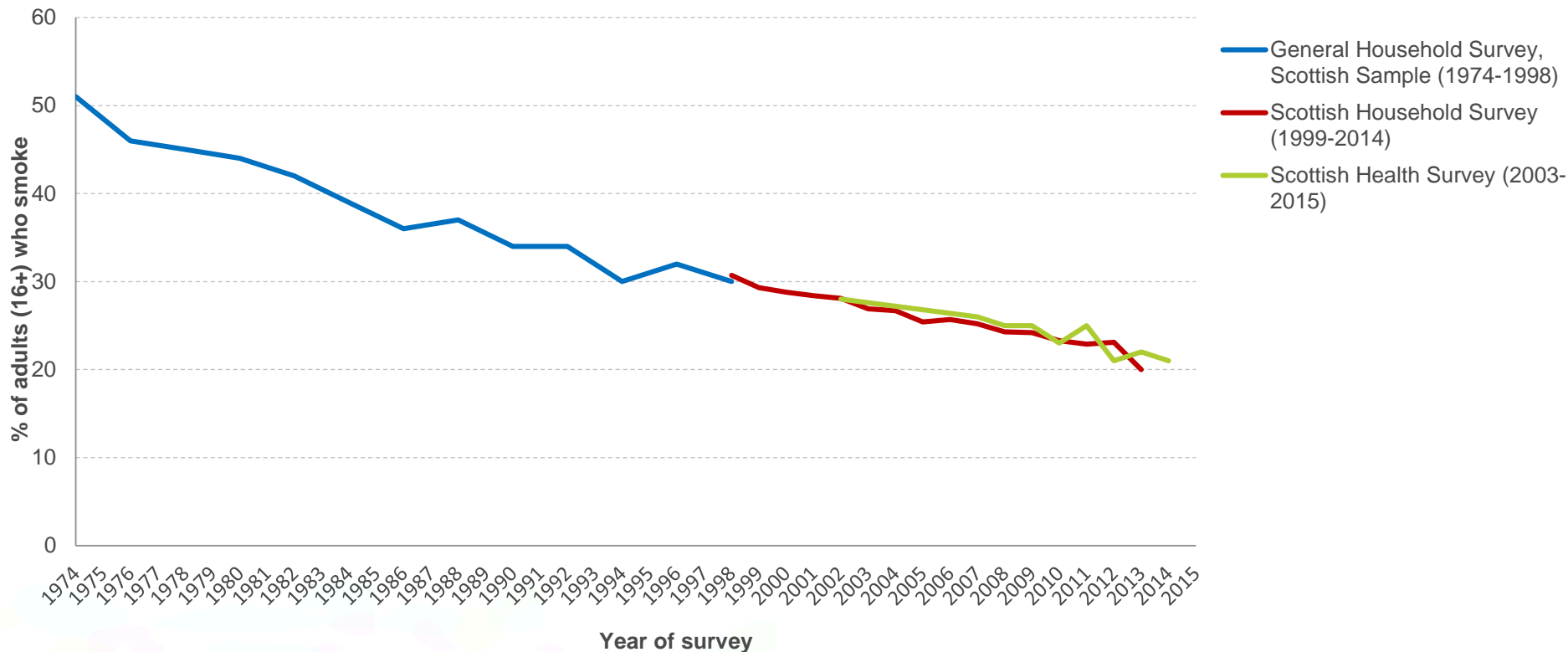
Presentation outline

- **Where we are now and how we got there**
- **What other NCDs can learn from tobacco control**
- **Keeping our foot on the tobacco control pedal and why it matters so much**



Current smoking prevalence in Scotland

Adult (age 16+) smoking prevalence in Scotland: 1974 to 2015
from the General Household Survey, Scottish Household Survey and Scottish Health Survey

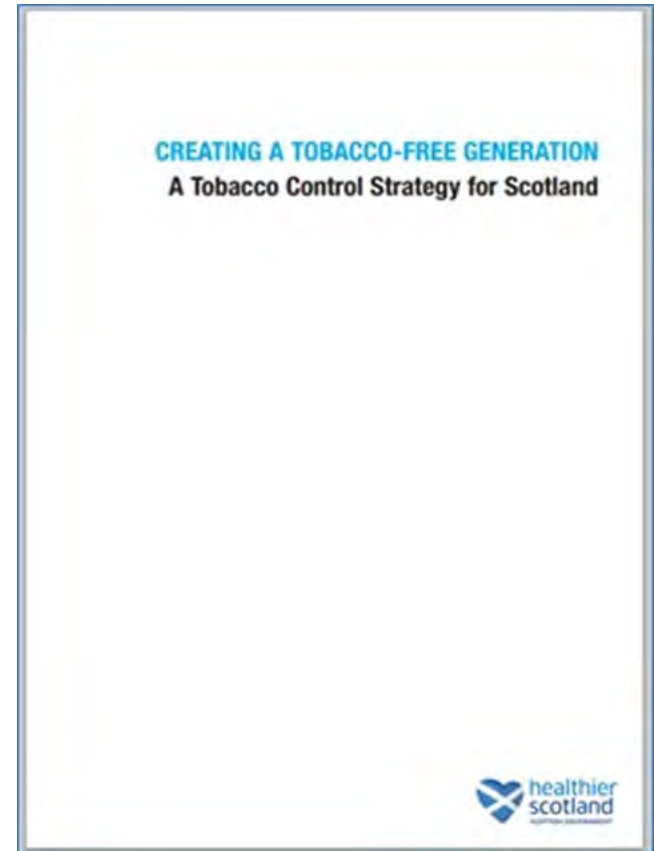


Creating a Generation Free From Tobacco

Key elements of the strategy are:

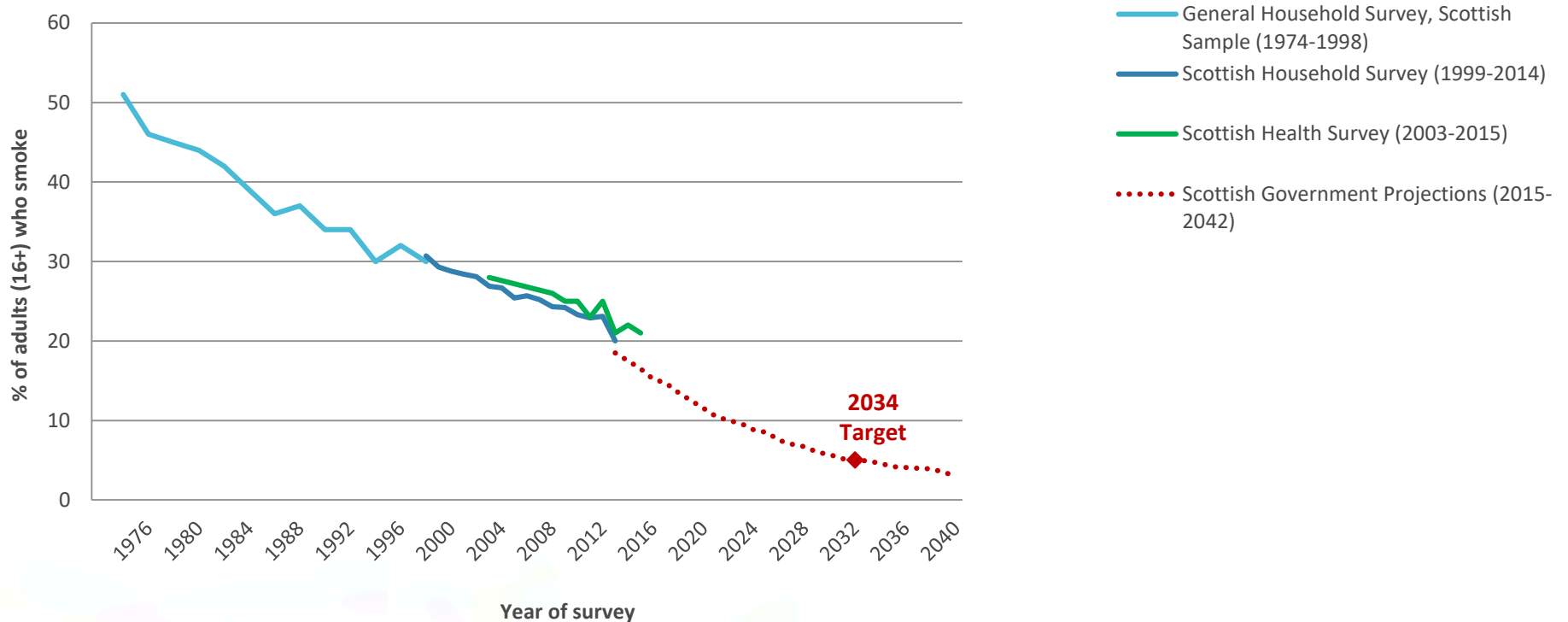
- prevention – creating an environment where young people do not want to smoke
- protection – protecting people from second-hand smoke
- cessation – helping people to quit smoking
- addressing inequalities in health

Identifies and sets the target of Scotland being smoke-free by **2034**



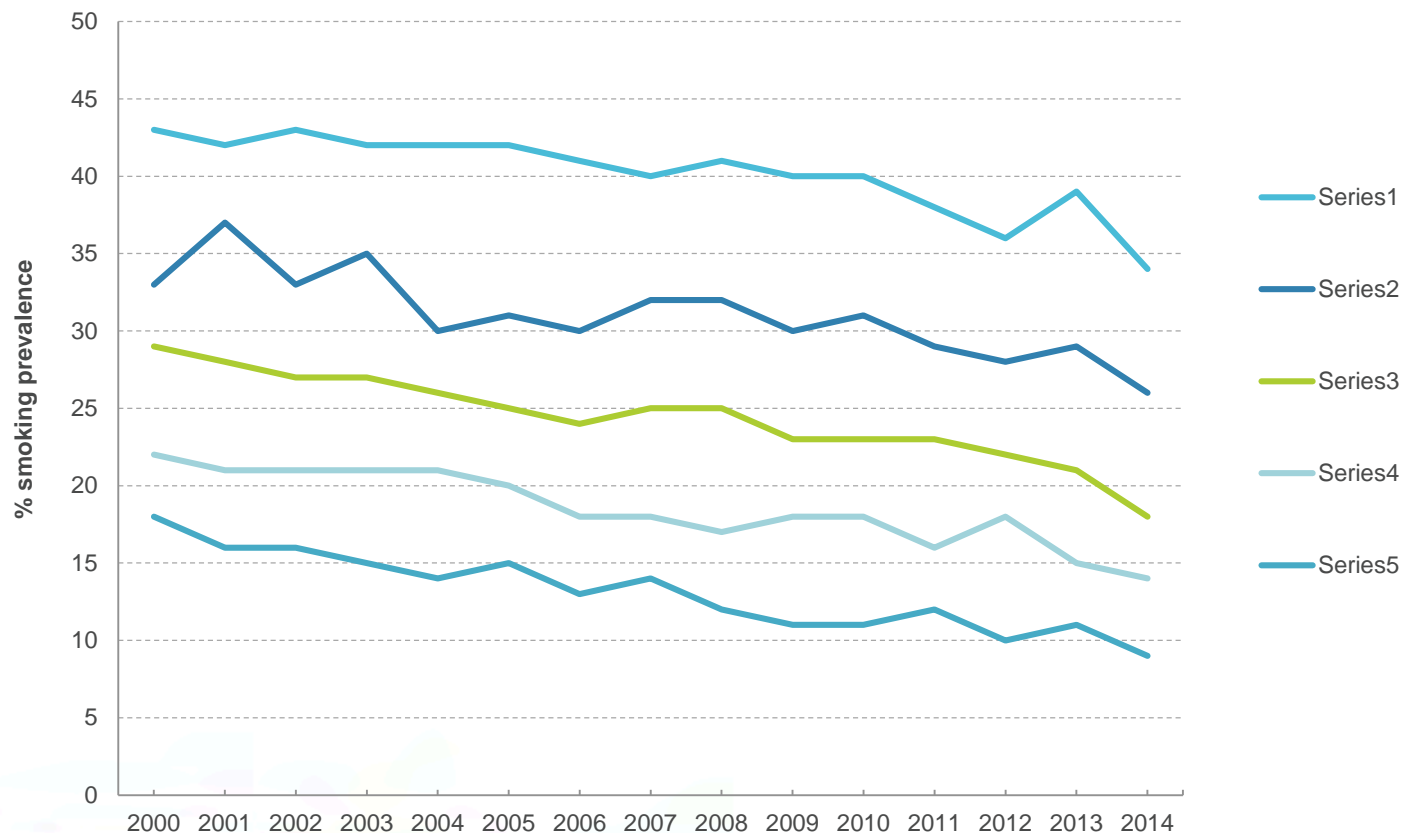
2034 Target

Adult (age 16+) smoking prevalence in Scotland: 1974 to 2042
from the General Household Survey, Scottish Household Survey, Scottish Health Survey and
Scottish Government projections



Smoking in Scotland's most deprived areas

Adult (16+) smoking prevalence in Scotland by Scottish Index of Multiple Deprivation quintiles, 1999 to 2014, from the Scottish Household Survey using 2014 SIMD rankings



Children and exposure to SHS: 2020 target

Significant decrease from 2014 to 2015 in the proportion of children who were exposed to second-hand smoke in the home (**11% to 6%**).

Significant decrease from 2014 to 2015 in the proportion of children who lived in accommodation where someone smoked inside (**16% to 12%**).



We're still at the start of a long journey, but in the wake of smoke-free law...

- the age of purchase for tobacco was raised to 18
- the display of tobacco products was banned
- sales from vending machines were banned
- proxy purchase was made illegal
- a tobacco retail register was set up

The new legislative landscape

- UK legislation on standardised plain packs - The Standardised Packaging of Tobacco Products Regulations 2015
- Smoking Prohibition (Children in Motor Vehicles) (Scotland) Bill (Jim Hume MSP)
- Scottish Government's Health (Tobacco, Nicotine etc. and Care) (Scotland) Bill
- Revision of the Tobacco Products Directive (EU) – regulations came into force in May 2016

Standardised packaging

- prevention measure, introduced in Australia in December 2012
- UK Government deferred implementation in 2013, but in March 2015 voted to bring in by May 2016
- Scottish Government has remained committed to the measure throughout
- very strongly opposed by tobacco industry and allies



Lessons from tobacco control for other NCDs

- establish a strong evidence base
- communicate that evidence base
- create strong local and international alliances
- counter industry interference
- legislate rather than have voluntary codes of conduct
- set clear targets
- find new ways to engage



Much remains to be done



1. Ensure the next generation grows up free from tobacco

Two-thirds of people who smoke started when they were children and most have gone on to regret it. Tobacco companies present smoking as an adult lifestyle choice, yet few adults take up smoking and almost nobody over the age of 25. If we could ensure that smoking really was a free choice made by adults then very few people would do it.

➔ The next Scottish Government should help the next generation grow up free from tobacco by committing to abide by the principles of Scotland's Charter for a Tobacco-free Generation:

- every baby should be born free from the harmful effects of tobacco;
- children have a particular need for a smoke-free environment;
- all children should play, learn and socialise in places that are free from tobacco;
- every child has the right to effective education that equips them to make informed positive choices on tobacco and health;
- all young people should be protected from commercial interests which profit from recruiting new smokers;
- any young person who smokes should be offered accessible support to help them to become tobacco-free.



Promote the Children's Charter



Scotland's Charter for a tobacco-free generation



Every baby should be born free from the harmful effects of tobacco



Children have a particular need for a smoke-free environment



All children should play, learn and socialise in places that are free from tobacco



Every child has the right to effective education that equips them to make positive informed choices on tobacco and health



All young people should be protected from the commercial interests which profit from recruiting new smokers



Any young person who smokes should be offered accessible support to help them become tobacco-free

To find out more, contact us on
0131 225 4725
enquiries@ashscotland.org.uk

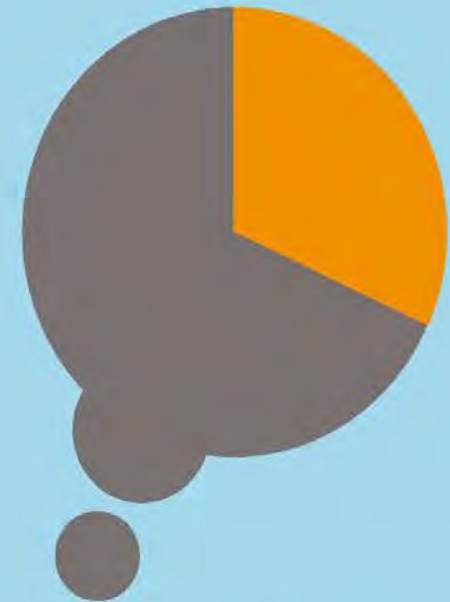
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scotland
Taking Action on Smoking and Health

Action on Smoking & Health (Scotland) (ASH Scotland) is a registered Scottish charity (SC 010412) and a company limited by guarantee (Scottish company no 141711).
The registered office is 8 Frederick Street, Edinburgh EH2 2HS.

2. Stop neglecting the physical health of people with mental health issues

A third of tobacco in the UK is consumed by people with mental health issues, who experience physical ill-health and die years earlier than the mainstream population. People with mental health issues are just as motivated to quit as the rest of the population. Yet smoking rates in this group are not declining as they are in the general population, despite the weight of evidence that stopping smoking is associated with improved mental health as well as physical well-being.

- ➔ The national strategy on mental health must recognise that tobacco use is causing disproportionate harm to people with mental health issues, and be clear that smoking should not be endorsed as a support or coping mechanism. This requires changes in the culture of mental health support services, and in the approaches and actions of professionals across the sector, so that people are motivated and supported to find positive alternatives for the roles currently played by tobacco.



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3. Give preventing dementia the same importance as dementia care or cure

Dementia cases in Scotland will double over the next 25 years unless risk factors are addressed. We now know that the risk of developing dementia is up to 70% higher amongst those who smoke heavily – so that reducing the smoking rate is an effective means of reducing the future rate of dementia. Yet the link between smoking and dementia is not well known amongst people who smoke.

- There has been great progress in research into dementia cures and in standards for dementia care. Learning from the experience of cancer prevention, heart health and stroke awareness campaigns, we now need a complementary strategy for dementia prevention which addresses the various factors which increase dementia risk, including smoking.

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4. Put tobacco out of sight, out of mind and out of fashion

There are around 10,000 retailers selling tobacco in Scotland – one for every 90 people who smoke. With 8 times more tobacco outlets than pharmacies, poison is sold more widely in our communities than medicine. Deprived communities have a particularly high concentration of tobacco outlets, presenting a deadly, addictive substance as an everyday consumer item. Every 100 packs of twenty cigarettes a shop sells removes 15 days of life from the community it serves.

- The Government should commit to helping retailers shift their business model away from reliance on a harmful product in long-term decline. A programme of Government support is needed to assist retailers in diversifying to healthier products which are better placed to sustain their businesses into the future.



There are around

10,000

places to buy tobacco in Scotland.



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5. Focus e-cigarette debates on the goal of reducing tobacco use

Electronic cigarettes have the potential to help people stop using tobacco, but concerns have also been raised over recruiting new markets for nicotine and the limited health benefit to the over 100,000 people in Scotland who continue to use tobacco alongside e-cigarettes (“dual use”). We are confident that e-cigarettes are much less harmful than tobacco, whilst not being completely safe.

- ➔ As the most harmful product, tobacco should be subject to the strongest regulation. Regulatory approaches should support those who smoke to quit tobacco completely, to shift to e-cigarettes only or quit nicotine use entirely. The suggestion that e-cigarettes could help groups in particular situations, such as prisoners, patients in psychiatric hospitals or parents wishing to make their homes smoke-free, should be tested. Marketing of e-cigarettes must be regulated so that it is tightly focused on people who smoke, while the growing involvement of tobacco companies in the e-cigarette market must be closely monitored.



The growing involvement of tobacco companies in the e-cigarette market must be closely monitored.



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6. Defend the historically low levels of illicit tobacco

Illicit tobacco is a real problem in that it undermines health regulations we have fought long and hard to achieve, brings organised crime into communities and deprives the public purse of much needed income. It is also a manufactured problem, with tobacco companies scaremongering over illicit products in order to oppose public health measures. Yet figures from Her Majesty's Revenue and Customs indicate the number of illicit cigarettes used in the UK has decreased by 76% since 2001 and the volume of illicit hand-rolling tobacco has decreased by 33%.

- The reduction in illicit tobacco has been achieved at a time when regulation and prices have increased and stems from improved enforcement measures. To maintain the downward pressure on the illicit market, enforcement work by trading standards, police and others must be sufficiently resourced and robustly pursued. Any trader caught selling illicit tobacco should receive an immediate long-term ban from selling tobacco of any kind.



The number of illicit cigarettes used in the UK has decreased by

76%
since 2001

Obesity is catching up but tobacco hasn't gone away...

Obesity is one of the top three social burdens generated by human beings.

Impact on global GDP¹



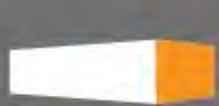
¹In 2014 dollars at purchasing-power parity.

Source: Literature review; World Health Organization global burden of disease (GBD) database; McKinsey Global Institute analysis.

Time to achieve more

Evidence is clear that a society free from tobacco will not just be healthier, but wealthier and fairer too. ASH Scotland is pro-health and pro-people. We want the next generation in Scotland to be free from tobacco.

Did you know, every year in Scotland there are:



10,000

deaths attributable to smoking



128,000

smoking-related hospital admissions.



lung cancer

incidence rates in Scotland are among the highest in the world

We calculate that smoking costs around

£1.1b

to the Scottish economy every year.

What next?

- ensure tobacco remains a public health priority & resourced as such
- keep the 2034 vision alive
- join up across health and social care to promote prevention and cessation as an integral part of making Scotland healthier, wealthier and happier
- and join up thinking on NCDs.



...and finally

For information on tobacco and e-cigarette issues please contact our FREE national enquiry service.

**enquiries@ashscotland.org.uk
or phone 0131 220 9479.**

If you would like to stay abreast of tobacco control in Scotland, sign up for our FREE weekly bulletin at www.ashscotland.org.uk

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