

1.3

Smoking in Society Tobacco Control Strategies

What is Tobacco Control?

Tobacco Control is an umbrella term that refers to a range of activities and initiatives aimed at reducing the impact of tobacco. Tobacco Control strategies are often misunderstood as simply referring to legislative interventions such as smoke free laws and controls on smuggling. However, recent strategies have been extended to systems of Stop Smoking Support and Health Promotion

An International Approach

Probably the best known and arguably the most influential Tobacco Control Strategy is that contained within the World Health Organisation's Framework Convention on Tobacco Control (FCTC).

Formally launched in 2003, the FCTC represents the first coordinated global effort to reduce tobacco use. As of early 2009, 167 nations had signed the FCTC and more than 130 have ratified it. This legally binding treaty gives nations powerful new tools to protect the health of their citizens from the tobacco industry's deceptions and slick marketing. The treaty commits countries to:

1. Ban all tobacco advertising, promotion and sponsorship
2. Place large, graphic health warnings on cigarette packs.
3. Protect non-smokers from second hand smoke.
4. Increase the price of tobacco products
5. Combat cigarette smuggling.
6. Regulate the content of tobacco products.

Smoke Free Legislation

An increasing number of countries around the world have introduced smoke free legislation. This legislation has been in response to the growing body of evidence suggesting the impact of second hand smoke (see section 1.2 for a summary).

In most cases, these laws completely prohibit smoking in enclosed public or work places. However, countries differ (even within the UK) according to the exemptions they have allowed to smoke free legislation. For example, while Wales and Scotland provide exemption to mental health units, the English Smoke-free (Exemptions and Vehicles) Regulations 2007 gave only a temporary 1-year exemption. This was in light of consultation responses from many who argued that it is unethical to expose detained patients and staff in mental health settings to the harmful effects of passive smoking.

Studies have shown that mental healthcare staff fear the effects of a smoking ban before it is implemented (McNally, 2006). However, Lawn & Pols (2005) review of 26 studies indicated that the actual experience of a ban usually leaves staff attitudes more positive towards the policy.

To understand this, we have to look at the isolated, disruptive effects of smoking bans in a wider context. Lawn & Pols' review indicated that overall, smoking bans did not usually lead to increases in aggression, use of seclusion, discharge against medical advice, or increases in use of prn

medication. Notably, Lawn & Pols (2005) found that consistency in the ban were essential to success, with problems occurring where this was not the case.

Recent Tobacco Control Developments in the UK

The Department of Health published a consultation paper entitled 'Consultation on the future of tobacco control', on 31 May 2008. This consultation was the first step in developing a new national tobacco control strategy. The focus of the consultation was on a range of issues including the health inequalities, protecting children and young people from smoking and how to helping those who cannot quit.

The Health Bill was introduced into Parliament on 15 January 2009. It proposes measures to improve the quality of NHS care, the performance of NHS services, and to improve public health. In relation to tobacco, the Bill prohibits the display of tobacco products at the point of sale and creates powers to control the sale of tobacco from vending machines.

References

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- McNally, L; et al. (2006) *Journal of Public Health*, Volume 28, Number 3, 15 September 2006, pp. 192-196(5)
- World Health Organisation Framework Convention on Tobacco Control (WHO FCTC) <http://www.who.int/fctc/en/>