

Strategy Aim

To protect children’s health, tackle inequalities and reduce the prevalence of smoking in Lanarkshire from 21.8% to an overall 11% by 2022.

Our Approach

By putting children firmly at the centre of our tobacco control efforts we are focusing on creating a smoke-free Lanarkshire by 2034

“We” means all of us. This emphasises the importance of us all working together to create a society for children which is smoke-free and where all adults are positive anti -tobacco role models, whether they smoke or not.

What we aim to achieve

- Cultural change where not smoking is the norm
- Increase tobacco control programmes focusing on prevention and protection activities
- Reduce % of 15 year olds who take up smoking
- Reduced availability of tobacco to young people
- Reduce the % of children exposed to second hand smoke
- Smoking prevalence in Lanarkshire will be 5% or less by 2034
- Inclusion of local communities in planning, development, and evaluation / feedback of tobacco control activities
- A majority of the local population will support smoke-free environments and be committed to making a smoke-free Lanarkshire a reality for our children

Reducing inequalities in priority groups

Where inequalities exist, action is required to support a cultural shift regarding smoking in Lanarkshire. The strategy will focus on the following priority groups within the population:

- Children and young people
- Looked after Children (LAC)
- Pregnant women and their families
- Prisoners
- People living in deprived areas
- People with mental ill health
- People with long term conditions and disabilities
- People who are unemployed/ low income
- People experiencing homelessness
- All smokers, on admission to hospital, with issues relating to respiratory, vascular and cardiac conditions, diabetes, mental ill health, pregnancy and cancer.

Prevention – supporting environments where children and young people choose not to smoke and don’t see adults smoking.

What we will do

- Support national prevention work e.g. *Scotland’s Charter for a smoke-free generation*
- Support development of smoke-free environments
- Invest in peer education approaches
- Focus on education settings
- Support work on availability and enforcement of tobacco sales

How we will measure success

- In 2018/19 the number of organisations reporting positive engagement with charter activities in Lanarkshire will be 15.
- By 2019 overall prevalence will be 17% in North Lanarkshire, 13% in South Lanarkshire, and 15% across the whole of Lanarkshire.
- By 2021 % of 15 year old smoking will be 6% in North Lanarkshire, 5% in South Lanarkshire, and 5% across the whole of Lanarkshire.
- Prevalence of smoking in Lanarkshire will reduce from 21.8% to an overall 11% by 2022.

Protection – protecting children, adults and pets from second-hand smoke.

What we will do

- Support work around air quality monitoring in a range of settings
- Support and develop education and awareness raising of second hand smoke
- Engage with communities and families on the topic of second hand smoke

How we will measure success

- Exposure to second hand smoke in Lanarkshire will reduce to 6% by 2022.
- Hospital admissions of children due to smoking or second hand smoke will reduce by 2023.
- Implementation of a smoke-free HMP Shotts by November 2018.

Cessation – helping people to stop smoking.

What we will do

- Build on existing assets ensuring smoking cessation support in Lanarkshire is person centred and delivered at the right time, in the right place.
- Target support to key priority groups
- Support will be provided in a number of ways
 - Community pharmacies
 - Community groups
 - One to one
 - Home visits
 - Online/telephone

How we will measure success

- Local Delivery Plan annual smoking cessation target will be met.
- By March 2019 the proportion of Stop Smoking Service provision will increase in SIMD areas 1 and 2 to 70%.
- % of pregnant women identified at a booking as a current or recent smoker will reduce to 14.1% by 2021.
- The % of people being supported to stop smoking using Varenicline will increase by 2021.

Support and leadership – demonstrating the importance of anti-tobacco actions at an individual, team, organisational and societal.

What we will do

- Ensure robust data collection methods are used so we know which interventions are effective
- Ensure consultation with stakeholders is integral to tobacco control programmes and activities
- Partnership, collaboration, and sharing resources will be central to our approach
- Develop a workforce to support delivery of the actions within the strategy
- Develop and update tobacco control policy in line with evidence base and legislative context.

How we will measure success

- Robust data collection methods document progress against actions in line with measures contained in the data measurement plan
- Engagement levels with a range of stakeholders increases over time and is evidenced in project plans and evaluations of tobacco control work
- Increased levels of feedback received via care opinion and evidence of tobacco control responses to this
- The proportion of evidence based tobacco control activity will increase in SIMD areas 1 and 2.