

Sub Committees on The Smoke-free Premises etc. (Wales) (Amendment) Regulations 2012

Response from the Hywel Dda Local Health Board

The Smoke-free Premises etc. (Wales) (Amendment) Regulations 2012 Consultation Response	
Responding organisation: Hywel Dda Local Health Board	
Role of our organisation Hywel Dda Local Health Board is the provider of all healthcare services for Carmarthenshire, Ceredigion and Pembrokeshire.	
We will not be able to send a representative to the oral evidence sessions	
Date: 10th January 2013	Version: 1
<p>Purpose and Summary of Document:</p> <p>The Health and Social Care Sub-Committee and Enterprise and Business Sub-Committee (NAFW) have requested evidence to support a discussion relating to making an amendment to the Smoke- Free Premises (Wales) Regulations 2007.</p> <p>This paper aims to provide the Health and Social Care Sub-Committee and Enterprise and Business Sub-Committee (NAFW) with Hywel Dda Local Health Board's response to their request to evidence, to inform an agreement on the content of a joint report to lay before the Assembly, to inform the debate on the Smoke-free Premises etc. (Wales) (Amendment) Regulations 2012.</p> <p>On the basis of the available evidence, Public Health concerns and the potential detriment to health of the Hywel Dda population, Hywel Dda Local Health Board does not support the proposal for an amendment to the Smoke-free Premises etc. (Wales) (Amendment) Regulations 2012.</p>	
<p>Hywel Dda Local Health Board - Key Public Health concerns</p> <ol style="list-style-type: none"> 1. It is vital that smoking legislation in Wales is supported in order to achieve the Welsh Government target of a reduction in smoking prevalence rates in Wales from 23% to 16% by 2020 as set in the Wales Tobacco Control Action Plan. In the Hywel Dda area, this equates to supporting an estimated 18,600 smokers to give up. 	

Reducing smoking prevalence rates is a public health priority. This amendment will therefore have a potential negative impact on people who are trying to quit.

2. Wales's smoke-free premises legislation has been proved to be the most successful and accepted public health measure introduced in Wales and has been widely supported by the public with 80% of Welsh adults in favour. Any amendment to the legislation will be a significant step backwards for Wales, and will undermine the initiatives set out in the Tobacco Control Action Plan designed to reduce smoking prevalence rates.
3. Wales's smoke-free premises legislation was designed to protect people from the harmful effects of second hand smoke in enclosed/semi enclosed premises. Any amendment to the legislation will expose non-smokers to the harmful effects of second-hand smoke.
4. If this exemption goes ahead, it will undermine the Welsh Government's other tobacco control initiatives since the smoke-free legislation was introduced in Wales. It could also set a dangerous precedent for other industries to follow and open the door to future challenges to the legislation from other industries who deem the law to be affecting their profits.
5. Young people are strongly influenced by the behaviour of celebrities, film and TV personalities. The impact that role models (actors not characters) who smoke 'on screen' will have a detrimental effect on 'normalising' smoking amongst young people. Every year 14,000 11-15 year olds who have never smoked before try smoking (HSBC, 2009/10) and by aged 15-16, one in six girls are regular smokers, compared to one in nine boys. Smokers in this age group reported starting at an average of just 12 years of age.

1 Introduction

In line with the Wales smoking prevalence rates, 23% of the adult population smoke in the Hywel Dda area (daily or occasionally) (Welsh Health Survey, 2010) which is approximately 68,000 adults. The Welsh Government target of a reduction in smoking prevalence rates in Wales from 23% to 16% by 2020 as set in the Wales Tobacco Control Action Plan equates to supporting an estimated 18,600 smokers in the Hywel Dda area to give up.

The vision for Hywel Dda is creating a sustainable healthcare system for the population which has a greater focus on care closer to home, prevention and well-being and improved quality of life. There will be an increasing focus on creating a wellness service rather than a sickness service. Hywel Dda Local Health Board has set 10 pledges to help individuals live healthier over the next 10 years, including a pledge to reduce tobacco use.

Hywel Dda Local Health Board are therefore committed to protect the health and well-being of the population in the counties of Carmarthenshire, Ceredigion and Pembrokeshire, and to tackling the harm that tobacco causes to these communities.

On the basis of the available evidence, Public Health concerns and the potential detriment to health of the Hywel Dda population, Hywel Dda Local Health Board does not support the proposal to an amendment to the Smoke-free Premises etc. (Wales) (Amendment) Regulations 2012.

1.1 Consultation Questions

The following section considers the consultation questions of most concern and pertinence to Hywel Dda Local Health Board with regard to public health concerns relating to the legislation amendment.

Is there sufficient clarity about the circumstances in which the exemption applies?

The proposals state that "*The exemption does not apply to performers during rehearsals*". TV and film productions may take several 'takes' of a scene which would not be classed as rehearsals. The exposure to second hand smoke would therefore be greater than the duration of the completed scene, thus creating greater exposure to second hand smoke for performers and production staff than the amendment suggests.

Do the conditions offer adequate protection to other performers, production staff and members of the public?

No. The dangerous effects of second hand smoke are extensively documented (Department of Health, 2004). The 2007 ban on smoking in enclosed public places has led to considerable falls in people's exposure to second-hand smoke (Public Health Wales Observatory, 2012). It is therefore difficult to argue that any conditions offer adequate protection because any actor smoking due to 'artistic integrity' will suffer the consequences of tobacco smoke inhalation. Additionally any other actor or production staff in the vicinity of the 'smoker' will suffer the same consequences of tobacco smoke inhalation.

Might there be any unintended consequences of introducing this exemption?

Yes. There are a number of underlying Public Health concerns relating to the amendment of this legislation. Such concerns are paramount to the health of the population in Wales and Hywel Dda and summarised as follows:

- 1) The impact role models could have on young people. The evidence tells us that smoking in films is associated with increased pro-tobacco attitudes and beliefs amongst adolescents and others.
- 2) The harmful effects of second hand smoke is also well documented, as is the cost to the NHS.
- 3) Reducing smoking prevalence rates is a public health priority. It is also of concern that images of individuals smoking in films may have a negative impact on individuals who are trying to quit.

1) The impact role models could have on young people.

A systematic review (2005) on the nature and effect of smoking in the movies on adolescents and others concluded that there is a consistent chain of evidence that smoking in the movies leads adolescents to hold more pro-tobacco attitudes and beliefs, which is consistent with the observed dose-response relationship between exposure to smoking in the movies and initiation of adolescent smoking (Charlesworth and Glantz, 2005). Every year, 14,000 11-15 year olds who have never smoked before try smoking (HSBC, 2009/10) and by aged 15-16, one in six girls are regular smokers, compared to one in nine boys. Smokers in this age group reported starting at an average of just 12 years of age (HSBC, 2009/10). It is clear that young people can quickly develop a dependence on nicotine and may be unable to reduce their risks due to addiction (Di Franza et al., 2007). In addition, the younger a person starts smoking the greater the risk of longer term smoking related disease (Royal College of Physicians, 1992).

2) The harmful effects of second hand smoke

The dangerous effects of second hand smoke have been extensively documented (Department of Health, 2004). The 2007 ban on smoking in enclosed public places has led to considerable falls in people's exposure to second-hand smoke (Public Health Wales Observatory, 2012). Consequently, whilst also considering the consultation question '*do the conditions offer adequate protection to other performers, production staff and members of the public?*' it is difficult to argue that any conditions offer adequate protection because any actor smoking due to 'artistic integrity' will suffer the consequences of tobacco smoke inhalation. Additionally any other actor or production staff in the vicinity of the 'smoker' will suffer the same consequences of tobacco smoke inhalation. The proposals state that "*The exemption does not apply to performers during rehearsals*". TV and film productions may take several 'takes' of a scene which would not be classed as rehearsals. The exposure to second hand smoke would therefore be greater than the duration of the completed scene, thus creating greater exposure to second hand smoke for performers and production staff than the amendment suggests.

Just thirty minutes of exposure to second-hand smoke can cause heart damage similar to that of active smokers (Otsuka, et al, 2011; Barnoya and Glantz, 2005) as non-smokers' heart arteries show a reduced ability to dilate, diminishing the ability of the heart to get blood. In addition, the same half hour of second-hand smoke exposure activates blood platelets, which can initiate the process of atherosclerosis (blockage of the heart's arteries) that leads to heart attacks. These effects may explain other research showing that non-smokers regularly exposed to Second hand smoke suffer death or disease rates 30% higher than those of unexposed non-smokers (Burghuber et al. 2011)

The Department of Health states in its review of evidence that no infant, child or adult should be exposed to second hand smoke (Department of Health, 2004). Any relaxation of the Smokefree law in Wales would contradict this guidance. The comprehensive review also states that second hand smoke represents a substantial health hazard and therefore if this exemption is granted actors and production staff would be exposed. Inhalation of second hand smoke can cause a direct increase in risk of both lung cancer and heart disease (WHO, 2003). This exemption is in contrast to the Welsh Government's own Tobacco Control Action plan which has a core aim of promoting Smokefree environments in the workplace, the home and the car (Welsh Government, Tobacco Control Action Plan for Wales, 2012). If this exemption goes ahead, it will undermine the Welsh Government's other tobacco control initiatives since the smoke-free legislation was introduced in Wales.

Whilst the conditions state that smoking will not take place when children are present, existing evidence states that dangerous chemicals can linger

in the area where tobacco has been smoked and that no ventilation system is adequate to remove the risk associated with inhaling second hand smoke (Tobacco Advisory Group of the Royal College of Physicians, 2005). Furthermore second hand smoke may be present on a person's clothes where smoking has taken place, and could be hazardous and transmitted to children, where performers or production staff have families. Exposure to second hand smoke during pregnancy can have adverse effects upon the health of the mother and child (Tobacco Advisory Group of the Royal College of Physicians, 2005). This exemption could impact upon actors or production staff who are in the early weeks of pregnancy, but do not yet know that they are pregnant.

3) Reducing smoking prevalence rates is a public health priority

It is vital that smoking legislation in Wales is supported in order to achieve the Welsh Government target of a reduction in smoking prevalence rates in Wales from 23% to 16% by 2020 as set in the Wales Tobacco Control Action Plan. In the Hywel Dda area, this equates to supporting an estimated 18,600 smokers to give up. This amendment will therefore have a potential negative impact on people who are trying to quit.

Tobacco smoking causes serious harm to the health of smokers and to non-smokers who are exposed to second-hand smoke. It continues to be the largest single preventable cause of ill health and premature death in Wales, causing around 5,650 deaths each year (Public Health Wales Observatory, 2010). Almost half of all long-term smokers will die in their middle age as a result of tobacco use and many smokers will suffer poor health and associated loss of quality of life. Smoking is also a main cause of health inequalities, having been identified as a leading cause for the gap in life expectancy between rich and poor (Dolman et al, 2007).

The significant burden of illness due to smoking has major costs for the NHS in Wales. Research shows that approximately 20% of all admissions and bed days are attributable to people suffering from smoking related diseases (Furlong, 2005). While a study commissioned by ASH Wales and the British Heart Foundation Cymru indicates that treating smoking-related diseases cost NHS Wales an estimated £386 million in 2007/08; this is equivalent to £129 per head or 7% of total healthcare expenditure in Wales (Phillips and Bloodworth, 2009).

Smoking is highly addictive (British Medical Journal, 2003). By including this exemption to the legislation, ex-smoking actors and production staff face the possibility of relapse if 'artistic integrity' states that the production they are involved in should portray smoking.

Individual actors who need work may feel coerced to smoke cigarettes for the sake of 'actors' integrity' – especially young or less famous actors. A

role that involves smoking could be their initiation into a lifelong smoking habit.

What health policy considerations are relevant to this amendment?

Wales's smoke-free premises legislation has been proved to be the most successful and accepted public health measure introduced in Wales and has been widely supported by the public with 80% of Welsh adults in favour. Any amendment to the legislation will be a significant step backwards for Wales, and will undermine the initiatives set out in the Tobacco Control Action Plan designed to reduce smoking prevalence rates.

Wales's smoke-free premises legislation was designed to protect people from the harmful effects of second hand smoke in enclosed/semi enclosed premises. Any amendment to the legislation will expose non-smokers to the harmful effects of second-hand smoke.

If this exemption goes ahead, it will undermine the Welsh Government's other tobacco control initiatives since the smoke-free legislation was introduced in Wales. It could also set a dangerous precedent for other industries to follow and open the door to future challenges to the legislation from other industries who deem the law to be affecting their profits.

1.2 Conclusion

Smoking continues to be the greatest single cause of avoidable mortality in Wales and in the Hywel Dda area. Major reductions in smoking prevalence are achievable, given evidence from California and Singapore and the ban on smoking in public places (2007) Wales's smoke-free premises legislation has been proved to be the most successful and accepted public health measure introduced in Wales, widely supported by the public.

However any amendment to the legislation will be a significant step backwards for Wales; will undermine the initiatives set out in the Tobacco Control Action Plan and in reaching Welsh Government's ambitious target of reducing smoking prevalence in Wales to 16% by 2020. It will also undermine the Welsh Government's other tobacco control initiatives since the smoke-free legislation was introduced in Wales and could set a dangerous precedent for other industries to follow and open the door to future challenges to the legislation from other industries, with further threat to the health of the population.

The Public Health concerns to the amendment of this legislation are paramount and summarised as follows:

- 1) The impact role models could have on young people. The evidence tells us that smoking in films is associated with increased pro-tobacco attitudes and beliefs amongst adolescents and others.
- 2) The harmful effects of second hand smoke is also well documented, as is the cost to the NHS.
- 3) Reducing smoking prevalence rates is a public health priority. It is also of concern that images of individuals smoking in films may have a negative impact on individuals who are trying to quit.

On the basis of the available evidence, Public Health concerns and the potential detriment to health of the Hywel Dda population, Hywel Dda Local Health Board does not support the proposal for an amendment to the Smoke-free Premises etc. (Wales) (Amendment) Regulations 2012.

References

- Barnoya, J.; Glantz, S.A., (2005) Cardiovascular effects of secondhand smoke: nearly as large as smoking, *Circulation* 111(20): 2684-2698, May 24, 2005.
<http://circ.ahajournals.org/cgi/content/short/111/20/2684>
- British Medical Journal, (2003). Treating nicotine addiction. Available online at:
<http://www.bmj.com/content/327/7428/1394>
- Burghuber, O et al. (2011) Platelet sensitivity to prostacyclin in smokers and non-smokers, *Chest*, 90: 34-38, 1986. www.ncbi.nlm.nih.gov/pubmed/3522121
- Charlesworth A. and Glantz S. A (2005) Smoking in the Movies Increases Adolescent Smoking: A Review *Paediatric*
- Department of Health, (2004). Scientific Committee on Tobacco and Health (SCOTH): Secondhand smoke: Review of evidence since 1998.
- Di Franza J et al (2007). Symptoms of tobacco dependence after brief intermittent use: the development and assessment of nicotine dependence in youth, *Archives of Paediatrics and Adolescent Medicine* 162 (7): 704-710
- Dolman, R., Gibbon, R. and Roberts, C. (2007). Smoking in Wales: current facts. Cardiff: Wales Centre for Health
- Furlong, C. (2005). Preoperative Smoking Cessation: a model to estimate potential short term health gain and reductions in length of stay. London: London Health Observatory.
- Health Behaviour in School-Aged Children survey (2009/10) (World Health Organisation/Welsh Government)
- Otsuka, R, et al. (2011) Acute effects of passive smoking on the coronary circulation in healthy young adults, *Journal of the American Medical Association*, 286: 436-441, 2001. www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=PubMed&list_uids=11466122&dopt=Abstract
- Phillips, C.J. and Bloodworth, A. (2009). Cost of smoking to the NHS in Wales. ASH Wales and British Heart Foundation Cymru.
- Public Health Wales Observatory (2010). Lifestyle and Health: Wales and its Health Boards. Cardiff: Public Health Observatory.
- Public Health Wales Observatory (2012) Tobacco and Health in Wales
- Royal College of Physicians (1992). Smoking and the Young. London: Royal College of Physicians
- Tobacco Advisory Group of the Royal College of Physicians, (July 2005). Going smoke-free: The medical case for clean air in the home, at work and in public places. A report on passive smoking by the. Available online at:
<http://www.smokefreeengland.co.uk/files/going-smokefree.pdf>
- Welsh Government, Tobacco Control Action Plan for Wales, (2012). Available online at:
<http://wales.gov.uk/docs/phhs/publications/120202planen.pdf>

WHO, (2003). Framework Convention on Tobacco Control. Available online at:
http://www.who.int/tobacco/framework/WHO_FCTC_english.pdf

Welsh Health Survey (2010) combined
<http://wales.gov.uk/topics/statistics/headlines/health2011/1109131/?lang=en>