

**COMMUNITY WELL-BEING PDG
13 OCTOBER 2015**

LOCAL GOVERNMENT DECLARATION ON TOBACCO CONTROL

Cabinet Member Cllr Colin Slade
Responsible Officer Simon Newcombe, Public Health and Professional Services Manager

Reason for Report: To provide information to members on the Local Government Declaration on Tobacco Control

RECOMMENDATION(S): That the Community Well-Being PDG support the principle of tobacco control and recommend to Cabinet that this Council to sign the Local Government Declaration on Tobacco Control

Relationship to Corporate Plan: Public health is not a specific objective in the current Corporate Plan, however the plan does note in its district profile and challenges that *“Although the health of Mid Devon residents is generally good, the provision of high-quality health services is still seen to be essential for people’s quality of life... There must be a focus on reducing preventable diseases, for example by tackling obesity, smoking, alcohol and substance misuse, improving sexual health and improving mental health and well-being.”*

Financial Implications: There are no specific financial implications from signing the Local Government Declaration

Legal Implications: Since 2005 the Council has been legally obliged to comply with the Framework Convention on Tobacco Control (negotiated through the World Health Organisation). Signing the Local Government Declaration explicitly commits the Council to abide by the Convention. Failure to comply with the requirements of the Framework Convention on Tobacco Control by the Council would place the UK in breach of its obligations to the Parties to the Treaty. The UK could be called to account for such breaches through Treaty mechanisms, although this risk is very small. The main risk would therefore be reputational.

Risk Assessment: There are no major risks arising from signing the Local Government Declaration. There may be adverse reputational risks from not doing so.

1.0 Background

1.1 In common with other areas, smoking is the single greatest cause of premature death and disease in Devon, and the single largest factor in health inequalities. It is also a major driver of poverty. The move of public health to local government presents an opportunity for local authorities at all levels to lead local action to tackle smoking, and to ensure that the tobacco industry is not able to influence local tobacco control policy.

1.2 **The impact of smoking**

Smoking and health

Every year in England more than 80,000 people die from smoking related diseases. This is more than the combined total of the next six causes of preventable deaths, including alcohol and drugs misuse. Smoking accounts for one third of all deaths from respiratory disease, over one quarter of all deaths from cancer, and about one seventh of all deaths from heart disease. On average a smoker loses 10 years of life.

Within Mid Devon, the latest health profile data available from Public Health England indicates that around 18% of the adult population smoke and there are 117 smoking related deaths per year, approximately one every three days.

1.3 **Reducing smoking in our communities significantly increases household incomes and benefits the local economy**

The annual cost of smoking to the UK national economy has been estimated at £13.7 billion equating to £200million in Devon alone. A smoker consuming a pack of twenty pre-rolled cigarettes a day will currently spend around £3,000 a year on their habit. Based on 2009 prices, poorer smokers proportionately spend five times as much of their weekly household budget on smoking than do richer smokers. With tobacco product prices rising faster than inflation and average income then this situation will have worsened. If poorer smokers quit they are more likely to spend the money they save in their local communities.

1.4 **Reducing smoking amongst the most disadvantaged in our communities is the single most important means of reducing health inequalities**

About half of all smokers in England work in routine and manual occupations. Workers in manual and routine jobs are twice as likely to smoke as those managerial and professional roles. The poorer and more disadvantaged you are, the more likely you are to smoke and as a result to suffer smoking-related disease. Ill-health caused by smoking is therefore much more common amongst the poorest and most disadvantaged communities.

1.5 **Smoking is an addiction largely taken up by children and young people**

Two thirds of smokers start before the age of 18, and across the UK more than 200,000 children aged between 11 and 15 start to smoke every year, even though it is illegal to sell cigarettes to anyone below the age of 18. Two thirds of smokers say they began before they were legally old enough to buy cigarettes. Research shows that by the age of 20, four fifths of smokers regret they ever started. Growing up around smoke puts children at a major health disadvantage in life. Children exposed to tobacco smoke are at much greater risk of cot death, meningitis, lung infections and ear disease, resulting in around 10,000 hospital admissions nationally each year.

1.6 **The Smoking Epidemic**

The tobacco industry needs to recruit 200,000 smokers a year in the UK to maintain current levels of consumption, replacing those smokers who have stopped or who have died from diseases related to their addiction. The great majority of these new smokers will be under 18 years old. Although tobacco advertising is now banned in the UK, the tobacco multinationals use packaging of their products to try to attract young people in general, with specific brands aimed at target groups such as young women.

1.7 **The illicit trade in tobacco funds the activities of organised criminal gangs and gives children access to cheap tobacco**

HM Revenue and Customs estimate that in 2012/13, the illicit market in cigarettes accounted for about 9% of the UK market, and the illicit market in hand-rolled tobacco accounted for about 36% of the UK market. The total amount of revenue lost to the Exchequer was estimated at £2 billion in total.

2.0 **Framework Convention on Tobacco Control**

2.1 The Framework Convention on Tobacco Control (FCTC) is the world's first public health treaty, negotiated through the World Health Organisation. It has been ratified by more than 170 countries, including the UK. Key provisions include support for: price and tax measures to reduce the demand for tobacco products; public protection from exposure to tobacco smoke; regulation of the contents of tobacco products; controlling tobacco advertising, promotion and sponsorship; measures to reduce tobacco dependence and promote cessation; tackling illicit trade in tobacco products; and ending sales to children.

2.2 Article 5.3 of FCTC commits Parties to protecting their public health policies from the commercial and vested interests of the tobacco industry and the UK has explicitly committed to live up to this obligation in chapter 10 of the Tobacco Control Plan for England (Dept. of Health 2011). The FCTC is binding on all levels of Government, including local government. The national tobacco control plan aims to reduce smoking prevalence, in line with the FCTC commitment "*to reduce continually and substantially the prevalence of tobacco use.*" Specifically, the national plan is to cut the number of smokers by 210,000 every year.

3.0 **Local Government Declaration on Tobacco Control**

3.1 The Local Government Declaration on Tobacco Control (Appendix A) is a response to the huge impact that smoking has on our communities. It is a commitment to take action and a statement about a local authority's dedication to protecting local communities from the harm caused by smoking.

3.2 This is a cross-party Declaration built on the same principles as the Nottingham Declaration on Climate Change. At the time of writing, the Tobacco Declaration has been signed by 100 authorities since inception in March 2013 including all other Devon Councils. The number of signatories is increasing on average by approximately four authorities per month nationally.

- 3.3 Everything contained in the Declaration has previously been committed to at a national level by all major political parties. The Declaration is also strongly supported by the wider public health community including the Chartered Institute of Environmental Health, Trading Standards Association and the Association of Directors of Public Health as well as Public Health England, the Public Health Minister and the Chief Medical Officer.
- 3.4 The declaration has key strategic support at County level with the Devon County Council Health and Wellbeing board signing the declaration in January this year. The Director of Public Health at Devon County Council subsequently wrote to all Devon districts stating *“We should be delighted if you could join us in this public statement of commitment to reducing smoking prevalence in the County. In essence the Declaration commits councils to take local action in reducing smoking reducing prevalence and health inequalities, develop plans with partners and local communities, participate in local and regional networks, support Government action at a national level, protect tobacco control work from the commercial and vested interests of the tobacco industry, monitor the progress of plans and join the Smokefree Action Coalition.”*
- 3.3 Much work is already being done at district level working with the Smokefree Devon Board. The declaration therefore strengthens and underpins initiatives within Mid Devon including the smoke-free play areas, support to the annual ‘Stoptober’ challenge and our corporate commitment to supporting staff through smoking cessation. Furthermore, one of four local health inequality priorities for action adopted by Mid Devon this year is working in partnership to address cardiovascular disease and cancer prevention which have clear links to smoking.
- 3.4 The FCTC is binding on local government, so strictly speaking there is no need for Council to sign up to the Declaration which makes that commitment explicit. This option is not recommended because the binding commitments are little known within local government. Signing the Declaration and the actions that follow will raise awareness and thus limit the likelihood of the Council breaching UK Treaty obligations. Signing the Declaration will also show strong leadership on a key public health issue in Mid Devon.
- 3.5 In signing the declaration, there is a specific commitment to review our current policies and strategies and develop plans. There is an opportunity to undertake this as part of our commitment to a temporary (two-year) Public Health Officer within the Public Health service (currently under recruitment) and the outline these findings in the production of a wider Mid Devon Public Health Strategy.

4.0 **Five steps to signing the Declaration**

The Local Government Declaration on Tobacco Control web page outlines five steps to signing the Declaration.

4.1 **Step 1: Briefing our stakeholders**

There are many tobacco control stakeholders who will have an interest in the Declaration. In terms of local decision making the local stakeholders at Mid Devon include:

- The Community Well-Being PDG
- The Cabinet Member for Community Well-Being
- The Corporate Management Team
- Devon County Council Director of Public Health/Public Health team

The commitment to the Declaration is led by Devon County Council locally and the purpose of this report is to brief the PDG.

The Declaration and this report are fully endorsed by the Cabinet Member for Community Well-Being and the Corporate Management Team/Chief Executive through consultation undertaken in August and September this year.

4.2 **Step 2: Ensure all necessary signatories are familiar with the Declaration**

The Declaration will need to be signed up to by:

- The Leader of the Council
- Chief Executive
- DCC Director of Public Health

The Chief Executive has endorsed signing up to the Declaration and the Cabinet Member for Community Well-Being has informally briefed the Leader of the Council ahead of formal review by this PDG.

4.3 **Step 3: Identify the route the council will take to endorse sign-up**

This will vary by local circumstances. At district level endorsement is typically achieved by an initial policy debate and recommendation to either Cabinet or Full Council. On the advice of the Head of Communities and Governance, it is confirmed this is not a key decision so the correct constitutional process in this instance is for the PDG to make a recommendation to Cabinet should it wish.

4.4 **Step 4: Prepare notice of motion and table the Declaration**

A councillor or senior officer in a leadership position will need to champion the Declaration through the democratic process. Accordingly, this report contains a recommendation to Cabinet and includes a copy of the Declaration in full (Appendix A). The Declaration is co-championed by Cllr Slade (Cabinet Member for Community Well-Being) and the Public Health and Professional Services Manager.

4.5 **Step 5: Sign-up**

This provides an opportunity to promote signing up to the Declaration with the local media. There is requirement to contact the Smokefree Action Coalition so that they update the Declaration website detailing this Council as a signatory.

5.0 **Other implications**

- 5.1 Councils which sign up to the Declaration are committing to taking action on smoking, and will develop plans in partnership to reduce smoking prevalence, monitor progress and publish the results. This work is largely on-going through working closely with Public Health at Devon County Council in respect of tackling health inequalities and joint working under the provisions of the Health and Social Care Act 2012.
- 5.2 There are also established smoking policies and information in place corporately in that demonstrate not only our compliance with workplace smoke-free legislation but also our commitment providing access to advice and support for staff who wish to cease smoking.
- 5.3 Councils will also need to ensure that the tobacco industry is not able to exert influence. This will require reviews of any relevant work programmes (see section 3.5) including any which the tobacco industry has an involvement. There are no such programmes identified however as Council we continue to support programmes such as the Keep Britain Tidy Group's 'Love Where You Live' campaign, which was sponsored by Imperial Tobacco until recently. We should also ensure therefore that there are safeguards against direct or indirect tobacco company influence through lobbying or other means.

Contact for more Information: Simon Newcombe, Public Health and Professional Services Manager, 01884 244615 or snewcombe@middevon.gov.uk)

Circulation of the Report:

Cabinet Member for Community Well-Being (Cllr Colin Slade)
Leader of the Council (Cllr Clive Eginton)
Management Team

List of Background Papers:

Mid Devon Health Profile

www.apho.org.uk/resource/view.aspx?RID=171867

World Health Organisation Framework Convention on Tobacco Control and guidance notes.

http://www.who.int/fctc/text_download/en/index.html and

http://www.who.int/fctc/guidelines/adopted/article_5_3/en/index.html

Health and Social Care Act 2012

<http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted>

Local Government Declaration on Tobacco Control
<http://www.smokefreeaction.org.uk/declaration/index.html>

Local Government Declaration on Tobacco Control

We acknowledge that:

- Smoking is the single greatest cause of premature death and disease in our communities;
- Reducing smoking in our communities significantly increases household incomes and benefits the local economy;
- Reducing smoking amongst the most disadvantaged in our communities is the single most important means of reducing health inequalities;
- Smoking is an addiction largely taken up by children and young people, two thirds of smokers start before the age of 18;
- Smoking is an epidemic created and sustained by the tobacco industry, which promotes uptake of smoking to replace the 80,000 people its products kill in England every year; and
- The illicit trade in tobacco funds the activities of organised criminal gangs and gives children access to cheap tobacco.

As local leaders in public health we welcome the:

- Opportunity for local government to lead local action to tackle smoking and secure the health, welfare, social, economic and environmental benefits that come from reducing smoking prevalence;
- Commitment by the government to live up to its obligations as a party to the World Health Organization's Framework Convention on Tobacco Control (FCTC) and in particular to protect the development of public health policy from the vested interests of the tobacco industry; and
- Endorsement of this declaration by the Department of Health, Public Health England and professional bodies.

We commit our Council from this dateto:

- Act at a local level to reduce smoking prevalence and health inequalities and to raise the profile of the harm caused by smoking to our communities;
- Develop plans with our partners and local communities to address the causes and impacts of tobacco use;
- Participate in local and regional networks for support;
- Support the government in taking action at national level to help local authorities reduce smoking prevalence and health inequalities in our communities;
- Protect our tobacco control work from the commercial and vested interests of the tobacco industry by not accepting any partnerships, payments, gifts and services, monetary or in kind or research funding offered by the tobacco industry to officials or employees;
- Monitor the progress of our plans against our commitments and publish the results; and
- Publicly declare our commitment to reducing smoking in our communities by joining the Smokefree Action Coalition, the alliance of organisations working to reduce the harm caused by tobacco.

Signatories



Leader of Council



Chief Executive



Director of Public Health

Endorsed by

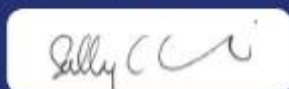
Jane Ellison, Public Health Minister, Department of Health



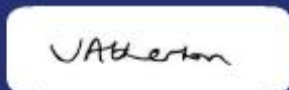
Duncan Selbie, Chief Executive, Public Health England



Professor Dame Sally Davies, Chief Medical Officer, Department of Health



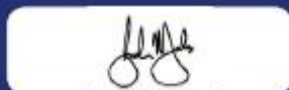
Dr Janet Atherton, President, Association of Directors of Public Health



Dr Lindsey Davies, President, UK Faculty of Public Health



Graham Jules, Chief Executive, Chartered Institute of Environmental Health



Leon Livermore, Chief Executive, Trading Standards Institute

