

- Creating smokefree environments – including parks, playgrounds and areas around schools - across GM is key to its aim of protecting people from second hand smoke.
- There is **strong public support** for the Making Smoking History Strategy with 79.3% of survey participants saying they overwhelmingly agreed with making smoking history in GM and more than three quarters in favour of extending smokefree spaces.
- So far the strategy has resulted in a **2.2% reduction** in the rate of smokers from 18.4% in 2016 to 16% in 2019. Significantly more GM smokers are now attempting to quit with the quit attempt rate at 40% or above for past year.

Questions

- Martin Fidler Jones: Was there one particular intervention that made the difference in 'Making Smoking History'.
- Andrea Crossfield: The single biggest difference in increasing quit attempts has been the investment in campaigns. The one thing that made the difference when establishing the campaign was the political engagement and senior leadership engagement across the whole system, bringing everyone together and getting the buy in from them. Following that the support from the public and the community has allowed them to do what they do.
- Mathew Norman: When do you think Wales should aim to have an endgame target?
- Andrea Crossfield: In England it's 2030. There's no reason why Wales shouldn't do the same given where we are now. With the right investment, and the will, this could be achieved.

Item 5: Suzanne Cass thanked the speakers and said following today's meeting we would be putting forward a report and a set of recommendations.

Questions

- Nick Ramsay: Has there been any work done since lockdown and the effect on smoking rates in Wales? Is anything being done to help people quit during this challenging time?
- Suzanne Cass: We know from a UK survey that there has been an increase in the number of people trying to quit smoking. Covid19 is a respiratory disease and the message seems to have got through that if you smoke you increase the risk of more severe symptoms from the disease. There is an issue around lack of face to face services so there is a challenge around how we support people who want to quit smoking. Helpmequit have increased their telephone service but there needs to be more innovative solutions. How can we reach into communities, work with housing, work with families who are facing financial difficulties? It's challenging. According to the most recent statistics prevalence has gone up from 17% to 18% but we suspect that since lockdown that figure will have probably gone down. We will have to wait and see.

Item 6: John Griffiths thanked the presenters and stressed the importance of hearing examples from elsewhere. He emphasised the strong political will in Wales. He then closed the meeting.

END

Questions

- Suzanne Cass: Where does Wales sit among other European countries and how can Wales learn from European Policy Forum?
- Claire Clement: UK is well placed on European scale. There is a good level of compliance around smokefree policies. Most policies are becoming self enforcing once they've been adopted. We have lead the way in areas such as smokefree laws around smoking in cars.
- Mathew Norman: Is there data to show the reduction of smoking between those countries who have implemented smokefree laws and those countries that haven't – is there an evidence base?
- Claire Clement: Yes there is an evidence base. Enforcement is important. Greece had a good law but it wasn't enforced and compliance was low. They had to bring in a second law with much higher fines and at that point compliance improved. Fines are an important deterrent. In countries where there is good compliance, evidence is strong that smoking is reduced. We should also remember that we are also trying to achieve denormalisation and there is strong evidence that this is achieved.
- Bethan Edwards: How important is it that policy makers from different countries share information and learning, that we are using these examples and case studies?
- Claire Clement: Yes it's really important. If one country can do it, and do it well, it shows others that it can be done, for example Sweden with smokefree pavements – Spain and other countries now doing the same.
- Craig Lawton: Away from smokefree policies are there any indirect actions/policies that have also helped to reduce smoking?
- Claire Clement: Yes, other measures are important. Increasing tax is the best deterrent. The WHO Framework Convention on Tobacco Control gives a whole host of ideas of what works best.

Item 3: Dr Esteve Fernandez from Catalan Institute of Oncology highlighted some of challenges associated with implementing smokefree hospitals, most notably the continued presence of smokers at the entrance to smokefree areas, stressing the need for **additional smokefree zones** around these areas, such as school gates.

The Catalan Network of Smokefree Hospitals was first set up in 1998. Initially no government funding was provided for the initiative. There are now 84 hospitals affiliated to the scheme. Implementation involved:

- Training healthcare professionals in cessation
- Setting up and promotion of working groups and annual meeting
- Monitoring of smoking prevalence among healthcare professionals

The **establishment of an accreditation process** in which healthcare settings are given a gold, silver or bronze level depending on the smoke-free policies.

Item 4: Andrea Crossfield from Greater Manchester Health & Social Care Partnership leads the mobilisation of the Making Smoking History Strategy in Greater Manchester to reduce smoking prevalence further and faster than anywhere else in the UK and globally, over the next 3 years.

The strategy aims to achieve smoking prevalence of 115,000 fewer smokers by the end of 2020, and to reduce the smoking rate from 18.4 to 13% by 2021 and in the longer term to 5% by 2027. The strategy also aims to reduce smoking at delivery from 12.6 to 6%.

Agenda

Agenda

Time	Item
10.30	1. Welcome from Chair
10.35	2. Introduction of Speakers by ASH Wales
10.40	3. Presentation by Claire Clement and questions
10.55	4. Presentation by Dr Esteve Fernandez and questions
11.15	5. Presentation by Andrea Crossfield MBE and questions
11.30	6. Summary and Close

Speakers

- **Claire Clement, Policy Officer, Smoke Free Partnership (SFP).** The SFP is based in Belgium and is made up of a coalition of 49 members who operate at a national and EU level. The priority of the partnership is to promote forward-thinking, evidence-based tobacco control legislation.
- **Dr Esteve Fernandez, Director of Tobacco Control Unit of the Catalan Institute of Oncology and Professor of Epidemiology and Public Health at the School of Medicine of the University of Barcelona.** Spanish Tobacco Control law includes bans on smoking in hospital grounds, school grounds, children's playgrounds and more recently a ban on outdoor terraces and public places.
- **Andrea Crossfield MBE, Independent Public Health Consultant, Greater Manchester Health & Social Care Partnership** Andrea is leading the mobilisation of the Making Smoking History Strategy in Greater Manchester to reduce smoking prevalence further and faster than anywhere else in the UK and globally, over the next 3 years.

Meeting notes

Item 1: The Chair welcomed everyone to the meeting. He introduced the content of the Public Health (Wales) Act. He stressed there is a strong Welsh Government commitment to smokefree spaces in Wales. He also shared with the group the news that just yesterday FAW had announced its intention to make all mini and junior football smokefree from now on.

Item 2: Suzanne Cass from ASH Wales introduced the speakers.

Claire Clement from Smokefree Partnership shared the Smokefree Partnership's Smokefree Map 2020 which revealed the extent to which different European countries have adopted and implemented WHO FCTC policies and where improvements need to be made.

- The UK as a whole is identified as a country where the adoption of smokefree legislation is very strong.
- CC stressed the importance of **effective enforcement** and emphasised the popularity of these measures which tended to increase once implemented.
- Methods of enforcement in Europe have included fines and working in partnership with existing enforcement agencies. Citizen driven compliance mechanisms have also proved successful in some areas with digital maps of smoke-free zones.
- The **Covid-19 crisis should act as a catalyst for change** by emphasising the burden tobacco places on health and economic systems. However, this may be hampered by tobacco industry interference around the relationship between Covid-19 and smoking at the start of the pandemic.

Cross Party Group on Smoking & Health

Key details

- **What:** Cross Party Group On Smoking & Health, Chaired by John Griffiths MS
- **When:** 10.30 – 11.30, Wednesday 30 September 2020
- **Where:** Teams meeting
- **Purpose:** To explore the impending Public Health (Wales) Act 2017 and the opportunities the new legislations opens up; how can we maximise the impact whilst avoiding the pitfalls.

Apologies

- Rebecca Davies, Will Mclean, Nia Thomas, Sharon Neale

Attendees

- | | |
|----------------------------------|-------------------------|
| 1. John Griffiths MS (Chair) | 30. P Roberts |
| 2. Nick Ramsay MS | 31. L England |
| 3. Claire Clement (speaker) | 32. Susan Carbis |
| 4. Dr Esteve Fernandez (speaker) | 33. Andy Glyde |
| 5. Andrea Crossfield (speaker) | 34. Ben Chiu |
| 6. Sarah Grimley | 35. Faye Graver |
| 7. Julie Edwards (Secretariat) | 36. Bethan Edwards |
| 8. Suzanne Cass (ASH Wales) | 37. Gareth Richards |
| 9. Beth Mahoney | 38. Calum Higgins |
| 10. Diana Milne | 39. Kathryn Jones |
| 11. Christine Farr | 40. Rebecca Lewis |
| 12. Ryland Doyle | 41. Marianne Manello |
| 13. Karen Owen | 42. Martin Fidler Jones |
| 14. Sheila Duffy | 43. Matthew Norman |
| 15. Jude Stamp | 44. Nia Rees Williams |
| 16. Alan Williams | 45. Stephanie Hill |
| 17. Cerri Jones | 46. Craig Lawton |
| 18. Sarah Jones | 47. Teresa Owen |
| 19. Rhodri Thomas | 48. Carl James |
| 20. Catherine Taylor | 49. Curtis Shea |
| 21. Adam Thomas | 50. Gareth Richards |
| 22. Alison Dally | 51. Susan Evans |
| 23. Jennifer Evans | |
| 24. Suzanne Williams | |
| 25. Andrew Bettridge | |
| 26. Brody Anderson | |
| 27. Gethin Matthews-Jones | |
| 28. Christie Owen | |
| 29. Joseph Carter | |