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Quick reference guide

NHS National Institute for Health and Clinical Excellence

School-based interventions to prevent smoking

This quick reference guide presents the recommendations made in 'School-based interventions to prevent the uptake of smoking among children and young people'.

It is for commissioners, managers and practitioners who have a direct or indirect role in, and responsibility for, preventing the uptake of smoking by children and young people. This includes those working in the NHS, local authorities, education and the wider public, private, voluntary and community sectors. It may also be of interest to children and young people, their parents or carers and other members of the public.

The guidance complements, but does not replace, NICE guidance on: preventing the uptake of smoking by children and young people through mass-media and point-of-sale interventions; smoking cessation; and school-based interventions on alcohol (see related NICE guidance, back page for a list of publications).

NICE public health guidance 23

This guidance was developed using the NICE public health intervention process.

NICE public health guidance makes recommendations on the promotion of good health and the prevention of ill health. This guidance represents the views of the Institute and was arrived at after careful consideration of the evidence available. Implementation of this guidance is the responsibility of local commissioners and/or providers. Commissioners and providers are reminded that it is their responsibility to implement the guidance, in their local context, in light of their duties to avoid unlawful discrimination and to have regard to promoting equality of opportunity. Nothing in this guidance should be interpreted in a way which would be inconsistent with compliance with those duties.

Recommendations

For the purposes of this guidance, 'schools' is used to refer to the following educational establishments:

- maintained and independent primary, secondary and special schools
- city technology colleges and academies
- pupil referral units, secure training and local authority secure units
- further education colleges
- 'extended schools' where childcare or informal education is provided outside school hours.

Recommendation 1 Organisation-wide or 'whole-school' approaches

Who is the target population?

- Children and young people under the age of 19 who attend school or another educational establishment
- Those working in schools and other educational establishments aimed at under-19s.
- Parents and carers.

Who should take action?

- Head teachers, school governors, teachers, support staff and others who work with primary and secondary schools and further education colleges. This includes:
 - Healthy Schools and Healthy Further Education leads
 - personal, social, health and economic (PSHE) education coordinators
 - school nurses
 - counsellors.

What action should they take?

 Develop a whole-school or organisation-wide smokefree policy in consultation with young people and staff. This should include smoking prevention activities (led by adults or young people) and staff training and development. The policy should take account of children and young people's cultural, special educational or physical needs. (For example, large-print versions of information may be needed.)

- Ensure the policy forms part of the wider healthy school or healthy further education strategy on wellbeing, sex and relationships education, drug education and behaviour.
- Apply the policy to everyone using the premises (grounds as well as buildings), for any purpose, at any time. Do not allow any areas in the grounds to be designated for smoking (with the exception of caretakers' homes, as specified by law).
- Widely publicise the policy and ensure it is easily accessible so that everyone using the premises is aware of its content. (This includes making a printed version available.)
- Ensure the policy supports smoking cessation in addition to prevention, by making information on local NHS Stop Smoking Services easily available to staff and students. This should include details on the type of help available, when and where, and how to access the services.

Refer, in particular, to 'Workplace interventions to promote smoking cessation' (NICE public health guidance 5). See also: 'School-based interventions on alcohol' (NICE public health guidance 7); 'Smoking cessation services' (NICE public health guidance 10); 'Social and emotional wellbeing in primary education' (NICE public health guidance 12); and 'Social and emotional wellbeing in secondary education' (NICE public health guidance 20).

Recommendation 2 Adult-led interventions

Who is the target population?

 Children and young people under the age of 19 who attend school or another educational establishment.

Who should take action?

- Head teachers, school governors, teachers, support staff and others who work with primary and secondary schools and further education colleges. This includes:
 - Healthy Schools and Healthy Further Education leads
 - personal, social, health and economic (PSHE) education coordinators
 - school nurses
 - counsellors.

What action should they take?

- Integrate information about the health effects of tobacco use, as well as the legal, economic and social aspects of smoking, into the curriculum. For example, classroom discussions about tobacco could be relevant when teaching a range of subjects including biology, chemistry, citizenship, geography, mathematics, and media studies.
- Deliver interventions that aim to prevent the uptake of smoking as part of PSHE (drugs education) and activities related to Healthy Schools or Healthy Further Education status. Link them to the whole-school or organisation-wide smokefree policy and involve children and young people in their design. Interventions should:
 - be entertaining, factual and interactive
 - be tailored to age and ability
 - be ethnically, culturally and gendersensitive and non-judgemental
 - aim to develop decision-making skills through active learning techniques
 - include strategies for enhancing selfesteem and resisting the pressure to smoke from the media, family members, peers and the tobacco industry

- include accurate information about smoking, including its prevalence and its consequences: tobacco use by adults and peers should be discussed and challenged
- be delivered by teachers and higher-level teaching assistants who are both credible and competent in the subject, or by external professionals trained to work with children and young people on tobacco issues.
- Support tobacco education in the classroom with additional 'booster' activities until school leaving age. These might include school health fairs and quest speakers.
- Encourage parents and carers to become involved, for example, by letting them know about class work or by asking them to help with homework assignments.
- Work with local partners involved in smoking prevention and cessation activities to deliver interventions. This could include local health improvement services, regional tobacco policy leads, local tobacco control alliances and NHS Stop Smoking Services.

See also: 'Behaviour change' (NICE public health guidance 6); 'School-based interventions on alcohol' (NICE public health guidance 7); and 'Preventing the uptake of smoking by children and young people' (NICE public health guidance 14).

Recommendation 3 Peer-led interventions

Who is the target population?

• Children and young people aged 11 to 16 who attend secondary school.

Who should take action?

- Head teachers, school governors, teachers and support staff in secondary schools and others who work with them. This includes:
 - Healthy Schools and Healthy Further Education leads
 - personal, social, health and economic (PSHE) education coordinators
 - school nurses
 - counsellors.
- Young people.

What action should they take?

- Consider offering evidence-based, peer-led interventions aimed at preventing the uptake of smoking such as the ASSIST (A Stop Smoking in School Trial¹) programme. They should:
 - link to relevant PSHE activities
 - be delivered both in class and informally, outside the classroom
 - be led by young people nominated by the students themselves (the peer leaders could be the same age or older)
 - ensure the peer leaders are trained outside school by adults who have the appropriate expertise
 - ensure peer leaders receive support from these experts during the course of the programme
 - ensure young people can consider and, if necessary, challenge peer and family norms on smoking, discuss the risks associated with it and the benefits of not smoking.

See also 'School-based interventions on alcohol' (NICE public health guidance 7).

Recommendation 4 Training and development

Who is the target population?

- Teachers, support staff and others with a remit for improving the health and wellbeing of children and young people under the age of 19 who attend school or another educational establishment. This includes:
 - Healthy Schools and Healthy Further Education leads
 - personal, social, health and economic (PSHE) education coordinators
 - school nurses
 - counsellors.

Who should take action?

 Head teachers, school governors, public health commissioners, teacher training bodies and providers of continuing professional development.

What action should they take?

- Provide training for all staff who will be involved in smoking prevention work.
- Work in partnership to design, deliver, monitor and evaluate smoking prevention training and interventions. Partners could include: national and local education agencies, training agencies, local authorities, the school nursing service, voluntary sector organisations, local health improvement services and universities.

See also: 'Brief interventions and referral for smoking cessation' (NICE public health guidance 1); 'Behaviour change' (NICE public health guidance 6); and 'Smoking cessation services' (NICE public health guidance 10).

¹ Campbell R, Starkey F, Holliday J et al. (2008) An informal school-based peer-led intervention for smoking prevention in adolescence (ASSIST): a cluster randomised trial. Lancet (371) 9624: 1595–602.

Audrey S, Halliday J, Campbell R (2006) It's good to talk: adolescent perspectives of an informal, peer-led intervention to reduce smoking. Social Science and Medicine (63): 320–34.

Audrey S, Halliday J, Campbell R (2008) Commitment and compatibility: teacher's perspectives on the implementation of an effective school-based, peer-led smoking intervention. Health Education Journal (67): 74–90.

Recommendation 5 Coordinated approach

Who is the target population?

 Children and young people under the age of 19 who attend school or another educational establishment.

Who should take action?

- Government departments, school inspectorates, school governing bodies and school commissioners.
- Children's trusts.
- Local authorities, in particular, children and young people's services, trading standards and environmental health officers.
- Connexions or Integrated Youth Support Services.
- Primary care trusts (PCTs) and regional and national health commissioners.
- Local tobacco control alliances.

What action should they take?

- Ensure smoking prevention interventions in schools and other educational establishments are part of a local tobacco control strategy.
- Ensure schools and other educational establishments deliver evidence-based smoking prevention interventions. These should be linked to their smokefree policy and consistent with regional and national tobacco control strategies.
- Ensure the interventions are integrated into the curriculum, PSHE education and work associated with Healthy Further Education and Healthy Schools status. They should also follow the Healthy Schools enhancement model (stage 5)².

See also 'Behaviour change' (NICE public health guidance 6).

Implementation tools

NICE has developed tools to help organisations put this guidance into practice. For details see our website at www.nice.org.uk/guidance/PH23

Further information

You can download the following from www.nice.org.uk/guidance/PH23

- A quick reference guide (this document) for professionals and the public.
- The guidance the recommendations, details of how they were developed and evidence statements.
- Details of all the evidence that was considered and other background information.

For printed copies of the quick reference guide, phone NICE publications on 0845 003 7783 or email publications@nice.org.uk and quote N2083.

² For details visit the Healthy Schools website at www.healthyschools.gov.uk

Related NICE guidance

For more information about NICE guidance that has been issued or is in development, see www.nice.org.uk

Published

- Social and emotional wellbeing in secondary education. NICE public health guidance 20 (2009). Available from www.nice.org.uk/guidance/PH20
- Preventing the uptake of smoking by children and young people. NICE public health guidance 14 (2008). Available from www.nice.org.uk/guidance/PH14
- Social and emotional wellbeing in primary education. NICE public health guidance 12 (2008). Available from www.nice.org.uk/guidance/PH12
- Smoking cessation services. NICE public health guidance 10 (2008). Available from www.nice.org.uk/guidance/PH10
- School-based interventions on alcohol. NICE public health guidance 7 (2007). Available from www.nice.org.uk/guidance/PH7
- Workplace interventions to promote smoking cessation. NICE public health guidance 5 (2007). Available from www.nice.org.uk/guidance/PH5
- Varenicline for smoking cessation. NICE technology appraisal 123 (2007). Available from www.nice.org.uk/guidance/TA123
- Brief interventions and referral for smoking cessation in primary care and other settings.
 NICE public health guidance 1 (2006).
 Available from www.nice.org.uk/guidance/PH1

Under development

- Alcohol-use disorders: preventing harmful drinking. NICE public health guidance (publication expected March 2010)
- Quitting smoking in pregnancy and following childbirth. NICE public health guidance (publication expected May 2010)
- Personal, social and health education focusing on sex and relationships and alcohol education. NICE public health guidance (publication expected January 2011)

Updating the recommendations

This guidance will be reviewed at 3 and 5 years after publication to determine whether all or part of it should be updated. Information on the progress of any update will be posted at www.nice.org.uk/guidance/PH23

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