Smoke Factor is produced by Health Promotion Fife in partnership with Fife Council Education Service (2016).
Contents

Background ............................................................................................................................................. 4

Introduction ........................................................................................................................................ 5

Curriculum for Excellence outcomes ................................................................................................. 6
  Health and wellbeing outcomes ........................................................................................................ 7
  Cross curricular outcomes ................................................................................................................ 8

Activity set 1 History of tobacco ........................................................................................................ 9
  Teacher record experiences and outcomes ..................................................................................... 10
  Activity 1.1 History of tobacco presentation .................................................................................... 11

Activity set 2 Ingredients of a cigarette and the effects of tobacco ............................................... 29
  Teacher record experiences and outcomes ..................................................................................... 30
  Activity 2.1 ....................................................................................................................................... 31
  Activity 2.2 ....................................................................................................................................... 35
  Additional task worksheets ............................................................................................................... 38

Activity set 3 Second hand smoke and smoke free communities ............................................... 41
  Teacher record experiences and outcomes ..................................................................................... 42
  Activity 3.1 ....................................................................................................................................... 43
  Activity 3.2 ....................................................................................................................................... 48

Activity set 4 Attitudes and influences ............................................................................................ 51
  Teacher record experiences and outcomes ..................................................................................... 52
  Activity 4.1 ....................................................................................................................................... 53
  Activity 4.2 ....................................................................................................................................... 60
  Activity 4.3 ....................................................................................................................................... 63
Acknowledgements

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• Saline Primary School
• Mountfleurie Primary School.

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Primary 6, Saline Primary School for providing the winning logo design.
Gillian Merritt, Head Teacher at Mountfleurie Primary School.
Kay Samson, Tobacco Issues Coordinator NHS Fife Health Promotion.

Any issues regarding Smoke Factor should be directed to Fiona Lockett: fiona.lockett@nhs.net or 01592 226487.
Background

In terms of smoking education, children provide an excellent opportunity for effective intervention as health behaviours are often developed at an early age. The implementation of smoking prevention strategies for primary age pupils is endorsed by the Scottish Government. The Scottish Government’s Tobacco Strategy for Scotland - Creating a Tobacco-Free Generation, 2013\(^1\) sets out an ambitious programme of measures designed specifically to dissuade children and young people from smoking.

Smoking remains the single greatest cause of preventable death in the UK and the harmful effects of tobacco smoke are well documented. Smoking amongst children and young people is a major health concern, particularly as a large proportion of those who experiment with smoking develop into regular smokers and continue smoking into adulthood. Many experiment with smoking thinking they will give up when they want to, but underestimate just how highly addictive smoking is.

Current Smoking Behaviour by Age Group 13 years -15 years\(^2\)

<table>
<thead>
<tr>
<th>Smoking Behaviour</th>
<th>Fife 13yrs</th>
<th>Scotland 13yrs</th>
<th>Fife 15yrs</th>
<th>Scotland 15yrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regular Smoker</td>
<td>3%</td>
<td>2%</td>
<td>12%</td>
<td>9%</td>
</tr>
<tr>
<td>Occasional Smoker</td>
<td>2%</td>
<td>1%</td>
<td>3%</td>
<td>4%</td>
</tr>
<tr>
<td>Used to smoke</td>
<td>5%</td>
<td>2%</td>
<td>9%</td>
<td>6%</td>
</tr>
<tr>
<td>Tried smoking once</td>
<td>9%</td>
<td>8%</td>
<td>16%</td>
<td>15%</td>
</tr>
<tr>
<td>Never smoked</td>
<td>82%</td>
<td>87%</td>
<td>63%</td>
<td>66%</td>
</tr>
</tbody>
</table>

References:


Introduction

Smoke Factor is an evidence based tobacco education initiative designed to complement the ‘Curriculum for Excellence’. The Smoke Factor resource comprises of 4 Activity Sets for composite Primary 5/6, Primary 6 and Primary 7 pupils. The themes of the Activity Sets are:

- History of Smoking
- Ingredients of a Cigarette and the Effects of Smoking
- Second Hand Smoke and Smoke Free Communities
- Attitudes and Influences

The objectives of Smoke Factor are:

- to prevent the experimentation and uptake of smoking by children, through education on tobacco issues and the promotion of non-smoking norms.
- to provide a programme of activity which complements the outcomes and experiences set within the Curriculum for Excellence.

Upon completion of the activity sets a one hour theatre production is delivered by Raenbow Theatre Productions. The theatre production reinforces the learning from the activity sets.

This resource offers comprehensive notes for teachers to confidently deliver tobacco education sessions, safe in the knowledge that the information is evidence based and current. The activity sets also offer teachers greater autonomy than a structured lesson plan might. Teachers can therefore select and deliver the activities they feel most appropriate to their pupils. Smoke Factor recognises the sensitivities of the subject matter and the need for care to be taken when addressing the issues, particularly those around second hand smoke.

Smoke Factor meets a number of cross-curricular outcomes in order to support integration of the activities into other subject areas. This resource should not be seen as a stand alone Health and Wellbeing resource. A full list of the curriculum outcomes met is provided on pages 7 and 8.

Children whose parents or siblings smoke are more likely themselves to smoke when they are older. Therefore, they are an important group to deliver tobacco education to. However, those children with parents/carers and grand-parents who smoke may become alarmed or distressed by information around smoking morbidity and mortality. Instead, allowing pupils to explore issues around choice and culture is important and this is what Smoke Factor aims to do.
Curriculum for excellence

Experiences and outcomes
## Health and wellbeing

### Substance misuse outcomes

<table>
<thead>
<tr>
<th>Activity Set 1</th>
<th>Activity Set 2</th>
<th>Activity Set 3</th>
<th>Activity Set 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>The History...</strong></td>
<td><strong>Ingredients...</strong></td>
<td><strong>Second Hand...</strong></td>
<td><strong>Peer Influence...</strong></td>
</tr>
<tr>
<td>I understand the effect that a range of substances including tobacco and alcohol can have on the body. (HWB 2-38a)</td>
<td>I understand the effect that a range of substances including tobacco and alcohol can have on the body. (HWB2 – 38A)</td>
<td>I understand the impact that misuse of substances can have on individuals, their families and friends. (HWB2-43a)</td>
<td>I know that popular culture, the media and peer groups as well as my own attitudes and values can influence how I feel about substance use and recognise the impact this may have on my actions. (HWB 2-39a)</td>
</tr>
<tr>
<td>I understand the impact that misuse of substances can have on individuals, their families and friends. (HWB 2-43a)</td>
<td>I can identify the different kinds of risks associated with the use and misuse of a range of substances (HWB2 – 41a)</td>
<td></td>
<td>I understand the impact that misuse of substances can have on individuals, their families and friends. (HWB 2-43a)</td>
</tr>
</tbody>
</table>
## Cross Curricular Outcomes

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<thead>
<tr>
<th>Activity Set 1</th>
<th>Activity Set 2</th>
<th>Activity Set 3</th>
<th>Activity Set 4</th>
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</thead>
<tbody>
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<td><strong>Ingredients...</strong></td>
<td><strong>Second Hand...</strong></td>
<td><strong>Peer Influence...</strong></td>
</tr>
<tr>
<td>I can compare and contrast a society in the past with my own and contribute to a discussion of the similarities and differences. <em>(SOC 2-04a)</em></td>
<td>By investigating some body systems and potential problems which they may develop, I can make informed decisions to help me to maintain my health and wellbeing. <em>(SCN 2-12a)</em></td>
<td>I can create and present work that shows developing skill in using the visual elements and concepts. <em>(EXA 2-03a)</em></td>
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</tr>
<tr>
<td>I can discuss why people and events from a particular time in the past were important, placing them within a historical sequence. <em>(SOC 2-06a)</em></td>
<td>I can discuss the environmental impact of human activity and suggest ways in which we can live in a more environmentally-responsible way. <em>(SOC 2-08a)</em></td>
<td>Inspired by a range of stimuli, I can express and communicate my ideas, thoughts and feelings through activities within art and design. <em>(EXA 0-05a / EXA 1-05a / EXA 2-05a)</em></td>
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</tr>
<tr>
<td>I can investigate how an everyday product has changed over time to gain an awareness of the link between scientific and technological developments. <em>(TCH 2-01b)</em></td>
<td>Through exploring ethical trading, I can understand how people’s basic needs are the same around the world, discussing why some societies are more able to meet these needs than others. <em>(SOC 2-20a)</em></td>
<td>Through discovery and imagination, I can develop and use problem-solving strategies to construct models. <em>(TCH 1-14a / TCH 2-14a)</em></td>
<td>I can develop and communicate my ideas, demonstrating imagination and presenting at least one possible solution to a design problem. <em>(EXA 2-06a)</em></td>
</tr>
</tbody>
</table>
Activity Set 1

The images in section 1 are used with permission.
## Activity set 1 - Teacher record

### Experiences and outcomes

<table>
<thead>
<tr>
<th>Outcome Statement</th>
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<td></td>
</tr>
<tr>
<td>I can investigate how an everyday product has changed over time to gain an awareness of the link between scientific and technological developments.</td>
<td></td>
</tr>
<tr>
<td>(TCH 2-01b)</td>
<td></td>
</tr>
</tbody>
</table>
Activity 1.1
A History Of Tobacco Presentation

Learning Objective
• To raise pupil awareness of tobacco farming and the historical context of tobacco.
• To encourage pupils to think of a world free of tobacco.

What you need
• The CD with presentation and teachers notes from folder.
• Computer, projector and wall space or Smartboard.

Time required
Up to 2 hours

Delivery of activity
Deliver the Powerpoint presentation using the presentation provided on the CD.

Additional optional activities
• The date is 2034. The world is now tobacco free. Pupils write a poem or short story about living in a tobacco free world.

• The date is 1492, Christopher Columbus comes back to Europe having found the Cubans smoking their ‘tabacos’. Pupils imagine they are Christopher Columbus and write a log telling the world about discovering ‘tabacos’. Helpful tip: soaking paper in a little water with a teabag and allowing to dry gives an aged look to the paper before the pupils write their log on it for authenticity.

• As a class, design and create a timeline of tobacco issues based on the information provided.
Activity 1.1

Presentation slide notes

Copyright Notice:

Permission has been given to use all images in this presentation.

Permission has been given by GASP to adapt the History of Tobacco Factsheet for the purposes of this presentation.
Slide 1
A Revolution is a complete 360° turn. We are going to imagine a time when smoking didn’t exist and ask what a future without tobacco would be like? Can we complete a 360° turn and again live in a world free of tobacco?
Slide 2

Quick background
The tobacco smoked in cigarettes comes from a plant. The image is an actual tobacco plant as it flowers.

Ask the pupils
Where they thought tobacco came from? Did they think it just appeared in a big factory somewhere?
Tobacco is the name given to the leaves of the Nicotiana plant. The leaves of the plant are picked when they are fully grown (image on the left) and over the next few months they are dried (image on the right).

**DID YOU KNOW:**
Tobacco is the name given to the leaves of the genus Nicotiana plant.
**True or False?:**

Children in many developing countries are used as child labour on tobacco farms?

**Answer:** TRUE

---

*Tobacco is grown in many countries like North America and Malawi, Africa*

---

**Slide 4**

**Background continued**

**Ask the pupils:**

Did you know that children are used on tobacco farms throughout the world?

These children often develop a sickness through exposure to the nicotine in the plant and the chemicals used to grow the crop. The children will earn only pennies per day and will work on the farms instead of going to school.
Slide 5
The native races and tribes of the Americas have been smoking for pleasure and religious rituals for over 2000 years. They smoked as a symbol of peace and blow smoke to the four winds.
Slide 6

In 1492 Christopher Columbus found Indians on Cuba smoking tobacco cigars.

Ask the pupils:

Does anyone know who Christopher Columbus is?

Christopher Columbus was a navigator, coloniser and explorer from Genoa, Italy, whose voyages across the Atlantic Ocean led to general European awareness of the American continents.
Tobacco first came to Spain in Europe 450 years ago to be grown to make medicine.

Ask the pupils:
Does anyone recognise a clue in the surname of the French ambassador on the bottom right?
His surname is Nicot and this is where the word nicotine comes from.

Ask the pupils:
Does anyone know what nicotine does?
Nicotine is the most addictive chemical in tobacco. It can be more addictive than heroin or cocaine. It is found naturally in tobacco plants and is one of the main reasons why people become addicted to cigarettes. It takes approximately 7 seconds from inhaling cigarette smoke for the nicotine in the smoke to reach the nicotine receptors in the brain.
Slide 8
King James 6th and 1st was not very complimentary about tobacco in 1604. Teacher should pick out the key words like loathsome, harmful, dangerous, stinking, horrible and...

Ask the pupils:
Why do you think the use of tobacco continued to grow even though someone as powerful as the King of the United Kingdom had such a bad opinion of it?

Although King James had his views tobacco continued to become popular throughout Britain.
As tobacco became more popular they had to grow more tobacco plants to make enough for everyone. Slaves were taken from Africa to America to work on the fields to grow and prepare the tobacco.

Around this time trade between countries across the World was beginning to grow and large boats would transfer the tobacco back to Europe. Unaware of the harm, the people of Europe craved tobacco. It was smoked in pipes and cigars and was even chewed.
World War 1 started in 1914 and ended in 1918. As if war wasn’t dangerous enough British and German soldiers were given free cigarettes to keep their spirits high and comfort them during their time fighting.

Cigarette companies had military and naval names like Nelson, Capstan, Man of War and Red Hussar. As a result of the free cigarettes and the clever promotion of cigarettes during this time smoking seemed like a patriotic thing to do. The Second World War was like the first in that tobacco was seen as an important comfort to the soldiers. Cigarette smoking was the most popular in 1950s when 75% of men smoked. It became strange if you didn’t smoke!!

Ask the pupils:
What percentage of people in Scotland do you think are smokers? You will generally find that their responses are much higher than the national averages. The current national averages are:

- 13 year olds - 2%
- 15 year olds - 9%
- Adults 16+ - 23%

References
   The national average is based on data on regular smokers (defined as smoking at least one cigarette a week).
We all know that smoking is very bad for our health, but it wasn’t until 1939 that doctors first realised that there was a link between smoking and lung cancer.

Until about 40 years ago people generally did not know that smoking was so dangerous to their health. At this time the number of people smoking started to go down as people worried about the effect it would have on their health.
Slide 12

Cigarettes were promoted as an important part of everyday life and celebrities such as actors, pop stars and sports stars were paid lots of money to promote cigarettes. Advertising was also used to target young girls and women.

Ask the pupils:
Ask the pupils who their idols are. (Sam Smith, Beth Tweddle, Zoella, etc). Then ask how they would feel if every time they saw their idol on TV they had a cigarette? Do you think seeing your idols smoking in such a way would have an effect on how you think about smoking?

What we see in the movies and TV has a big impact on us, whether we realise it or not! To find out more about the relationship between the tobacco industry and the movies pupils may wish to visit the Smoke Free Movies website on www.smokefreemovies.ucsf.edu/

Ask the pupils:
To make a list of children’s movies they are aware of with smoking in them (individually or as a class).

Why does smoking need to be in these movies? Would the movies be any worse without smoking in them? Is there any situation where smoking is important to a movie? The short answer is no! Smoking, more often than not, is deliberately added to movies in an effort to promote cigarettes to the viewer as something which is attractive.
Slide 13

Like within movies tobacco companies try to sell their products by making them look attractive to children and young people by using clever marketing tools, including using bright colours and selling them under bright lights in the shops behind the counter assistant.

In 1995 a major tobacco company planned to sell more cigarettes by targeting homeless people. They called their plan “Project Scum”. This demonstrates what tobacco companies really think of the public.

Ask the pupils: How it makes them feel towards the tobacco companies knowing they behave in this way?

Then, ask the pupils: How would it make you feel if you knew that tobacco companies referred to children as “replacement smokers”? They refer to children as “replacement smokers” as they need children to start smoking to replace the people who die because of their smoking and those who quit. Would the pupils be willing to change their name on the class register as replacement 1, 2, 3 etc?
Given everything that you already knew about the effects of smoking on your health and how tobacco companies desperately need you to start smoking to keep making money, why would you start smoking? It's not cool and it's not glamorous!

As a class make a list of all the positive things about smoking.

You will quickly find that there are no positives in smoking. Repeat the question: Why would you start smoking then?
Slide 15
Fear not, people are now standing up to tobacco companies and saying that they will not be fooled into smoking any longer! Children and young people are voting by not starting to smoke. Adults who do smoke are saying no longer shall I smoke and are quitting in huge numbers.

Did you know?
98% of 13 year olds in Scotland choose not to smoke.
91% of 15 year olds in Scotland choose not to smoke.
77% of adults in Scotland choose not to smoke.

One minute imagery/reflection
Close your eyes for a minute and think about all the times you see people smoking, about the times you see cigarette butts littering the streets, about the 250 million trees that are cut down each year to produce cigarettes, think about the children working in Africa who are developing illnesses from working on tobacco farms, think about the smokers who become ill because of their habit...

Now think about a world without smoking, without tobacco making people ill and littering the streets. Ask yourself, would you rather live in a world free from tobacco? The world is joining together to shape a world free from tobacco and you can play an important part in making that possible. What do you think? It's all in your hands...

It’s your choice. Make your school a smoke free community and help rid this world of tobacco.
Activity Set 2

The information provided in section 2 is adapted with permission from NHS Health Scotland Tobacco facts: a resource pack for teachers, youth workers and those working with children and young people on tobacco issues, 2008.
## Activity set 2 Teacher record

### Experiences and outcomes

<table>
<thead>
<tr>
<th>Outcome Statement</th>
<th>Teacher Notes</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>I can identify the different kinds of risks associated with the use and misuse of a range of substances (HWB2 – 41a)</td>
<td></td>
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<tr>
<td>By investigating some body systems and potential problems which may develop, I can make informed decisions to help me to maintain my health and wellbeing (SCN 2-12a)</td>
<td></td>
</tr>
</tbody>
</table>
Activity 2.1
Stick the effects on the body

Learning Objective
To raise awareness of the health dangers of smoking
To raise awareness of the effect smoking has on your looks.

What you need
• A sheet of effects for each group,
• Large sheet of frieze paper (at least 1½ metres long) per group
• Coloured pens/pencils
• Glue/cellotape/bluetack
• Teachers’ notes

Time required
Approximately 1 - 1½ hours

Delivery of activity
1. Divide the class into groups. Ask each group to nominate an individual to be the template for the “body” and draw around the pupil with a felt-pen onto the frieze paper. Ask the group to draw features on the “body” and give it a name e.g. Smokey Joe. Stick the “body” on the wall.

2. Give each group a sheet of effects and ask them to cut out each effect.

3. Each group member takes a turn at placing one of the labels on the affected body part. This is repeated until all the labels are placed on the body.

4. Once activity is completed, compare and discuss each group’s answers. Have a brief discussion on each effect (See teacher’s notes). Can the class add any more of their own?

5. Conclude by informing the class that this activity highlights the effects smoking has on the whole body and not just the lungs.

(Note: it is important that the visual effects of smoking are reinforced, greater emphasis should be given to the impact of smoking on the way it makes you look.)
Activity 2.1
Teachers’ notes

Stick the effect on the body - Short-term effects

Hair Smells.
Cigarette smoke has an unpleasant odour that lingers on everything from skin and hair to clothing and curtains. Often smokers hair will go grey earlier and male smokers in particular will lose hair and go bald younger.

Stained Teeth and Bad Breath.
Particles from cigarette smoke stain teeth brown and yellow and trap odour-producing bacteria in your mouth. Gum disease and tooth loss is also common in smokers.

Yellow fingers.
When people smoke, the tar in the cigarette stains their fingers yellow. Tar is the sticky black stuff that is used to mend roads. You cannot see the tar in smoke but when you breathe it in, tiny drops of tar get into the mouth, throat and lungs.

Smoker’s cough.
In the nose, throat and lung passages there are lots of little hairs, known as cilia, which protect the airways, keeping them clear. When someone smokes, the cilia become paralysed and are unable to keep the airways free. Hence a smoker’s cough is the body trying to get rid of all the tar and mucus which has accumulated in the airways.

Eyes water.
The smoke from the burning end of a cigarette and exhaled from a smoker contains a range of harmful substances which irritate the eyes causing stinging, watering and increased blinking.
Long-term effects

Wrinkled skin.
Smoking restricts blood vessels and it reduces the amount of blood flowing to the skin, thus depleting the skin of oxygen and essential nutrients. The more the person smokes the greater the risk of premature wrinkling. Young smokers in their 20s often have as many wrinkles as non-smokers in their 40s.

Asthma.
Asthma attacks all age groups but often starts in childhood. It is a disease known by recurrent attacks of breathlessness and wheezing. This condition is due to inflammation of the air passages in the lungs and affects the sensitivity of the nerve endings in the airways so they become easily irritated. In an attack, the lining of the passages swell causing the airways to narrow and reducing the flow of air in and out of the lungs.

Reduced sense of taste and smell.
The chemical components contained in cigarettes reduce the sense of smell and taste. This tends to happen gradually over a period of time and is often undetected but quitters often report a quick improvement after stopping smoking.

Heart attack.
Regular smoking for many years causes damage to the arteries (the tubes which carry blood) which results in the heart having to pump faster and work harder than it should. Nicotine in cigarettes makes the heart beat faster, while carbon monoxide restricts the amount of oxygen the blood can carry. This can damage the heart and result in a heart attack.

Cancer.
There are a group of cancers that are a result of smoking. Cancer involves the uncontrolled growth of cells resulting in the formation of a lump (or tumour) which can then spread to other parts of the body. Lung cancer is the most common cancer caused by regular smoking as the harmful chemical components in tobacco smoke are drawn directly into the lungs. Smoking regularly also increases the risk of cancer of the mouth, throat, bladder and stomach. Giving up smoking reduces the risk of getting cancer.

Poor circulation and gangrene.
Tobacco smoke contains a range of harmful substances which can restrict circulation, potentially leading to gangrene and eventual amputation. 95% of gangrene cases occur in smokers. Amputation is the removal of a limb, like your leg or arm for example due to poor circulation caused by smoking.
Activity 2.1
Effects of smoking worksheet

<table>
<thead>
<tr>
<th>Hair Smells</th>
<th>Wrinkles Around Mouth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stained Teeth</td>
<td>Yellow Fingers</td>
</tr>
<tr>
<td>Heart Attack</td>
<td>Smokers’ Cough</td>
</tr>
<tr>
<td>Throat Cancer</td>
<td>Lung Cancer</td>
</tr>
<tr>
<td>Eyes Water</td>
<td>Mouth Cancer</td>
</tr>
<tr>
<td>Reduced Sense of Taste and Smell</td>
<td>Stomach Cancer</td>
</tr>
<tr>
<td>Poor Circulation and Gangrene</td>
<td>Bad Breath</td>
</tr>
<tr>
<td>Wrinkles Around the Eyes</td>
<td>Asthma</td>
</tr>
</tbody>
</table>
Activity 2.2

Guess the ingredient

Learning Objective
To raise awareness of the common chemicals found in cigarettes and their alternative everyday uses.

What you need
- A worksheet of ingredient clues (x number of groups)
- Pencils
- Teachers’ notes

Time required
1 - 1½ hours

Delivery of activity
Divide the class into groups.

Give each group a worksheet of ingredient clues and ask them to guess what the ingredient is. (Note: if you feel your class will be unable to guess straight away, it might be best to talk through some of the ingredients using the teachers’ notes). Pupils can stick the ingredients on the ‘what’s in a cigarette’ sheet as a display for the school.

Once activity is completed, compare and discuss each group’s answers. Have a brief discussion on each ingredient and their common uses. (See teachers’ notes).

Conclude by asking the class to think about food from the supermarket. A list of ingredients appears clearly on the back. Discuss as a class why ingredients do not appear on the back of cigarette packets?

Optional additional activities
Design a poster called ‘The Truth About Tobacco’ to encourage non-smokers not to start smoking.
Activity 2.2
Teachers notes

Guess the ingredient

- There are over 4000 chemicals in tobacco smoke, many are poisonous and over 60 are known to cause cancer.
- But how do these chemicals get into the smoke? The majority are produced as part of combustion – they are produced in smoke when the cigarette is lit.

Below each of the clues on the worksheet are explained:

Ant - nicotine.
Nicotine is a pesticide and the fastest acting and most addictive chemical in a cigarette. It takes only 7 seconds after smoke is inhaled for the nicotine to be absorbed into the blood stream and register an effect in the brain. It affects the body by making the heart beat faster and raising blood pressure. It is also found in ant poison.

Car - carbon monoxide CO.
Poisonous gas which is also found in car exhausts fumes. It reduces the amount of oxygen your blood can carry around the body. It clings to the red blood cells and up to 15% of a smoker’s blood may be carrying carbon monoxide rather than oxygen.

Road - tar.
The tar in tobacco smoke contains a number of substances which cause cancer. When you breathe in tobacco smoke the tar goes straight into your lungs. About 70% of the tar contained in the smoke ends up coating the lungs. An average smoker’s lungs will collect over a mug full of tar every year. Tar also stains the fingers and teeth yellow. Different cigarettes have different levels of tar. However, research shows that low tar cigarettes are no safer than higher tar cigarettes because smokers tend to compensate by smoking more of them or inhaling more deeply.

Mummy - formaldehyde.
Embalming fluid. A colourless liquid, highly poisonous, used to preserve dead bodies - also found in cigarette smoke. Known to cause cancer, respiratory, skin and gastrointestinal problems.

Vinegar - acetic acid.
The main ingredient in vinegar is also in cigarettes. Would you want to smoke something you would also use for salad dressing?
**Toilet cleaner - ammonia.**
Added by tobacco companies as it speeds up the release of nicotine into the body by opening up the airways, allowing the smoker to inhale more deeply.

**Nail polish - acetone.**
A flammable, colourless liquid used as a solvent. It’s one of the active ingredients in nail polish remover. The tobacco industry refuses to say how acetone gets into cigarettes.

**Rocket - methanol/rocket fuel.**
Methanol is toxic. If inhaled it can cause a wide range of harmful effects, from heart and liver damage to reproductive harm, blindness or death.
**Activity 2.2**

*Guess the ingredient clues*

<table>
<thead>
<tr>
<th>Ingredient Clue 1</th>
<th>Ingredient Clue 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ant</td>
<td>Car</td>
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<tr>
<td>Rocket</td>
<td>Figurine</td>
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</tr>
<tr>
<td>Nail polish</td>
<td>Bottle</td>
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</tbody>
</table>
What's in a cigarette?

There are over 8,000 chemicals in a cigarette. Of which cause cancer.

Look at some of the chemicals that are found in cigarettes.
Activity Set 3

The information provided in section 3 is adapted with permission from NHS Health Scotland Tobacco facts: a resource pack for teachers, youth workers and those working with children and young people on tobacco issues, 2008.
## Activity Set 3  Teacher record

### Experiences and outcomes

<table>
<thead>
<tr>
<th>Outcome Statement</th>
<th>Teacher Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>I understand the impact that misuse of substances can have on individuals, their families and friends. (HWB2-43a)</td>
<td></td>
</tr>
<tr>
<td>I can create and present work that shows developing skill in using visual elements and concepts. (EXA 2-03a)</td>
<td></td>
</tr>
<tr>
<td>Inspired by a range of stimuli, I can express and communicate my ideas, thoughts and feelings through activities within art and design (EXA 0-05a / EXA 1-05a / EXA 2-05a)</td>
<td></td>
</tr>
</tbody>
</table>

**Please note:**

Second Hand Smoke (SHS) issues must be handled with great care, compassion and sensitivity. The issues raised may be upsetting for some pupils and not all pupils will have a supportive home environment in which to take the message.

The information provided is designed to support teachers to deliver the message but allows for discretion and autonomy in the way it is delivered. Please read the sections fully before deciding what messages you feel are most appropriate for your pupils.

**TIP:**

Concentrating on the effect of SHS on household pets may be a less direct way of delivering the message.
Activity 3.1 Second hand smoke exposure

Learning Objective

To raise awareness of second-hand smoke (SHS), the effect it has on the non-smoker and where exposure may occur.

What you need

- Teachers’ notes
- Smoke Free Door Hanger x number of pupils
- Second Hand Smoke quiz
- Coloured pens and pencils
- Jar of water, food dye

Time required

Up to 2 Hours

Delivery of activity

1. Introduce the topic of second-hand smoking. Ask the pupils to think about the following:
   - What do they understand by the term ‘second-hand smoke’? Can the class agree upon a definition of second hand smoke.
   - How do they feel about breathing in the smoke from another person’s cigarette?
   - How do they feel about the effect that second hand smoke has on pets?
2. Quiz pupils on SHS by using the quiz provided. (This can be carried out individually, pairs, groups or as a class at your discretion).
3. Use science time to demonstrate the movement of smoke. Drip colour food dye into a jar of water showing how it moves through the clear water to eventually colour the whole jar in the same way that smoke moves through a room.

Additional Activity

Pupils can design their very own smoke-free room door hanger (using the hangers provided) and secure their own smoke-free space in the home.
Activity 3.1 Teachers’ notes
second hand smoke exposure

Definition

• Second hand smoke or SHS (formerly known as passive smoke) means involuntarily breathing in other peoples tobacco smoke. SHS contains the same 4000+ chemicals that smoking a cigarette does.

• Second Hand Smoke can be also known as ETS (environmental tobacco smoke) and has been classified as a Class A (known to be cancer causing in humans) carcinogen by the Environmental Protection Agency in the USA, putting it in the same class as asbestos, arsenic, benzene and radon gas.

• Tobacco Smoke consists of mainstream and side stream smoke.

• Mainstream smoke is smoke breathed in and out by smokers.

• Side stream smoke is smoke which comes from the tip of a burning cigarette or cigar and makes up 85% (much of which is invisible) of the smoke in a smoky place and contains higher levels of toxins than mainstream smoke.

• Cigarette smoke can linger in the air for up to 5 hours. You can’t see or smell it but it’s there. Second hand smoke is made up of particles that are smaller than household dust, so it moves easily from room to room as you move around and open doors.

Impact Of Second Hand Smoke

• Research over the past 20 years has shown the serious health risks associated with exposure to second hand smoke, including increasing risk of lung cancer, heart disease, nasal sinus cancer and indicates that SHS may also be associated with breast cancer and stroke.

Legislation

• The Smoking, Health and Social Care (Scotland) Act banned smoking in all enclosed public places and workplaces in Scotland as of March 26, 2006. Before the smoking ban, asthma admissions were increasing each year. After the ban, the rate of admissions decreased sharply each year, relative to the rates at March 2006. Rates were reduced both in pre-school and school-age children.

Concerns About Children/Young People

• Concern is now focusing on children and infants’ level of exposure to second hand smoke within the home and car. In Oct 2015, it became illegal in Wales to smoke in a car carrying anyone under 18.

• UK data suggests that approximately half of all children in the UK are exposed to SHS in the home.

• Children and infants are more vulnerable to SHS than adults. They have smaller airways, faster breathing rates and immature immune systems. Infants inhale double the quantity of household dust compared to adults, and so inhale more dust containing SHS particulates. Infants also have greater hand/object/mouth contact, and so absorb proportionately more smoke particles through ingestion, as well as through inhalation.

• Second hand smoke will quickly spread to other rooms in the house, even if a window is open. It also sticks to clothes, walls, furniture and carpets. Prohibiting smoking in the home significantly reduces a child’s level of exposure to SHS.
Effect Of Second Hand Smoke On Pets

- If second hand smoke is harmful to human beings, it would make sense that second hand smoke is harmful to pets as well.

- Did you know that animals can become ill when exposed to second hand smoke? Your pets don’t just inhale smoke. Smoke particles get trapped in their fur and swallowed when they groom themselves with their tongue.

- Dogs in smoking households have a much greater risk of lung cancer and nasal cancer.

- Cats living with a smoker are much more likely to develop oral cancers.

- Birds and rabbits are also affected by second hand smoke.
Second hand smoke quiz

What is second hand smoke?
Second hand smoke means involuntarily breathing in other people’s tobacco smoke. Second hand smoke contains more than 4000 chemicals.

What can you do to avoid second hand smoke?
(Open for pupils to find ways, possible answers may include)
Tell your family and friends about your ‘smoke free room’ and ask for their support to keep it smoke-free.
Encourage your parents/carers to smoke outdoors whenever possible, away from children.

Name three dangerous chemicals in cigarette and second hand smoke? 
Correct answers may include:
• Acetone
• Ammonia
• Carbon Monoxide
• Methanol
• Nicotine
• Tar

True or False: Pets in the home are not affected by second hand smoke?  
False

True or False: It can take the force of a hurricane to completely clear tobacco smoke from a room?  
True

Second hand smoke is made up of two types of smoke. What are they?  
Mainstream – is smoke breathed in and out by other smokers
Side stream – comes from the burning tip of a cigarette and contains higher concentrations of toxins than mainstream smoke.
Room is smoke free
Activity 3.2 Action plans for a smoke-free school and community

Learning Objective
To make an action plan to reduce pupils exposure to second hand smoke around their school, homes, and wider community.

What you need
- Coloured Pens
- Teachers’ notes

Time required
1 - 1 ½ Hours

Delivery of activity
- Split class into small groups
- Get each group to think about where they are exposed to second hand smoke (should have identified this in the first activity). Get the groups to think about actions they could assist with to ensure no more exposure to second hand smoke around schools / homes / community venues such as youth clubs etc. Note: we realise there is a need to be careful with this activity as not all children and young people have a supportive environment at home in which their voice counts. Instead of an aim here for pupils to be advocates for a smoke free home, it might be better to think of home and school within the context of the wider community. This can still be an issue for those whose parents do not smoke as family and friends visiting the home may do.
- There could also be time for discussion here encouraging pupils to identify who they could speak to safely if they are worried about inhaling other people’s smoke at home or elsewhere.
- Discuss plans as a class and choose 4 or 8 statements you can make to demonstrate that your class/school is making a smoke-free commitment.
- When you have agreed upon your smoke-free statements they can be presented as a ‘Welcome to Our Smoke-Free School’ display sheet. The sheet(s) can be laminated and displayed on school notice boards for visitors to see as they come into the school.
Potential School / Community Action To Ensure Smokefree Environments For Children And Young People

The following are examples of statements you might make on your ‘Welcome to Our Smoke-free School’ Poster.

• Ensure all pupils and staff are aware of the risks related to second hand smoke.

• Ensure all staff and pupils do not smoke on or near school grounds – for young people to be exposed to or even just to see. All staff within the school have a Health Leadership Role and this must be promoted by not smoking in or around school grounds.

• Display your poster at the front entrance to your school stating ‘Welcome to our smoke-free school’, with Head Teacher signature included.

• In school, have information on the risks of second hand smoke available at parents’ nights and other events parents will be involved in. Encourage parents to make a “Smoke Free Homes” pledge. Resources available from the Information and Resources Centre, Health Promotion, NHS Fife at fife-uhb.infocentre@nhs.net

• Can you think of any more steps your class/school can make?
Activity Set 4

The information provided in section 4 is adapted with permission from NHS Health Scotland Tobacco facts: a resource pack for teachers, youth workers and those working with children and young people on tobacco issues, 2008.
### Activity set 4 Teacher record

#### Experiences and outcomes

<table>
<thead>
<tr>
<th>Outcome Statement</th>
<th>Teacher Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>I know that popular culture, the media and peer groups as well as my own attitudes and values can influence how I feel about substance use and recognize the impact this may have on my actions. (HWB 2-39a)</td>
<td></td>
</tr>
<tr>
<td>I understand the impact that misuse of substances can have on individuals, their families and friends. (HWB 2-43a)</td>
<td></td>
</tr>
<tr>
<td>I can create and present work that shows developing skill in using visual elements and concepts. (EXA 2-03a)</td>
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<td></td>
</tr>
<tr>
<td>I can develop and communicate my ideas and demonstrating imagination and presenting at least one possible solution to a design problem (EXA 2-06a)</td>
<td></td>
</tr>
<tr>
<td>Through discovery and imagination, I can develop and use problem-solving strategies to construct models. (TCH 1-14a / TCH 2-14a)</td>
<td></td>
</tr>
</tbody>
</table>
Activity 4.1
Yeah Butt, No Butt, Not So Sure

Learning Objective
To give pupils the opportunity to explore and challenge their attitudes and assumptions about smoking and smokers

What you need
• Activity cards (x no. of groups)
• Statement cards (x no. of groups)
• Large sheets of A3 paper
• Coloured pens and pencils
• Teachers Notes

Time required
1 Hour

Delivery of activity
• Divide the class into groups. The activity will work with a large group of up to ten pupils, or you could have several smaller groups.

• Arrange each group into circles and place the Yes, No and Don’t Know cards in the middle of the group. The statement cards should be shuffled and placed in the middle face down.

• One member of the group takes the top statement card and reads it aloud to the rest of the group. S/he then places it under one of the three large Yes, No, Don’t Know cards depending on what s/he thinks about the statement. Others in the group might think differently and this can be discussed. The person whose turn it is may move the statement after a group discussion if s/he wishes.

• This continues with the next person taking a card from the statements pile until all the cards have been used up. If there are still cards on the Don’t Know pile at this stage, ask if the groups can negotiate relocating them to the Yes or No pile. If they cannot, this is quite acceptable.

• You can join in the discussion by drawing the group’s attention to the issues/facts relating to each of the statements (see teachers notes). You may wish to challenge those statements of fact which may have been placed in the wrong pile.

• Compare and discuss each group’s responses. You may wish to start a debate about one of the statements that pupils had different opinions on.
Activity 4.1 Teachers’ notes

Yeah Butt, No Butt, Not Sure

Smoking should be made illegal.
This is a question which often arises with young people and can make an interesting debate. There is no doubt that if tobacco were to be discovered today, it would be considered far too dangerous to be licensed for human consumption. Points to consider could include: the amount of money the government raises in taxes from tobacco against the amount spent by the NHS on treating smoking related diseases, problems caused by smuggling tobacco on the black market, personal freedom and choice, the loss in revenue faced by businesses due to the fact smokers are absent more often from work and take more breaks, the responsibility of government to protect the public (e.g. compulsory wearing of seatbelts, illegality of speeding and drink driving etc) and the fact that so many people are already addicted.

In the UK, it’s estimated that cigarette butts account for around 40% of all street litter with 200 million cigarette ends and 20 million packets thrown away everyday.
That's about 122 tonnes of cigarette related rubbish dropped everyday in the UK. It takes between 1 and 12 years for a cigarette end to biodegrade and the filter contains lots of toxins which often find their way in to water supplies threatening aquatic life. Cigarette ends are also dangerous to animals and small children who may pick them up and eat them.

It is easy to give up smoking.
Lots of people in Scotland successfully give up smoking for good every day. However, most ex-smokers had to try a number of times before they successfully gave up for good. Aside from the fact that nicotine is a highly addictive drug, people continue to smoke for a variety of reasons. Knowing the risks does not necessarily make it easier to stop. Scare tactics with facts on smoking related diseases alone can be counter productive. Relating the benefits of quitting to the lives of young people and ensuring that smoking education is relevant to the concerns of young people (appearance, cost, environmental damage etc.) can be a more fruitful way of undertaking work on smoking.

Second-hand smoking is breathing in other people’s.
If you live in a smoky atmosphere you are more susceptible to a smoking related disease. Exposure to second-hand smoke has been found to significantly increase the risk of a number of health problems including cancers. Exposure can cause a number of problems such as asthma, “glue-ear” (a middle ear infection), bronchitis, pneumonia, coughing and wheezing. Cats that are exposed to SHS have more than twice the risk of developing various forms of cancer; dogs that live with smokers are more likely to develop lung cancer and long-nosed dogs living with smokers are more likely to develop nasal cancer.
330 people die from smoking every day in the UK
Smoking is the single greatest cause of preventable illness and premature death in the UK. Smoking kills over 120,000 people a year in the UK, approximately 330 per day and more than 13 people an hour. On average, lifelong smokers (who start early in adult life and never stop) die about 10 years sooner than non-smokers. If a hundred people smoke, fifty people might die from a smoking related disease.

Smoking cigarettes is only bad if you smoke a lot.
Many smokers believe that it’s OK if they smoke only a few cigarettes a day or smoke ‘light’ cigarettes. Once they are hooked it becomes increasingly difficult to stop the longer they smoke. Also, new research has shown that smoking even 1-8 cigarettes a day can significantly increase the risk of heart disease and cancer. In both sexes, smoking 1–4 cigarettes per day was associated with a significantly higher risk of dying from heart disease and from lung cancer.

Carbon Monoxide is a poisonous gas released in both tobacco smoke and car exhaust fumes.
There are over 4000 other chemicals in cigarette smoke including; tar, nicotine, arsenic (poison), acetone (paint stripper/nail polish remover), ammonia (cleaning fluid), formaldehyde (embalming fluid), hydrogen cyanide (poison in gas chambers) and methanol (rocket fuel) to name but a few. Many are poisonous and over 60 are known carcinogens (cancer causing). A lot of these substances are added during the manufacture of cigarettes in order to make more money. Ensuring that the cigarettes will stay lit in the ashtray means it will burn down faster and the smoker will have to buy more. The manufacturers have no legal obligation to inform the public of these additives.

Smoking doesn’t just affect the smoker.
As described above, second-hand smoke can increase the risk of smoking related diseases in non-smokers and cigarettes constitute a major litter problem but tobacco also causes wider social and environmental problems. One acre of tobacco needs about one acre of forest to cure it, meaning that an average smoker uses about one tree every fortnight to keep smoking. If food crops were grown instead of tobacco it is estimated that around 10-20 million extra people could be fed, about 2-4 times the population of Scotland. Four-fifths of tobacco is grown in developing countries where it is bought from the workers at a very low price and then cigarettes are sold back for much more. This means developing countries actually spend more on tobacco than they make. Also, tobacco needs a lot of pesticides and fertilisers, many of which are highly toxic. In the developing world, workers are often not given access to protective clothing and many would be unable to read the warning labels anyway, either because they’ve never needed to learn or because it’s not in a language they understand.

Girls are more likely to be regular smokers than boys.
2013 SALSUS¹ reported that in Fife 5% of 13 year old girls and only 2% of boys were regular smokers.

Reference
Nicotine in cigarettes is an addictive drug.
Nicotine is an extremely powerful drug that can cause addiction comparable to that of heroin and cocaine dependence. Nicotine is found in the tobacco leaf and when absorbed by the body reaches the brain within 7 seconds when smoked. Nicotine is what keeps smokers coming back for more and more. Most people feel sick when they first try smoking but if they try it again and persevere they are soon hooked.

Young people only start smoking to look cool.
Young people are by nature curious. Surveys have shown that around a quarter of children have experimented with smoking before the age of 10 years. Young teenagers often use the excuse of “boredom” as a reason for smoking and it can also be seen as a support to cope with difficult social situations or to break the ice with others. In these situations, the handling, lighting and smoking of cigarettes can cover a feeling of inadequacy or awkwardness. Young people are also influenced by the smoking status of those around them; for example parents, siblings and friends.

The average smoker (20 cigarettes per day) will spend around £3285 each year on cigarettes (based on £9 per pack).
Many people who smoke haven’t thought about the amount they spend on cigarettes annually, they see it as a daily amount of nine pounds which they don’t really miss each day. Many smokers are shocked when they are asked to consider what they actually spend over time and what they could have bought instead. Can you work out what this will cost over 5 years and over 10 years? What might you be able to buy with that amount of money?

Smoking is a sign of being grown up.
Some young people start smoking because they think that it makes them look mature. The very dangers of smoking can be attractive to young people who often want to rebel against authority as they discover their own identities. 15,000 young people (aged 13 – 24) start smoking each year in Scotland – an average of 41 a day, and the younger a person starts smoking the more likely s/he is to remain a lifelong smoker. A child who starts smoking at age 14 or younger is five times more likely die of lung cancer than someone who starts smoking at age 24 or older, and no less than fifteen times more likely to die of lung cancer than someone who never smokes.

Over 70% of smokers want to give up.
Over 70% of smokers when asked state they would like to give up smoking but many find it very difficult to do so. Two aspects which make it difficult to quit are the physical addiction to nicotine and the fact that smoking becomes a well-established psychological habit.

Anyone can buy cigarettes - they’re easy to get hold of.
It is not illegal for young people under the age of 18 to smoke cigarettes but it is illegal to buy them. It is illegal for shopkeepers to sell cigarettes to children under the age of 18 years. Unfortunately, 31% of 15 year old and 15% of 13 year old smokers regularly buy their cigarettes from shops. Evidence shows the younger you start smoking, the more you smoke into adulthood, the more harm is done to your health, and the harder it is to quit.
Girls who smoke are more stylish.
The prevalence of smoking in young people is higher among girls than boys. This could be due in part to the close connection to body image. Many girls may see smoking as a means to gain acceptance by peers and as a way of appearing and feeling more mature.
Activity 4.1 Support sheet

Statement cards – yeah butt, no butt

- **330 people die from smoking every day in the UK**
- **Girls who smoke are more stylish**
- **Anyone can buy cigarettes - they're easy to get hold of**
- **Second hand smoke is breathing in other people's smoke and can cause lung cancer**
- **Carbon Monoxide is a poisonous gas released in both tobacco smoke and car exhaust fumes**
- **Nicotine in cigarettes is an addictive drug**
- **The average smoker (20 cigarettes a day) will spend £3,285 each year on cigarettes**
- **Over 70% of smokers want to quit smoking**

- **Smoking should be made illegal**
- **Every day in the UK, 200 million cigarette butts are thrown away**
- **It is easy to give up smoking**
- **Smoking cigarettes is only bad if you smoke a lot**
- **Smoking only affects the smoker**
- **Young people only start smoking to look cool**
- **Smoking is a sign of being grown up**
- **Girls are more likely to be regular smokers than boys**
<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>NOT SURE</th>
</tr>
</thead>
</table>

**SMOKEFACTOR**
Activity 4.2  Peer influence

Learning Objective
To provide pupils with the opportunity to develop resilience strategies when faced with peer influences to experiment with tobacco.

What you need
• Scenario cards (x number of groups)
• Scrap paper (x number of groups)
• Teachers’ notes

Time required
45 minutes - 1 hour

Delivery of activity
1. Start with a general discussion about the influence friends and peers can have in many situations.
2. Split the class into small groups.
3. Hand one scenario to each group. (It won’t matter that more than one group will be working on the same scenario as their views on how to respond to the scenario may differ). Ask the group to read through the scenario and make a decision on how they would respond. You may wish for each group to act out their scenario to the rest of the class. (Alternatively, the group can discuss what they would do and report back to the class).
4. Have a class discussion on the strategies chosen by the young people to overcome pressure on them.
Peer Influence Scenarios

Imagine you are Nick who is 12 years old and has just started secondary school. Nick is hanging around with a new bunch of friends from different primary schools, Mark and David. Mark and David hang around the smokers’ corner in school, and although it smells a bit, Nick wants to stay in this friendship group because Mark and David are really popular. After a few weeks David offers Nick a cigarette. Nick has never tried smoking, hates the smell, and knows it isn’t allowed on school grounds, but he also wants to stay in with the crowd.

What could you do as Nick?

Imagine you are Catriona who is 11 years old and is about to start secondary school. Catriona moves house over the summer to a new area and quickly makes friends with Jayde who is 12 and lives across the road. Jayde goes to the youth club every Tuesday night and asks Catriona to come too. After a few weeks Catriona has become good friends with Jayde and her friends who are all 14 and 15. Jayde offers Catriona a cigarette and tells her that she smokes when she goes to youth club to make her look older and fit in with her older friends.

What could you do as Catriona?

Fiona and Emma are both 13 years old and are best friends. Fiona has been smoking since she was in primary 7. She used to get her cigarettes from her big brother Daniel, but now that she is a bit older and gets more money from their parents, Daniel tells her to buy her own. Fiona is nervous about trying to buy cigarettes in the shop as she knows the law says you have to be 18 to buy them. But, she has also heard that the shopkeeper is relaxed about it and is already selling cigarettes to people her age.

You are Emma and you are with Fiona outside the shop – what would you do?

Johnny and Imran are both 13 years old and go to the local secondary school. Imagine you are Nathan and you are 10 years old. Nathan sees Johnny and Imran at the gates to the primary school when school is coming out and wonders what they are up to. As he passes them, Johnny and Imran offer Nathan a single cigarette for 70p. Nathan hasn’t ever tried smoking, and knows his granddad is quite ill as he smoked for more than 40 years, but at the same time he feels a bit threatened by Johnny and Imran who are blocking his way and starting to make fun of him for being a ‘baby’.

You are Nathan, what would you do?
Activity 4.2 Teachers’ notes

Scenarios

Scenario 1 - Boys smoking in school
• This is difficult for Nick as there are issues around looking macho and the pressures of feeling he might have to smoke to remain within his friendship group.
• Nick should stay strong and say ‘no thanks’. His friends should respect his decision and it may give them strength to consider their own decision to smoke. If they are true friends that Nick would like to keep, then they will respect his decision.

Scenario 2 - Girls body image and maturity
• Catriona is facing a common issue in the mistakenly held belief that smoking is a glamorous and mature thing for young girls to do.
• The issue of keeping weight down is a myth.
• Catriona should stay strong and say ‘no thanks’ to the offer of a cigarette. It may be useful to refer back to Activity 2.1 the body mapping exercise which demonstrated that smokers are more likely to have wrinkles, particularly around the eyes and mouth which will make them look more mature but not in the way that they would like!!

Scenario 3 - Girls aiming to buy cigarettes even though underage
• Underage purchasing of cigarettes is an important issue.
• Emma should make Fiona aware that the shopkeeper will get into serious trouble if they are caught selling to Fiona. Although Fiona wants cigarettes she is aware that it is illegal to buy them. Emma knows that if Fiona attempts to buy cigarettes and is caught doing so could end up with a fine and worse still could end up with a criminal record (the same as alcohol sale law). Emma should use her apprehension to persuade Fiona from buying.
• Just because the shopkeeper is willing to sell, does that make it ok?

Scenario 4 - Boys selling single cigarettes to other young people
• Anecdotally, we hear about instances where young people are selling single cigarettes to other young people.
• Single cigarettes are now sold in high schools between pupils for around £1, which equates to a £1 per 20 pack of cigarettes bought and sold.
Activity 4.3 - Popular culture and media influence

**Learning Objective**
To consider the influence of popular culture and media on health choices.

**What you need**
Large sheets of A3 paper
Coloured pens and pencils
Teachers’ notes

**Time required**
1½ - 2 hours

**Getting started**
See teacher’s notes for information on each topic listed below for general discussion.

**Delivery of activity**
1. Start with a general discussion about the influence of media – i.e. TV, magazines, and so on. Ask the group if they can think of smoking they have seen in films or TV programmes and whether or not they think this is necessary? As a class, make a list of all the movies you have seen where smoking exists. (Refer to notes around Disney and Pixar).

**Optional Additional Activities**
2. Talk to class about the ‘tobacco wall’ (display of tobacco behind the counter) that they are exposed to in corner shops. Ask them how they feel about this and whether or not it makes smoking more tempting? As a Class carry out a ‘thought-shower’ with the question - How many different brands of cigarettes are there and what colours are the branding?

3. Develop an anti-tobacco promotional campaign within your school which educates pupils and teachers about the tactics used by big Tobacco to encourage young people to start smoking. (useful website – www.thetruth.com)

4. Develop an anti-tobacco promotional campaign within your school which educates pupils and teachers of the actual norms around smoking, rather than the perception that everyone smokes.
Activity 4.3 Teachers’ notes

Influences on smoking

• Young people are greatly influenced by their sense of what is normal and attractive; and this in turn is affected by the messages and imagery attached to different behaviours. Particular fashions, music styles and forms of recreation become more or less popular over time. Young people’s smoking is susceptible to these same forces, but in this case the associated imagery seems, for some young people at least, to remain consistently positive. This capacity to remain ‘forever cool’ belies the reality: smoking continues to be the leading cause of ill health and premature death in the UK.

• Pro-smoking imagery is everywhere: young people see others – parents, peers and public figures smoking and this reinforces the normality of the habit. In Great Britain, smoking still has around 10 million role models. The accumulation of smoking also provides a reminder of the apparent normality of the behaviour.

Factors associated with smoking

• Substantially higher rates of smoking among 15 year olds are associated with:
  - a parent or elder sibling who smokes
  - lower levels of parental supervision and more nights out with friends
  - truanting, excluded from school, juvenile offending.

Reference
Smoking in films and in the media

- The entertainment media depict smoking on a regular basis. Images of smoking are commonplace in films, television shows and magazines, and can influence the attitudes and behaviours of young people. Other forms of media such as the internet represent a growing concern in this respect.

- Tobacco companies have known for a long time what a huge influence they can have by portraying smoking in the movies. There is evidence of ties between tobacco companies and film studios in the 1950s. Their stars would appear in tobacco advertising leading to cross promotion of tobacco brands and films. By the 1970s there was paid placement for film studios to include tobacco.

- The World Health Organisation (WHO) aims to reduce exposure to tobacco images in all ways, including films. They recognise that smoking in the movies is a powerful promotional force and that there is a shifting in the resources of the tobacco companies. As many countries ban advertising — tobacco companies increase advertising through other methods — such as in the movies.

- The length of time that smoking is on screen may only be two minutes — so it is not always an important/necessary part of the film.

Tobacco Company Advertising

- Young people are exposed to the positive images of smoking generated by tobacco industry marketing. The ban on tobacco advertising in the UK has greatly restricted the more traditional forms of marketing (e.g. billboards); however, increasingly elaborate point of sale displays, attractive pack liveries and evocative brand imagery continue to provide key marketing opportunities that influence young people.

- Tobacco products should be judged for what they are - nicotine delivery devices - rather than what they are made out to be by the tobacco industry.

The ‘School Effect’

- Schools can influence their pupils’ smoking behaviour through the schools social organisation and culture (non-formal school characteristics) as well as through formal curriculum.

- For male pupils, attitude to school, quality of staff and pupil relationships, school-level affluence, and their interaction with school were all associated with school level smoking rates and successfully explained the ‘school effects’.

- It is likely that there are additional effects of peer influence and small geographical area effects.

- However, peer influence in itself is subject to the school effects and evidence to date suggests that area effects are smaller than school effects.

- Changing school characteristics may have an effect on smoking and so this supports a health promoting school approach.

- The investment in social environments has the potential to strongly influence male smoking and to a lesser extent female smoking.

- Influence is possible even for senior secondary pupils and likely to apply to other health behaviours.
**Potential Solutions**

**Out of sight sales**

- There is a positive and consistent relationship between seeing tobacco products and the uptake of smoking among adolescents.

- Adolescents appear to be more receptive to tobacco advertising than adults.

- Tobacco displays in shops are very important to the tobacco industry. It is an extremely effective way of encouraging children and young people to want to try smoking through the marketing of the packs. Studies have found that cigarette point of sale advertising and marketing are more prominent in stores where adolescents frequently shop.

- Tobacco companies have taken advantage of the lack of rules regarding the display of tobacco products in shops to increase the attractiveness and appeal of certain brands. Therefore reducing the visual impact of health warnings on tobacco packs.

- Tobacco companies themselves have highlighted that a ban on advertising cigarettes in shops will have a negative impact on tobacco use and harm tobacco sales.

- The Scottish Government’s Tobacco and Primary Medical Services (Scotland) Act 2010 aimed to force shopkeepers to remove all tobacco adverts, the display of tobacco products and prices from their shops. Imperial Tobacco challenged the legislation which was thrown out by the Appeal Judges in February 2012. In April 2013 the Sale of Tobacco (Scotland) Regulations came into effect whereby large shops (i.e. supermarkets) are no longer allowed to display tobacco products behind their counters. Smaller shops had until April 2015 to apply these regulations. Some of the large supermarkets exploited a loophole in the regulations so that their petrol stations did not need to comply until 2015 as they are separate from the main supermarket building (therefore seen as a small retail outlet).