

Children and Environmental Smoking

(Power Point 15 min)

What is passive smoking? Passive smoking is the involuntary breathing of other people's tobacco smoke. Environmental tobacco smoke (ETS) or second-hand smoke is a complex mixture of more than 4,000 chemical compounds, including at least 40 known carcinogens (cancer-causing agents). Tobacco smoke also contains carbon monoxide, a gas that inhibits the blood's ability to carry oxygen to body tissues including vital organs such as the brain and heart.

Extent of exposure to tobacco smoke: The World Health Organization estimates that nearly 700 million, or almost half of the world's children, are exposed to tobacco smoke by the 1.2 billion adults who smoke. For young children, the major source of tobacco smoke is smoking by parents and other household members. Maternal smoking is usually the largest source of ETS because of the cumulative effect of exposure during pregnancy and close proximity to the mother during early life.

Health Impact: Children are particularly susceptible to the effects of passive smoking. A review by the World Health Organization concluded that passive smoking is a cause of bronchitis, pneumonia, coughing and wheezing, asthma attacks, middle ear infection, cot death, and possibly cardiovascular and neurobiological impairment in children. Infants of mothers who smoke have almost five times the risk of dying from Sudden Infant Death Syndrome (cot death) compared to those whose mothers do not smoke. Other disorders have been found to be associated with passive smoking but require further research to confirm the findings. These include a study showing that children living with smokers are at an increased risk of childhood meningitis; the possibility of mental impairment among children exposed to even low levels of tobacco smoke; and a recent study linking foetal exposure to tobacco smoke to the development of autism. Other research has shown that children exposed to environmental tobacco smoke have lower levels of serum vitamin C than those in non-smoking households, whilst another study found that passive smoking can reduce children's ability to detect a number of different odours.

Awareness of the health risks of passive smoking: In developed countries, there is a recognition that passive smoking is harmful and the majority of smokers report that they try not to smoke in the presence of children. In developing countries there is very low or no awareness.

Tobacco and the Convention on the Rights of the Child: The UN Convention on the Rights of the Child was adopted by the UN General Assembly on 20 November 1989 and came into force in September 1990. The Convention consists of legally binding international obligations. Article 3 of the Convention states that in every decision affecting a child, the best interests of the child shall be a primary consideration. Although the Convention does not include any explicit right to protection from the harm caused by tobacco, official interpretation of the articles of the Convention demonstrates that tobacco is a human rights issue. According to the World Health Organization, “Because of the enormous potential harm to children from tobacco use and exposure, States have a duty to take all necessary legislative and regulatory measures to protect children from tobacco and ensure that the interest of children take precedence over those of the tobacco industry.”

Strategies to reduce children’s exposure to ETS: In view of the considerable health risks posed to children by passive smoking, public health policies are needed to protect this vulnerable population. The WHO’s consultation document on ETS and Child Health identifies two principal approaches: legislation and education. Legislation includes all regulatory approaches to controlling where and when people can smoke. Education includes public information, debate and advocacy to encourage behaviour change. These two approaches are complementary.

Educating parents about passive smoking: Parents who smoke should be aware that their children may become ill as a result of breathing in airborne tobacco smoke. Furthermore, children of smokers are more likely to take up the habit themselves because they copy the behaviour of adults and will perceive smoking as the norm if they grow up in a household where adults smoke.

Conclusions: The health impacts of passive smoking on children are now well documented and pose a considerable health burden on this vulnerable group. As public knowledge about the health consequences increases, so demand for smoking restrictions in public places also rises. In countries where smoking bans are now commonplace, there is a greater willingness to accept the need for smoking restrictions to be extended to the home environment. Government action is therefore required to restrict smoking in public places and to raise awareness through mass media campaigns. Since legislation is inappropriate to regulate smoking in the home, educational campaigns offer the best means of encouraging adult smokers to modify behaviour in order to protect children from ETS.

Recommendations :

- Governments should implement strategies to ensure that non-smoking is the norm in all public places with particular attention paid to places frequented by children.
- National and regional governments should work with appropriate health agencies to inform parents about the impact of passive smoking on children.
- Further research is needed to establish the level of knowledge of, and attitudes towards passive smoking in order to develop effective interventions and policy development.
- Parents must recognise that passive smoking causes ill-health in children and that they have a responsibility not to harm their children.

- Interventions campaign to assist pregnant women to stop smoking should be extended to include measures to prevent smoking relapse after the birth of the child. Health and social welfare professionals should work with parents to increase the chances of a smoke-free environment for children.
- Training of health care workers should include education about the health impacts of passive smoking and strategies to minimise children's exposure.
- Government guidelines for childminders working at home should be amended to require childminders not to smoke in their homes when caring for children.
- FCTC ratification