

# Smoking advice for prospective foster carers

## Smoking evokes strong feelings in both smokers and non-smokers alike.

Although there is a Government ban on smoking in public places, smoking in the home will continue to have a significant impact on the health of smoking and non-smoking members of the household. Children are particularly vulnerable and the local authority, acting as the corporate parents for children in our care, has a duty to promote every aspect of their welfare, including their health. People who apply to be foster carers should be fully aware of:

- the risks associated with smoking
- the position of the local authority, and
- the implications for any application to be considered as a carer for children, whether temporary or permanent.

## Some facts about smoking:

- Tobacco smoke contains a mixture of around 4000 chemicals, many of which are poisonous and cause cancer and heart disease
- Second-hand smoke is even more toxic than the smoke which goes directly into the smoker's lungs
- If you're breathing second-hand smoke at home or work, your chances of developing asthma are doubled, your risk of developing lung cancer is increased by 24% and the risk of heart disease is increased by 25%
- Children who live with smokers are much more likely to become smokers themselves.

## Our position on smoking:

We are committed to reducing the level of smoking in the county and protecting

non-smokers from the damaging effects of second-hand smoke. One important aspect of this is to encourage and support smokers who want to give up and to promote local "stop smoking" services.

## What are the main concerns in relation to fostering?

1. Carers who smoke are damaging their own health and potentially compromising their ability to actively parent the child. This is of particular concern for a limited number of foster carers who are providing a permanent home for the child. Children who have experienced many losses in their lives may be faced with the premature loss of another parent figure as a result of smoking related disease, disability or death.

2. Carers who smoke are damaging the health of children in their care. Babies and children who are exposed to a smoky atmosphere are:

- twice as likely to have asthma attacks and chest infections
- more likely to need hospital care in the first year of life
- off sick from school more often
- more likely to get more coughs, colds and wheezes
- at greater risk of getting "glue ear", which can lead to deafness

3. Adult carers act as role models for their children. Children who live with smokers are much more likely to become smokers themselves, with all the health risks that this poses. Smoking is a difficult habit to break, so it is important to encourage children never to start.

## **What if I only smoke at work/in the car/outside/in another room?**

You might think that smoking at work (if you're still allowed to do it) - deals with the second-hand smoking issue. However, the smoke on your clothes that you take back into the home still contains poisonous chemicals which can affect the health of those who breathe it in. The same is true if you smoke in the car, outside or in another room. It is impossible to cancel out the damaging effect of smoke which hangs around on your clothes, or drifts into the house or another room and, of course, in all these situations the risk to your own health is still present.

It is illegal to smoke in private vehicles that are carrying someone under 18.

## **What if I only smoke Electronic cigarettes (e-cigarettes)**

The use of e-cigarettes is a relatively new development but is a growing phenomenon. These are battery operated devices that provide a nicotine delivery system which does not contain tobacco.

Electronic cigarettes produce a vapour, but there is no evidence to date that second hand vapour is harmful to human health. E-cigarettes play a role in reducing tobacco smoking levels nationally, and they could be a useful aid to foster carers who may wish to use them to cut down or stop tobacco smoking. The use of e-cigarettes imitates smoking behaviour by mimicking the sensation and appearance of smoking a cigarette for the user and for those around them. There are some concerns that this may 'normalise' smoking behaviour, making it more acceptable especially to children and young people.

The fostering service is therefore following The Fostering Network's guidance in relation to carers approved for children aged 5-18 years, which considers the current research evidence and provides no compelling reasons for restricting the use of e-cigarettes.

However, we advise it is good practice not to use them in front of children and young people

until more evidence is gained about the role modelling effect of this on the smoking behaviour of children more generally.

We will however, not place children under 5 years old with carers who use e-cigarettes (unless exceptional circumstances apply) and will continue to monitor and review this in line with legislation around the use and sale of e-cigarettes.

## **So, should I stop smoking to foster?**

Ideally, yes – for your own health's sake and for the welfare of the child who would be placed with you. We will raise this with you at the outset and hope that you will be open with us about your smoking. Government statistics suggest that 70% of smokers wish to give up. If you're one of them, we can point you in the direction of services which might help you achieve this. Your GP is the first port of call. Most people find that it is quite difficult to simply stop smoking, and many are more successful if they have some support and encouragement.

If you are unable to stop smoking or have no wish to stop, this will not mean an automatic ban on becoming foster carers. We look at many factors, health and other wise.

Realistically, however, smoking will restrict the number of children we could consider placing with you. Because of this we would need to decide whether we were justified in taking up an application from you. Our focus must be on the child and we are legally obliged to make them our first and foremost consideration. Medical advice is that children under 5 years should not be placed within a smoking household, nor should children who have:

- asthma or other breathing difficulties
- heart conditions
- middle ear/glue ear problems
- a disability such as Down's Syndrome or Cystic Fibrosis
- been born prematurely
- a family history of asthma.

From these examples, you can see that if you are committed to fostering you would be well

advised to first commit yourself to stop smoking. Generally speaking, medical advisers expect to see that applicants have not smoked for at least twelve months before they consider them to be “non-smokers”.

## **How to get help to stop smoking:**

If you want to stop smoking it is important that you first seek advice from your GP who will be able to discuss how you might approach this and also give you information about local support groups.

You may also find the following phone lines and websites helpful:

- **NHS Smoking Helpline**  
0300 123 1044 (freephone)
- **NHS Asian Tobacco Helpline**  
0800 169 0 881 (Urdu)  
0800 169 0 882 (Punjabi)  
0800 169 0 883 (Hindi)  
0800 169 0 884 (Gujarati)  
0800 169 0 885 (Bengali)
- **[www.smokefree.nhs.uk](http://www.smokefree.nhs.uk)**

## **NHS “Stop Smoking” Services across Nottinghamshire:**

**FREE** support for smokers who want to stop.

- **Bassetlaw Stop Smoking Service**  
“Do you want to kick the habit?”  
**0800 328 8553 or email:**  
**[bassetlaw.stopsmoking@nottshc.nhs.uk](mailto:bassetlaw.stopsmoking@nottshc.nhs.uk)**
- **New Leaf Stop Smoking Service**  
**0800 561 2121**  
**Text LEAF to 80800**