

Worcestershire Health & Well-being Board

JSNA Briefing on Smoking

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Summary

- x In Worcestershire the estimated smoking prevalence in adults had been falling year-on-year. However, recently the rate has increased, from 13.5% in 2016 to 14.7% in 2017.
- x This equates to approximately 68,574 people who smoke in Worcestershire.
- x It is estimated that each year in Worcestershire smoking costs society approximately £143.9 million which equates to £1,827 per smoker per year.
- x There are significant differences in smoking prevalence between Worcestershire districts. Redditch District has the highest estimated proportion of current smokers at 24.8%. Malvern Hills has the lowest estimated proportion of smokers at 10.6%.
- x In Worcestershire the gap between smoking rates for people in routine and manual occupations compared to the adult population overall appears to be widening. Latest data (2017) shows that in Worcestershire 31.5% of individuals in routine and manual occupations are estimated to be a current smoker compared to 14.7% of the overall adult population.
- x National data shows that smoking prevalence is significantly higher in people with a mental health issue in comparison to those without.
- x In Worcestershire the proportion of mothers smoking at the time of delivery has been consistently higher than the England average. In 2016-17, across Worcestershire,

Key Statistics - National Data

The latest data shows that:

- x In 2018, of all adult survey respondents in the UK, 14.7% were current smokers and 14.9% of individuals living in England are current smokers⁶.
- x In England, it is estimated that 77,900 deaths were attributable to smoking in 2015, approximately 16% of all deaths⁶.
- x In the UK those aged 18 to 24 have experienced the largest decline in smoking prevalence (6.5 percentage points since 2010).
- x In Great Britain⁷, in 2016, 5.6% of respondents stated they currently used an E-cigarette⁸.
- x Use of E-cigarettes increased amongst 16-24 year olds from 2% in 2015 to 6% in 2016⁹.

The British Medical Association have stated that whilst E-cigarette use has contributed

Protected Characteristics ¹²

- x Smoking prevalence by age shows adults aged 25-34 years are most likely to smoke and those aged 65 and over are least likely to smoke.
- x Smoking prevalence by gender shows that there is a higher prevalence of smoking in males (16.8%) in comparison to females (13.0%). This is reversed for young people where girls (9.8%) are more likely to smoke than boys (6.6%) at age 15.
- x Smoking prevalence by ethnicity shows that the highest rates of smoking are for individuals who identify as Mixed ethnicity (20.5%) and White ethnicity (15.4%). Lowest rates are for individuals who identify as Asian (9.3%), Black (10.4%) or Chinese (8.6%).
- x Smoking prevalence by sexual orientation shows that individuals who identify as Gay/Lesbian (23.6%) and Bi-sexual (24.1%) have a significantly higher prevalence of smoking than the overall England average.
- x National data shows that there is a clear social gradient for smoking with those in the most deprived decile having the highest smoking prevalence at 18.1%, compared to 10.4% in the least deprived decile.

Figure 1: Smoking Prevalence in Adults (2017) by District and UA deprivation deciles in England (IMD2015)

It is important to note that whilst the Annual Population Survey (APS) is the designated national statistic for smoking prevalence, estimates of smoking prevalence vary between surveys. For example, in Worcestershire, in 2016-17, the GP Population Survey (GPPS) estimated smoking prevalence to be 13.5% (CI: 12.7-14.2%) and Quality Outcomes Framework (QOF) data from GP Practices estimates smoking prevalence at 16.8% (CI: 16.7-16.9%).

All three measures of smoking prevalence, APS, QOF and GPPS, agree that the smoking prevalence for Worcestershire is significantly lower than the England average. There is still variation across district areas and at the present time the APS is the only measure that allows a breakdown by type of occupation.

Smoking Prevalence: Routine and Manual Occupations (Adults, 18+)

In England, the prevalence of smoking for individuals in routine and manual occupations is over 2.1 times higher than the prevalence for all smokers at 31.5%.

Latest data shows that, in Worcestershire, 31.5% of individuals in routine and manual occupations are estimated to be a current smoker. In Bromsgrove, the prevalence of smoking amongst people in routine and manual occupations is estimated to be 40.2%, which is 3.2 times higher than the overall smoking prevalence. In Wyre Forest, the prevalence of smoking amongst people in routine and manual occupations is estimated to be 36.1%, which is 2.6 times higher than the overall smoking prevalence rate.

There are significant links between smoking and health inequalities. Not only are rates higher by socioeconomic status, they are higher across a range of deprivation indicators including those with a mental health condition, unemployed, homeless, those on benefits and lone parents¹³.

Figure 3: Smoking Prevalence in adults in routine and manual occupations including regional, national and district comparisons (Current Smokers aged 18-64, 2017)

Source: Public Health England, 2018, Public Health Outcomes Framework, [Online], Available from: <https://fingertips.phe.org.uk>

¹³ Action on Smoking and Health (2016) Health Inequalities and Smoking, [Online], Accessed: 16/01/2017. Available from: [http://9pr h.390 10.00:217.h 4\(ai\)1 Oa2n -0.002 0 T e argertinsAn\[n\(A\)3.3\(n\[5 Onk 1.44 Tn](http://9pr h.390 10.00:217.h 4(ai)1 Oa2n -0.002 0 T e argertinsAn[n(A)3.3(n[5 Onk 1.44 Tn)

No target has been set to reduce smoking rates in this group. However, there is a national ambition that the gap between the rate of smoking in people aged 18-64 overall and those in routine and manual occupations, will close over time up to 2022. Figure 4 below shows that in Worcestershire, the gap between these two groups appears to be widening, and therefore will require interventions that are targeted appropriately to avoid an increase in health inequalities.

Figure 4: Smoking Prevalence in adults in routine and manual occupations and all current smokers between 2012 to 2016 (Current Sm-8.06 0ion >>BDC BT 0.004gwEM7 1 0 Td (0.08(t

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reviewed, to understand the long and short-term effects of their use to individuals and the health of children and bystanders through second-hand smoke.

There are a number of new and novel products being introduced to the market where there is limited data about their health effects. The latest technology called 'Heat not Burn' (HNB) is gaining popularity. The WHO states that 'Currently, there is no evidence to demonstrate that HNB tobacco products are less harmful than conventional tobacco products'²² and they are awaiting further research and studies to understand the potential health implications.

Best Practice Recommendations

NICE Guidance: Stop Smoking Services (2008, updated 2013)

1. NICE recommends a spectrum of interventions according to need and context:
 - i. Brief Interventions (opportunistic advice) delivered by a range of frontline healthcare professionals, typically in less than 10 minutes, involving self-help and pharmacotherapy material and/or behavioural therapy.
 - ii. Individual behavioural counselling, including pharmacotherapy
 - iii. Group behaviour therapies, including pharmacotherapy.
 - iv. Telephone counselling and 'quit lines'.

2. NICE recommends targeting specific high risk groups:
 - i. People with an existing medical condition e.g. cardiovascular or respiratory disease.
 - ii. Pregnant women.
 - iii. Women with infants or young children – encourage a 'smoke free home'.
 - iv. Young people aged 12-17, particularly those who are in 3(r)(m)3.4(ok)-1.7j 0.001 T9 Interng(ee h

Department for Health (2017), Towards a Smoke-free Generation: A Tobacco Control Plan for England, Accessed; 21/11/2017, [Online], Available from: [https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/630217/Towards_a_Smoke_free_Generation - A Tobacco Control Plan for England 2017-2022_2_.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/630217/Towards_a_Smoke_free_Generation_-_A_Tobacco_Control_Plan_for_England_2017-2022_2_.pdf)

NICE (2018) Smoking Cessation interventions and services (In development), [Online], Available from: <https://www.nice.org.uk/guidance/indevelopment/gid-phg94>

Worcestershire Joint Tissue Viability and Wound Care Group