

HEALTH AND WELLBEING BOARD

13 December 2019

TOBACCO PRIORITY UPDATE

Report of the Sunderland Smokefree Partnership

1.0 Purpose of the Report

- 1.1 Tobacco is one of the Board's seven priorities.
- 1.2 The Sunderland Smokefree Partnership presented a Walk the Wall session to the Board in September 2019, where it was agreed the final tobacco control action plan would be submitted to the Board for approval.
- 1.3 This report sets out the eight key strands of work that will form the basis of action planning for 2019-2024, along with key performance indicators that will be used to measure progress on this priority, and a high-level action plan for the year ahead.

2.0 Background

- 2.1 Tobacco control is a complex issue and no single approach will be successful in isolation, therefore it requires commitment and contributions from a range of partners and stakeholders across the city.
- 2.2 Smoking remains the key driver of health inequalities with around half the difference in life expectancy between the most and least affluent groups due to smoking.
- 2.3 The Board endorsed the North East local authorities' ambition to reduce the adult smoking prevalence to 5% by 2025. Whilst a rate of 5% by 2025 may seem ambitious based on the 2019 prevalence, such a target will support 'Making Smoking History' and facilitate a collective approach to reduce tobacco related harm.
- 2.4 ASH (Action on Smoking and Health), in their 'Brief guide for local authority members and officers and their partners on Health and Wellbeing Boards', suggests an ambitious measurable target is reducing smoking prevalence to below 5% in all socio-economic groups by 2029.
- 2.5 In 2018, the Government published the new Tobacco Control Delivery Plan for 2017 to 2022, which set out the vision for tobacco control for England. The delivery plan includes actions to improve collaborative working for national agencies and provides leadership and direction for local tobacco control plans. The Sunderland Smokefree Partnership Action plan is aligned to this.

3.0 Local picture

- 3.1 Between 2014 and 2016 there were 1,868 deaths in persons aged 35 and over in Sunderland that were attributable to smoking; this gives a rate of smoking

attributable mortality that is 1.5 times the England rate. Over the same time period, smoking resulted in 8,964 years of life lost in Sunderland.

3.2 **National Annual Population survey (APS) 2018**

Adult Smoking prevalence - Considerable progress has been made over the last six years from 24.6% to 20.2%, however Sunderland is higher than the North-East Region (16.2%) and England (14.4%). Sunderland has approximately 45,000 people currently smoking.

Routine and manual workers – Considerable progress has been made over the last four years with a reduction from 33% to 28.5%, however Sunderland is higher than the England average of 25.4%.

Smoking at time of delivery (SATOD) - In 2018/19, 450 women in Sunderland were recorded as smokers at the time they gave birth; this equates to 17.5% of pregnant women compared to the England average of 10.6%. SATOD has seen a decrease in comparison to the previous years but remains the third highest regionally.

Gender difference - Male prevalence is higher than females, and there has not been any significant change in the past 5 years.

3.4 **Smokers at age 15** - According to the Sunderland Health Related Behaviour Survey, 11.6% of 15 years olds say that they smoke compared to 8.7% nationally. Of these, 8.9% say they smoke regularly and 2.7% smoke occasionally. Among 16 to 17-year olds this rises to 18.7% in Sunderland and 14.7% across England.

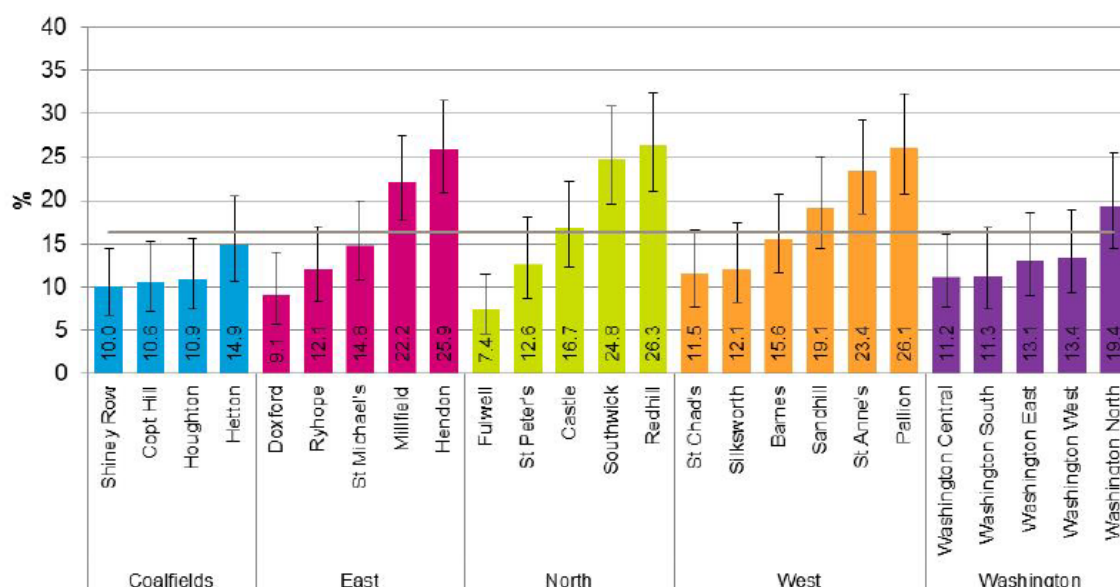
3.5 **Quit attempts** - The national expectation is that 5% of smokers should access local stop smoking services to set a quit date to stop smoking each year. This has been modelled against local figures (2246) to give a target of 187 people setting a quit date which is stretched to 218 per month

Currently in England only 30% of smokers make at least one quit attempt every year. At this rate it is estimated England will get to 5% smoking prevalence by 2043. If 50% of smokers made an annual quit attempt, England could get to 5% smoking prevalence by 2029.

3.6 **Number of smokers setting a quit date** – Based on the past 4 years, average conversion in Sunderland between those who set a quit date and those who successfully quit at 4 weeks is positive at approximately 50%. This is above national performance which stands at 42%.

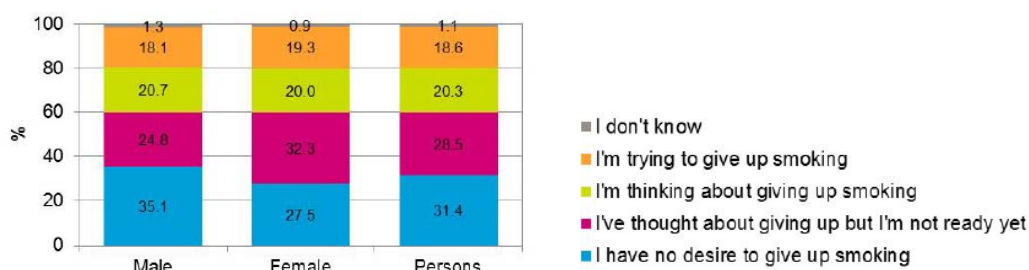
3.7 **Socio economic groups** - According to the Sunderland Adult Lifestyle Survey (ALS) carried out in 2017, smoking prevalence is higher in adult males and younger age groups. The highest smoking prevalence is seen in males aged 25-34 (33.3%) and females aged 25-34 (25.7%), and in young people renting flats in high density social housing (Mosaic® groups). The ALS also highlighted adults with a learning disability significantly higher smoking prevalence (26.7%) reported than the Sunderland average.

A recent needs assessment carried out in Sunderland has identified that smoking prevalence is distributed unevenly within the local population by geographical location and a range of other factors. There is a strong correlation between smoking prevalence and the level of deprivation; the more deprived the area, the higher the smoking prevalence. Sunderland has twenty-five electoral wards where smoking prevalence is above the Sunderland average. These are: Hendon, Millfield, Pallion, Redhill, Southwick, Sandhill, St Annes, Washington North and Castle.



Other key groups that have a high prevalence of smoking compared to national data include: pregnant women and partners, young people, Lesbian Gay Bi-Sexual and Transgender (LGBT), those affected by substance misuse, those with long term conditions, BAME groups, routine and manual workers and those with complex needs.

The majority of smokers (67.5%) want to quit and a fifth of smokers (20.3%) are actively trying to stop. Some smokers need support and encouragement to feel ready to quit or to make a quit attempt. Sunderland NHS Stop Smoking Services facilitate this support and are available throughout the city.



4.0 Priority Update – Tobacco

- 4.1 To develop the Sunderland Tobacco Control Action Plan, in March 2019 the Sunderland Smokefree Partnership held a workshop to complete the Public Health England CLeaR Tobacco self-assessment tool. Areas of improvement identified

through the self-assessment have been combined with actions from national tobacco control delivery plan.

- 4.2 In July 2019, the Smokefree Partnership reviewed the areas identified area as good practice and combined these with areas of improvement to formulate the action plan. The action plan has been structured around the eight key strands of work in Fresh's annual delivery plan. These are:

1: Developing Infrastructure, Skills and Capacity - This covers strategic planning, advocacy, evidence-based approaches, whole system partnership, review and evaluation, capacity building, regional and national linkage.

2: Reducing Exposure to Secondhand Smoke - This covers legislation, enforcement, life course harm minimisation, monitoring of young people exposure, smokefree settings, partnership with those working with children and families.

3: Helping smokers to stop - This covers the commissioning of evidence-based Stop Smoking Services, supporting those with highest smoking prevalence, support the implementation of Smokefree NHS with clear pathways for secondary and primary care easing the smoker's journey to quit, maximise opportunities to address health inequalities, raising awareness of the harms of smoking, collaboration between schools and wider partners.

4: Media, Communications and Education - This covers amplifying national and regional media campaigns locally through PR, heighten public awareness, increase public awareness of home fire safety particularly in relation to smoking materials and targeting house fire hotspot areas.

5: Reducing the availability and supply of tobacco products; licit and illicit and addressing the supply of tobacco to children

6: Tobacco Regulation

7: Reducing Tobacco Promotion - These cover collection of intelligence on the availability and supply of illicit tobacco, maintain focus on reducing access to tobacco for young people, heighten public awareness on illicit tobacco, enforce tobacco advertising and brand sharing regulations and monitor national developments around NICE guidance on tobacco harm reduction.

8: Research, monitoring and evaluation - This section ensures tobacco control interventions are targeted to have greatest impact on reducing health inequalities and will enable the collation of intelligence to keep the Joint Strategic Needs Assessment up to date and published.

- 4.3 From August to October 2019, it was identified that further co-production was needed with key partners. Key partners were identified and engaged with, and it was agreed which key indicators would be allocated to them. Key organisations were appointed as leads in the action plan with a responsibility to provide updates on a quarterly basis.

- 4.4 In September 2019 a Walk the Wall session with the Board was carried out which discussed the current challenges and existing evidence. The Board explored any additional support that could be provided by members.
- 4.5 The October 2019 meeting of the Smokefree Partnership adopted a co-production approach to developing the action plan. This has helped to ensure partners understand how their contribution is integral to achieving the ambition of reducing the smoking prevalence to 5% by 2025.

5.0 Sunderland Smokefree Action Plan

- 5.1 The Sunderland Smokefree action plan will focus on specified groups with high smoking prevalence and will identify areas across the system to maximise opportunities to support local people to stop smoking. A high-level version of this action plan accompanies this report (appendix 1).
- 5.2 The action plan will support 'Making Smoking History' and facilitate a collective approach to reduce tobacco related harm by shifting the social norms of tobacco use to make it less accessible, less affordable and less attractive.
- 5.3 A whole system partnership approach to encourage smokers to make an annual quit attempt is pivotal in the success of reaching a 5% prevalence in Sunderland. The delivery of the action plan will support this key aim.
- 5.4 Smoking prevalence is high amongst key inequality groups and the action plan has taken this in to consideration by ensuring this priority is threaded across all areas of the plan.

6.0 Recommendations

- 6.1 The Board is recommended to:
- Support the focus of the Sunderland Smokefree Partnerships work being on the eight key strands of work, set-out in section 4.2 of this report
 - Agree the Sunderland Smokefree Partnership action plan (appendix 1)
 - Receive an update report annually from the Sunderland Smokefree Partnership, including progress on the indicators set-out in section 3 of this report, and key actions for the year ahead.

