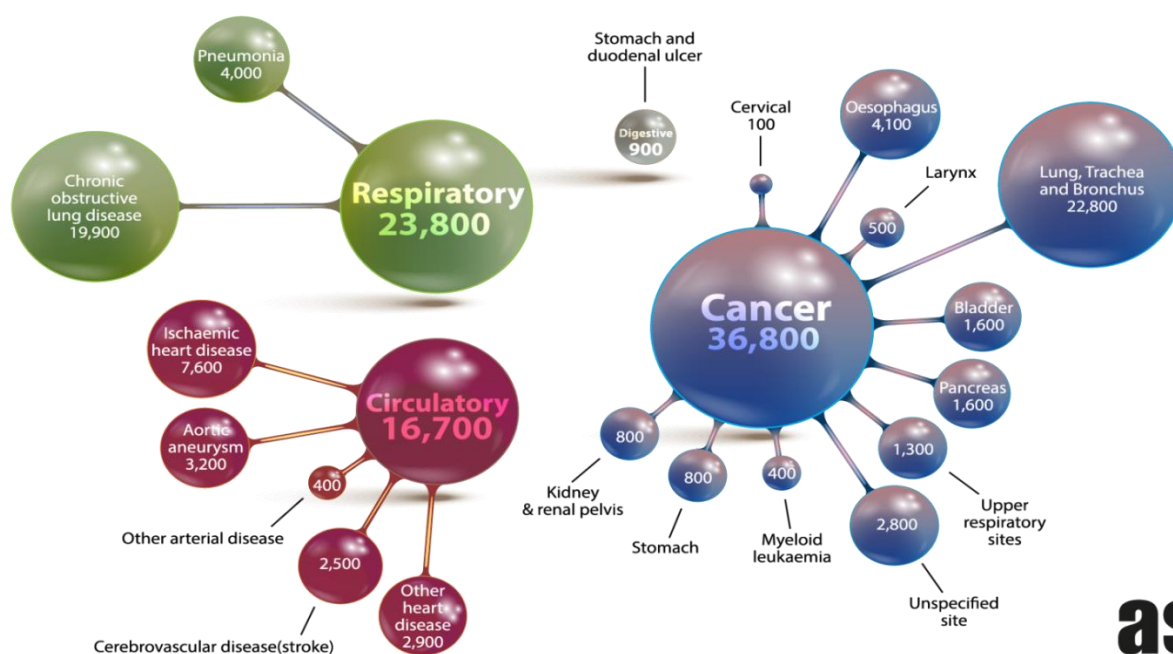


Smoking Still Kills; Smoke Free Vision 2025

Deaths caused by smoking each year in England



Data from: Statistics on Smoking: England, 2015. Health and Social Care Information Centre, May 2015

Gateshead Health and Wellbeing Board

A message from the Chair of the Health and Wellbeing Board

Smoking remains the biggest killer in Gateshead and is the single most preventable cause of premature death. More people die from smoking related illness than all other causes each year. Around 420 people each year, the equivalent of a large aeroplane full of people, die in Gateshead from smoking related diseases. That's almost 9 people a week, or one death every 21 hours. More than half of smokers will die early from a smoking related illness. A large number of smokers will also be living the last years of their life incapacitated by smoking related conditions such as respiratory disease, circulatory problems and cancers.

Smoking stops unborn children getting the best start in life, it prevents young children from thriving, it recruits some of our children to an expensive addiction which will result in illness and death and takes money out of our poorer communities, and adds to many people's poverty and inequalities.

If we want an "Active and Healthy Gateshead", If we want "A healthy , inclusive and nurturing place for all", If we want to give our children and young people the Best Start in Life, we need to focus on driving down current rates of smoking towards the lowest rates in England.

A message from the Director of Public Health

People in Gateshead are living longer and healthier lives than ever before, however there are still significant challenges. The biggest challenge is the stubborn inequalities in health outcome between different groups in our population and different areas of our Borough. Smoking has been identified as the single biggest cause of the inequality in death rates between rich and poor in the UK. Smoking accounts for over half of the difference in risk of premature death between social classes.

A total of 42,042 (ASH Ready reckoner 2015) Gateshead people smoke (21.0% of the population) with around 1,430 of these under 16 years of age. If we had the lowest smoking rate in England of 8.4%, a further 25,226 people would not be smokers and the benefits for our populations' health, and the economic wellbeing of our Town, would be enormous. We need to do more to support our residents to be smoke free, around 32,000 of people who currently smoke want to stop. Anything we can do to make this easier would be met with support.

If we are serious about achieving an Active and Healthy Gateshead, supporting and encouraging people to improve their health and lifestyle whilst eradicating health and inequality gaps, we need to reinvigorate our action on tobacco and smoking.

One Vision (Smoke Free Gateshead)

“Smoking Still Kills”

No one can say that the job of tobacco control is done when thousands of smokers in Gateshead face the risks of smoking related illness and premature death, young smokers start smoking every day and smoking remains the principal cause of health inequalities. In Gateshead over 420 people die each year from smoking related illness.

Our Vision is for a smoke free future for our children, that our next generation will be born and raised in a place free from tobacco, where smoking is unusual. Our ambitious target is 5% smoking prevalence in adults by 2025. We have already made good progress over the past 10 years with smoking rates falling from 29% to 21% but there is much more we can do.

Key Facts in summary

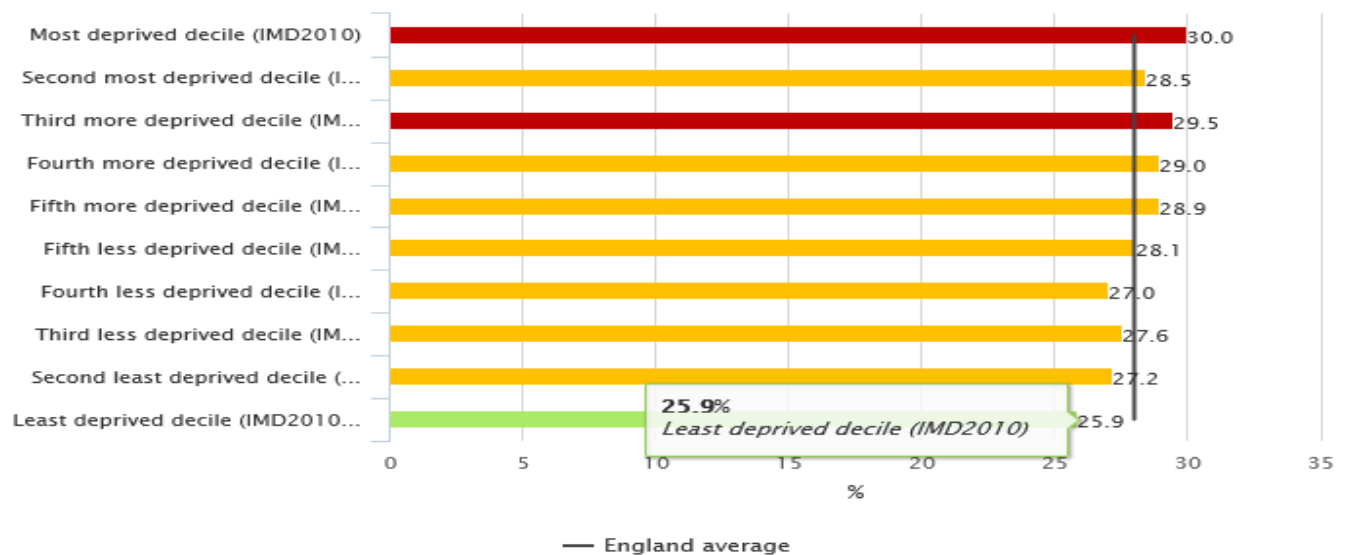
- Smoking is the primary cause of preventable illness and premature death in Gateshead.
- Smoking accounts for half of the difference in risk of premature death between social classes.
- Half of all life-long smokers die prematurely losing on average 10 years of life.
- Tobacco is a key contributor to poverty. Around 300,000 households in the NE have at least one smoker with around a third of these falling below the poverty line. If these smokers were to quit, nearly 34,000 households would be lifted out of poverty.
- Each year in the Gateshead smoking is estimated to cost society approximately £65.1m, that's £1,936 per smoker / year.

We need continued investment in comprehensive tobacco control, combined with effective Stop Smoking Service interventions to ensure smoking rates continue to fall over the next decade.

“Smoking is our biggest cause of inequalities” - Years on lives and life on years

Smoking drives Inequalities. **Our vision is to reach the same 5% prevalence by 2025 across all smokers, regardless of their socio-economic situation.**

Figure 3: Smoking prevalence in adults in routine and manual occupations - current smokers (IHS) England, 2014



Smoking remains by far and away the single biggest preventable cause of death and illness in England. In 2013, 78,200 people aged over 35 years died from smoking-related causes in England, 17 per cent of all deaths in this age group. (Annual Mortality Statistics. Statistics on Smoking, England 2015. Health and Social Care Information Centre) **that’s over 200 people every day.** Likewise the impact of smoking on ill health is huge; in 2013/14 an estimated 28% of all the hospital admissions in England in the 35 years+ age group were attributable to smoking. (Hospital Episode Statistics. Statistics on Smoking, England 2015. Health and Social Care Information Centre)

Smoking has been identified as the single biggest cause of inequality in death rates between rich and poor in the UK. Smoking accounts for over half of the difference in risk of premature death between social classes. Death rates from tobacco are two to three times higher among disadvantaged social groups than among the better off.

Smoking is far more common among unskilled and low income workers than among professional high earners. The more disadvantaged someone is, the more likely they are to smoke and to suffer from smoking-related disease and premature death. In Figure 3 above the rate for least deprived routine and manual workers (25.9%) is higher than the average for the general population across Gateshead (21%).

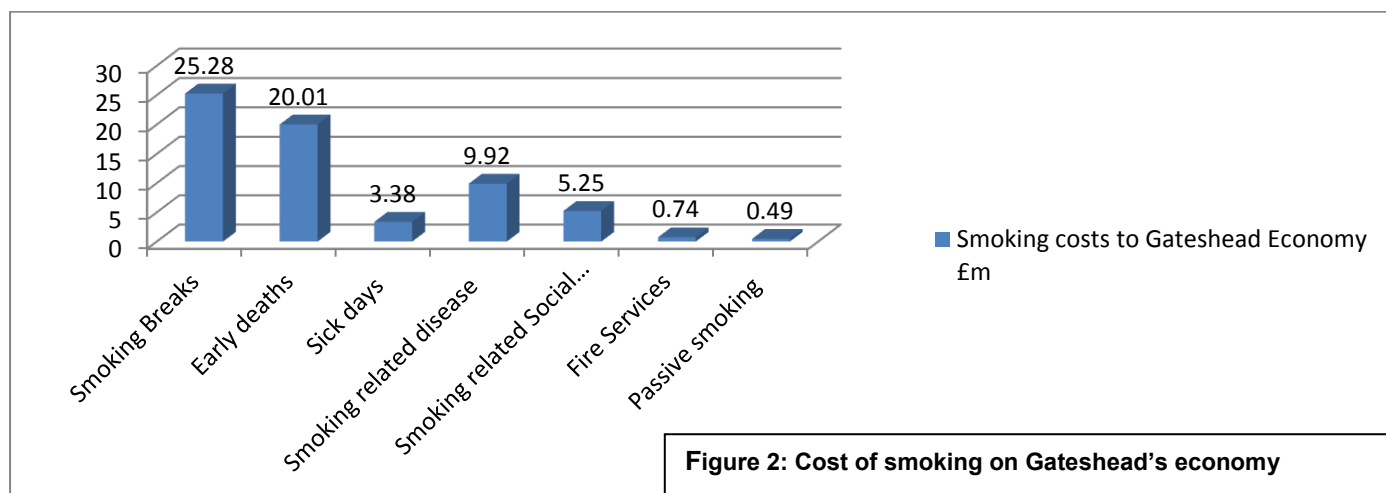
In poorer communities, young people are more exposed to smoking behaviour, more likely to try smoking and, once hooked, they find it harder to quit.

Smoking is so corrosive to individual, family and community health that any success in reducing smoking in disadvantaged groups has knock on benefits for the wider determinants of health, above all through reductions in poverty.

Why then should we set targets for manual socio economic groups that are less ambitious than those from other groups? The starting point may be higher but our vision is the same.

“Smoking costs our economy”

Our vision is for a ban on all burning tobacco products. The total cost to the Gateshead economy is estimated at £65.1m, that’s £1,936 per smoker / year. This is broken down as shown in the graph below. This cost is in comparison to a total contribution in tobacco duty of £34.79m, leaving a shortfall of just over £30m.



Early deaths due to smoking result in 1,117 years of lost productivity and a cost of £20m in Gateshead. There are also 37,876 days of productivity lost because of smoking related sick days, at a cost of £3m. (ASH ready reckoner December 2015).

23,712 Gateshead households have at least 1 smoker, 34% of which fall below the poverty line. If smokers stopped and the money was recirculated back into the household budget, it would lift around 2,655 Gateshead homes, 4,434 Gateshead people, out of poverty (ASH Ready Reckoner, 2015).

Illicit tobacco sales account for approximately 5% of sales. This is money going into the hands of criminal gangs, avoiding duty and tax. There is strong Public support to curb the sale of Illicit tobacco.

A person who smokes on average 20 a day spend £2,190 on smoking each year, that’s £10,950 after five years.

“Smoking steals our young people’s future”



Our vision is for No Young People to start smoking. Smoking is an addiction that takes a hold of most when they are young. Two-thirds of smokers start before age 18. Of those who try smoking between one-third and one-half will become regular smokers. Young people are most at risk if they grow up in a world where smoking is normal or accepted where they believe smoking is desirable and where they have easy access to cigarettes.

Children in disadvantaged circumstances will bear the greatest burden, continuing the cycle of inequalities. They are more likely to start smoking at an earlier age, find it more difficult to stop once they start and death rates are up to three times higher in these groups than more affluent communities. We also know that Illicit tobacco is targeted into lower socioeconomic areas.

We need to work in engaging Young People to think more about the role that the tobacco industry has in recruiting new smokers to replace those that have either stopped or died. We already know 74% of adults in the North East feel that tobacco companies can't be trusted to tell the truth (FRESH NE).

- Tobacco companies make an equivalent profit of almost £4,000 for every death they cause
- In the UK, the tobacco industry needs to recruit 100,000 new smokers each year to replace those who die
- The tobacco industry makes more money than McDonalds, Coca Cola and Microsoft combined

We will work with young people in Gateshead to establish their views and build local action.

Next Steps

Building on and Developing Assets in Communities

Our Vision is for a Smoke free Gateshead. ASH identify effective tobacco control requires focus on three domains as detailed here:

- **Challenge** for your existing tobacco control services – based on evidence of the most effective components of comprehensive tobacco control, as outlined in NICE Guidance and “Healthy Lives, Healthy People, a Tobacco Control Plan for England”.
- **Leadership** for comprehensive action to tackle tobacco.
- **Results** demonstrated by the outcomes you have delivered against national and local priorities.



Figure 1: CLeaR Thinking Excellence in local tobacco control (ASH 2012)

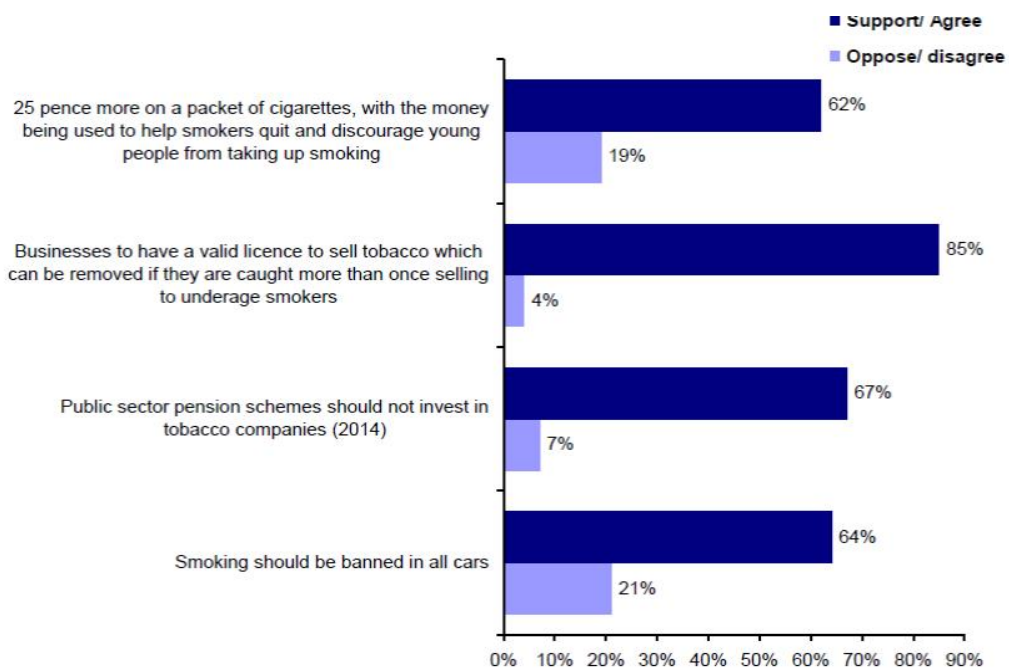
We need to review the work of our smokefree alliance and identify its strengths and areas for improvement. We can do this using the CLeaR methodology and support that is offered by Public Health England and FRESH NE. The CLeaR tool will provide the platform for our tobacco control alliance to assess our delivery plans and take assurance from review by our peers, that we are investing our resources wisely and in full knowledge of the evidence which supports this. This will support a refresh of our action plans and the development of a comprehensive 10 year tobacco control plan.

Ensuring Public support

Our vision is for a smoking prevalence of 5% by 2025. Maintaining public support for the target is key to being able to move forward with ambitious plans and engaging communities in action to tackle the issue.

Levels of support for intervention on smoking are at an all-time high. On behalf of Gateshead Council and the other 11 partner Local Authorities, FRESH regularly consults with people in the North East to gauge their opinions; the table below shows

that there is strong support in the region for further tobacco control measures, with the strongest support (85% positive – 2015 figures) being shown for a licensing scheme. (You Gov ASH Smokefree 2016).



- Smoking has declined by more than a third from 2005 to 2014, with the biggest decline of any region in England from 1 in 3 adults regularly smoking in 2005, it is now down to 1 in 5 (19.9%). This is 165,000 fewer smokers.
- Smoking related mortality in the NE is declining faster than the national average.
- The NE has highest public support for tobacco control measures through driving a social movement to shift the social norms and world leading media campaigns have helped to drive behaviour change
- Through implementing a systematic approach to implementing NICE guidance, NE maternal smoking rates have fallen by 4.0% (from 20.7% to 16.7%) compared to a 2.6% decline nationally
- The investment in a regional tobacco control programme has been exceptional value for money and provided a blue print for other areas of public health and firmly placed the NE on the international map for innovative, effective, collaborative workin

Way Forward – Recommendations

Action 1: Ensure a greater focus on tobacco control activity by all partners on Health and Wellbeing Board for Gateshead.

Action 2: Undertake a CLear review of the Gateshead Smokefree Tobacco Alliance in July 2016 in partnership with HWB members.

Note: PHE and FRESH have offered to support to work with our Alliance and HWB members on either the 5, 6 or 8 July 2016. Our next Alliance meeting is on Tuesday 5 July 2016, 9.30 – 11.30, which fits with availability of external facilitators.

Action 3: We will work with young people in Gateshead to establish their views and build local action.

Action 4: Develop a local 10 year delivery plan based on both the output of the CLear assessment and national, regional and local intelligence (November / December 2016).

Action 5: To maintain public support for action, communicate a clear understanding of the harm caused by tobacco and the benefits of stopping smoking in partnership with FRESH NE.

Action 6: Ensure the Sustainability and Transformation Plans (STPs) include challenging action and targets for reducing smoking locally.