Understanding health and wellbeing needs

### Smoking

**Why is it a priority?**

An established programme of Tobacco Control in Greenwich had seen a significant decrease in smoking prevalence of the adult population over recent years with rates falling from 24% in 2010 to 16.6% in 2014. However, smoking prevalence is not equally distributed among all groups in the society with people employed in routine and manual jobs being more likely to smoke. Worryingly, smoking prevalence in people employed in routine and manual jobs in Greenwich is increasing.

Tobacco use is the major cause of preventable morbidity and mortality in England, with a number of cases being due to second-hand smoking. Greenwich has significantly higher death rates from causes related to smoking compared to the national and London rates. Specifically, in 2012-14 deaths from lung cancer in Greenwich were significantly higher compared to the national and London averages, 71 versus 58 and 60 per 100 000 population respectively.

**What could make a difference at a local level?**

Smoking is the single biggest cause of differences in mortality rates between the richest and poorest in our communities. People living in areas of high deprivation are more likely to start smoking at a younger age, be heavily dependent and less likely to quit, increasing the risk of smoking related disease. Tailored Stop Smoking campaigns could help to reduce smoking rates in these population groups.

Two thirds of smokers report that they want to quit. Unfortunately, evidence based and NICE approved smoking cessation interventions are not routinely offered to patients in primary and secondary care settings. In addition, even though Stop Smoking services are well established in Greenwich, there is a huge variation in the number of smokers...
referred by the GP practices. A new model of Health Improvement could see an embedding of smoking cessation programmes within primary and secondary care.

Tobacco dependency is a long term condition that starts in childhood, 67 children start smoking in London each day. Greenwich currently commissions a prevention of uptake of smoking in schools and youth settings which is delivered by Charlton Athletic Community Trust (CACT). This work has a vital role in working with young people preventing them becoming the smokers of tomorrow with a vision of working towards a smoke free generation for Greenwich.

**What are the opportunities for improvement in Greenwich?**

Royal Borough of Greenwich is working with its local NHS partners, workplaces, HMP Belmarsh, CACT to provide [Stop Smoking services](#). There has been a huge progress in reducing smoking prevalence among Greenwich population and even higher gains could be achieved by:

- Supporting the smokers who want to quit by adapting the range of services on offer to their needs.
- Using social marketing techniques to effectively communicate with and motivate tobacco users to think about quitting and to guide to the most effective support available.
- Offering a choice of support both in health and community settings and continuing to work with our partners in secondary care to establish systematic referral pathways into cessation support.

  **Making Every Opportunity Count** increasing referrals across the population into a wide range of healthy lifestyle behaviour change support programmes.

- Prioritising patients who are pregnant, have a long term condition or pre-surgery, adding value to every clinical contact by treating tobacco dependence.
- Focusing on smokers employed in routine and manual jobs in order to assess their needs and tailor services accordingly.
- Tackling [illegal tobacco](#) trade.

Lastly, there is clear evidence that the most effective tobacco control strategies involve taking a multi-faceted and comprehensive approach at both national and local level. The effectiveness of tobacco control is dependent on strategies with a wide range of actions, which complement and reinforce each other. Applying a mix of educational, clinical, regulatory, economic, and social strategies has been established as the guiding principle for eliminating the health and economic burden of tobacco use.