Delivering a Smokefree Oxfordshire by 2025

Health Improvement Board, 27th May 2021

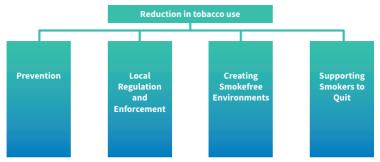
Summary

This paper describes the priorities for tobacco control in Oxfordshire in 2021/22 and its ambition to be smoke free by 2025.

The paper highlights the importance of creating healthy smoke free environments and preventing people from starting smoking. It emphasises the need to directly tackle the stark inequalities in smoking rates and tobacco-related harm across the County – particularly among people with long term mental health conditions, and the shared responsibility for achieving this across the member organisations of the Oxfordshire Tobacco Control Alliance.

Oxfordshire's Smokefree 2025 ambition

On the 31st May 2021 Oxfordshire will celebrate the first anniversary of its Tobacco Control Strategy¹. The Strategy has four pillars which underpin a whole systems approach to reducing tobacco use:



The Strategy's ambition is for Oxfordshire to be smokefree by 2025 (defined as less than 5% of the adult population smoking). County and District Councils across Oxfordshire signed up to this ambition, along with Oxford Health NHS Foundation Trust, Oxfordshire University Hospital NHS Foundation Trust and Oxfordshire Clinical Commissioning Group.

Latest data from 2019 suggests that 65,000 adults in Oxfordshire (12%) still smoke.² Smoking remains the leading preventable cause of premature death and disease from conditions such as cancer and cardiovascular disease, with wider costs the County amounting to over £120m per year in lost productivity, health care, and social care.

Inequalities in Smoking Prevalence

Whilst the overall adult smoking rate in Oxfordshire is 12%, it is higher in more deprived parts of the County, with smoking rates among routine and manual workers at 22.5% - nearly double the county average.

In Oxfordshire, 17.3% of adults with a long-term mental health condition smoke and for those with serious mental illness, smoking prevalence is over three times the average in the County at 36.4%. People with a long-term mental health condition have

¹ https://www.oxfordshire.gov.uk/sites/default/files/file/public-health/OxfordshireTobaccoControlStrategy.pdf

² Public Health Profiles - PHE

a 10-20-year shorter life expectancy than average, with smoking being the single largest preventable cause.

There are also a range of other marginalised groups with high smoking rates, such as Gypsies and Travellers, those who are homeless, suffer from substance misuse, and people in contact with the criminal justice system.

Finally, the age group most likely to smoke in Oxfordshire are 25-34 year olds - the parents of today and tomorrow. Children with parents who smoke are three times more likely to smoke themselves, with two thirds of smokers starting smoking before they are 18 years old. Preventing uptake is key in creating a sustainable approach to a smoke free Oxfordshire.

Oxfordshire's Tobacco Control Priorities for 2021/22

Our tobacco control priorities for 2021/22 focus on prevention and creating healthy smoke free environments, alongside providing targeted stop smoking services for those who need it most, and using enforcement for retailers who break the law.

To be smoke free by 2025, smokers need supportive environments to quit and young people need environments where being smoke free is the easy option. On average, around 30% of smokers per year make a serious attempt to quit, with only 5% of smokers being successful. And whilst stop smoking services increase the likelihood of quitting for good, only 2% of smokers nationally quit use this support. Instead, the vast majority of smokers choose to quit with the help of family and friends, and by switching to less-harmful sources of nicotine such as e-cigarettes.

We will therefore be working closely with workplaces, communities, and our smoke free partner organisations to support the implementation of smokefree indoor and outdoor places, and to improve access to nicotine replacement and pharmacotherapy for those who need it most. This includes people working in routine jobs, communities in the most deprived part of the County, people with long term physical and mental health conditions, and women who are pregnant and their partners.

Mental Health and Smoking

People with a long-term mental health condition are more likely to smoke than the general population and are more likely to die prematurely. Meeting the needs of this population is key to Oxfordshire achieving its ambition to be smoke free by 2025 and in narrowing inequalities in tobacco use and tobacco-related harm.

People with mental health conditions want to quit smoking as much as other smokers. While there may be concerns that quitting could negatively affect mental health, evidence suggests that quitting reduces symptoms of anxiety and depression, as well as improves physical health³.

The majority of mental health provision takes place in the community, requiring action and ownership of actions across the local health and social care system, and between primary, community, and inpatient settings.

³ https://www.cochrane.org/CD013522/TOBACCO_does-stopping-smoking-improve-mental-health

The national Mental Health and Smoking Partnership has made a range of recommendations in advance of the government's Tobacco Control Plan for England 2021, due to be published in the Summer.⁴ The opportunities for Oxfordshire include:

- 1) Data collection and recording of smoking status. ICT systems of the local NHS Trusts and primary care need to have appropriate functionality to record guit status and staff trained to enter that information correctly and consistently.
- 2) Improving access to medication and other aids to guitting such as ecigarettes. One of the key barriers is trained staff who are competent and confident in giving advice about medication, including e-cigarettes.
- 3) Supporting smokers in community and inpatient mental health settings Provision of training in very brief advice for staff and volunteers who support residents who smoke when working with the Oxfordshire Mental Health Partnership (OMHP). And a clear referral pathway between the offer of support from members of the OMHP and the County Council commissioned stop smoking service.
- 4) Addressing smoking through Improving Access to Psychological Therapy (IAPT) services

IAPT services have teams with the knowledge and confidence to offer very brief advice and clear referral pathways into locally commissioned stop smoking services.

5) Supporting groups with both high rates of smoking and poor mental health

There are groups such as those who are homeless or have substance misuse issues where smoking rates can be as high as 60%. Services may wish to consider the use of embedded stop smoking services to maximise the benefit the therapeutic relationship, including the provision of e-cigarettes.

6) Improving the mental health of all smokers The findings of a recent Cochrane review show that the benefits to the mental health of guitting smoking is similar to the impact of taking anti-depressants. Partners can promote this messaging when considering messages about

Next Steps for Smokefree 2025 and the Oxfordshire Tobacco Control Alliance Over the coming weeks and months, we are looking forward to working with senior leaders from member organisations of the Oxfordshire Tobacco Control Alliance (OTCA) to update, finalise, and deliver the OTCA action plan for 2021/22.

We will also be developing an evaluation framework to understand the impact of the work of the OTCA and the county's progress towards being smoke free by 2025. This will take a broader view than simply looking at four week quits, to align with the range of ambitions of the county's tobacco free strategy, particularly in areas of creating healthy smokefree environments and prevention.

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general population mental health⁵.

⁴ Mental Health and Smoking Partnership – Smokefree Action Coalition
⁵ https://www.cochrane.org/CD013522/TOBACCO_does-stopping-smoking-improve-mental-health