

Up in Smoke: How Tobacco Drives Economic and Health Inequalities: Tobacco Harm Profile for Sunderland 2023

“Smoking helps to sustain deprivation, just as deprivation sustains smoking”

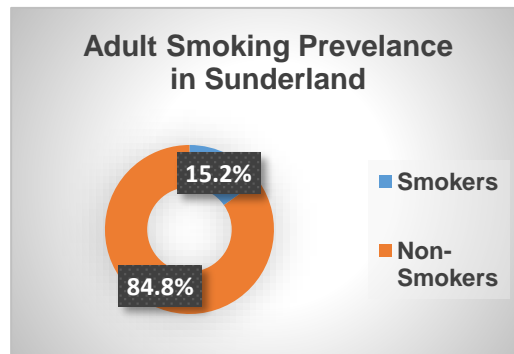
This report has been developed by Fresh using multiple data sources including those from ASH. It aims to highlight the key figures relating to the toll to the locality from tobacco and also the level of support from the public for further action to reduce the scale of the problem.

Smoking remains the biggest preventable cause of death and illness in Sunderland, the North East and England and continues to be the leading driver of local health inequalities with the greatest harms falling on our poorest and most vulnerable individuals living in our communities. There is no safe level of exposure to tobacco smoke including secondhand smoke (passive smoking) and there are short, medium and long-term health effects, including heart disease and lung cancer, especially with continued exposure over time.

We continue as a region in taking a comprehensive approach to reach our shared ambition to reduce smoking rates to less than 5% by 2030. Despite the positive trends in smoking prevalence continuing to decrease it is likely that the national and regional target is going to be missed¹. It is vital that we continue our focus and drive to action at all levels; nationally to locally to enable us to achieve a tobacco free generation, such that any child born today in any part of the North East will reach adulthood breathing smoke free air, being free from tobacco addiction and living in a community where smoking is unusual.

Smokers in Sunderland:²

- **34,000** adults continue to smoke at **15.2%**
- **512** people are estimated to die from smoking in Sunderland every year – for every death it is estimated around 30 smokers are living with a smoking-caused disease
- **4,846** people visited hospital as a result of smoking attributed hospital admissions (2019/20)



Young Smokers:

While overall youth smoking rates are at an all-time low, smoking in young people is twice as common in those from disadvantaged backgrounds.³ Evidence shows that children of smokers are up to three times more likely to smoke themselves meaning that health inequalities can often persist throughout generations. As smoking remains an addiction which is largely taken up in childhood we know young people become addicted before they fully understand the associated health risks. We must continue to reduce exposure to smoking within households and peer groups and focus on effective prevention policies to reduce uptake of smoking including considering raising the age of sale from 18 to 21.

The most recent data within the North East showing the proportions of pupils who were current smokers, by region and sex 2021 highlights;

- **4%** of boys and girls currently smoke compared to **3%** England Average⁵.

Smoking prevalence in priority populations:

Smoking in pregnancy is a health inequality associated with serious complications and remains the leading modifiable risk factor for poor birth outcomes including; stillbirth, miscarriage and pre-term birth⁶ Rates in Sunderland have been decreasing over time however remain statistically worse than England. We know exposure to tobacco smoke during pregnancy negatively impacts offspring from infancy to childhood and into adulthood, pregnancy is considered a ‘teachable moment’ and evidence has shown that more women quit smoking when they are pregnant than at any other time during their lives⁶. Over the last year in Sunderland;

- **13.7%** of maternities were smoking at time of delivery (SATOD) in 2022/23⁷

Routine and Manual Occupations - Despite the number of adult smokers decreasing this is a reduction that is not spread evenly across Sunderland with the highest proportion of smokers in the Routine and Manual Population⁸:

- **28.9%** of those in routine and manual occupations smoke

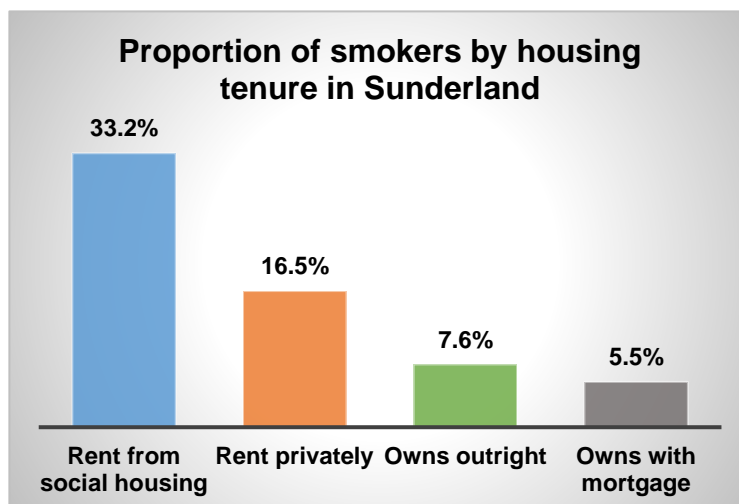
Mental Health Conditions - Evidence shows that people with mental health conditions are more likely to smoke than the general public and smoking rates increase with the severity of the condition. Partly a result of high smoking rates, people with a mental health condition have high mortality rates compared to the general population. Therefore, quitting smoking is particularly important for this group since smoking is the single largest contributor to their 10-20 year reduced life expectancy⁹.

- At **23.9%** smoking prevalence remains higher in adults with a long term mental health condition within the City¹⁰ (2021/22)

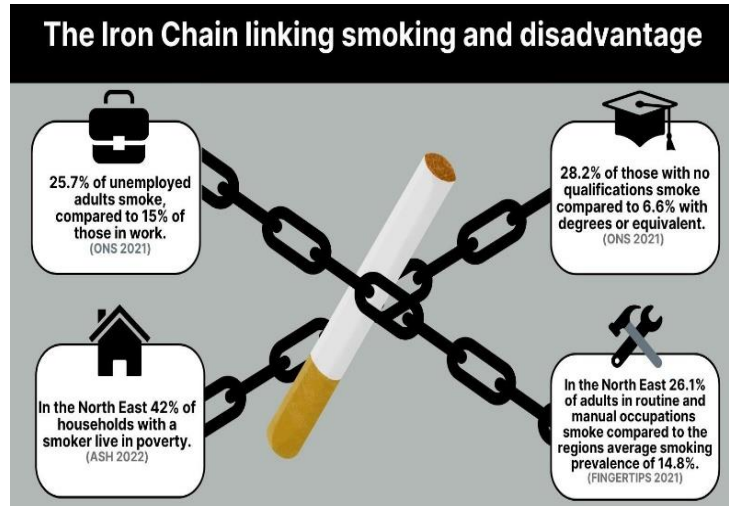
Smoking related Health Inequalities:

Social Housing - Smoking rates remain considerably higher in many deprived groups both nationally and locally with smoking prevalence twice the national average among people who live in social rented housing and among people with no qualifications ¹¹.The smoking rate among social housing residents is one of the highest in England – around 1 in 3 people smoke, compared to 1 in 10 people who own their own home and 1 in 7 in the general adult population.¹²

People living in Sunderland are disproportionately affected by the substantial health and economic inequalities caused by smoking. The percentage of the population of smokers within the City shows that smoking rates in people living in social housing are double the national average.¹³



The evidence is clear in that the collaboration between social landlords and public health teams to support residents who smoke to stop and access existing professional support is invaluable and delivers substantial benefits to them and social landlords.



By reducing smoking prevalence in our deprived towns, communities and households it will provide multiple dividends and support households on the brink of poverty who are pushed over by their tobacco spends. The iron chain linking smoking and deprivation can be broken with substantial investment and strategic commitment across government and civil society¹¹

Impact on Health and Social Care¹⁴:

In Sunderland both current and former smokers require care in later life as a result of a smoking related illnesses. Costing the local authority an estimated **£6.9 million**;

- **£3.3 million** in Residential Care
- **£3.6 million** in Domiciliary care

As a result of smoking-related ill health;

- **6,300** people are currently provided informal social care by friends/ family
- **2,600** people’s social care needs are currently being unmet

If these were both replaced with formal paid care, it would cost the social care system in Sunderland an additional **£80.3 million**.

A further **£11.9 million** is spent on healthcare costs in Sunderland as a result of smoking– related hospital admissions and the cost of treating smoking – related illness via primary care services.



Poverty, worklessness and economic impact

Smoking has a destructive financial impact on both individuals and the economy and reinforces health inequalities¹⁵, people living in more deprived areas are more likely to smoke and less likely to quit. Smoking is a very costly addiction that is preventing employment, driving down wages and costing the economy in Sunderland millions. The average smoker in Sunderland spends around;

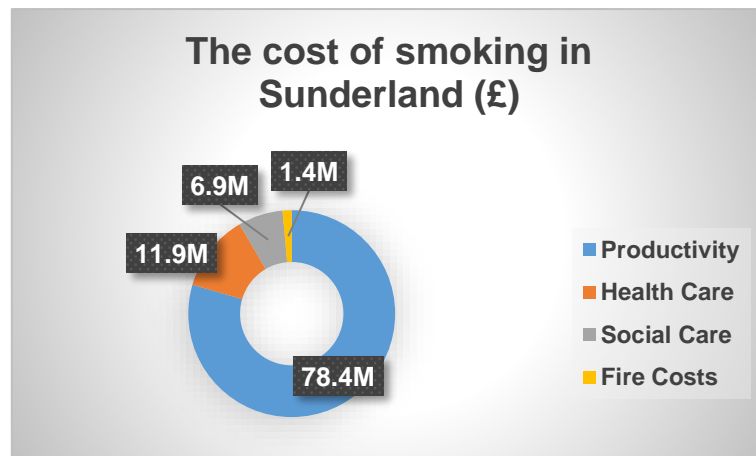
- **£2,451** a year.
- A total of **£82.2m** is spent by the population of Sunderland as a whole annually.

Higher smoking rates are linked with virtually every indicator of social and economic disadvantage, those at the sharp end of inequalities are more likely to smoke and suffer significant income loss and harm to health whilst continuing to line the pockets of the tobacco manufacturers¹⁶ Poverty pressures continue to be a major issue and many households are undoubtedly struggling with the average spend in Sunderland over £200 per month or £47 a week this would be enough to cover the energy bill for a typical household in Great Britain¹³

The employment chances and average earnings of a smoker are also damaged by smoking¹⁴ negatively affecting both earnings and employment prospects¹⁷:




It is estimated that overall Smoking Costs in Sunderland totals **£98.7 million** each year; this includes costs of healthcare, social care, productivity and fire costs¹⁴



Illicit Tobacco


ILLEGAL TOBACCO IN THE NORTH EAST. THE FACTS - 2023.

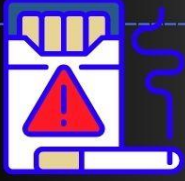
THE ROLE OF ILLICIT TOBACCO IN EXACERBATING HARMS



14% OF TOBACCO SMOKED IN THE NORTH EAST IS ESTIMATED TO BE ILLICIT


22% OF SMOKERS BUY ILLICIT TOBACCO IN THE NORTH EAST






ILLICIT TOBACCO MAKES UP 48% OF THE TOBACCO CONSUMED BY AN ILLICIT TOBACCO BUYER


180 MILLION ILLICIT CIGARETTES ARE SMOKED EACH YEAR EQUATING TO £95 MILLION IN LOST DUTY






77% OF ILLICIT TOBACCO BUYERS ARE FROM C2DE SOCIOECONOMIC BACKGROUNDS


83% OF ILLEGAL TOBACCO BUYERS SAY THAT ILLEGAL TOBACCO FACILITATES THEIR SMOKING





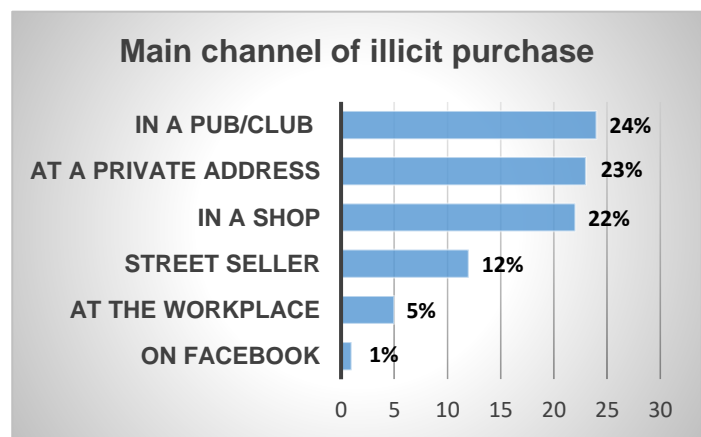
64% OF YOUNG SMOKERS HAVE EVER BEEN OFFERED ILLICIT TOBACCO

46% OF YOUNG SMOKERS BUY ILLICIT TOBACCO



Illegal tobacco plays a key role in exacerbating harms across the North East, getting young smokers hooked on tobacco and making it harder for smokers to quit. Fresh has tracked the size of the illicit market in the North East every two years since 2009. These are the headline results of the 2023¹⁸ survey:

Illegal tobacco is bought from a range of sources in the North East:



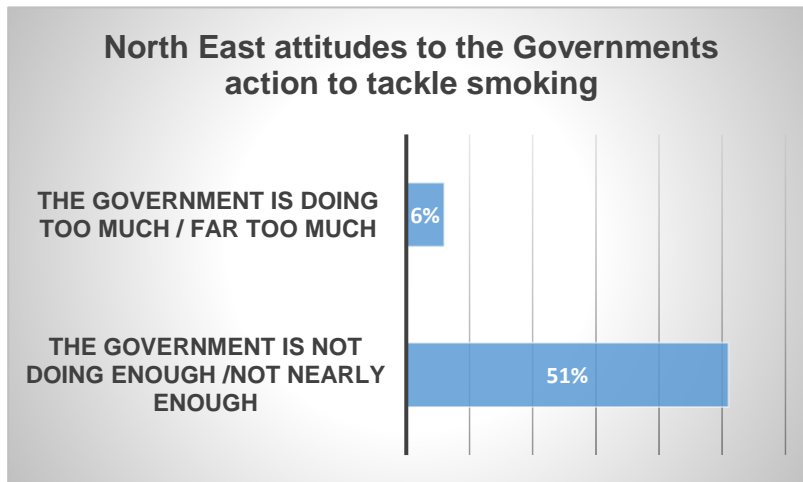
Amongst retailers themselves, there is strong support for more robust legislation and penalties for those who break the law around tobacco, including selling illegal cigarettes and selling to underage children;

- Over **80%** of retailers would support the introduction of tobacco licences
- Over **70%** of retailers support larger fines for those who break the law.¹⁹

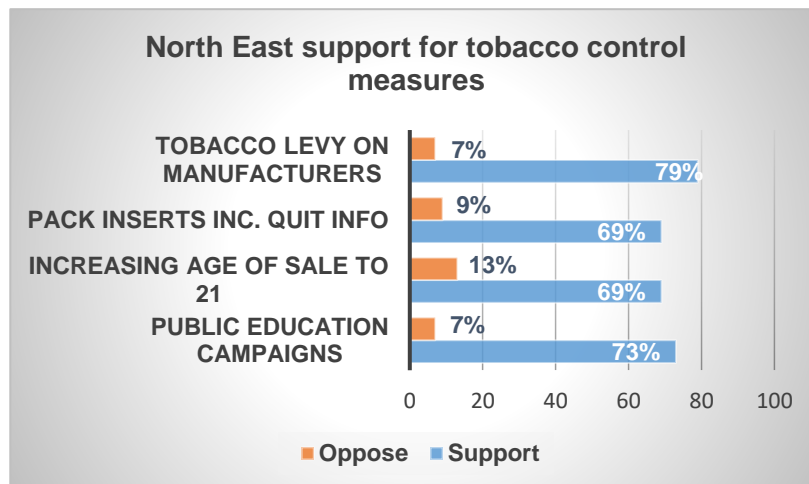
Tobacco control measures – public support and the potential for harm reduction –

It is clear that there is strong support in Sunderland for national measures to reduce tobacco harm and as we continue to drive smoking prevalence down the health, social and economic wellbeing of the whole population in Sunderland will be reap the benefits.

In the North East over half of the proportion of adults believe the Government could be doing more to limit smoking, with **78%** of the public continuing to support the ambition of Smokefree 2030²⁰



The North East continues to support a range of measures to tackle tobacco harm across the region; backing measures to include introducing a levy on tobacco manufacturers investing in public health campaigns, increasing the age of sale for tobacco from 18 to 21.



An independent survey of smokers across the North East (2023) by Fresh found²¹

- **77%** regret they ever started to smoke
- **46%** say they *really* want to stop smoking
- **53%** are trying to either quit (13%) or cut down (40%)
- **81%** want to quit for health and 46% want to also quit for finances
- **83%** of smokers under-estimate the one in two risk of dying early (2 in 3 for heavier smokers) – almost half believe it to be 1 in 10 or fewer

Next Steps – local, regional and national solutions to reducing smoking harm:

There is a clear commitment amongst local authorities and the NHS across the North East to reducing smoking rates with proposed local and national measures heavily supported by members of the public.

The collaborative funding of Fresh by all 12 Local Authorities and the North East and North Cumbria NHS Integrated Care Board is testament to the priority given to reducing smoking. Despite the long-term decline of overall adult smoking prevalence in the North East and Sunderland, there is still much to be done to drive down smoking rates in priority groups and smoking related harm.

There are a number of ways in which local authorities can now work to develop tobacco control efforts within their own community, with expertise and support from Fresh offer. The Fresh local tobacco alliance action plan for 2023-2024 is a useful repository of resources for a comprehensive approach to tobacco control.

From a national perspective, the Government committed in 2019 to producing a new Tobacco Control Plan to pave the way towards a Smokefree 2030²². A new plan is awaited and Fresh alongside ASH and Cancer Research UK continue to flag the importance of this. To find out more about our key policy and campaigning work visit:

<https://www.fresh-balance.co.uk>

<https://ash.org.uk/about/who-we-work-with/smokefree-action-coalition>

<https://www.cancerresearchuk.org/get-involved/campaign-for-us/smokefreeuk>

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