

Plan for Enfield to become smoke-free by 2030

Vision – To eliminate the harm tobacco products cause to the residents of Enfield by ensuring that Enfield becomes a smoke-free borough by 2030 (<5% prevalence).

Introduction

Each year smoking tobacco kills some 64, 000 people in England¹ with at least 30x suffering from smoking-related diseases². Tobacco is estimated to reduce smokers' life-expectancy by 10 years³ and is the leading modifiable risk factor for health inequalities accounting for half of the 10 year difference in life expectancy between the most and least disadvantaged in society⁴. Each smoking death will also represent considerable morbidity; the five year life-expectancy of someone diagnosed with emphysema is 40 – 70%⁵ but this represents a considerable loss of quality of life.

In Enfield there are approximately 250 smoking related deaths per year and 2000 smoking attributable hospital admissions⁶. These do not include the costs to social care, work-days lost, litter / pollution, fires, the environmental costs of tobacco production (deforestation, water consumption, pesticides, non-biodegradable butts⁷) and that the inclusion of tobacco costs into measures of poverty tips an extra half a million households into poverty⁸.

85% of smokers and ex-smokers regret ever starting to smoke⁹. Most people who smoke start when they are still children whereas the greatest effects on youth smoking result from policies such as high tobacco prices, smokefree laws and bans on tobacco advertising¹⁰. In England 60% of smokers want to stop¹¹ and smokefree policies can also motivate and help tobacco users to quit¹².

¹ PH England (2021) Official Statistics. Local tobacco control profiles for England: short statistical commentary July 2021. <https://www.gov.uk/government/statistics/local-tobacco-control-profiles-for-england-july-2021/local-tobacco-control-profiles-for-england-short-statistical-commentary-july-2021> Site accessed 12th April 2022.

² Centers for Disease Control and Prevention (CDC). Smoking & Tobacco Use. May 2020. https://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm Site accessed 12th April 2022.

³ Jha, P. et al (2013) 21st-Century Hazards of Smoking and Benefits of Cessation in the United States N Engl J Med 2013; 368:341-350 DOI: 10.1056/NEJMsa1211128

⁴ Jha P, Peto R, Zatonski W, et al. Social inequalities in male mortality, and in male mortality from smoking: indirect estimation from national death rates in England and Wales, Poland, and North America. The Lancet 2006; 36: 367–370.

⁵ What is the life expectancy of someone with COPD? Emedicinehealth. https://www.emedicinehealth.com/ask_life_expectancy_for_copd/article_em.htm#ask_a_doctor Article accessed 15th Aug 2022.

⁶ Office for Health Improvement and Disparities (2022). <https://fingertips.phe.org.uk/profile/tobacco-control/data#page/1/ati/402/are/E09000010> Site accessed 12th April 2022.

⁷ World Health Organisation (2017) Tobacco and its environmental impact: an overview.

⁸ Landman Economics (2021) Estimates of poverty in the UK adjusted for expenditure on tobacco – 2021 update.

⁹ Fong, G. et.al (2004) The near-universal experience of regret among smokers in four countries: findings from the International Tobacco Control Policy Evaluation Survey. Nicotine Tob Res. 2004 Dec;6 Suppl 3:S341-51. doi: 10.1080/14622200412331320743.

¹⁰ Action on Smoking and Health (ASH) undated. Young People and Tobacco. <https://ash.org.uk/category/information-and-resources/young-people-tobacco-information-and-resources/> Site accessed 12th April 2022.

¹¹ Gov.uk (2018) Press release. One person quits smoking every 80 seconds in England. <https://www.gov.uk/government/news/one-person-quits-smoking-every-80-seconds-in-england> Site accessed 12th April 2022.

There are also wider smoking related considerations; approximately 1200 tonnes of cigarette waste is discarded as litter each year needing collection by local Government cleaning services¹³. Cigarette butt litter is a poisonous non-biodegradable problem containing lead and arsenic and making up a 1/3 of all litter in the UK¹⁴.

Making Smoking Obsolete (Independent Report)

The Kahn Review, an independent report was commissioned by the Office for Health Inequalities and Disparities (OHID) to review progress into the Government's target for England to become smoke-free by 2030¹⁵. It's conclusion was that without accelerated progress neither this target, nor that of increasing Health Life Expectancy (HLE) nor that of saving more lives through the 10 year Cancer plan will be achieved. High level recommendations from the plan include:

- Increased investment in both smoking policies and stop smoking services
- Increasing the age of sale one year every year so that eventually no-one will be able to buy tobacco
- Promoting ecigarettes
- Improved prevention within the NHS taking advantage of every interaction with a smoker

Costs to Enfield

It is difficult to estimate precise costs at a local level but following the ASH Ready Reckoner it is estimated that £76.7m is spent annually on legal and illicit tobacco in Enfield resulting in annual social care costs of £5.99m, healthcare costs of 11.44m, productivity losses of £113.46m, 19 tonnes of waste (including 8 tonnes discarded as street litter) and an annual cost to the borough of £132.3m.¹⁶

Purpose of this plan

This action plan sets out the actions we will take over the next XXX years and beyond to achieve a Smokefree Enfield and ultimately end the harm smoking causes. To achieve our goal of a smoking prevalence of less than five percent in the next XX years, we will need to implement a comprehensive mutually reinforcing package of actions at speed.

Our Outcomes

Eliminate inequities in smoking rates and smoking-related illnesses

There are marked differences in smoking prevalence

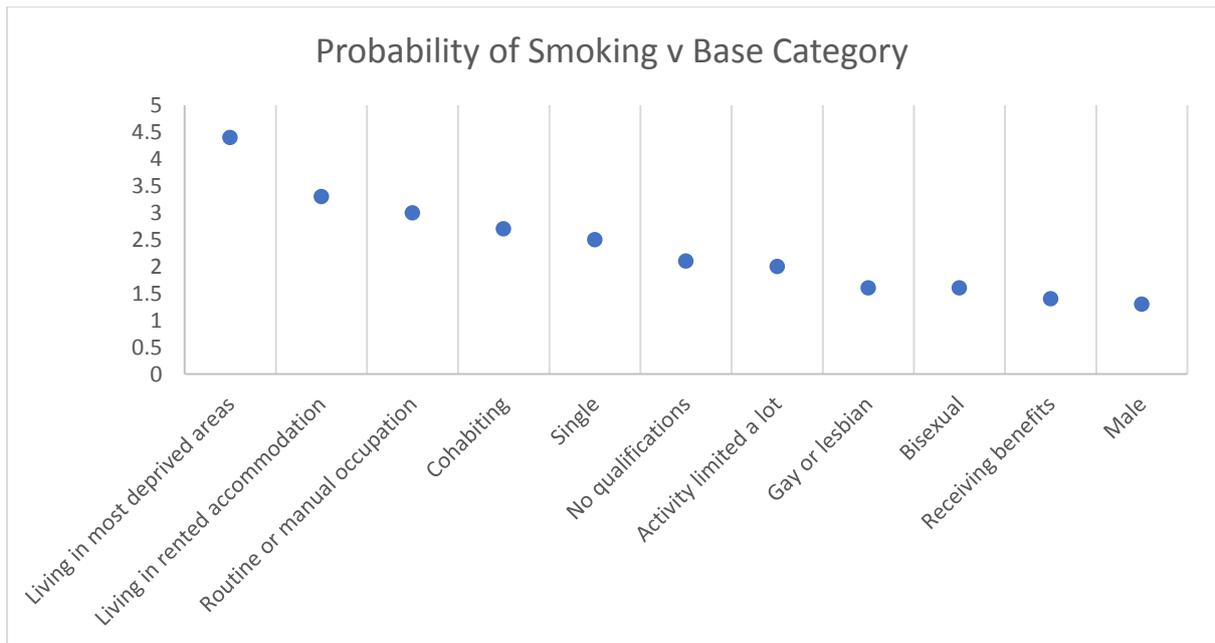
¹² Centres for Disease Control and Prevention (2021) Smokefree Policies Reduce Smoking. https://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/protection/reduce_smoking/index.htm. Site accessed 12th April 2022.

¹³ Public Health England (2016) Smoking: Litter

¹⁴ Local Government Association (2019) Reducing cigarette butt litter <https://www.local.gov.uk/case-studies/reducing-cigarette-butt-litter> Site accessed 15th June 2022.

¹⁵ Khan, J. (2022) Making Smoking Obsolete. An independent Report. Office for Health Inequalities and Disparities (OHID) [Making smoking obsolete: summary - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/making-smoking-obsolete-summary) Site accessed 19th July 2022.

¹⁶ ASH Ready Reckoner 2022 <https://ash.org.uk/ash-local-toolkit/ash-ready-reckoner-2022/> Site accessed 15th June 2022



Source: Smoking Inequalities in England, 2016¹⁷

To reverse inequity and improve health and wellbeing for all, we need to end the unequal distribution of the harm smoking causes. This acknowledges the marked inequalities in health caused by higher smoking prevalence between social groups.

Increase the number of people who successfully quit smoking

A key part of achieving our smokefree goal is removing the barriers that undermine quit attempts and ensuring the right quitting support is easy to access.

Create a smokefree generation by increasing the number of children and young people who remain smokefree

Stopping our children and young people from ever smoking will reduce future smoking rates and smoking related harm.

This outcome requires a holistic approach to protecting children and young people, including reducing their exposure to smoked tobacco products and to second-hand smoke and supporting parents to quit smoking. By focusing on stopping new generations of people from ever starting to smoke, we acknowledge that children and young people are our future and put them front and centre.

This outcome requires a focus on changing the settings in Enfield that allow smoked tobacco products to be widely available and concentrated in disadvantaged neighbourhoods, Support to quit smoking or to switch to a less harmful alternative must be available given the potential impact of the significant changes proposed in this action plan to transform the availability and appeal of smoked tobacco products.

¹⁷ Office for National Statistics (ONS)

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/drugusealcoholandsmoking/articles/likelihoodofsmokingfourtimeshigherinenglandsmostdeprivedareasthanleastdeprived/2018-03-14#:~:text=Smoking%20more%20common%20in%20deprived%20areas&text=These%20people%20were%20more%20concentrated,in%20the%20least%20deprived%20neighbourhoods>. Site accessed 15th Aug 2022

This action plan acknowledges that smoking is not an individual issue. Smoking is a community issue and a social issue.

E-cigarettes and Vaping

‘E-cigarettes’, ‘vapes’, ‘vape pens’ etc all refer to the same class of products with ‘e-cigarette’ being the product itself and vaping referring to the use of the product.

Despite initial concerns it is considered that vaping is a much safer alternative to smoking tobacco. As new products necessarily the long-term effects of e-cigs cannot be known but the National Institute for Health and Care Excellence (NICE) states that any potential harms from e-cigs are unlikely to be similar to those from tobacco¹⁸ and the Royal College of Physicians (RCP) states that the provision of nicotine without tobacco can prevent most of the harm from smoking¹⁹. Further, whilst there have been concerns that e-cigs would act as a gateway to smoking in young people it seems that e-cigs are being used ‘almost exclusively as safer alternatives to smoked tobacco by confirmed smokers’¹³.

Whilst evidence suggests that ecigarettes offer a much less harmful alternative to smoking it will be necessary to monitor on-going effects. A position statement on e-cigarettes North Central London Integrated Care System is expected which will inform how they will play a part in this plan.

Actions:

	Action	Lead	Timeframe
1.	Establish and expand the Smokefree Enfield 2030 Taskforce to lead on progress and delivery of actions	LBE Public Health	Immediate
2.	LBE staff abide by our smoke free policies e.g. no smoking on council ground, in council vehicles, and staff on estates/ parks etc don't smoke whilst working.	LBE management teams	
3.	Run consultation with Enfield residents on smokefree Enfield	LBE Public Health	Jan 2022
4.	Ensure that the Enfield smoke-free policy is maintained across all LBE sites	LBE FM	In place
5.	Extend smoke-free areas to include: Year 2022-23: All parks and recreation grounds Outside college gates Social housing owned by LBE 2023-24	Smokefree Enfield 2030 Taskforce	

¹⁸ NICE (2021) Tobacco: preventing uptake, promoting quitting and treating dependence. NICE guideline published 30th November 2021. www.nice.org.uk/guidance/ng209

¹⁹ Royal College of Physicians (2016) Nicotine without smoke: Tobacco harm reduction. Webpage <https://www.rcplondon.ac.uk/projects/outputs/nicotine-without-smoke-tobacco-harm-reduction> Site accessed 13th April 2022.

	Smoke-free shopping centres Smoke-free pavements in Enfield Town Sports facilities Whole borough		
6.	LBE to sign the Local Government Declaration on Tobacco Control https://smokefreeaction.org.uk/declarationsindex.html/		2022
7.	Promote the Smokefree NHS pledge with all NHS partners https://smokefreeaction.org.uk/smokefree-nhs/nhs-smokefree-pledge/		Ongoing
8.	Fund health promotion and community mobilisation activities that support the smokefree goal	LBE Public Health	On-going
9.	Fund a health promotion programme to prevent young people from smoking/vaping	LBE Public Health	On-going School and College workshops/info stalls
10.	Run comprehensive quit smoking programmes for Stoptober, New Year and National No-Smoking Day	LBE Comms	On-going
11.	Coordinate various stop smoking offers across the borough	LBE Public Health	2022
12.	Continue to run 'No-smoking outside schoolgates' annually	LBE Public Health	Active on a continuous basis Signage at school entrance. So far engaged with 40 schools that are prepared to use our signage. Tool kit prepared Smokefree gates - Toolkit (003).docx This toolkit provides guidance on how to introduce a smokefree gates policy, including a checklist for reviewing and developing a smokefree policy,

			as well as template smokefree policy, letter to parents / guardians, and a press release.
13	Work with housing to promote smoke-free homes	LBE Housing	On-going Distributing leaflets on council Estates. So far Joyce Estate.
14	Work with mental health service providers and users to better understand the specific and targeted stop smoking needs of these service users and use this information to inform service development and delivery	BEH MHT	Ongoing
15	Review the smoking cessation support training needs of the health workforce	CCG, NM, RF	Ongoing
16	Work with maternity services to support pregnant women and their families to successfully quit smoking	NM	On-going to offer one to one behavioural support to all pregnant ladies/partners and people living in the same household via the maternity services at NMUH, RFH and UCLH
17	Offer to support organisations who wish to develop smoke-free policies	LBE Public Health	Not Started.
18	Work with Trading Standards to explore how licensing laws could be used to restrict smoking on pavements	EHO	Ongoing
19	Work with Trading Standards to support Operation CeCe – to reduce the availability of cheap illegal / illicit tobacco.	EHO	Ongoing