

‘Emerging from the fog’

The Annual Director of Public Health Report on Smoking and Vaping in Bexley



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Foreword

We are all aware of the health risks associated with smoking cigarettes. It is a message that has been at the forefront of local and national health services for decades. Countless campaigns and legislative actions have been presented to the public to combat addiction, prevent damage, and raise awareness of the harm that smoking cigarettes can do.

In recent years vaping and e-cigarette usage has revolutionised the tobacco industry, with manufacturers developing devices with adjustable nicotine content and attractive flavours, providing existing people who smoke with a safer alternative to help them quit. However, we are now seeing a tidal wave of younger people becoming addicted to e-cigarettes, many of whom have never smoked.

This report looks at how smoking and vaping affects Bexley residents, how we are responding to these issues and what more can be done in partnership with agencies, communities, and individuals to protect the health of everyone who lives in, works in, and visits Bexley. I invite you all to join my call to action by taking every opportunity to have conversations about quitting smoking and young vaping, signposting our residents to the right support and information, and truly making every contact count.

My thanks to those partners who continue to support our joint efforts to reduce smoking in Bexley.



Dr Nicole Klynman, Director of Public Health, London Borough of Bexley

Executive Summary

Cigarette smoking is attributed as one of the most common reasons of early death in the UK. The harmful toxins and addictive substances that are inhaled through smoking can increase the risk of developing more than 50 serious illnesses, with the addictive nature of smoking making it more difficult to stop and protect the health of yourself and loved ones around you. This has led to multiple attempts by the government to prevent people taking up smoking in the UK, while giving existing people who smoke the support they need to quit. Nationally, these legislative measures have had a huge impact on the number of people smoking in the UK with the number of recorded people who smoke dropping year on year.

In Bexley, we have followed this trend over the last decade, however the year on year rate of smoking prevalence increased between 2021 and 2022, the last year on record, rising above the national average. However, the number of people being recorded as having successfully quit smoking in Bexley is on the rise again following the Covid-19 pandemic, during which time the measurement numbers took a hit. After having been successfully commissioned to the GP Federation, the stop smoking services offered in Bexley have successfully been able to support expecting mothers to quit smoking, with fewer new mothers in Bexley smoking at the time of delivery than the average across the country.

We are currently looking to widen the net for stop smoking services pathways by not only implementing elements of the stop smoking message into the service specifications for the 0-19 Children's Public Health Service and the Adult Substance Misuse Service, but also by working with and supporting schools to introduce voluntary Smoke Free School Gates within School Superzones to further protect our families. In 2024/25, we will be renewing our emphasis on Making Every Contact Count (MECC) and providing the right training to front line staff to help create a whole system approach for smoking and vaping cessation. The remainder of this report explores the issues and challenges we face and presents our plans for tackling smoking and vape use in Bexley.

Risks of Smoking

Over 76,000 people each year die from conditions directly related to smoking, with many others developing debilitating smoking-related illnesses that they carry with them for many years. (1) When smoking a cigarette, a person will inhale carbon monoxide, tar, and nicotine. These are incredibly harmful substances that can have significant impacts on health.

It is this combination of carbon monoxide, tar, nicotine, and other chemicals that are introduced to the body through smoking that increases the risk of developing countless serious health conditions, such as coronary heart disease, heart attacks, stroke, and multiple types of cancer including mouth, throat, bladder, liver, stomach, and lung. (2) In fact, cigarette smoking causes 70% of all lung cancer cases in the UK. Smoking has also been linked to other ailments such as emphysema, kidney failure, and dementia. When someone smokes a cigarette, it is not only themselves they are putting at risk. Passive smoking can also increase the risk of developing these diseases. For example, if someone who has never smoked has a spouse who smokes regularly around them, their risk of developing lung cancer can increase by 20-30%. (3) Babies and children are particularly susceptible to the effects of second-hand smoke as it can worsen asthma symptoms, as well as put them at an increased risk of contracting meningitis, developing a persistent cough, and sudden infant death syndrome (SIDS). (4)

Those who remain smoking whilst they are going through pregnancy are not only putting themselves at risk of disease, but also their unborn child. Smoking limits the amount of oxygen and nutrients that blood can carry to the unborn baby, increasing the risk of miscarriage, ectopic pregnancy, and stillbirth. (5) Smoking during pregnancy is also linked with an increased risk of placental abruption (bleeding during the last months of pregnancy when the placenta comes away from the wall of the womb) which can be fatal to both the mother and the child. (6) Babies whose mothers smoke during pregnancy are also at greater risk of being born prematurely and having their growth and health affected which can lead to further health problems in childhood and later life. (7)

The Effects of Smoking

Nicotine is the main addictive substance that is present in both traditional cigarettes, e-cigarettes, and vapes. When inhaled it is delivered to the brain in 10-20 seconds. Once nicotine reaches the brain, it causes a release of dopamine in the same regions of the brain as other addictive drugs and substances, which gives nicotine an addictive power comparable to that of alcohol, cocaine, and some opioids such as heroin. (8)

As well as being addictive, nicotine is one of the most toxic poisons that people can put into their bodies. Despite nicotine being well known as a harmful carcinogen, it can also attack almost all other organs in the human body, the most severe of which being the cardiovascular system and the respiratory system. (9)

Smoking addiction is a chronic and relapsing condition causing many people to require multiple attempts to quit for good. Nicotine replacement therapy and cognitive behavioural therapy have been offered to help combat the addiction. However, over the last few years vaping has become one of the most important and successful treatment regimes, shown to be more effective than using nicotine replacement therapies such as patches and gums. (10)

Once an individual has successfully stopped smoking and overcome their nicotine dependence, the health benefits they can experience include reduced risk of cancer, heart attacks and heart disease, stroke, and reduced blood pressure. It has been shown that 20 years after smoking cessation, an individual's risk of developing oral cancer drops to that of someone who has never smoked. (11)

As well as this, children of parents who stop smoking are less likely to take up smoking themselves. Studies looking into the causes of nicotine addiction show that children who have regular contact with people who smoke, such as parents, guardians, or friends are more likely to smoke themselves. As a result, reducing the number of people who smoke and vape can drastically lower the number of children and teenagers who start smoking and vaping themselves. (12)

Smoking also has an economic effect on people who smoke. The most recent tobacco tax increase in December 2023 has caused the price of a pack of 20 cigarettes to rise to £15.67, more than double what it would have cost in 2012, meaning that someone who smokes 20 cigarettes a day would spend £5,719.55 in a year. This would cover the cost of the average energy bill for a three bedroom house for two years. The average take home pay in the UK according to the Annual Survey for Hours and Earnings in 2023 is £27,573 per year, meaning that a person who smokes 20 cigarettes a day spends 20p of every pound they earn on cigarettes.

Historical Context

The UK government has made multiple attempts to combat and reduce smoking prevalence in the UK over the last 20 years. In 2007, the legal age for the sale of tobacco products was raised from 16 to 18, which led to a reduction in the prevalence of childhood smoking. In 2006 the rate of 11 to 15 year olds who smoked was 9%, whereas of 2018 that figure was 2%. (12)

In July 2007, a smoking ban was imposed in England prohibiting the smoking of cigarettes in workplaces, pubs, restaurants, and other enclosed public spaces. Research from the British Medical Journal suggested that in the year following this ban, there were 1,200 fewer hospital admissions from heart attacks, with improved air quality and fewer people smoking cited as having the most impact on this reduction.

On 6 April 2012, the display of tobacco products was banned in shops that were larger than 280 square metres (3000 square feet). This was extended to include smaller retailers on 6 April 2015. In 2015 the House of Commons voted to pass the Children and Families Act 2014, giving the UK Government the power to require plain packaging for tobacco products.

Data suggests that these efforts have had the desired impact as the smoking rate across the UK has decreased dramatically from 24% of adults in 2005 to 12.9% in 2022. (13, 14)

At the time of writing, the UK government has announced plans to introduce legislation to regulate the display, packaging, and flavours of vapes to address the issues surrounding the marketing of vapes towards children. A ban on disposable vapes has also been announced, enforced by Trading Standards, to tackle the environmental impact of single use vapes and discourage children from vaping, as a large majority of children who vape primarily use disposable vapes. (15)

On 4 October 2023, the UK Prime Minister announced plans to create a smoke free generation by introducing legislation to ensure that the legal age to buy tobacco will rise by one year on 1 January 2027,

and every year thereafter, meaning that people aged 14 today will never be able to legally buy tobacco products. (16)

Smoking in Bexley

The 2022 Annual Population Survey (APS) estimated that 12.7% of those aged 18 and over in England were current people who smoke, which is made up of 14.6% of all adult males and 11.2% of all adult females. In Bexley, the overall prevalence was 13.5% which would equate to 25,618 Bexley residents, with the borough following a similar trend of higher rates of smoking amongst males, with 14% of adult males compared to 12.9% of adult females. (17)

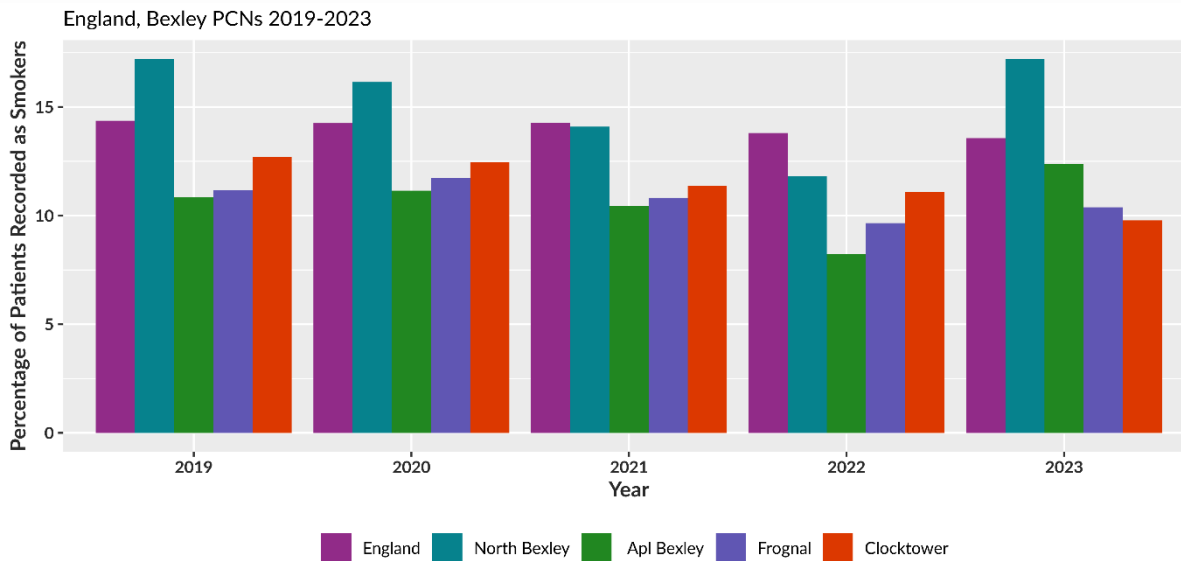
Figure 1 - Percentage of Bexley's population over the age of 18 who are registered as smoking (ONS APS)



Source: ONS Annual Population Survey

Figure 1 shows APS data comparing smoking prevalence in Bexley to the national average between 2012 and 2022. Bexley had a period of 7 years of low smoking rates compared to the national average. Bexley's rate began to increase in 2018, and in 2019 rose just above the England rate for the first time. The statistics for Bexley and England remained similar until 2022 when Bexley's rate began to rise even further.

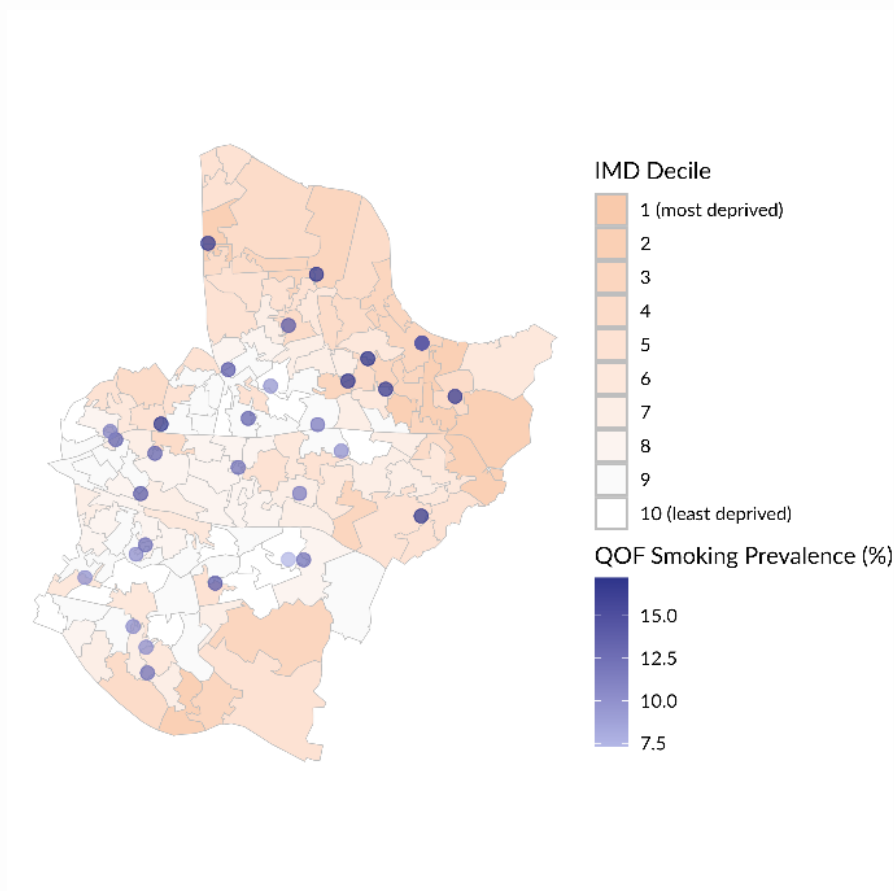
Figure 2 – Percentage of patients registered to GP surgeries who are recorded as smoking by PCN (GPPS)



GP practices in Bexley are split into 4 Primary Care Networks (PCNs); Frognal, Clocktower, North Bexley, and Apl Bexley. There are 248,059 people registered to GP practices in Bexley. North Bexley is the largest PCN with 102,750 patients registered to its surgeries, which is 41% of Bexley's registered patients. Data from the 2023 GP Patient Survey (GPPS) presented in Figure 2 estimates that 17.2% of North Bexley's registered patients are currently smoking, equivalent to 17,673 people. This is a much higher rate than the 3 other PCNs, which have estimated smoking rates of: Clocktower, 9.8% (5,018 people); Apl Bexley, 12.4% (4,843); Frognal, 10.4% (5,726). This would mean that over half of people who currently smoke in Bexley are registered to GP practices in North Bexley.

Figure 2 further shows that in 2023 the estimated prevalence of current people who smoke registered to North Bexley PCN has returned to a level above the England average, having previously trended downwards between 2019 and 2022. Apl Bexley PCN and Frognal PCN show a similar uptick in 2023, whilst Clocktower PCN continues to decrease in estimated prevalence.

Figure 3 – Percentage of recorded people who smoke by GP surgery against areas of relative deprivation in Bexley (IMD, QOF)



Higher smoking prevalence is linked with deprivation and marginalisation. In the UK, smoking is more common among those with a mental health condition, lower income, and fewer or no qualifications, as well as in people who are unemployed, homeless, lone parents, or are in contact with the criminal justice system. Figure 3 compares the smoking prevalence at each of Bexley’s GP practices as recorded on patients’ GP records, with the level of deprivation affecting the surrounding area. Here, deprivation is calculated using 39 social indicators including, but not limited to, income, employment rates, level of education, life expectancy, crime rate, housing affordability, and average distance to schools, post offices, supermarkets, and GP surgeries. As can be seen in Figure 3, GP surgeries with higher rates of smoking are generally situated within the areas of higher relative deprivation, which is consistent with the national evidence.

It is important to note that whilst people registered to a particular GP surgery tend to live in the area surrounding the practice, there is a small proportion of people who live further from their GP, including those that live outside the borough.

Vaping

Despite a decreasing rate of tobacco and cigarette smoking in the UK, there has been a rapid rise in the number of people who are using e-cigarettes and vapes including a younger demographic due to the varied flavours used in these products. Although the levels of nicotine that are present in these products can vary widely, it is usually significantly less than the amount delivered through smoking traditional tobacco products. A vast majority of published research into the short-term effects of vaping suggest that it is much less harmful than smoking, although it is not risk free and is only recommended for adults who are trying to quit smoking and stay smoke free.

Unfortunately, at the time of writing, there is little to no data at a local authority level regarding vaping. As well as this, there is also short supply of research into the long-term effects of vaping. For this section, we will be looking at national figures and use them to model best estimates for Bexley to try to gain some perspective on the problem at hand.

Children

A report published in 2023 by Action on Smoking and Health (ASH) showed that in March/April 2023, the proportion of children (aged between 11-17 years old, unless otherwise specified) experimenting with vaping had grown by 50% year on year, from 7.7% to 11.1%. Children's awareness of vaping has also increased, with more than half of all children reporting seeing vapes and e-cigarettes being advertised and sold in shops. Only 20% of children say that they never see vapes promoted; in 2022 that figure was 31%.

In 2020, ASH reported that 13.9% of children had tried vaping. Since then, that figure has continued to rise steadily over the next two years to 15.8% in 2022. In 2023 it was reported that there was a spike in the number of children who had tried vaping at least once, jumping to 20.5%, which would be the equivalent of 4,434 children in Bexley between the ages of 11 and 17, with many of those further reporting that they vape regularly.

More than half of all children who have never smoked reported that they vape 'just to give it a try' and around 20% say they do it to 'join in with others.' The proportion of children saying they vape just to give it a try has declined since 2022, while those saying they do it to fit in has risen. Of those who had a history of smoking, 21% said that they vape because they like the flavours, a sentiment shared by 12% of people who have never smoked, a figure that is relatively unchanged since 2022.

This year marks the first time that children have begun to report the false understanding that vapes are about the same or more harmful than smoking, including nearly half of those who have tried vaping. (18) This information suggests that children believing that vaping is harmful does not impact their willingness to try vaping.

The most frequent source of vapes for young people is vape shops, (48% of respondents), with almost as many (46%) responding that they are given vapes by other people. The most frequently used devices are disposable or single use vapes which have seen an increase in usage from 7.7% in 2021 to 69% in 2023, a nearly tenfold increase in just 2 years.

Adults

The proportion of adults using e-cigarettes and vapes in 2023 was 9.1%, the highest proportion ever recorded which is equivalent to 17,269 adults in Bexley. Of those, 56% (equivalent to 9,671 Bexley

residents) are people who used to smoke but who now only vapes, 37% (6,390) are people who currently both smoke and vape, and the remaining 7% (1,208) have never smoked but have taken up vaping.

The most common reason that people who smoke use vapes is to help them to quit smoking and remain smoke free, with over half of people who used to smoke but now currently vape saying that the use of vapes and e-cigarettes helped them to quit smoking or prevent relapse. Other reasons given by people who used to smoke for vaping are that they enjoy the experience, and they save money by vaping rather than smoking. In the group of current people who smoke who also vape, over a third have stated that they use vaping to help cut down on smoking or to try and quit smoking for good. Most people who have never smoked say that they vape because they enjoy the experience or just because they want to give it a try.

The perceptions of harm in adult vape and e-cigarette users somewhat resembles that of the figures seen with young people. 40% of people who smoke incorrectly believe that vaping is about the same or more harmful than smoking, a figure which has been increasing since 2021. A third of people who smoke understand that vaping is less harmful than smoking, but less than 10% correctly identified that it is much less harmful. People who used to smoke showed the most accurate perception of the harms of vaping, with 75% saying that it was much less harmful than smoking.

The most commonly used type of e-cigarette device used among adults is a refillable tank system, with 50% of current vape users reporting this as their main use device. However, disposable vapes have become more popular each year, with 31% of vapers mainly using single use vapes in 2023, which has massively increased from just 2.3% in 2021. Disposable vapes are most commonly used by young adults, with over half of 18 to 24-year-olds using disposable vapes as their main device in 2023.

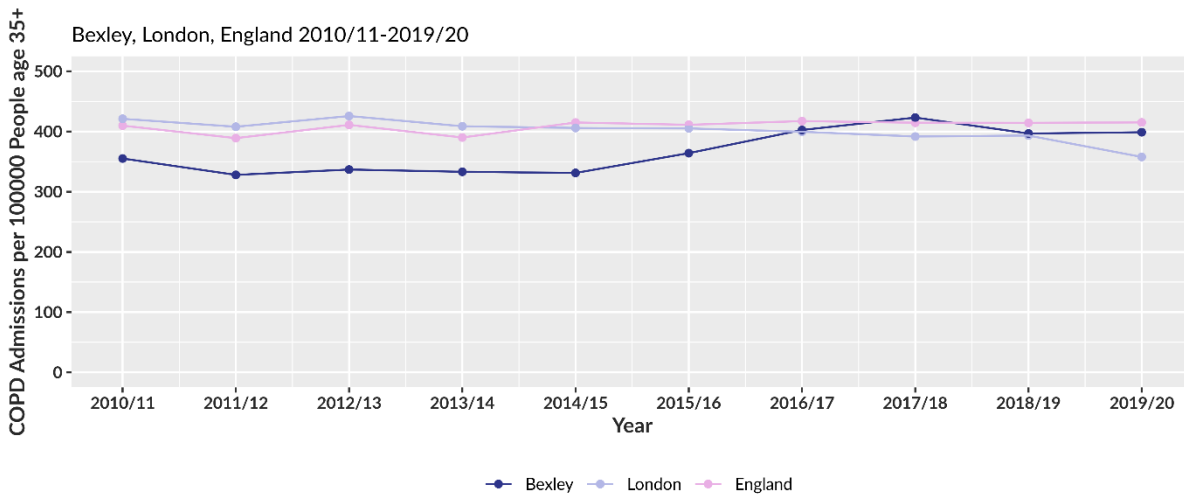
Not all people who smoke have tried vapes for several reasons; not wanting to swap one addiction for another, feeling that they are not addicted to smoking, they do not need help to quit, and safety concerns or lack of knowledge about the devices. (19)

Smoking-related Illness and Death

The most recent data from 2020 shows that Bexley sits above the London average of 1,152 people per 100,000 being admitted to hospital for smoking attributable conditions with Bexley's figure of 1,267 people per 100,000 nevertheless below the England rate of 1,398 people per 100,000.

Lung cancer and chronic obstructive pulmonary disorder (COPD) statistics can be used as proxy measures of smoking related harm within a population. Indeed, nationally in 2019/20, 77% of hospital admissions for trachea, lung, and bronchus cancers were attributable to smoking, as were 84% of admissions for chronic obstructive lung disease. In Bexley, 504 people were living with and beyond lung cancer between 2017-2019, a higher incidence than both London and England, possibly indicating a higher burden of smoking related harm. Moreover, the rate of hospital admissions for chronic obstructive pulmonary disease (COPD) in Bexley began increasing in 2014/15, overtaking the London average and maintaining this position up until the most recent data point in 2019/20.

Figure 4 – Number of emergency hospital admissions for COPD per 100,000 people aged over 35 in Bexley.



Support For People Who Smoke in Bexley

In 2020, Bexley published the Tobacco Control Plan with the aim to help more people who smoke quit, as well as to ensure effective and consistent messaging around tobacco control. The plan aimed to reduce smoking rates by encouraging more people who smoke to quit by using vaping as a way out of cigarette smoking, as well as offering free services to people who smoke in social housing and pregnant women. As of 2023, this has been commissioned by the GP Federation in Bexley.

Bexley residents can speak to their GP about getting help and support on their journey to quitting. They will be directed to the Smoke Free Bexley service where the referral team will prioritise each patient on a case-by-case basis. Priority groups are pregnant people who smoke, those with long-term health conditions, and people referred via acute services such as patients with cancer, chronic lung conditions and respiratory issues, mental health, and advanced life limiting conditions. Patients will then be offered a telephone consultation to be assessed with the offer to sign up to a programme of support. Anyone who joins the programme will be provided with medication to help alleviate any cravings. Over the next 12-week period, the Smoke Free Bexley team will conduct regular weekly check ins.

The Smoke Free Bexley Team also work with midwives at local hospitals to offer the stop smoking services to people who currently smoke in the early stages of pregnancy. Between April and September 2023, 29 pregnant women set a quit date with a 48% success rate. Those who were unsuccessful in their attempt to quit at this time will remain within the system so that further attempts can be made to offer the service, until such time that either they are successful, or they request that they are removed.

Table 1 – Percentage of mothers who still smoke at the time of giving birth.

Period	Region			
	Bexley		London	England
	Number	%	%	%
2012/13	287	9.8	5.8	12.8
2013/14	334	10.5	5.2	12.2
2014/15	232	8.2	5.1	11.7
2015/16	235	8.3	5.1	11.0
2016/17	207	7.5	4.9	10.7
2017/18	223	8.0	5.0	10.8
2018/19	201	7.6	4.8	10.6
2019/20	189	7.0	4.8	10.4
2020/21	117	4.5	4.6	9.6
2021/22	111	4.3	4.5	9.1
2022/23	116	4.5	4.6	8.8

Source: Calculated by OHID from the NHS England return on Smoking Status at Time of Delivery (SATOD)

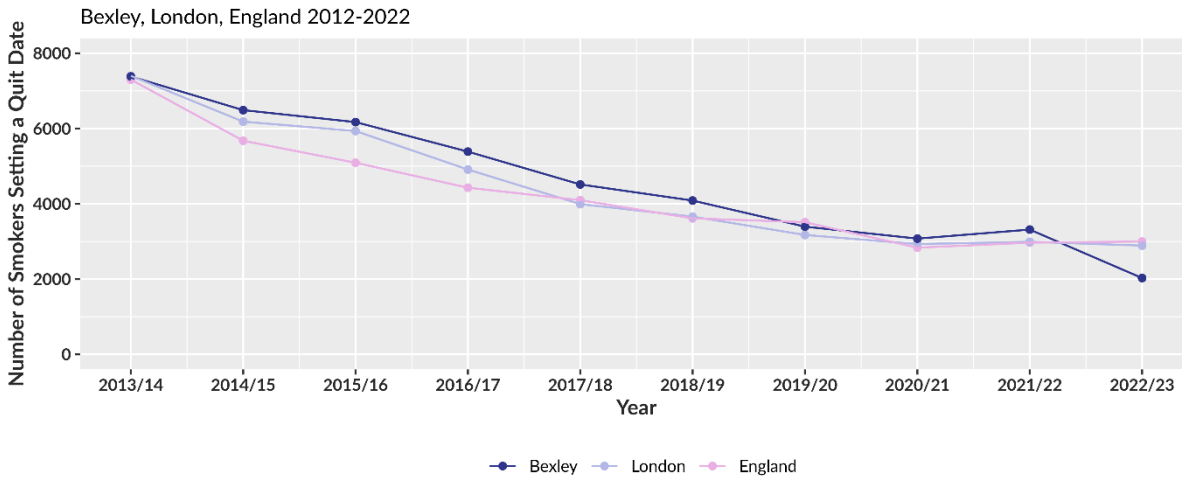
The work done by midwives with Bexley residents has shown a consistent effect, as between 2012 and 2023 the percentage of mothers who still smoke at the time of delivery in Bexley has been steadily decreasing and remains well below the national average figure. In 2023, 4.5% of mothers in Bexley were people who smoke at the time of delivery, very similar to the 4.6% of London mothers, but well below average when compared to the 8.8% figure reported for England as a whole.

Other patients registered to a Bexley GP outside of the priority groups can also use the service, through GP or self-referral, however this generally means a longer wait time for full access to the service. The Smoke Free Bexley team will also offer free advice on stop smoking medications that can help improve the chances of quitting for good. They are also able to direct patients to local vape shops and help support them in using vaping as a valuable tool to help them quit.

Between 2021 and 2023, NHS Digital data shows that on average 94.6% of recorded people who smoke over the age of 15 who are registered to Bexley GP surgeries have been offered access to these interventions. In 2012/13, the equivalent figure was 85.5%, showing that Bexley stop smoking services have increased engagement with known people who smoke over the last decade by over ten percentage points.

Since its peak in 2012, there has been a national decline in the number of people accessing stop smoking services. The number of people who smoke who set a quit date more than halved between 2012 and 2017, a trend that continued over the next three years in Bexley. The Nuffield Trust have postulated that this may reflect reduced smoking prevalence in the population but may also be due to increased use of e-cigarettes.(20)

Figure 5 – Number of people who smoke who have set a quit date for every 100,000 people who smoke in Bexley.

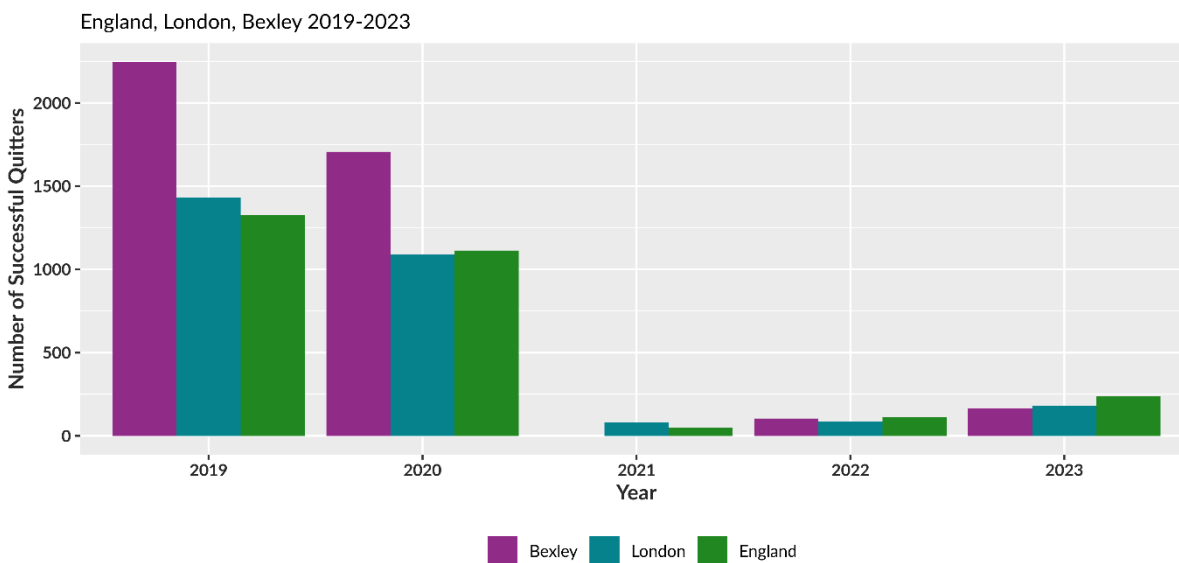


Source: NHS Digital Stop Smoking Services

Figure 5 shows in 2020, 947 Bexley residents set a quit date which is equivalent to a rate of 3,394 people per 100,000 smokers, higher than London’s average of 3,173 people per 100,000 but slightly lower than the national average of 3,512 people per 100,000.

Data shows that 193 people in Bexley set a quit date between April and September 2023, with 82 of those being males and 111 being females. Of these, 51 males (62%) reported that they had successfully quit, with 13 status unknown, and 57 females (51%) reported successfully quitting, while 31 are status unknown. The remaining 41 people were unsuccessful with this attempt to quit.

Figure 6 – Number of people who are validated as having quit smoking after 4 weeks via Carbon Monoxide test.



Source: Risk Factor Intelligence, Public Health England

Figure 6 shows that the rate of people who smoke in Bexley that have successfully remained smoke free after 4 weeks (CO validated) was consistently well above the national average before the Covid-19 pandemic. This corresponds with a period during which nicotine replacement prescriptions were also issued in Bexley at a much higher rate than the London and national averages. In 2018, for every 100

people who smoke in Bexley, approximately 16 prescriptions for nicotine replacement products were given out whilst the average figure for London was 11, and 12 in England.

Despite this, as shown in Table 2, Bexley has consistently been below the average spend per quitter. The average amount spent by Bexley Smoke Free services for each person that successfully quit over the 7-year period from 2013 to 2020 was £360.85, where the average service spend across London was £471.14 per quitter and £452.57 across England in the same period. In 2020, Bexley spent £150 less than the London average for each person that quit smoking, despite having almost 600 more people recorded as successfully having quit.

Table 2 – Average amount spent for each person who quit smoking in Bexley.

Period	Region			
	Bexley		London	England
	Total (£)	Average Per Quitter (£)	Average Per Quitter (£)	Average Per Quitter (£)
2013/14	241,829	183	297	283
2014/15	330,998	313	417	420
2015/16	360,000	359	479	479
2016/17	316,441	455	481	493
2017/18	241,000	428	559	519
2018/19	202,000	366	493	490
2019/20	235,000	422	572	484
2020/21	252,000	472	513	522
2021/22	254,000	515	685	584
2022/23	247,067	824	613	607

Source: NHS Digital – Statistics on NHS Stop Smoking Services, England

Bexley's Plans and Initiatives

Smoke Free Bexley

In December 2023, Bexley commissioned the GP Federation to take over the Smoke Free Bexley service. The commissioning process ensured that the service was picked up and delivered in the same way as it had been previously, and that the same level of aid is still offered to Bexley residents. As the crossover period begins to come to an end, the GP Federation has begun to expand its workforce in order to offer a greater range of services to our local communities. More face to face sessions will be able to take place in GP surgeries, which will allow for a closer working relationship between the service and GP's, further aiding those who need nicotine replacement medications. Additional access points have also been planned in the north of the borough for 2024/25, with the GP Federation having requested 1,000 vapes to be freely provided to those who require help to quit in the areas of highest smoking prevalence.

0-19 Children's Public Health Service

The updated Bexley 0-19 service specification (commencing February 2024) has incorporated a dedicated section on Smoking Cessation, highlighting the fact that addressing smoking in the home should be one of the key roles for Health Visiting Teams. Health visitor staff are trained in NCSCT VBA (National Centre for Smoking Cessation and Training - Very Basic Advice), and this will be regularly reviewed and updated as required. The promotion of smokefree homes starts from the first visit after the birth of a baby, at which time the Health Visitor will ask if there are any people who smoke in the household and signpost or refer them to smoking cessation services as necessary. Health Visitors will work with a family from when the child is 10-14 days old up until they are 5 years old, at which point the school nursing service takes over. School nurses support schools to undertake an annual school health profile which collects data on the number of students with asthma or other conditions that may be worsened by people who smoke at home, as well as gauging how many students smoke themselves. They can use this data to determine whether extra informative sessions from external services should be provided to students in PSHE lessons or assemblies regarding stop smoking services. This data will be further enhanced by the introduction of the School Health Education Unit (SHEU) survey from May 2024 which will collect a range of self-reported health information from students in Year 10, including information on smoking and vaping.

Adult Substance Misuse Service

All service users engaged with Bexley's Adult Drug and Alcohol Treatment Service, The Pier Road Project, are screened for their smoking status. The clinical note system used by the provider is set up to generate referrals to Bexley's stop smoking service. New guidance requires substance misuse services to also screen for smoking and Bexley's service already has this in place. Bexley's substance misuse partnership is focussing on training and upskilling the wider workforce in 2024/25 to increase the identification and referral of those using drugs and/or alcohol. An increase in referrals will also ensure increased access to stop smoking support for those who are also smoking. A new specification for Bexley's adult substance misuse treatment service is currently being prepared and it will include further detail on the expectations for the service in supporting service users to give up smoking.

Smokefree School Gates

School Superzones have been implemented by many London boroughs to protect children's health and enable healthy behaviours at a young age, addressing health inequalities issues in the areas around schools. In 2022, Bexley became the first London borough to include any type of tobacco control measures in their School Superzones Scheme, proposing the implementation of voluntary smoke free school gates. Smokefree gates prohibit smoking throughout all the school grounds, outside and around the school gates,

and sports fields at all times. The aim is to protect children, parents, and staff from exposure to second-hand smoke, to support de-normalising smoking, and reduce smoking litter. The policy is voluntary, and schools are provided with tools to engage with staff, parents, and the wider school community in the development of and adherence to the policy. These are unenforced areas in which it is heavily suggested that smoking does not take place, leaving the responsibility on parents and guardians to keep second hand smoke away from children. The scheme has been piloted in partnership with 2 schools in Bexley so far, with the posters due to be put up later this year, which has prompted another school to get in contact requesting information on the programme. Bexley has produced a 'Smoke Free School Gates Toolkit' for schools which outlines how to write and implement a smokefree school gates policy. Piloting the approach in School Superzones schools has provided useful learning that will inform how the project could be rolled out to other schools in the borough.

Making Every Contact Count

Starting in 2024/25, there will be a renewed emphasis on the benefits of making every contact count (MECC), embedding the message around tobacco control and smoking cessation throughout the Bexley system. By collaborating with partners in the voluntary sector and health care system, we aim to raise the profile of MECC and provide appropriate training for front line staff, so that they are able to signpost our smoking cessation services and spread our tobacco control message through every daily interaction with our residents.

Recommendations

Taking account of the smoking profile of Bexley and the rapidly changing landscape for managing appropriate vaping, it is important for all partners across Bexley to bring together our existing resources and levers to further reduce smoking and improve the lives of our residents. I recommend the following actions:

- Residents in Bexley who want to quit smoking should reach out to services and sources of support. <http://www.smokefreebexley.co.uk/home>
- Partners across the health and care system in Bexley should function as pioneers of good practice and consider what further measures can be taken to further reduce smoking in their local workforce.
- Health care partners should review policies which preclude smoking in and around public buildings and reduce visible smoking, developing clear policies on vaping.
- Reform the Bexley Tobacco Control Delivery Group and review the Tobacco Control Plan for Bexley 2020.
- Ensure that Bexley remains flexible in its approach to smoking cessation and tobacco control in order to comply with changing legislation, guidance, and funding pathways.
- Use all our engagement with residents, partners, and businesses as a basis to better support residents to live happier and healthier lives by making every contact count 'MECC.'
- Encourage commissioners across the local health and care system to consider measures that they can take through the development of new service specifications and recommissioning to reduce smoking, including the provision of smoking cessation training for frontline workers.
- Work across local partnerships to consider our approach to smoke free places in Bexley.
- Public Health to increase engagement, communication and campaign opportunities and give residents the information, tools, and support to enable them to quit.

- Build our local intelligence regarding smoking prevalence to allow our efforts to be focused on supporting residents who experience the starkest health inequalities in Bexley and enable improved signposting to stop smoking services.
- Ensure a whole system approach to planning, training, and referral pathways between local statutory and voluntary agencies that deal with other substance misuse and addictive behaviour issues.
- Ensure our NHS health check programme continues to be a mechanism for referrals to stop smoking support and that all health and wellbeing programmes in Bexley include a smoking cessation referral pathway.
- Continue to work with trading standards and enforcement agencies to ensure that illegal tobacco products are removed from sale and that vaping products are not available to children.
- Ensure that the approach to tobacco and vaping control takes account of current and future legislation, and we continually review and adapt our policies and actions.

Conclusion

Considering Bexley's current smoking trajectory, it will take the joint efforts of Bexley's Public Health team, Health Care partners, the Voluntary Sector, and those in all areas of the Council to support the call to action and reverse the trend. Bexley will welcome and support new measures and legislation put in place on a national scale to curb the popularity of tobacco products and create a smokefree generation. All the while, we will continue to pursue an innovative, methodical, and whole system approach to help tackle smoking in Bexley.

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