



## **Tobacco Control, Inequalities in Health and Action at the Local Level in England**

- Smoking is the single most important cause of premature death and inequalities in health in the England.
- Much is known about how to reduce adult smoking, but few reviews and studies have looked at the equity impact of tobacco control interventions.
- Increasing the price of tobacco has the strongest evidence for reducing inequalities in smoking at the population level. Combined behavioural and pharmacological cessation support can reduce inequalities at the individual level if effectively targeted at low socio-economic status (SES) smokers.
- Evidence for the equity impact of other interventions is more equivocal, negative, insufficient or unavailable.
- Overall, smoking rates declined between 2001 and 2008, particularly among the more affluent. The decline appeared to result from an increase in never smokers rather than an increase in quit rates.
- Since 2008, there is evidence to suggest that quitting and quit attempts have declined nationally.
- However, smoking prevalence remains higher and quit rates lower, in low SES compared to high SES groups, and in Northern regions of England, where levels of disadvantage are higher.
- Those leading tobacco control strategy at regional or local level rely on nationally produced reviews and summaries of research evidence to inform policy and practice, and also informal networks to share good practice.
- Tobacco control leads regard local data on smoking and its health, social and economic impacts as vital for planning and supporting tobacco control initiatives aimed at reducing inequalities. These data need to be accessible, reliable, up-to-date and available at local (ward) level and collected year on year to enable services to demonstrate the effectiveness of their work.
- The move of public health to local authorities and GP consortia raises new challenges for local tobacco control and the supporting data and evidence that are required.

## Details of the research team

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