

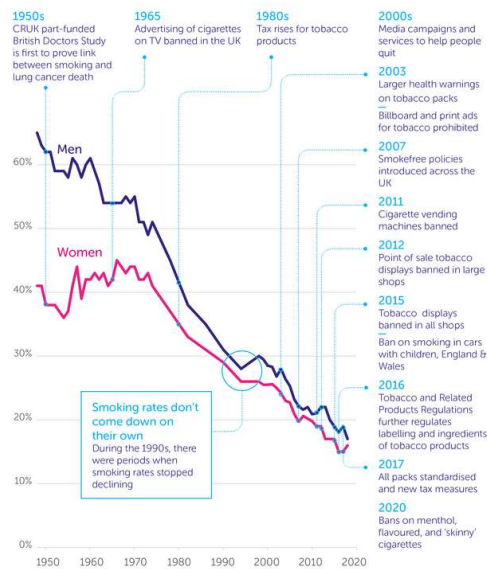
Supporting smokers to stop: Who needs the most support to stop and what works best?

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Smoking prevalence in general

Smoking rates decline with action

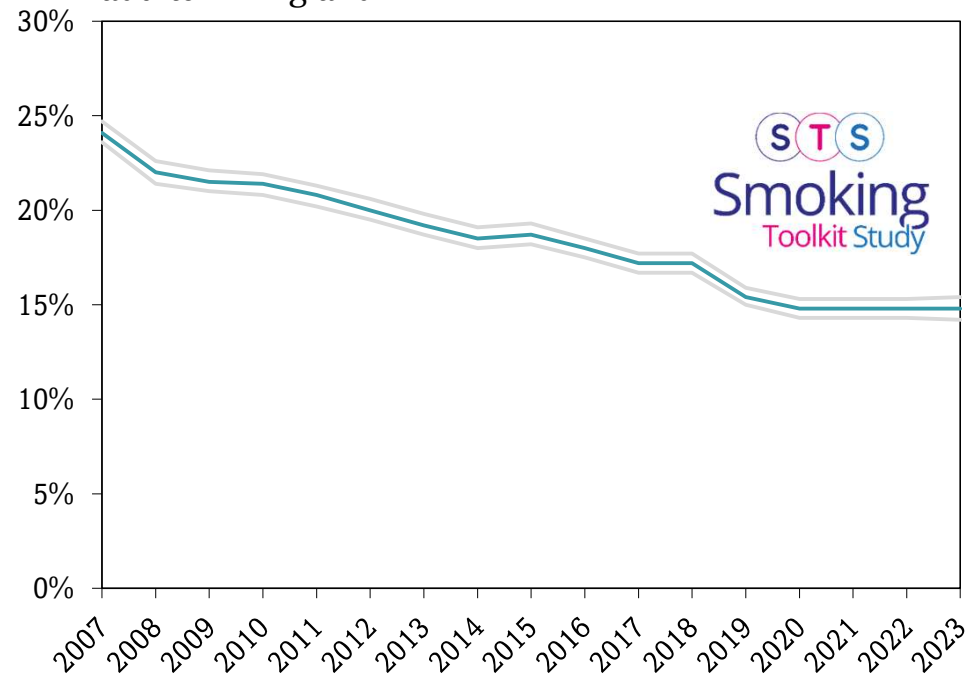


Sources: Data for 1948-1973: PN Lee Statistics and Computing Ltd. International Smoking Web Edition. Available from <http://www.pnlee.co.uk/ISS.htm>. Accessed October 2019. Data for 1974 onwards: Office for National Statistics. Adult smoking habits in Great Britain. Accessed October 2019.

cruk.org
Together we will beat cancer



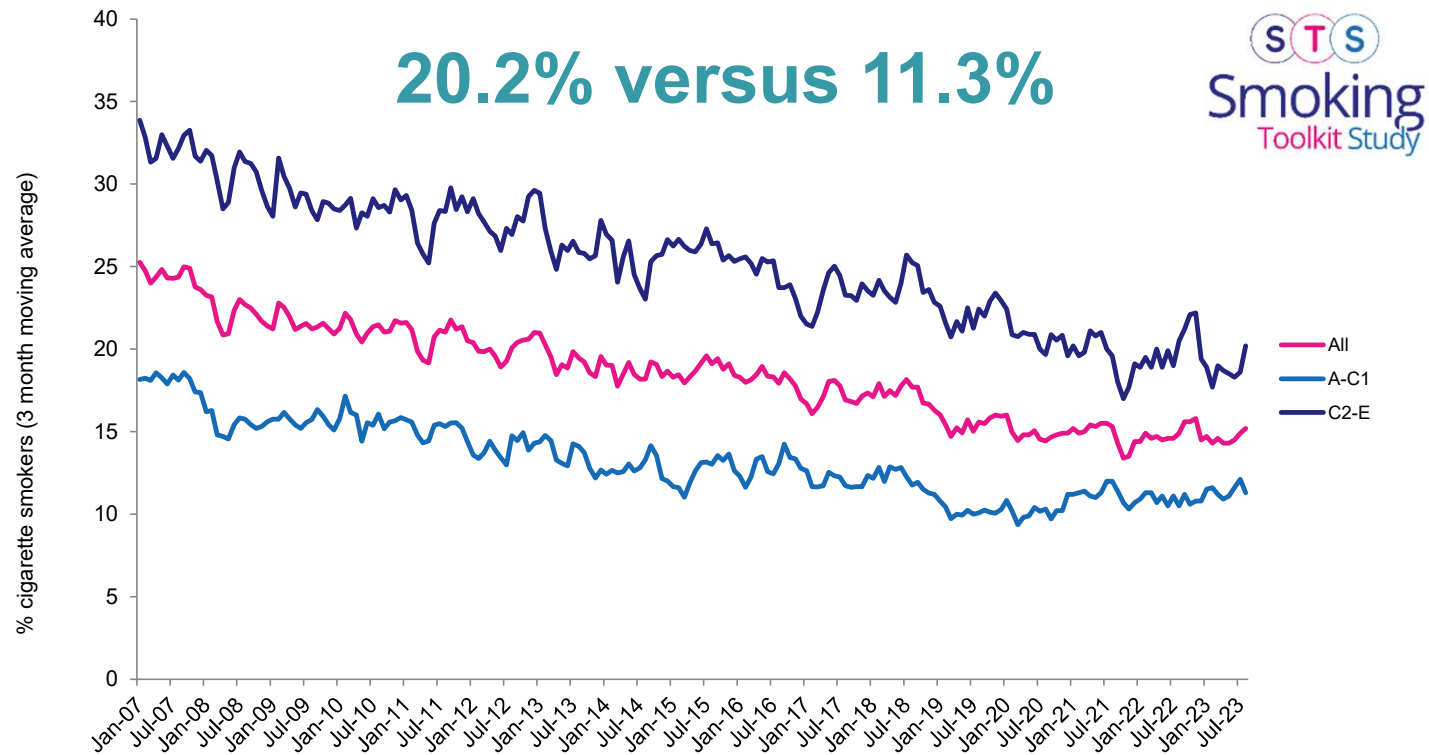
Prevalence of current cigarette smoking among adults in England



<https://www.cancerresearchuk.org/health-professional/cancer-statistics/risk/tobacco>

<https://smokinginengland.info/resources/latest-statistics>

Social grade

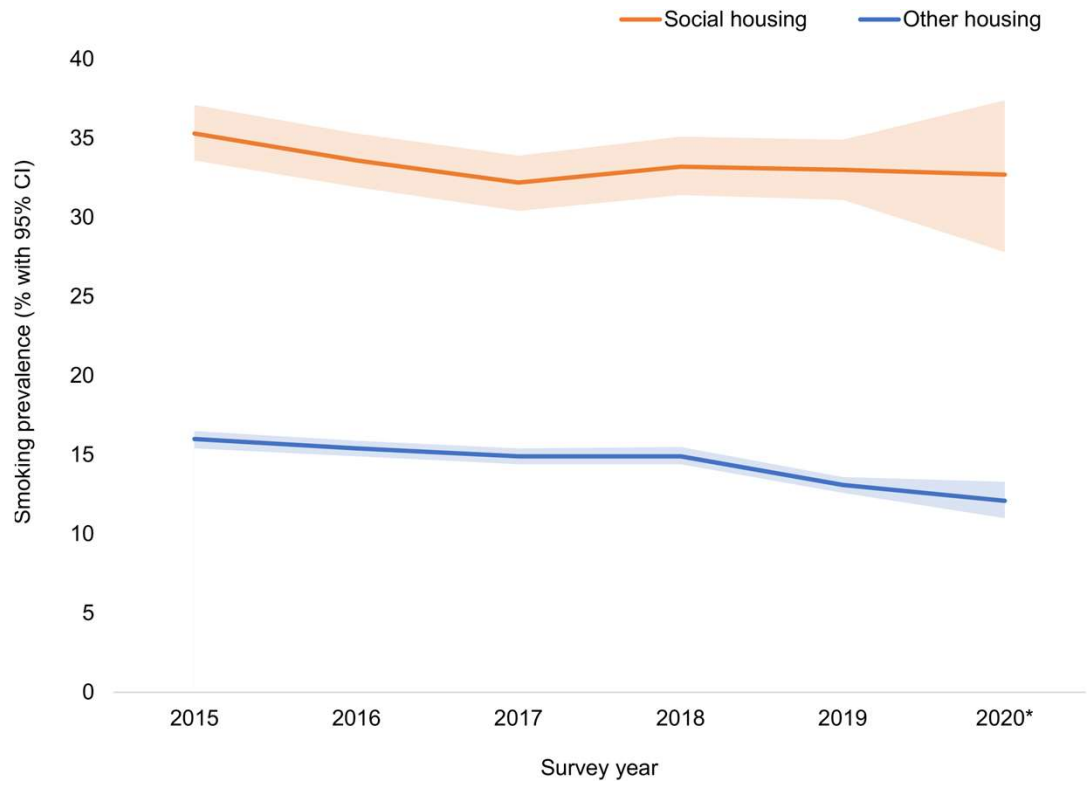


Housing status

Open access Original research
BMJ Open Smoking in social housing among adults in England, 2015–2020: a nationally representative survey
Sarah E Jackson¹,^{*} Hazel Cheeseman,² Deborah Arnott,² Robbie Titmarsh,² Jamie Brown¹

Nicotine & Tobacco Research, 2021, 107–114
doi:10.1093/ntn/ntaa030
Original Investigation
Received August 16, 2019; Editorial Decision January 23, 2020; Accepted February 5, 2020
SRNT

Original Investigation
Independent Associations Between Different Measures of Socioeconomic Position and Smoking Status: A Cross-Sectional Study of Adults in England
Emma Beard PhD¹, Jamie Brown PhD¹, Sarah E. Jackson PhD^{1,2}, Robert West PhD¹, Loren Kock MSc¹, Sadie Boniface PhD^{2,3}, Lion Shahab PhD^{1,2}



33.5% versus 14.8%



Characterising smoking and smoking cessation attempts by risk of alcohol dependence: A representative, cross-sectional study of adults in England between 2014-2021



Claire Garnett,^{a,b} Melissa Oldham,^{a,b} Lion Shahab,^{a,b} Harry Tattan-Birch,^{a,b} and Sharon Cox^{a,b}

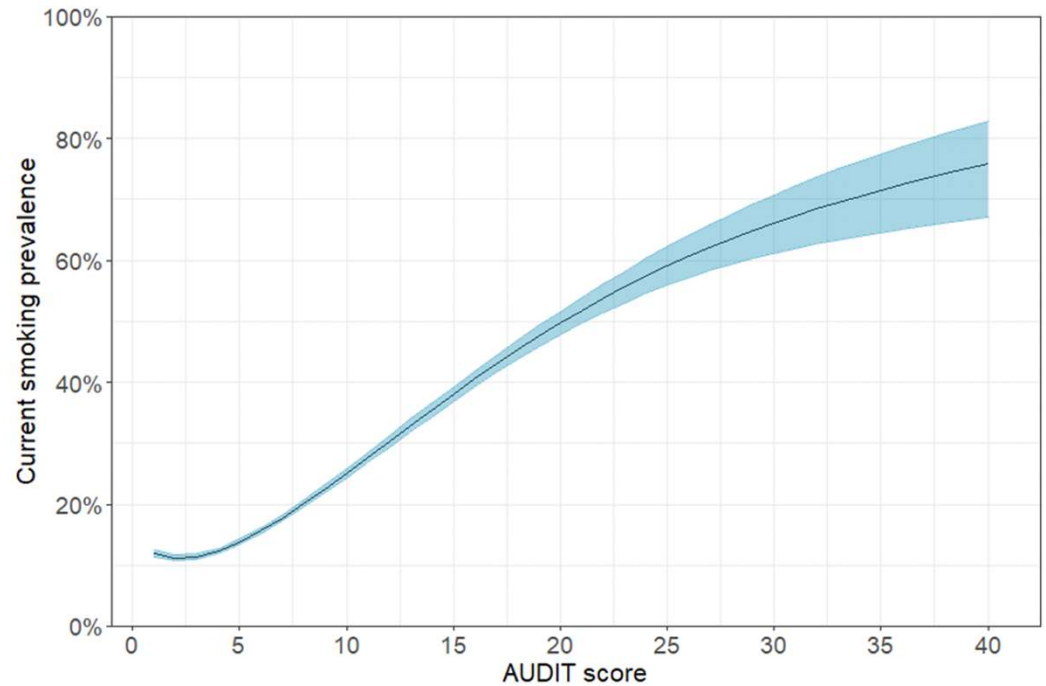
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^bSpectrum Consortium, London, UK

Summary

Background There is a strong shared association between smoking tobacco and drinking alcohol. This study aimed to compare smoking prevalence and smoking characteristics in drinkers who were versus were not at risk of alcohol dependence in England.

Methods We used cross-sectional data from a monthly, nationally representative survey of adults in England (weighted n=144,583) collected between 2014-2021. Smoking and smoking cessation attempt characteristics were regressed on to alcohol dependence (drinkers at risk versus not at risk), adjusting for survey year.

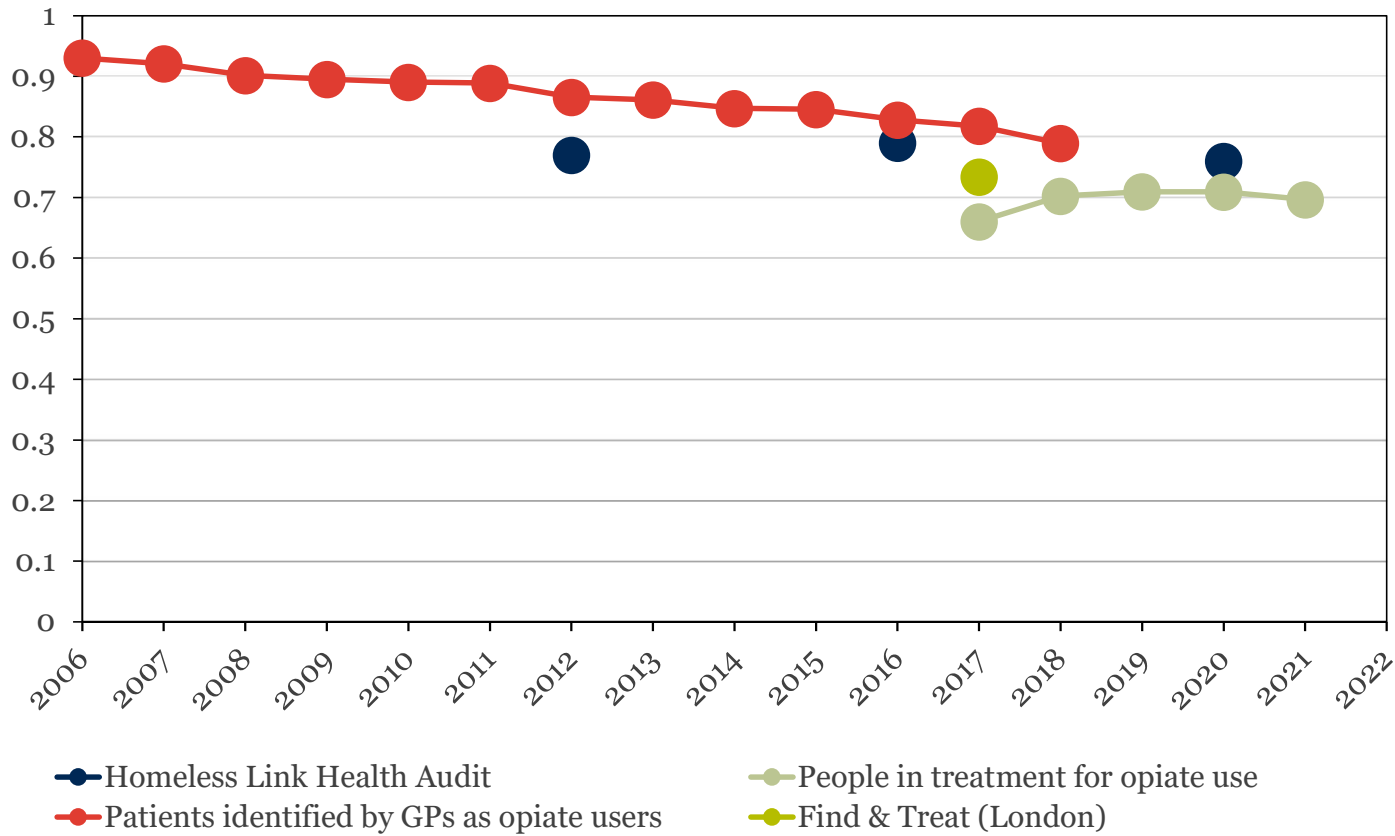
The Lancet Regional Health - Europe 2022;18: 100418
Published online 9 June 2022
<https://doi.org/10.1016/j.lanepe.2022.100418>



Current smoking prevalence was **57.9%** among those at risk of alcohol dependence



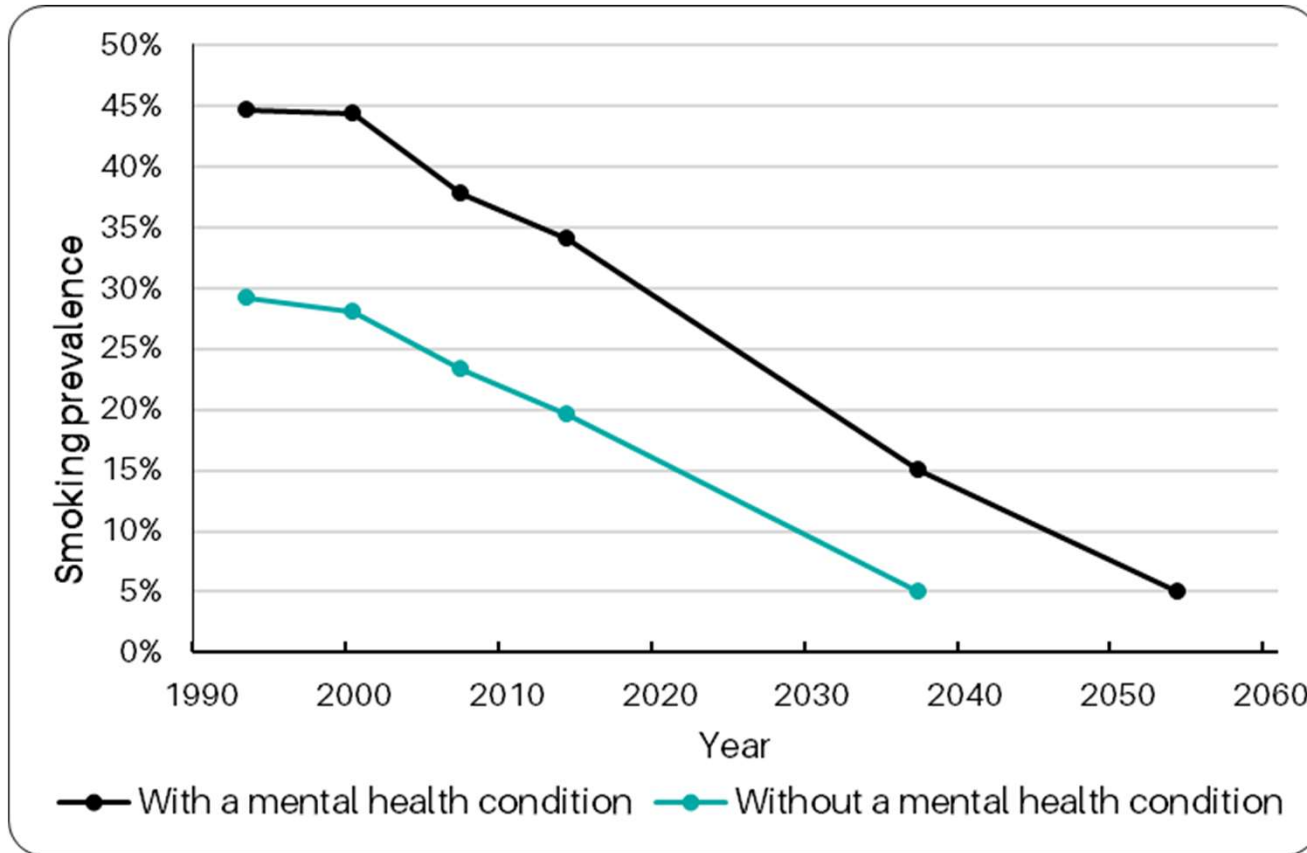
Inclusion health groups



Homeless Link Health Audit <https://homeless.org.uk/knowledge-hub/unhealthy-state-of-homelessness-2022-findings-from-the-homeless-health-needs-audit/>
Patients identified by GPs as opiate users [http://doi:10.1016/S2468-2667\(21\)00254-1](http://doi:10.1016/S2468-2667(21)00254-1)
People in treatment for opiate use
Find & Treat (London) <http://doi:10.1136/bmjopen-2018-025192>

20-year gap in securing smokefree goal

Projected rate of decline among smokers with & without a mental health condition



Richardson & Robson (2021) Adapted from Richardson et al (2019) Smoking and quitting behaviours by mental health conditions in Great Britain (1993-2014) Addictive Behaviours 90:14-10. Projected from data from Adult Psychiatric Morbidity Survey (2014)

Reasons why quitting is hard(er)

- Peer influence, family and friendship groups
- Social and cultural norms
- Availability
- Illicit market
- Feelings of stress reduction and enjoyment
- **Ability to cope with withdrawal within current lived environment**
- **Boredom**
- **Lack of support to quit**
- **Lack of opportunity to quit**

Quit attempts?

Characterising smoking and smoking cessation attempts by risk of alcohol dependence: A representative, cross-sectional study of adults in England between 2014-2021

Claire Garnett,^{1,2*} Melissa Oldham,^{1,2} Lion Shahab,^{1,2} Harry Tattan-Birch,^{1,2} and Sharon Cox^{1,2}

¹Department of Behavioural Science and Health, University College London, London WC1E 7HB, UK
²Spectrum Consortium, London, UK

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Open access

Original research

BMJ Open Smoking in social housing among adults in England, 2015-2020: a representative survey

...seman,² Deborah Arnott,² Robbie Titmarsh,²

✓ Motivation to quit
✓ Past-year quit attempts
✓ Some use of evidence-based support
✗ Lack of sustained quit attempts



Contents lists

Addict

journal homepage: www.elsevier.com/locate/add

A cross sectional survey of smoking characteristics from a sample of homeless adults in Great Britain

Lynne Dawkins^{1,*}, Allison Ford¹, Linda Bauld², Sema Bauld²

... & Tobacco Research, 2022, 690-698
<https://doi.org/10.1093/ntr/ntab211>
Original Investigation
... 7, 2021; Accepted October 8, 2021



OPEN ACCESS

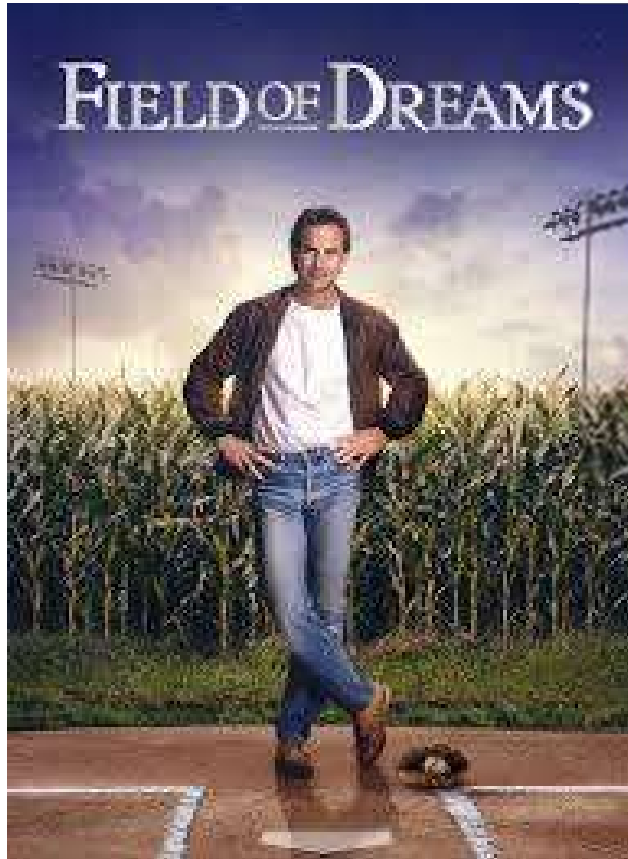
bmjmedicine

Burden and treatment of chronic obstructive pulmonary disease among people using illicit opioids: matched cohort study in England

Dan Lewer^{1,2}, Sharon Cox^{1,2}, John R Hurst^{1,3}, Prianka Padmanathan^{1,4}, Irene Petersen^{1,5}, Jennifer K Quint^{1,6}

Smoking and Quitting-Related Outcomes Among Adults With and Without Children in the Household 2013-2019: A Population Survey in England

Loren Kock PhD^{1,2,*}, Jamie Brown PhD^{1,2}, Lion Shahab PhD^{1,2,*}, Harry Tattan-Birch MSc^{1,2}, Graham Moore PhD^{2,3}, Sharon Cox PhD^{1,2,*}



*If you build it,
they will come!*

Received: 18 August 2021 | Accepted: 3 February 2022
DOI: 10.1111/add.15851

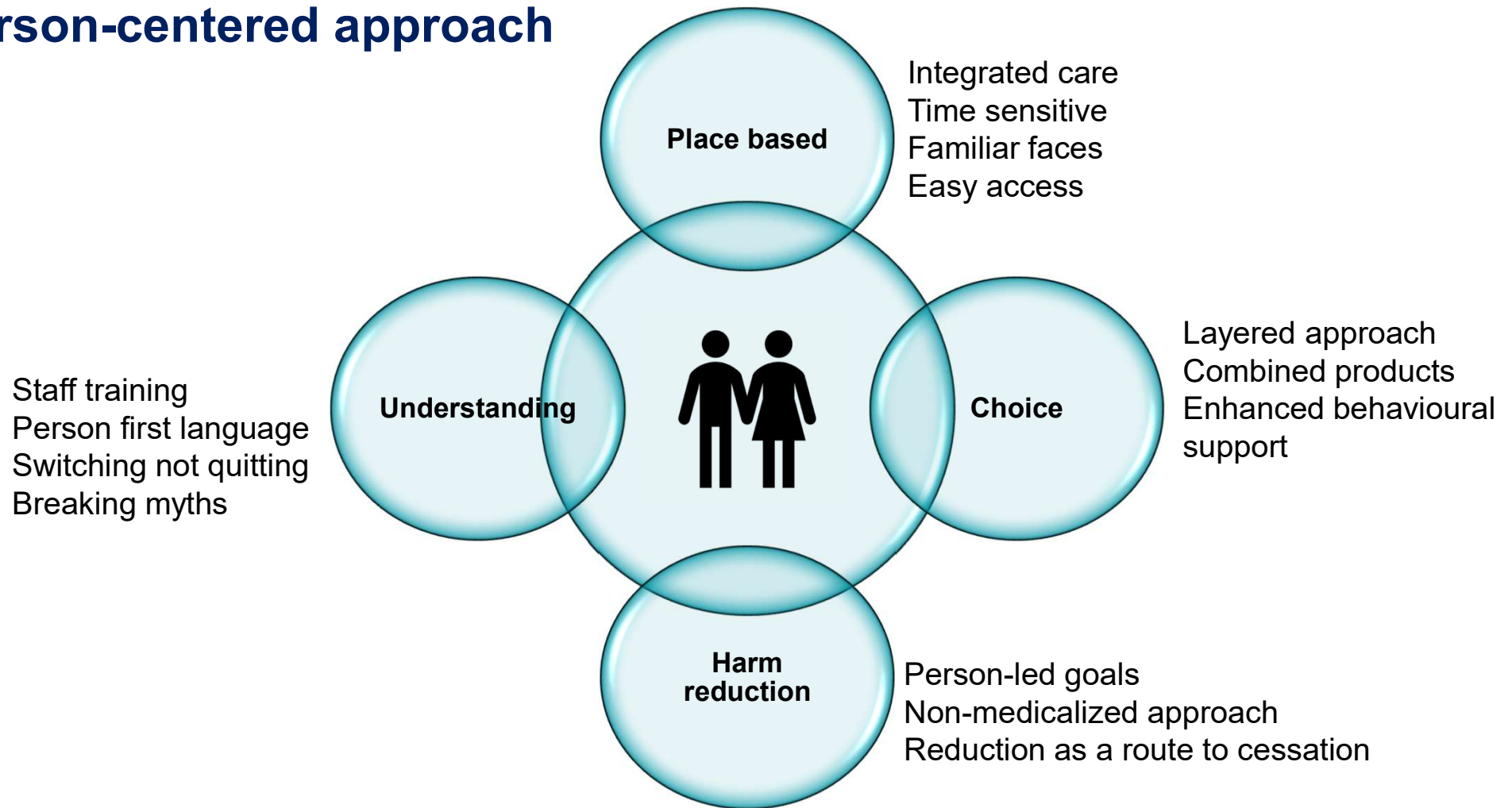
STUDY PROTOCOL ADDICTION **SSA**

Evaluating the effectiveness of e-cigarettes compared with usual care for smoking cessation when offered to smokers at homeless centres: protocol for a multi-centre cluster-randomized controlled trial in Great Britain

Sharon Cox^{1,2} | Linda Bauld^{2,3} | Rachel Brown⁴ | Matthew Carlisle⁵ | Allison Ford⁶ | Peter Hajek⁷ | Jinshuo Li⁸ | Caitlin Notley⁹ | Steve Parrott⁸ | Francesca Pesola^{2,7} | Deborah Robson^{2,10} | Kirstie Soar¹¹ | Allan Tyler¹¹ | Emma Ward⁸ | Lynne Dawkins¹¹

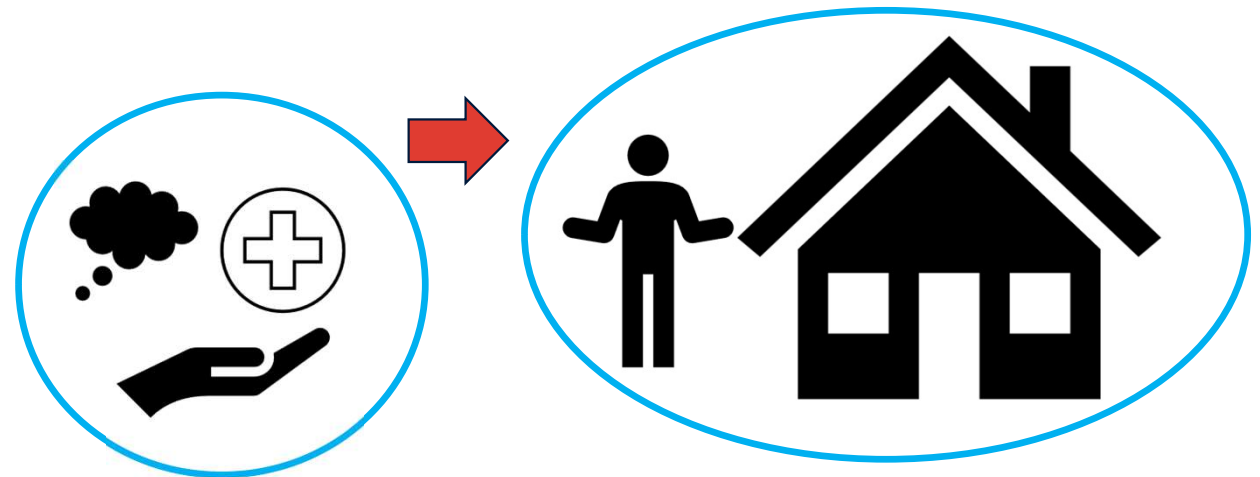
Evidence: What works?

Person-centered approach



Evidence: What works?

- **Integrated care** – backdrop of other types of support (e.g., food, housing estates, safer injecting access)
- **Place based** – easily accessible, no additional appointments, open access, familiar faces
- **Staff training** – improves knowledge, >understanding of the nuanced issues of tobacco smoking beyond health, increases willingness and ability to discuss cessation and harm reduction



- **Types of support** - Nicotine > behavioural support alone
- Behavioural support in more than one form > no or minimal support
- **E-cigarettes are a preferred choice** (choice of liquids, strengths, free of charge or low cost), and may be better at reducing harm from smoking
- **More choice** – layered approach, more support = better outcomes (e.g., quit rates, reductions and appointments attended)

Some evidence...

- Combined nicotine products
- Goals related to reduction, reducing unpleasant tobacco acquisition important

- Smoking is dangerous to **all people** and exacerbates health inequalities.
- Integrating an evidenced-based approach into a broader social care and harm reduction agenda shows signs of promise.
- **Doing nothing maintains the status quo.**

Collaborators and funders

- Dr Debbie Robson (KCL)
- Professor Lynne Dawkins (LSBU)
- Dr Dorothy Szinay (UCL)
- Dr Vladimir Kolodin (UCL)
- Colleagues from UTARG



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