

Tobacco control and housing

A case for action from both sides

- Although smoking rates are declining in England, inequalities in smoking rates remain, and have grown, between socio-economic groups
- Of all the socio-economic measures, housing tenure appears to be the strongest independent predictor of smoking in England
- Taking a place-based approach to tobacco control with partners across the housing sector therefore has the potential to address smoking among communities where rates are highest
- Addressing smoking in the home would deliver significant benefits to all partners through health, economic and wider societal gains and should be on the agenda for housing partners

What does housing have to do with tobacco control?

As a result of comprehensive tobacco control measures, smoking rates are declining in England, however inequalities in smoking rates between population groups remain and the inequality in rates between the richest and poorest in society has grown over time.

Of all the socio-economic measures, housing tenure [appears to be the strongest independent predictor of smoking in England](#) – smoking is 3 times more common in socially rented housing than in owner occupied housing. The result is that the huge burden of death and disease caused by smoking is disproportionately borne by people living in social housing.

Higher rates of smoking among social housing residents also translate into higher rates of child secondhand smoke (SHS) exposure. Children living in social housing are more than twice as likely to be exposed to SHS in the home compared to children living in owner occupied housing (26.5% vs 10.3%, respectively). This damages children's health resulting in an estimated 300,000 GP consultations and 9,500 hospital admissions each year from child exposure to SHS. Children who live with someone who smokes are also [around 3 times more likely to become smokers themselves](#), compared to children from non-smoking households - this creates intergenerational cycles of inequality and compounds high smoking rates among families and communities.

As evidence has shown, despite higher rates of smoking among social housing residents motivation to stop smoking is similar regardless of housing tenure. Further, prevalence of quit attempts and the use of stop smoking support [was greater in social housing as compared with other housing types](#), however success in quitting was much lower.

(Infographic below: General adult smoking prevalence by housing tenure)



Based on data from Opinion and Lifestyle Survey 2017, published 2018

What does tobacco control have to do with housing?



Smoking is the primary cause of preventable illness and death in England and kills more people each year than obesity, alcohol, drug misuse, traffic accidents and HIV combined. Around [half of all regular cigarette smokers](#) will be killed by their addiction and on average they will lose 10 years of life. For every death caused by smoking, approximately [30 more smokers](#) are suffering from a smoking related disease. Due to higher smoking rates, social housing residents disproportionately bear the burden of death and disease caused by smoking.



Tobacco smoke is a significant source of common indoor air pollutants including particulate matter such as [carcinogenic polycyclic aromatic hydrocarbons \(PAHs\)](#). In households where someone smokes, [more than 87% of PAHs](#) can be attributed to residual tobacco smoke.



Smoking is the [fourth most common cause of house fires but is the leading cause of fire deaths](#). Smoking accounts for 8% of house fires, over 2,000 a year, but is responsible for 34% of all house fire deaths. This costs society and local communities in England £324.5 million every year through societal losses from fatalities, injuries, property damage and service costs.



Smoking and particularly smoke drift, where someone is exposed in their home to tobacco smoke emanating from outside their property, can be significant cause of distress and community tension. A YouGov survey conducted for ASH found [that 35% of social housing residents report being exposed to smoke drift](#), nearly double the rate of exposure in owner occupied housing (17.5%).



Tobacco addiction is a long-term relapsing condition, with over 80% of smokers starting before 18, it also has a substantial impact on poverty and tenancy security. [One in seven people living in social housing live in poverty](#) as a direct result of expenditure lost to tobacco addiction. On average, tobacco consumes an eighth (12.4%) of the disposable income of people living in social housing who smoke – this translates into over £50 per week and around £2,600 per year. For the average resident in debt, arrears could be wiped out within 9 weeks of quitting smoking through income returned from tobacco addiction.



Smoking in the home seriously damages interior furnishings through staining, burns and the build-up of residual toxins and chemicals from tobacco smoke on all interior surfaces (sometimes referred to as third hand smoke). [The economic impact of this for the housing provider can be substantial.](#)

What next?

Sign [Achieving a Smokefree Generation for Every Home](#) - a public declaration of an organisation's commitment to addressing tobacco addiction and improving the lives of residents, setting out the key actions needed to achieve this ambition.

More information

- [Smoking in the home: New solutions for a Smokefree Generation](#)
ASH's full report on the challenge posed by smoking in the home and how stakeholders across health, housing, Fire & Rescue Services and Trading Standards can collectively address it
- [The quitting dividend for landlords and tenants](#)
A briefing and local cost calculator for local authorities and housing providers exploring the financial impact smoking has on social housing landlords and tenants
- [Smoking in the home webinar](#)
ASH webinar sharing findings from the Smoking in the Home report, including case studies detailing innovative approaches to addressing smoking through housing

