

Smoking

Key Findings:

- **12% of survey respondents reported themselves as being current smokers but the majority had never smoked; almost 1 in 3 current smokers are 'contented' smokers**
- **The highest smoking rates were amongst respondents from North Warwickshire Borough and Nuneaton and Bedworth Borough**
- **A higher proportion of females than males report never to have smoked, although males are more likely to be ex-smokers**
- **The likelihood of being a smoker increases with lower levels of education completed**
- **Those who have poor health, are underweight or have a long-standing illness are more likely to be current smokers**
- **Those from Non White British ethnicities are more likely to have never smoked than those from White British ethnicities**
- **Respondents from more deprived areas are more likely to be current smokers and are less likely to be concerned about their smoking status**
- **With increasing age, smaller proportions of have never smoked; of those that are current smokers, the older generations were more likely to be 'contented smokers'**

'Living in Warwickshire' Survey - Background

As part of our work on Warwickshire's Joint Strategic Needs Assessment (JSNA), it was acknowledged that a lack of robust intelligence existed on the lifestyle characteristics of the local population and the perception of residents with regard to local public services. To address this gap in our knowledge, our Health & Wellbeing Board agreed to sponsor a large scale survey of local people which focussed on issues around 'Living in Warwickshire'.

The aim of the survey was to capture perceptions type data about life in Warwickshire, use and satisfaction with public services, and also health and lifestyle data and intelligence.

The following analysis presents the detailed survey results for this particular topic and forms part of a wider 'suite' of products which present the key findings and implications from the research.

During Autumn 2013, 25,000 surveys were sent out to a random stratified sample of households across Warwickshire. By the time of the closing date, 7,617 completed surveys were returned, resulting in a response rate of 30%. This was over 50% higher than our target response of 5,000 surveys.

Although paper surveys were sent out in the post, recipients were also given the option to complete the survey online if they wished. Just under 300 people, or 4% of all respondents, chose to complete the survey this way.

Introduction to the Topic

In this series of questions, respondents were asked about their smoking status and habits. The section involved skip logic, whereby respondents were led on a specific path through the questions, dependent on their answers. This technique was used to gather more information about certain groups, in this case those who currently smoke and the behaviours of ex-smokers.

The section included the following questions:

Q28. On average, how many cigarettes do you smoke per day?

Q29. How do you feel about smoking and your health?

Q30. As an ex-smoker, how many times did it take for you to give up smoking?

Q31. How many times have you tried to give up smoking?

Smoking is widely considered to be one of the major risks to both individual and public health. Smoking causes more preventable deaths than anything else. There is also an impact on those around smokers, particularly their families, with increasing numbers of children being admitted to hospital with illnesses caused by second hand smoke.

Smoking causes about 90% of lung cancers. It also causes cancer in many other parts of the body including the mouth, bladder, kidney and stomach. Furthermore, smoking causes damage to the heart and blood circulation, increasing the risk of developing conditions such as coronary heart disease, heart attack and stroke. Smoking also damages the lungs, leading to conditions such as chronic bronchitis, emphysema and pneumonia. For more information, see [here](#).

Questions on smoking were included in the survey as currently there is a lack of robust data at local level and a reliance on nationally produced modelled estimates or very small sample sizes.

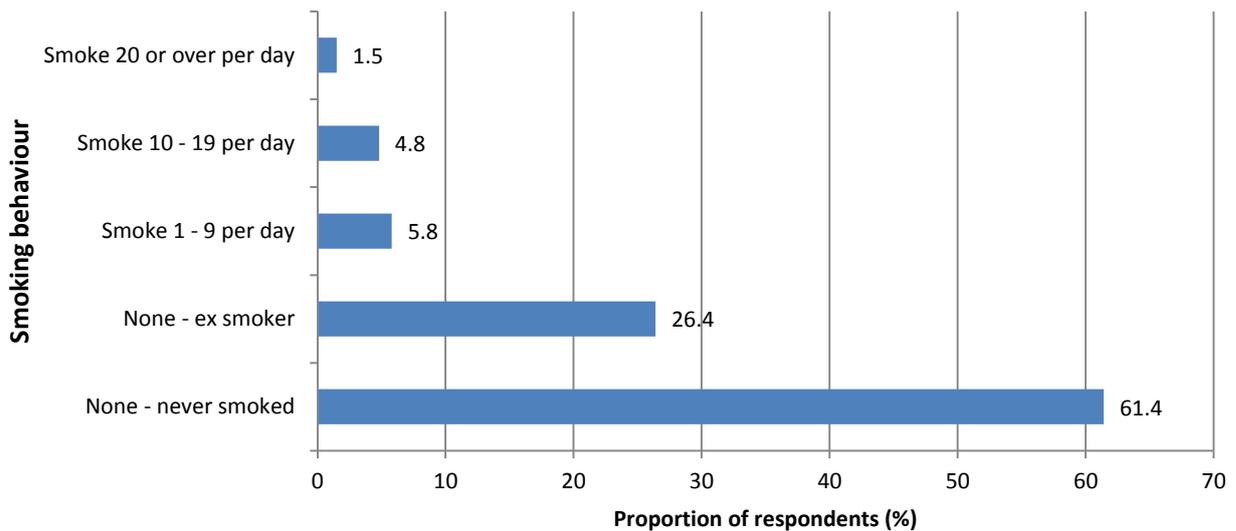
Some methodological issues around the question have been identified, which could have an effect on the results:

- The analysis on the number of times it takes to quit is based on a subjective measure of what a 'quit attempt' is. This definition could vary from person to person and between groups. Therefore, this could skew the data as certain groups could appear to make more or less quit attempts than others.
- Smokers in some groups, such as the younger age groups, may not have attempted to quit yet, due to age and length of time smoking, and could quit a number of years into the future. Therefore, they would not be included in the 'quit' or ex-smoker groups and could be over-represented in the current smoker group.

Warwickshire Overview – smokers, ex-smokers and non-smokers

In the analysis that follows, the data is analysed by different characteristics (e.g. district/borough, gender, Mosaic group), in terms of the proportion of each group who have never smoked, are ex-smokers or are current smokers.

Figure 1: Self-reported smoking status, all respondents, Warwickshire



As shown in figure 1, the majority of respondents reported that they have never smoked (61.4%), followed by those who report to be ex-smokers (26.4%). 12.1% of respondents reported that they currently smoke, which is lower than most other previous estimates for smoking prevalence in Warwickshire.

District/Borough analysis

Table 1: Self-reported smoking status, Warwickshire, by district/borough

District/Borough	None - never smoked	None - ex smoker	Current smokers
North Warwickshire Borough	56.5%	28.8%	14.7%
Nuneaton & Bedworth Borough	58.7%	25.0%	16.3%
Rugby Borough	60.4%	28.2%	11.4%
Stratford-on-Avon District	60.1%	28.9%	11.0%
Warwick District	65.4%	24.5%	10.1%
<i>Warwickshire</i>	<i>60.2%</i>	<i>27.1%</i>	<i>12.7%</i>

North Warwickshire Borough

As shown in table 1, the largest proportion of respondents from North Warwickshire Borough reported having never smoked (56.5%). This proportion is statistically significantly lower than the proportion for Warwickshire as a whole, indicating that the 'never smoked' group make up a statistically smaller proportion of the population in North Warwickshire Borough, than in the county as a whole. As shown in figure 2, North Warwickshire Borough had the largest overall proportion of respondents who reported smoking 20 or more per day (3.1%), with the proportion being higher than for Warwickshire, indicating that there is a relatively large proportion of heavy smokers in North Warwickshire Borough. Respondents who stated that they are ex-smokers comprise a large proportion of respondents from North Warwickshire Borough (28.8%) and, in proportion of respondents from each smoking category, are amongst the highest and slightly higher than the county average but not statistically significantly so. 14.6% of respondents from North Warwickshire Borough reported being current smokers, which is the highest proportion in the county and higher than the county average of 12.1%, but again not statistically significantly so.

Nuneaton and Bedworth Borough

Respondents from Nuneaton and Bedworth Borough are statistically similar to the Warwickshire population as a whole in terms of the proportion of current smokers. However, the proportion of those that smoke, who report smoking 1 – 9 cigarettes per day is higher than the county average (9% compared to 6%), indicating that there is a relatively high proportion of lighter smokers in the Borough. However, Nuneaton and Bedworth has the statistically significantly largest overall proportion of respondents who reported that they are current smokers at 16.4%, when compared with the other areas and the county as a whole (see table 1).

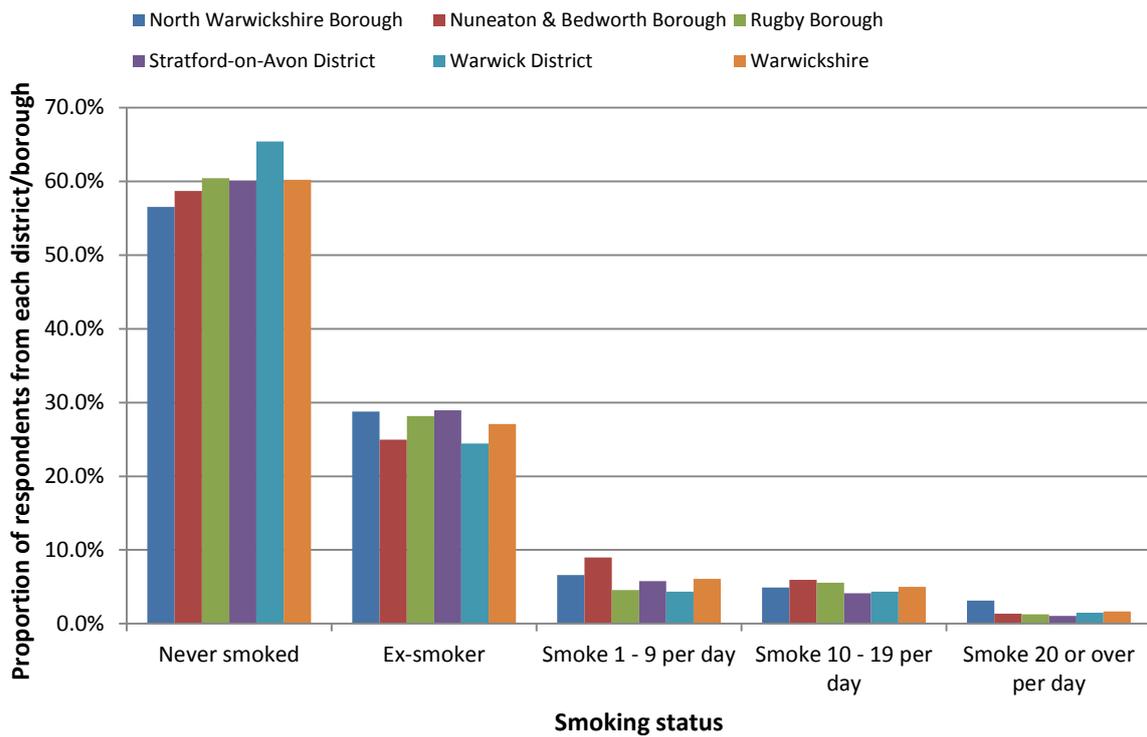
Rugby Borough

Generally, as shown in figure 2, the smoking behaviour of respondents from Rugby Borough is comparable to the smoking behaviour of smokers in Warwickshire as a whole. The proportions of respondents reporting to be current smokers (11.4%), ex-smokers (28.2%) or never having smoked (60.4%) are statistically similar the average proportions for the county.

Stratford-on-Avon District

60.1% of respondents from Stratford-on-Avon District reported that they have never smoked, which is the same proportion when respondents are considered at county level. This trend is similar for ex-smokers, where the Stratford-on-Avon proportion is slightly higher but comparable and not significantly different to the proportion for Warwickshire as a whole (28.9% and 27.1% respectively). The proportion of respondents from the district who report that they are current smokers is marginally less than that of the county as a whole (11% compared with 12.1%), but again is not statistically significantly different.

Figure 2: Self-reported smoking status, all respondents, Warwickshire, by smoking status



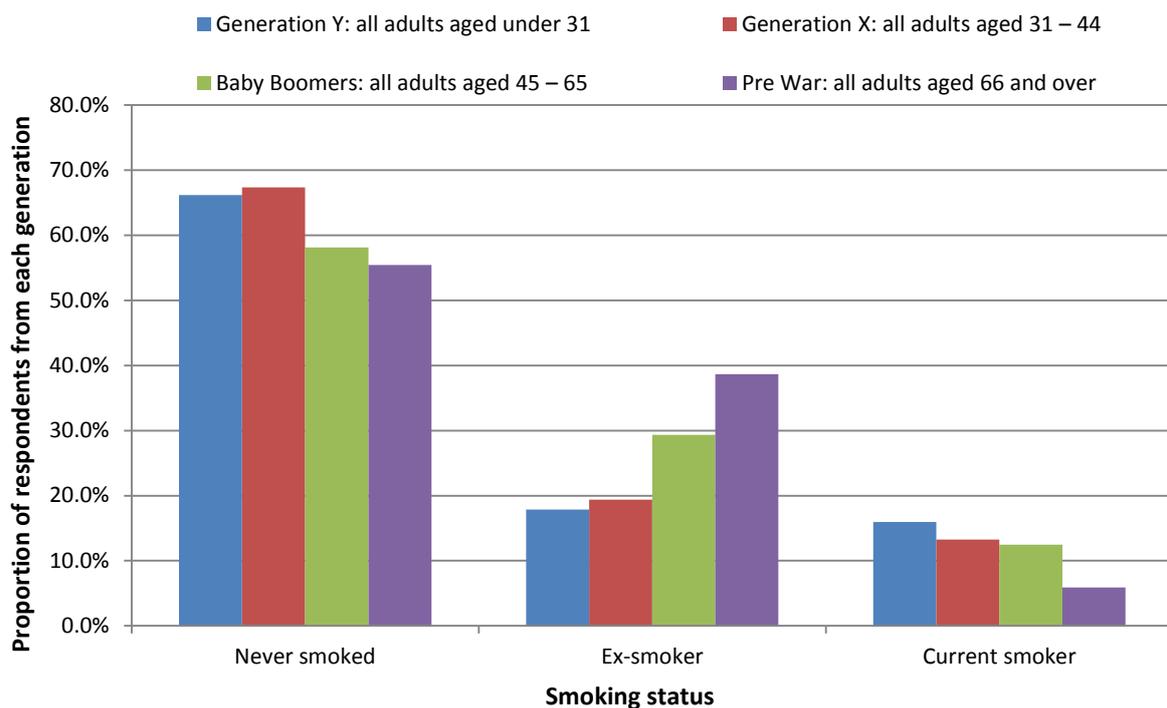
Warwick District

As shown in figure 2, Warwick District has the statistically significant highest overall proportion of respondents who report that they are ex-smokers (65.4%), when compared to the other district/boroughs and Warwickshire as a whole (60.2%). The opposite is the case for ex-smokers, with the proportion of respondents from Warwick District being statistically significantly lowest in the county for this smoking category (24.5% compared with 27.1% for Warwickshire as a whole). Warwick District has a statistically significantly lower than county average of current smokers, at 11.9%, with the majority of these smoking either 1 – 9 or 10 – 19 per day.

Generation analysis

Respondents were asked to state their age, and were then classified into different generational groups, as defined by Ipsos Mori (see [here](#) for more information). The ages bands are outlined in figure 3.

In each of the generational groups, the largest proportion reported that they have never smoked. The ‘Pre-War’ group have the smallest overall proportion of those that have never smoked (55.5%), when compared with the other groups and the county average of 61.4%. ‘Generation X’ has the largest overall proportion of those that have never smoked (67.3%), followed by ‘Generation Y’ (66.2%).

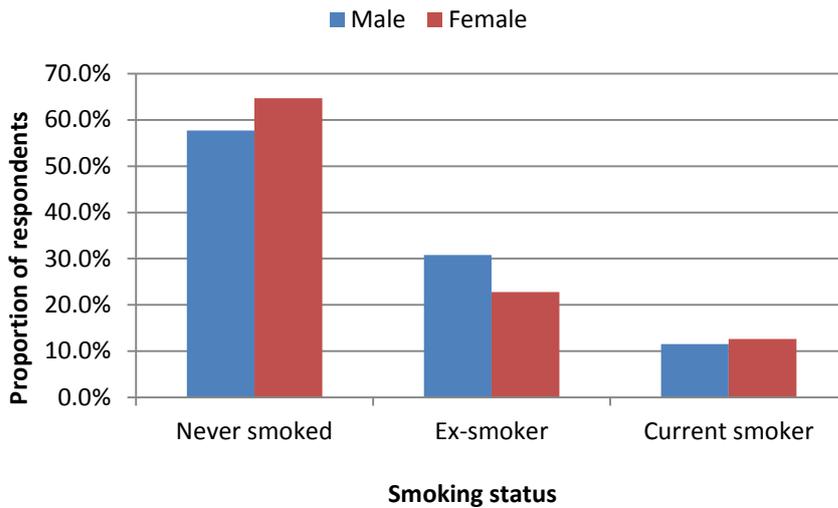
Figure 3: Self-reported smoking status, all respondents, Warwickshire, by generation

In terms of how different each generational group is from the county average, all are statistically significantly different from the average proportion of those who have never smoked in Warwickshire as a whole, as shown in figure 3. 'Generation X' and 'Generation Y' are significantly higher than the county average in terms of the proportion of who have never smoked, whilst 'Baby Boomers' and 'Pre War' are lower. The opposite trend is seen for the proportion of respondents in each generation who reported that they were ex-smokers, with 'Generation Y' and 'Generation X' emerging as being statistically significantly lower than the county as a whole, and Baby Boomers and Pre War as being higher than the proportion for the county as a whole. In terms of those who reported that they were current smokers, the proportions in 'Generation X' and 'Baby Boomers' are not statistically different to the proportions in Warwickshire as a whole. However, the proportion who reported as being current smokers in 'Generation X' is statistically significantly higher and in 'Pre War' adults statistically significantly lower than in Warwickshire as a whole.

Gender

As shown in figure 4, a higher proportion of females than males report that they have never smoked, with 57.7% of males compared with 64.7% of females, which represents a statistically significant difference. The proportion of males that have never smoked is statistically significantly lower than the proportion in Warwickshire as a whole, whereas the proportion of females that have never smoked is higher.

Figure 4: Self-reported smoking status, all respondents, Warwickshire, by gender

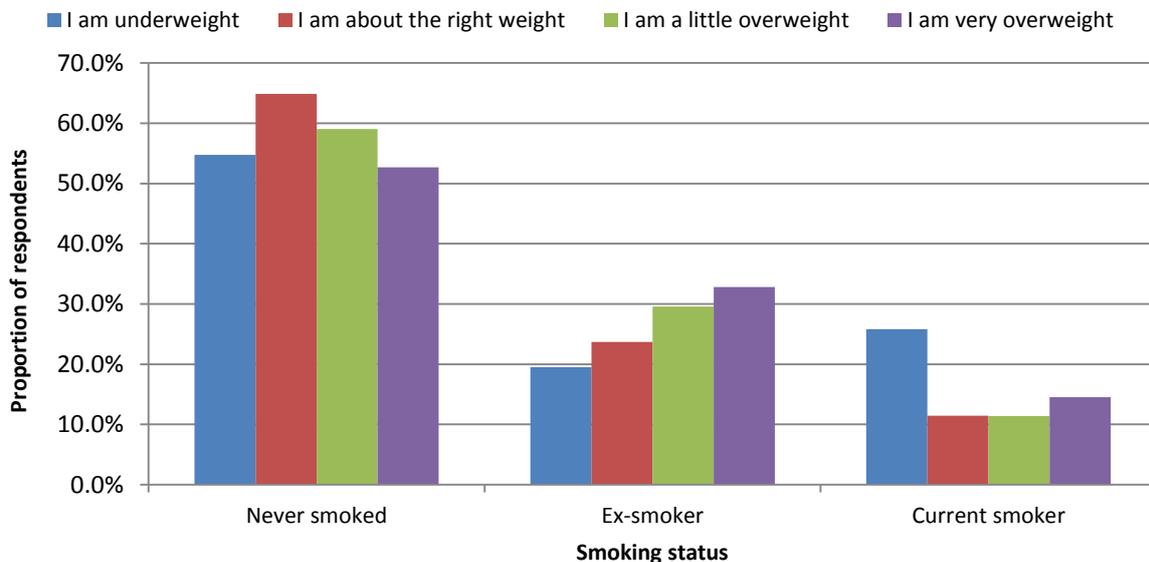


On the other hand, male respondents to the survey were more likely to be ex-smokers, with 30.8% of males and 22.7% of females, with males being statistically significantly more likely to be ex-smokers than the Warwickshire population as a whole, and females are less likely. The current smoker figures are more equal, although the data suggests that a higher proportion of female than male respondents currently smoke, with 12.6% of females and 11.5% of males. However, these figures are not statistically significantly different.

Self-reported weight

Respondents were asked to rate themselves as being ‘underweight’, ‘about the right weight’, ‘a little overweight’ or ‘very overweight’. The analysed data indicates a relationship between self-reported weight and smoking.

Figure 5: Self-reported smoking status, all respondents, Warwickshire, by self-reported weight



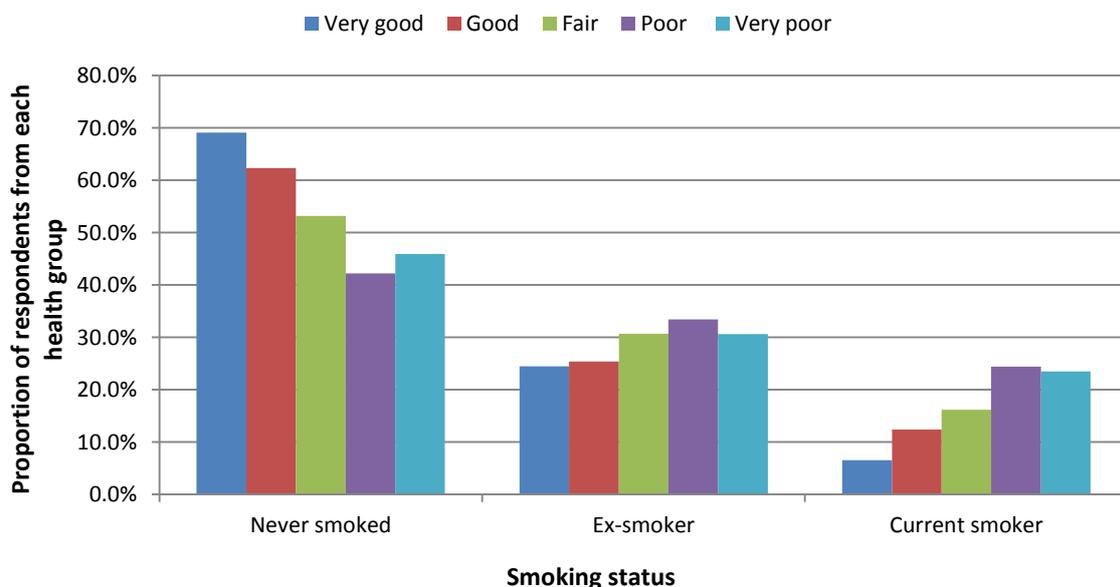
As shown in figure 5, of those that reported never having smoked, the largest proportion were from the 'about the right weight' category (64.9%). Of those that reported being ex-smokers, the proportion in each weight category increases with increasing weight, i.e. the smallest proportion of ex-smokers reported themselves as being 'underweight' (19.5%), with the largest proportion being those who reported themselves as being 'very overweight' (32.8%). Amongst current smokers, the largest proportion reported themselves as being 'underweight', followed by those who reported themselves as being 'very overweight' (14.5%). Significance testing has revealed that those who reported themselves as being 'underweight' are statistically significantly more likely to be current smokers than those in the population as a whole.

Self-reported health

Respondents were asked to rate their own health as being 'very good', 'good', 'fair', 'poor' or 'very poor'. These options were selected to compare against those used in the national census of the population.

The responses show a relationship between self-reported health status and smoking status, as illustrated in figure 6. A larger overall proportion of respondents who reported that their health is 'poor' or 'very poor' reported that they are current smokers (11.4%), compared with those who reported that they have never smoked (4%). The proportion of respondents reporting 'very good health' also declines with smoking status, with 32.2% of those that have never smoked, 26.4% of those who are ex-smokers and 15.4% of those who are current smokers reporting that their health is 'very good' (see figure 6).

Figure 6: Self-reported smoking status, all respondents, Warwickshire, by self-reported health status



Of those that reported having 'very good health', the majority (69.1%) stated that they have never smoked; the proportion who are ex-smokers is lower, at 24.4% and declines to 6.5% in those that are current smokers. The 'very good health' category also represents the largest overall proportion

of respondents who have never smoked. Those who report having ‘poor’ or ‘very poor’ health represent the largest proportions of respondents in the current and ex-smoker categories.

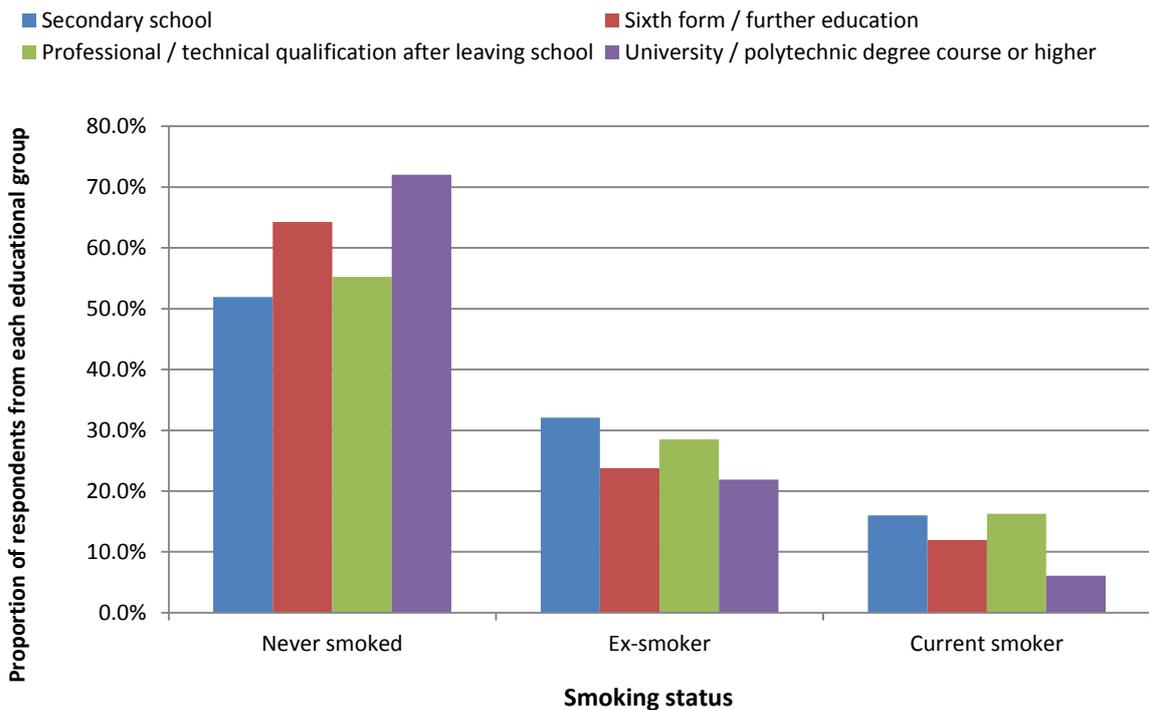
Those that report having 'poor' or ‘very poor’ health are statistically more likely to smoke than the population as a whole. Those that report having ‘very good’ health are statistically likely to never have smoked than the population as a whole.

Highest level of education completed

Respondents were asked to report on the highest level of education they had completed, as outlined in figure 7.

The highest proportions from each of the educational groups reported that they had never smoked, to varying extents (see figure 7). The general trend indicates that the likelihood of smoking increases with lower levels of education completed.

Figure 7: Self-reported smoking status, all respondents, Warwickshire, by highest level of education completed



As shown in figure 7, the proportionally largest percentage of those who reported never having smoked is in the group who reported their highest level of education as being University degree or higher (72.0%). This educational group then goes on to comprise proportionally smaller percentages in the ex-smoker (21.9%) and current smoker (6.1%) groups. All of these percentages are statistically significantly different to the equivalent figures for Warwickshire, whereby the proportion of those in the ‘University or higher’ group who have never smoked is significantly higher than the proportion in the population as a whole. Those who are ex-smokers or current smokers in the ‘University or

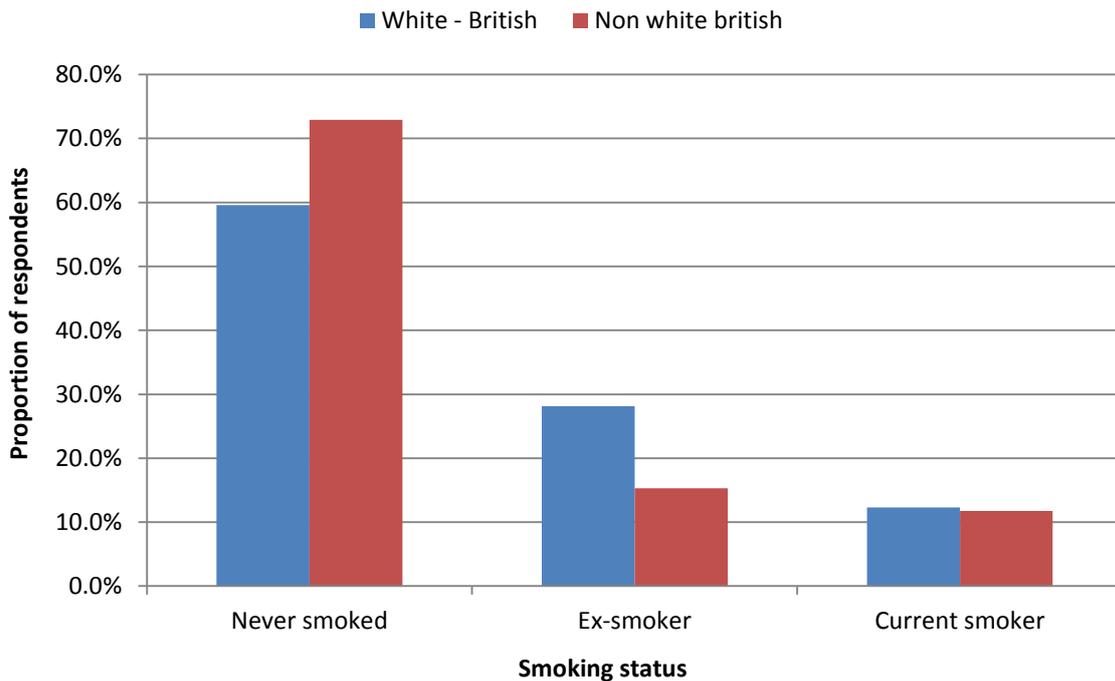
higher' group are statistically less likely to be so than the general population as a whole, indicating a relationship between education and smoking status.

Ethnic Group

Respondents were asked to state their ethnicity by selecting an ethnic group that they feel they belong to. The ethnicities were grouped into White British (n=6130) and Non White British (n=1020). The groups were created due to small numbers in some of the ethnicities, which would mean that no robust analysis could be carried out on such.

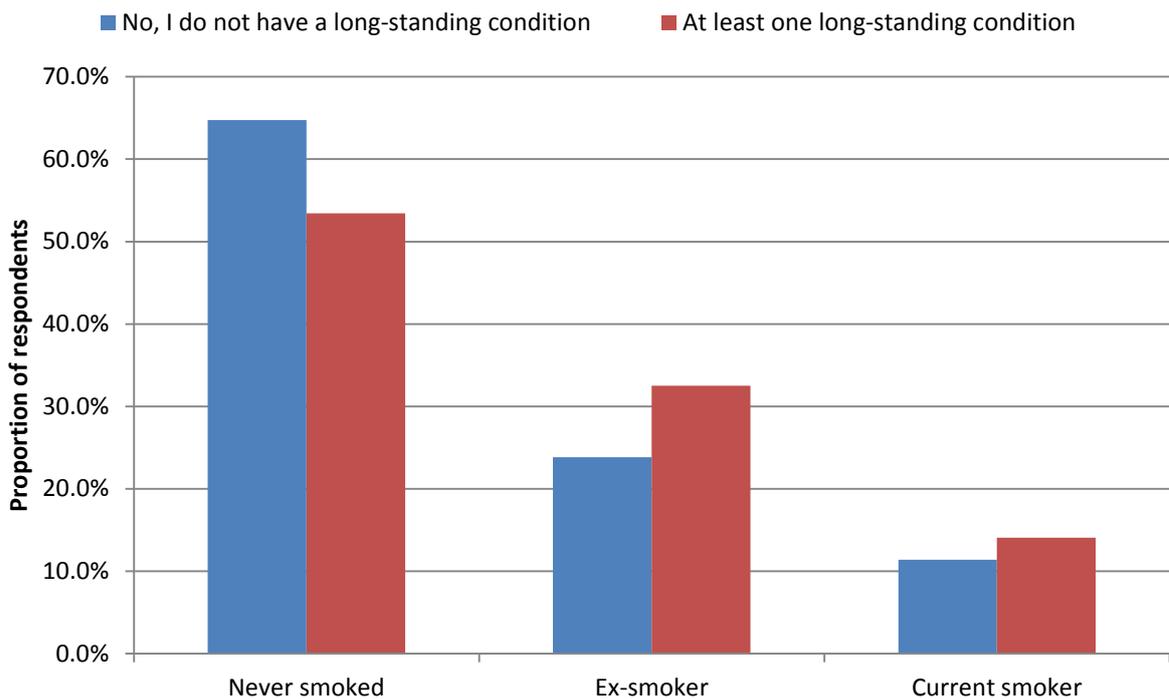
As displayed in figure 8, those from Non White British ethnicities are statistically significantly more likely to have never smoked than those from White British ethnicities (72.9% compared with 59.6%). Conversely, those from the White British ethnicity are statistically significantly more likely to be an ex-smoker than those from Non White British ethnicities (28.1% compared with 15.3%). In terms of those who are current smokers, the proportions from each of the ethnic groups are similar, with 12.3% of White British and 11.8% of Non White British reporting to be current smokers, the figures revealing no significant difference.

Figure 8: Self-reported smoking status, all respondents, Warwickshire, by ethnic group



Limiting Long-Standing Illness

Respondents were asked to state whether or not they considered themselves to have a long standing condition. This was defined as 'anything that has troubled the respondent over a period of time or that is likely to affect the respondent over a period of time'.

Figure 9: Self-reported smoking status, all respondents, Warwickshire, by long-standing condition

As shown in figure 9, those who do not consider themselves as having a long-standing condition are more likely to never have smoked, when compared against those who consider themselves as having a long-standing condition (64.8% compared with 53.4%).

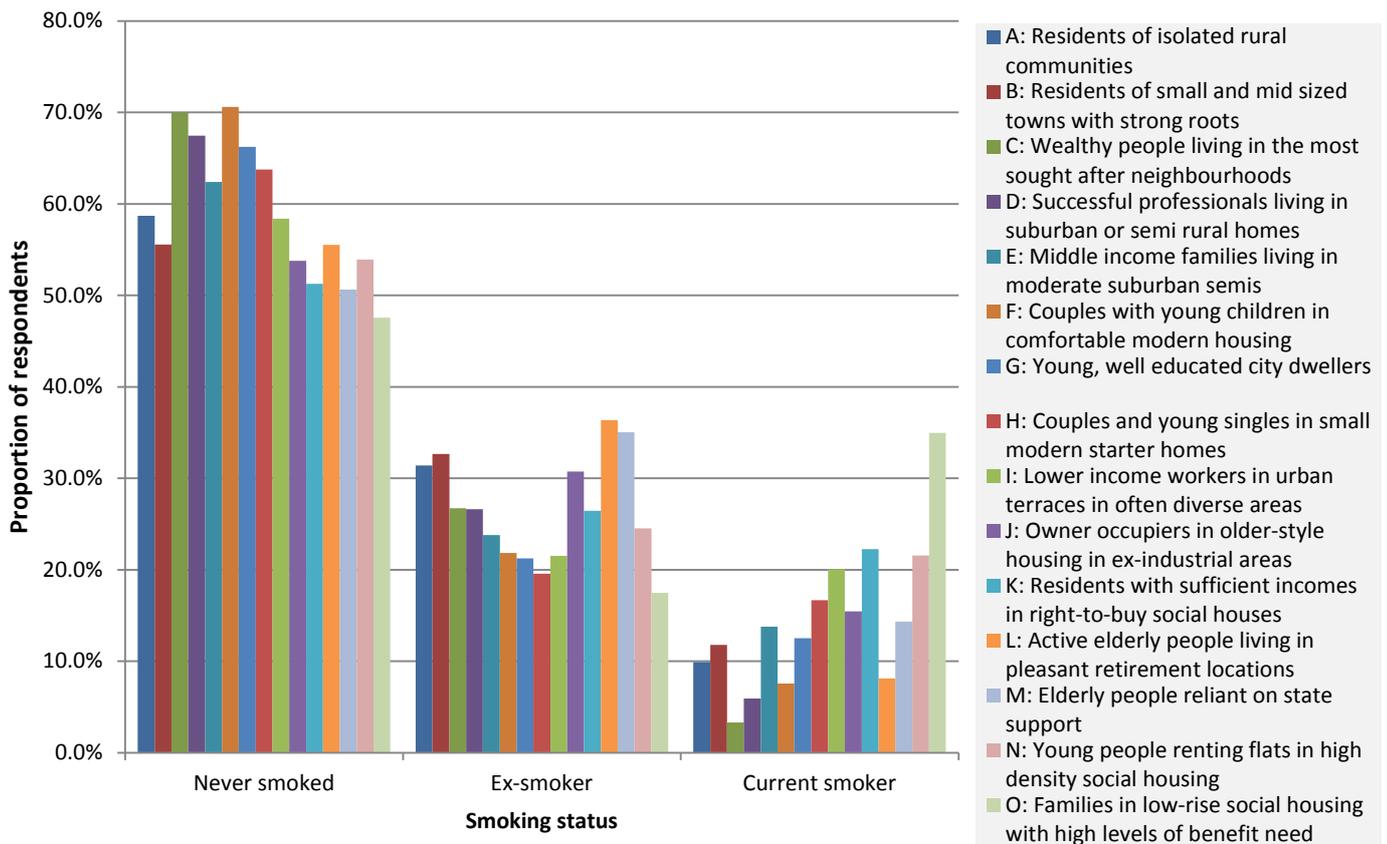
Furthermore, as illustrated in figure 9, those who report having a long-standing condition are statistically more likely to be ex- or current smokers.

Mosaic Analysis

Respondents were disaggregated into household Mosaic groups, and the proportion of each group with different smoking statuses is illustrated in figure 10.

As shown in figure 10, respondents from different Mosaic groups are different in terms of their smoking status.

Figure 10: Self-reported smoking status, all respondents, Warwickshire, by household Mosaic group



When compared to the other Mosaic groups, those from group O have the highest proportion of current smokers (35.0%), followed by group K (22.3%) and group N (21.6%). These groups represent households in more deprived areas and residents at the lower end of the income scale, which suggests that these are factors that are linked with higher levels of smoking. Respondents from groups C, D and F are least likely to be current smokers (3.3%, 5.9% and 7.6% respectively) and represent households and residents in more affluent areas and with higher incomes. This indicates a social gradient in terms of the likelihood of being a current smoker. This trend is reflected in those that have never smoked, with those from groups C and F being the most likely to have never smoked (70.0% and 70.6% respectively).

Groups L and M have the largest proportions of ex-smokers (36.4% and 35.0% respectively). These groups represent elderly people, suggesting that older people are most likely to be ex-smokers. This could either be due to older people having had more of an opportunity to quit, or a change in culture over the last few decades, whereby smoking is far less socially acceptable than it once was.

Smokers in Warwickshire

Of those that reported that they currently smoke, 30.8% reported being contented smokers, 19.4% were concerned smokers, 33.7% were planning to stop and 16.1% were in the process of stopping. The relatively high proportion of 'contented smokers' could be explained by the demographics of the survey respondents, in terms of age and highest level of educational attainment. Of those that smoke, the largest proportion smoke 1-9 per day (48.5%), with the proportions decreasing with increasing number of cigarettes (39.3% smoke 10-19 per day and 12.1% smoke over 20 per day).

District/Borough analysis

When comparing the smoking status of respondents from different districts and boroughs in Warwickshire, Nuneaton and Bedworth Borough have the largest proportion of those that report being 'contented smokers' (36.5%) and the smallest proportion of those that report that they are 'planning to stop' (28.1%) (see table 2 and figure 11). Warwick District has the largest proportion of those who report being 'concerned smokers' (23.6%), whereas North Warwickshire Borough has the largest proportion of those who are 'in the process of stopping' (17.9%), closely followed by those from Nuneaton and Bedworth Borough (17.5%).

Table 2: Self-reported smoking status, Warwickshire, by district/borough

Borough / District	Contented smoker	Concerned smoker	Planning to stop	In the process of stopping
North Warwickshire Borough	30.4%	21.4%	30.4%	17.9%
Nuneaton & Bedworth Borough	36.5%	17.9%	28.1%	17.5%
Rugby Borough	24.4%	14.1%	44.9%	16.7%
Stratford-on-Avon District	32.9%	20.5%	34.2%	12.4%
Warwick District	25.9%	23.6%	34.4%	16.0%
<i>Warwickshire</i>	<i>30.6%</i>	<i>19.5%</i>	<i>33.8%</i>	<i>16.2%</i>

North Warwickshire Borough

Amongst respondents from North Warwickshire Borough who report being current smokers, an equal proportion are either 'contented smokers' or 'planning to stop', both at 30.4%. The smallest proportion of respondents from North Warwickshire Borough reported being 'in the process of stopping', at 17.9%.

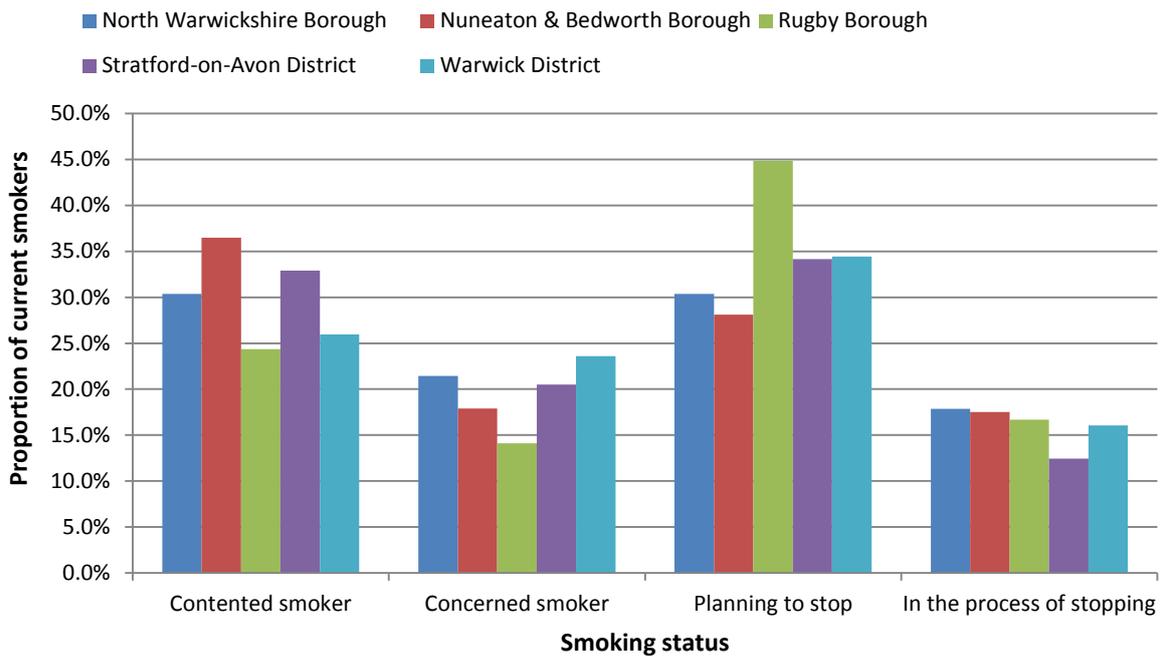
Nuneaton and Bedworth Borough

The largest proportion of respondents from Nuneaton and Bedworth Borough report being 'contented smokers', at 36.5%, which is the largest proportion when compared to the other districts and boroughs in Warwickshire. This is followed by those who report that they are 'planning to stop' (28.1%). The proportions of those that reported being 'concerned smokers' or 'in the process of stopping' is fairly similar, at 17.9% and 17.5% respectively.

Rugby Borough

As illustrated in figure 11, the largest proportion of respondents from Rugby Borough report that they are ‘planning to stop’ smoking (44.9%), which is also the largest proportion when compared to the other districts and boroughs. The smallest proportion of current smokers in Rugby is comprised of those that reported being ‘concerned smokers’ (14.1%), which is the smallest proportion when compared to the surrounding areas.

Figure 11: Self-reported smoking status, current smokers, Warwickshire



Stratford-on-Avon District

Of smokers in Stratford-on-Avon District, the largest proportion are ‘planning to stop’ (34.2%). The smallest proportion (12.4%) are ‘in the process of stopping’, which is the smallest proportion when compared with the other districts and boroughs in Warwickshire.

Warwick District

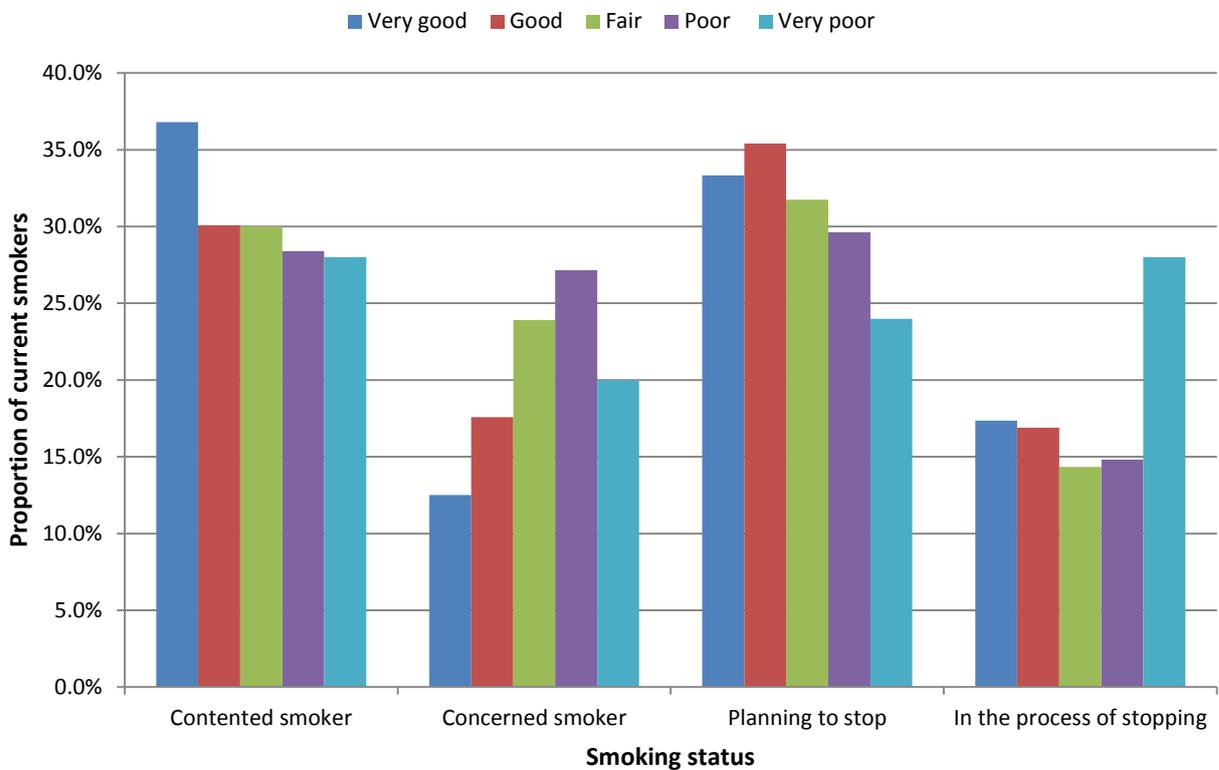
Of current smokers in Warwick District, the largest proportion report that they are ‘planning to stop’ (34.4%). As with the other districts and boroughs, the smallest proportion are ‘in the process of stopping’ at 16.0% which is about average when compared to Warwickshire as a whole. 23.6% of current smokers report being ‘concerned smokers’, which is the highest proportion in Warwickshire.

Self-reported health

As displayed in figure 12, of current smokers, those who consider themselves to be in ‘very good’ health had the largest proportion of contented smokers (36.8%) when compared to the other health groups. There was not a large amount of variation in the proportions of those who reported being ‘contented smokers’ between the other health groups.

Of respondents who reported being ‘concerned smokers’, the proportion within each health group increases with declining self-reported health status, with the exception of those that report having ‘very poor’ health, indicating that whilst there is a relationship between self-reported health status and smoking status, those who report having ‘very poor’ health have a different experience than others.

Figure 12: Self-reported smoking status, current smokers, Warwickshire



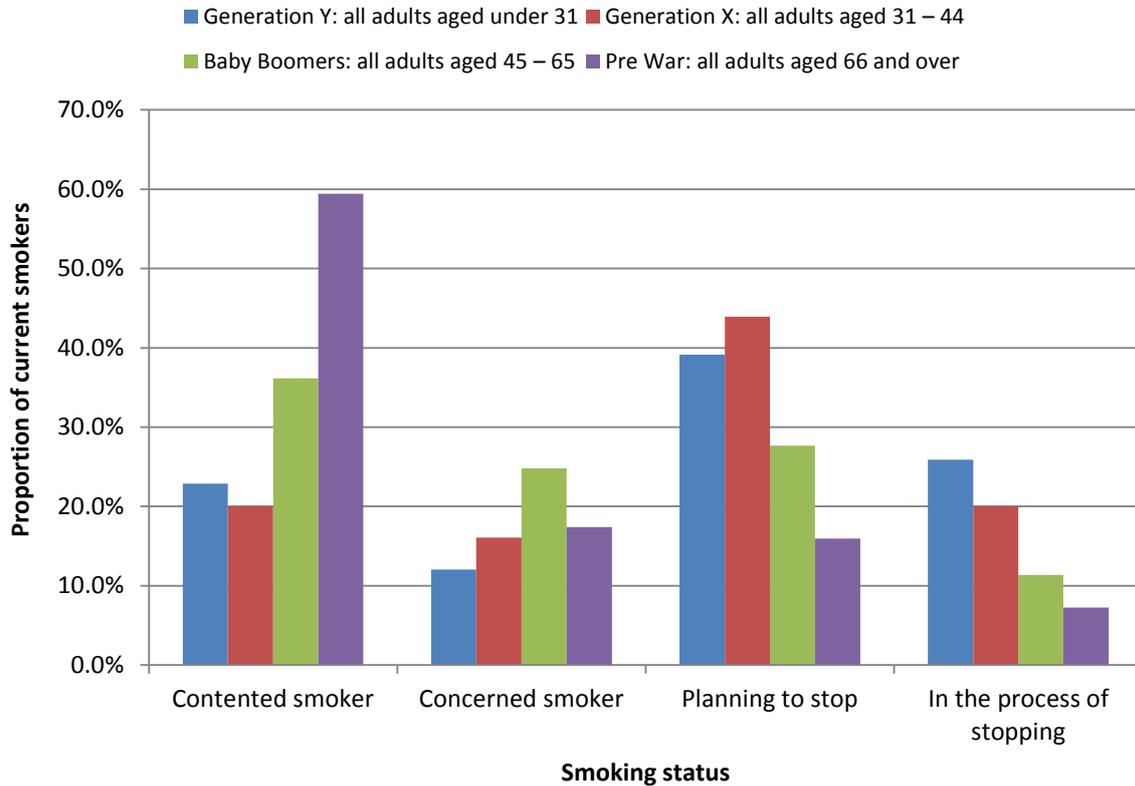
Of those who reported that they are ‘planning to stop’ smoking, the proportions in each group increase with improving health status, with the exception of those who report having ‘very good’ health, which again suggests that these respondents have a different experience to others.

In terms of respondents who are ‘in the process of stopping’, by far the largest proportion reported having ‘very poor’ health (28.0%), and again there is not a large variance in the proportions of those who are ‘in the process of stopping’ between the remaining health classifications (see figure 12).

Generation analysis

Of those from the Pre-War generation, the largest proportion (59.4%) reported being ‘contented smokers’, which is also the largest proportion when compared with the other generations, as shown in figure 13. Those from the Pre-War generation also have the smallest proportions that are ‘planning to stop’ or ‘in the process of stopping’ when compared to the other generations.

Figure 13: Self-reported smoking status, current smokers, Warwickshire, by generation

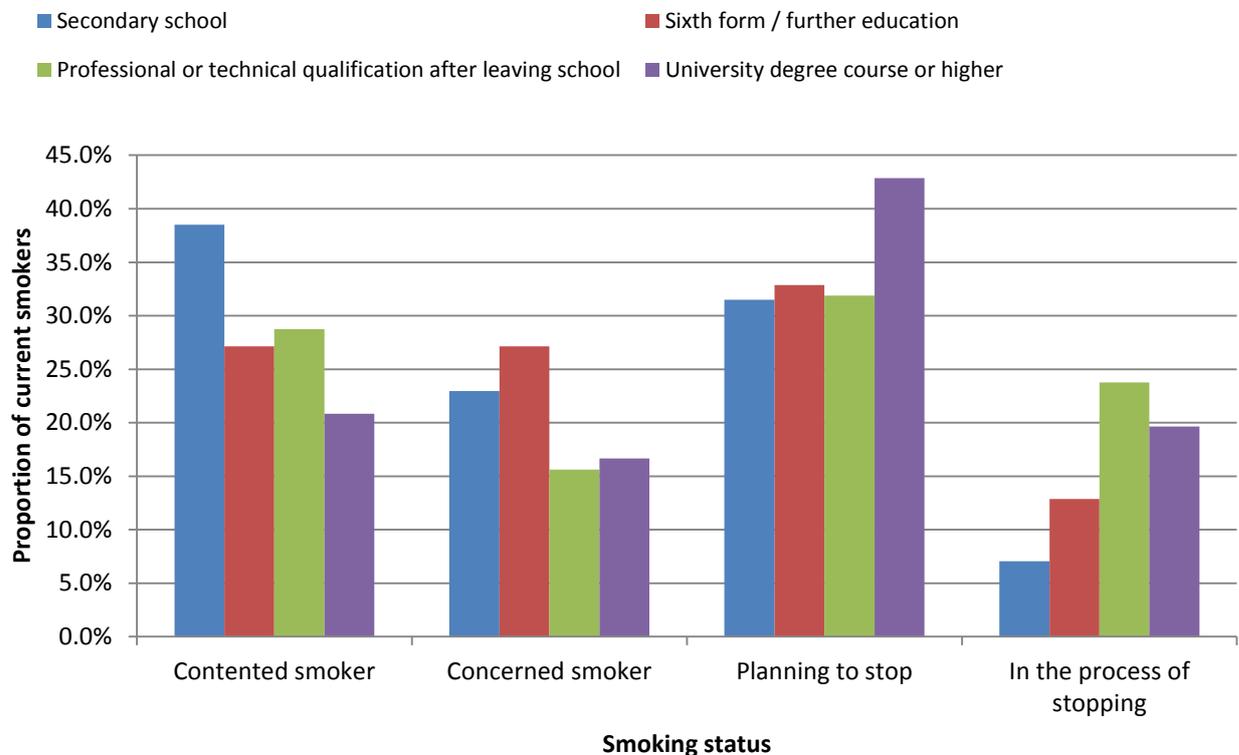


Those from Generation X had the smallest proportion of those that report being ‘contented smokers’ and the largest proportion of those who report that they are ‘planning to stop’ when compared to those from other generations, as displayed in figure 13.

Those that report being ‘in the process of stopping’ and ‘planning to stop’ generally decrease in overall proportion of each generation with increasing age, indicating older people are less likely than younger people to quit.

Highest level of education completed

Figure 14: Self-reported smoking status, current smokers, Warwickshire, by highest level of education completed



The statistically significantly highest proportion of those who report that they are 'planning to stop' is amongst those whose highest level of education completed is 'University degree course or higher' (42.9%). This group also have the statistically smallest proportion of respondents who report being 'contented smokers' (20.8%) when compared to the population as a whole (see figure 14).

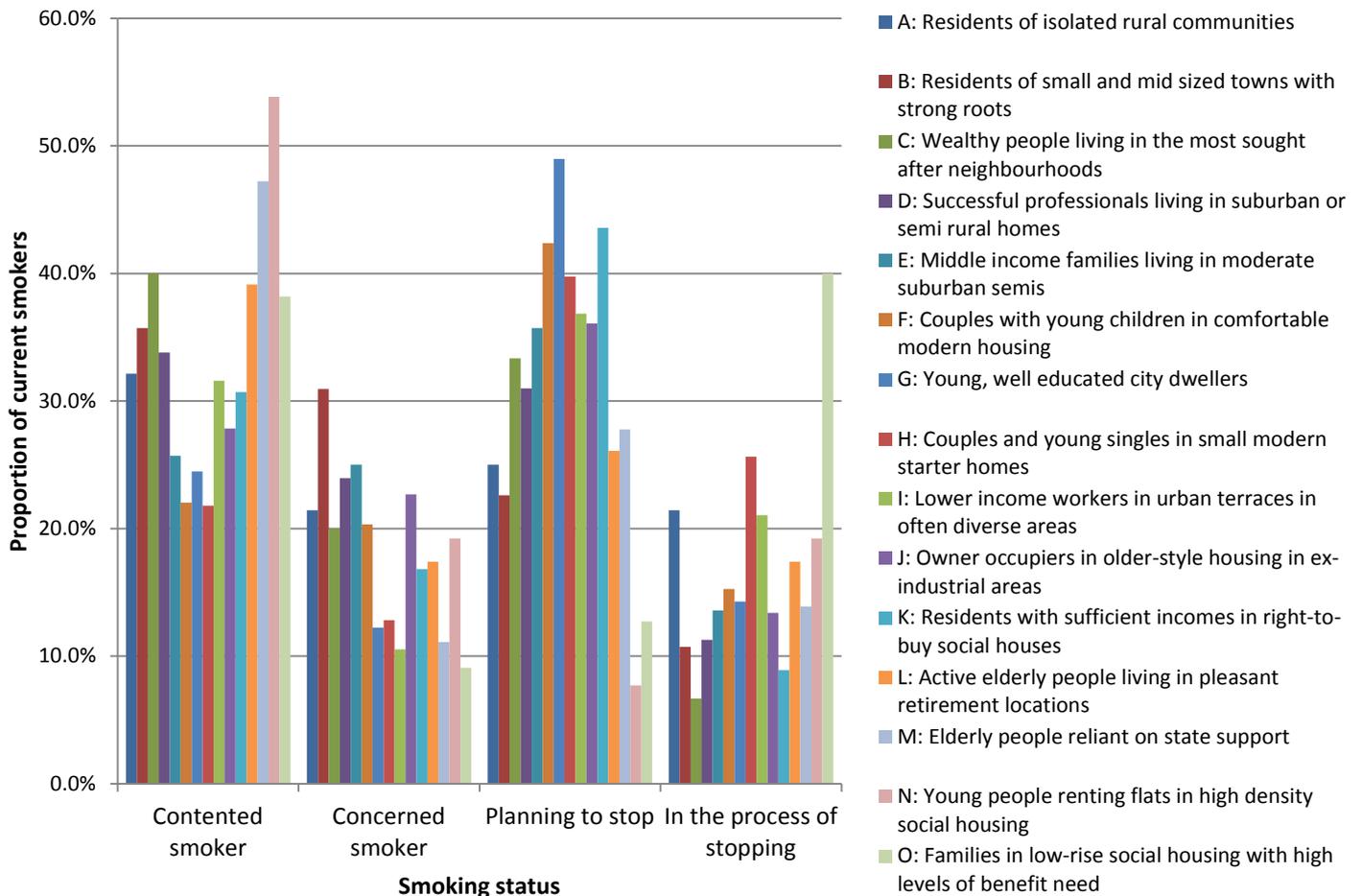
Adversely, those whose highest level of education completed was 'secondary school' have the smallest proportion of those who report that they are 'in the process of stopping' (7.0%) and the highest proportion of 'contented smokers' (38.5%) when compared to the other educational groups, with the proportions being statistically significantly different to the population as a whole. This indicates a relationship between education and smoking status.

Mosaic Analysis

Due to the sample being disaggregated by numerous variables and different groups, the sample sizes for the analysis by Mosaic groups, as shown in figure 15, are relatively small.

Of those that reported being 'concerned smokers', groups B and E had the largest proportions (31.0% and 25.0%), with I and O having the smallest proportions (10.5% and 9.1%). The latter groups represent those living in disadvantaged areas, who are in receipt of low incomes, suggesting that respondents from these socioeconomic groups are less likely to be concerned about their smoking habits (see figure 15).

Figure 15: Self-reported smoking status, current smokers, Warwickshire, by Mosaic group



In terms of current smokers, groups M and N have the largest proportions of those who report being ‘contented smokers’ (42.7% and 53.8% respectively), which represent both young and older people from more deprived areas. Groups F and H (which represent younger couples in comfortable situations), have the smallest proportions of respondents who reported being ‘contented smokers’ (22.0% and 21.8% respectively). This indicates that those from more deprived areas are more likely to be contented smokers.

Groups G and K had the largest proportions of respondents who reported that they were ‘planning to stop’ (49% and 43.6% respectively). Conversely, groups N (7.7%) and O (12.7%) had the smallest proportions who report that they are ‘planning to stop’, again suggesting a social gradient in terms of levels of awareness of the dangers of smoking, and the national recommendations to stop.

Groups C (6.7%) and K (8.9%) had the smallest proportion of respondents that reported being ‘in the process of stopping’; whilst H and O (families with benefits reliance) had the largest proportions (25.6% and 40% respectively). The latter is interesting, as the previous analysis suggests that those from group O would be more likely to continue with smoking.

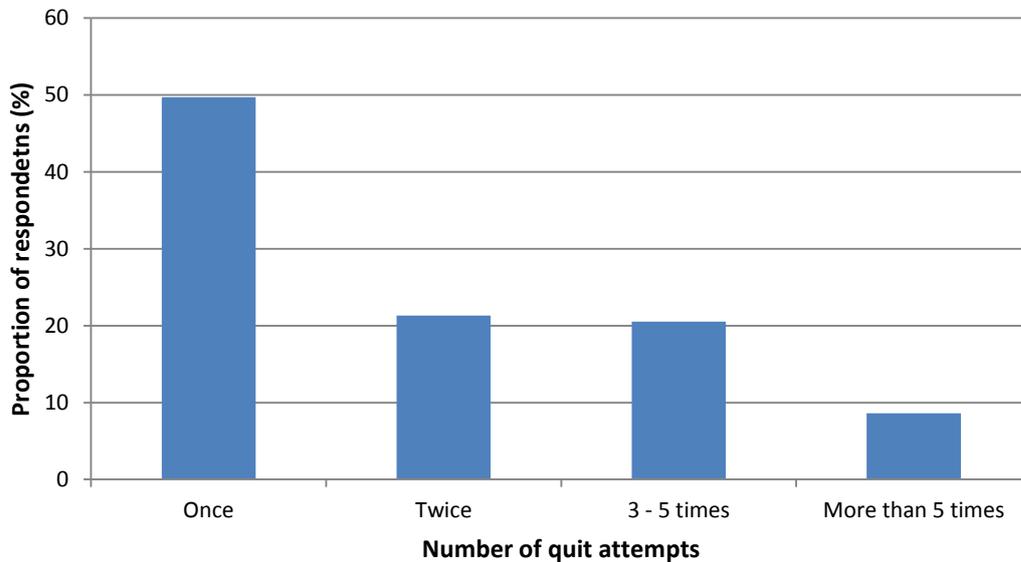
Other factors

- Although a larger proportion of male respondents reported being 'contented smokers' (22.3% compared with 28.6%), and a larger proportion of females than males reported that they are 'planning to stop' (35.0% compared with 37.1%), there is no statistically significant difference in the proportions.
- There was little difference in the smoking status of respondents who reported having a long-standing illness and those that reported that they did not have a long-standing illness. However, those without a long-standing illness are statistically significantly more likely to be 'planning to stop' than those without (36.3% compared with 29.3%).
- There was little significant difference in the smoking status of White British and Non White British respondents. However, there was a significantly higher proportion of respondents who reported being 'concerned smokers' in the White British than the Non White British groups (20.5% compared with 11.0%).

Ex-smokers in Warwickshire

This section will examine the characteristics and quit behaviour of ex-smokers in Warwickshire, to give an indication about what can have an impact on quit attempts. The analysis looks at ex-smokers by district/borough, gender, generation and a number of other indicators.

Figure 16: Number of quit attempts, ex-smokers, Warwickshire



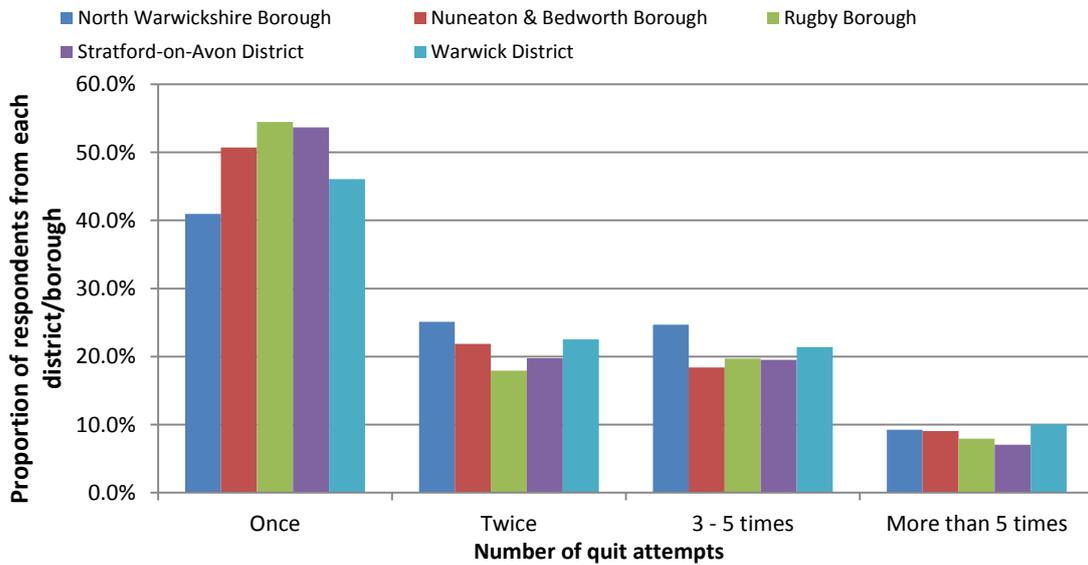
Of those that reported to be ex-smokers, the majority stated undertaking one quit attempt, with increasingly fewer numbers of respondents reporting to have taken between two and five or more quit attempts (see figure 16).

Self-reported health

There is no marked correlation between self-reported health status and number of quit attempts, with the data suggesting that on the whole, health status will not affect the number of times it takes a smoker to quit. However, a larger proportion of those who reported their health as being 'poor' or 'very poor' than those who reported their health as being 'good' or 'very good', reported more than 5 quit attempts.

District/borough analysis

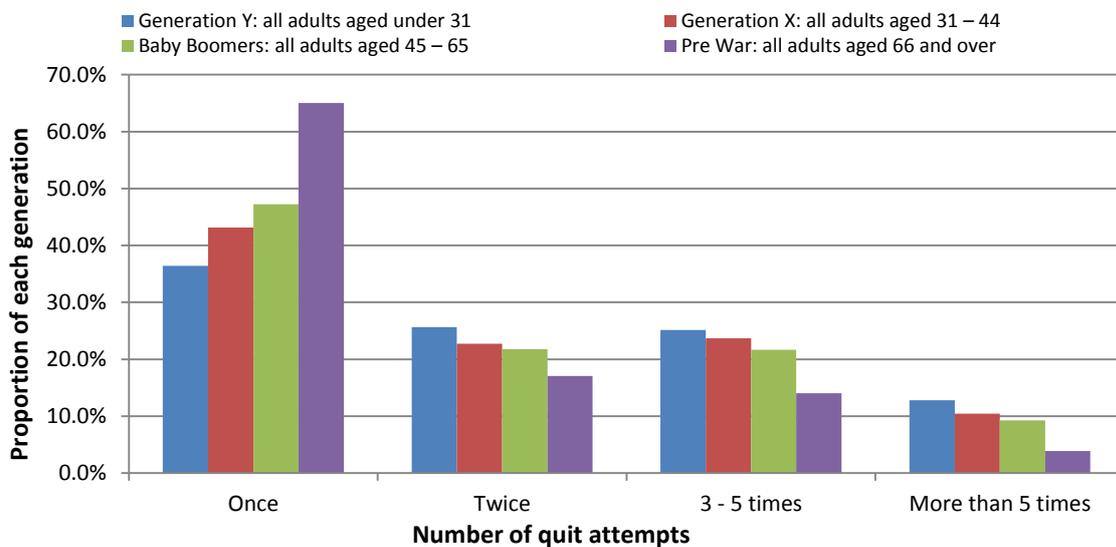
Figure 17: Number of quit attempts, ex-smokers, Warwickshire, by district/borough



In each of the districts/boroughs, the proportion of respondents who took one attempt to quit was the highest, with the proportions generally decreasing with increasing numbers of quit attempts. There is no marked difference between the districts and boroughs in terms of proportion of respondents taking more or less attempts to quit. However, as figure 17 illustrates, ex-smokers from Warwick District and North Warwickshire Borough were slightly more likely to take more attempts at quitting, with those from Rugby Borough and Stratford-on-Avon District more likely to take fewer attempts. However, these proportions are not significantly different from the average proportion for Warwickshire.

Generation analysis

Figure 18: Number of quit attempts, ex-smokers, Warwickshire, by generation



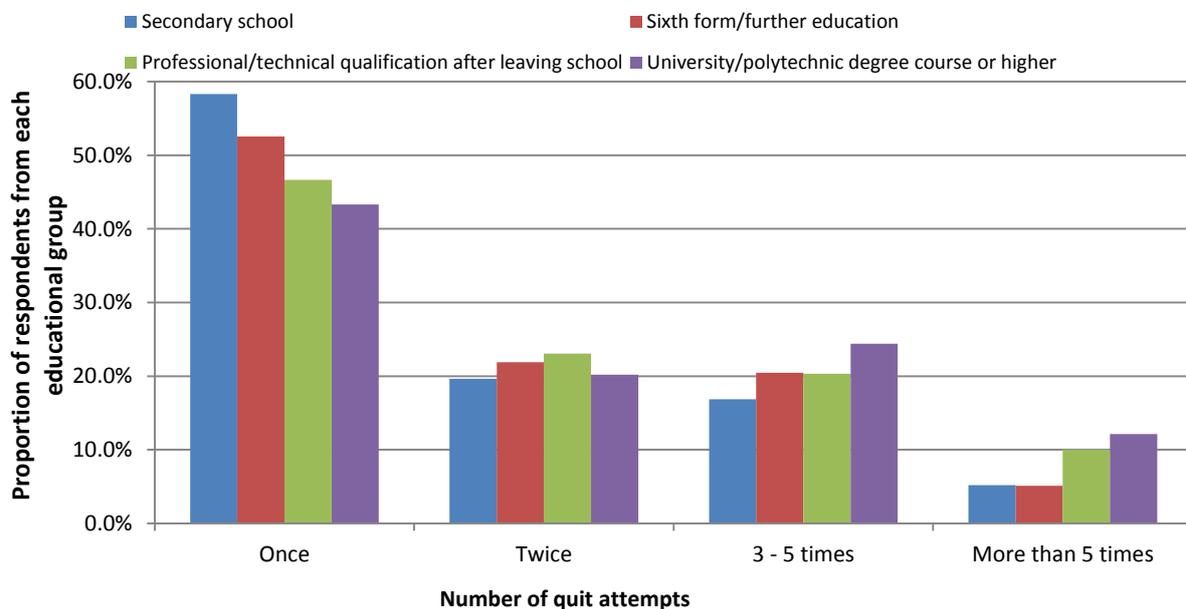
As shown in figure 18, the survey response indicates a relationship between the number of quit attempts taken by ex-smokers and the generation that they belong to. The size of the proportion of those who reported taking one quit attempt increased with increased generational age, ranging from 36.4% of ‘Generation Ys’ to 65.0% of ‘Pre Wars’ (see figure 18), the latter figure representing a statistically significantly larger proportion compared to the next largest proportion in the ‘once’ group. This trend is reversed in each of the other quit attempt categories, with the overall proportion in each generation decreasing over two, 3 – 5 and more than 5 quit attempts, although the differences are not statistically significant.

This indicates a generational difference in the amount of times ex-smokers have attempted to quit and could have implications for the targetting of smoking cessation services.

Highest level of education completed

As shown in figure 19, the highest level of education completed by an individual seems to have some impact on the number of quit attempts made by ex-smokers in Warwickshire. Within each educational group, the highest proportion reported taking one attempt to quit and the smallest proportion for each group reported taking five or more attempts.

Figure 19: Number of quit attempts, ex-smokers, Warwickshire, by highest level of education completed

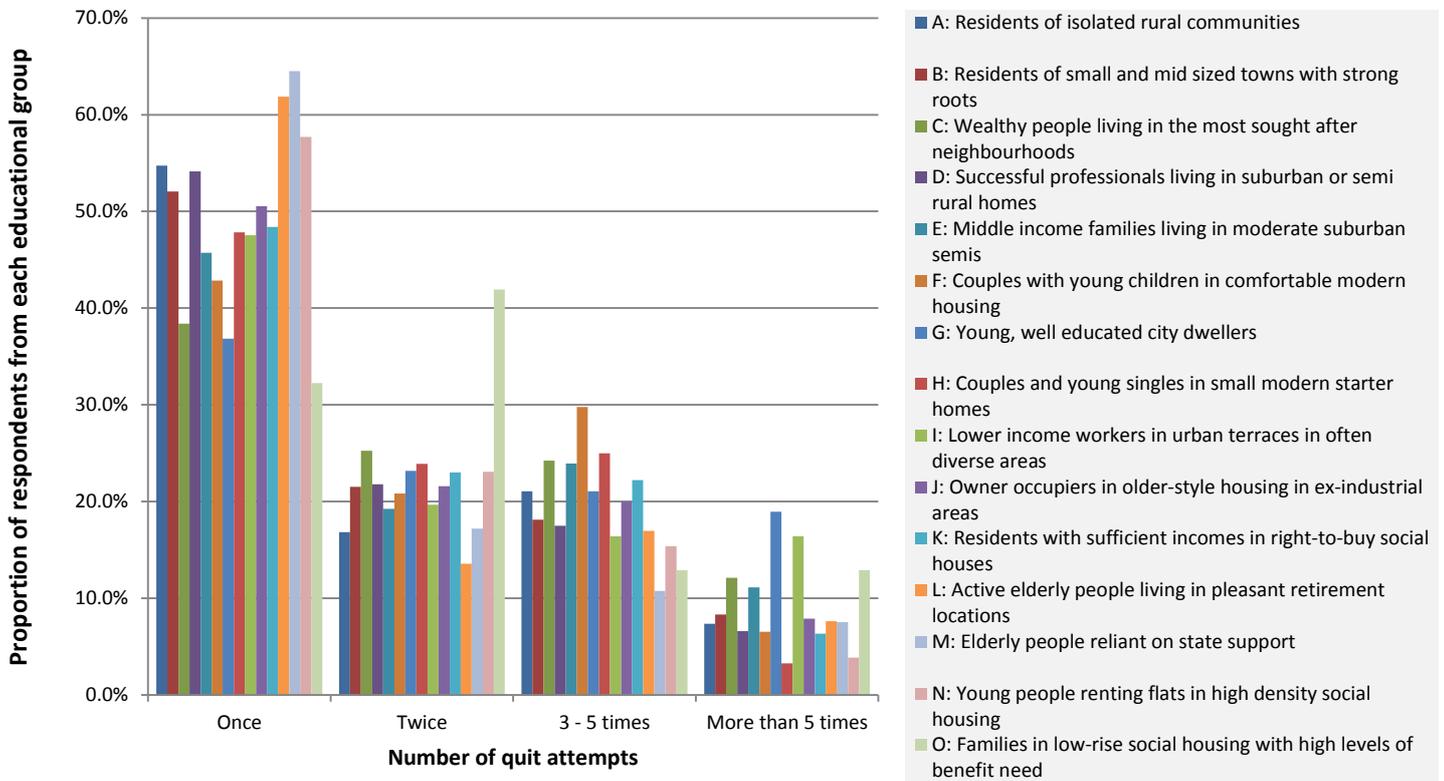


According to survey respondents, taking one quit attempt is a characteristic of those whose highest level of education completed is secondary school; the proportions in the ‘one quit attempt’ group decline with increasingly high levels of education completed, and the proportions in the highest and lowest educational groups are statistically significantly different. This trend is reflected in those who

took '5 or more' attempts to quit, with the proportions in this group highest in the professional/technical qualification and University/polytechnic degree groups.

Mosaic Analysis

Figure 20: Number of quit attempts, ex-smokers, Warwickshire, by household Mosaic group



As shown in figure 20, groups M and L, which represent elderly people, had the largest proportion of respondents taking just one attempt at quitting (64.5% and 61.9% respectively). This reflects the trend identified in the generation analysis, where an association between higher age and taking less attempts at quitting was illustrated. Groups G and O have the lowest proportion of respondents who reported taking one quit attempt (36.8% and 32.2% respectively), with these groups representing young, well-educated city dwellers, and families in social housing with benefit need respectively. This trend is reflected in the proportions who took 5 or more attempts at quitting, with the previously mentioned groups G and O being joined by group I (lower income workers) in having the highest proportions who took more attempts at quitting. Group G has the highest proportion who reported taking five or more attempts to quit, and this is reflective of the previously identified trend of younger people with higher levels of education completed taking more attempts to quit. However, groups O and I having a relatively large proportion of respondents who reported taking five or more times to quit is unexpected, as people in these groups tend to have completed lower levels of education. The groups with the smallest proportion of respondents who reported taking five or more times to quit, groups H and N (3.3% and 3.8% respectively), is also surprising as these two groups represent generally younger people, who were revealed in the generational analysis to take the longest time to quit.

Other factors

- Gender seems to have a limited impact on number of quit attempts taken. In both males and females, the largest proportion reported taking one attempt to quit and the smallest proportion reported taking more than 5 attempts; in each of these groups, the proportions were slightly higher for males than females. The majority of those who reported taking five or more attempts were male (61.3%).

Amongst respondents who reported as being ex-smokers, the following characteristics were revealed to have **no significant impact** on the number of quit attempts undertaken:

- Ethnicity
- Presence of long standing illness or disability
- Self-reported weight

What does this mean?

There has been a big drive in recent years to promote the benefits of stopping smoking – from the smoking ban of 2007 and the introduction of graphic health warnings on cigarette packs in 2008, to campaigns like Stoptober, which saw a quarter of a million smokers take up the quit challenge during October 2013.

It is clear also from the survey results that the majority of people in Warwickshire are aware of the harmful effects of smoking, and smokers are making real efforts to quit – successfully in many instances.

Due to the nature of the survey however, it provides limited insight about smokers under the age of 18. This is a key demographic, as smokers generally start when they are young. In fact, it's estimated that around 600 children (11 to 15 year olds) take up the habit every day in the UK. Reducing this trend will lead to a healthier population over time, as people are less likely to take up smoking in adult life if they have not smoked during childhood.

With this in mind, the government has announced plans to introduce plain cigarette packaging (subject to a short consultation) – which it hopes will prevent children from starting to smoke. The decision follows a comprehensive review of evidence that suggests “exposure to tobacco advertising and promotion increases the likelihood of children taking up smoking”. It is expected that standardised cigarette packaging will be introduced, similar to those in Australia, where the entire pack is taken up with graphic health warnings.

Plain packaging is a further move to limit the appeal of cigarettes to young people, following the instruction to supermarkets and large shops in 2012 to remove tobacco products from display (smaller shops will also need to comply with this from 2015).

An unforeseen factor in the take-up of smoking has been the growing use of electronic cigarettes. Although intended as a quitting aid for traditional smokers, there is concern that these devices are re-normalising smoking and could act as a gateway to smoking, particularly for young people. A whitepaper is currently out for consultation in Wales that proposes a ban on the use of e-cigarettes in enclosed public places. This could lead to a debate about similar bans elsewhere.