# healthwatch Devon

Better services through public involvement

# Smoking Cessation Engagement

April 2015

# Contents

Introduction 1
Key Findings 1
Survey Report 2
Survey Responses 2
How often do you smoke? 2
If daily, how soon after waking up do you smoke?
Have you ever used an e-cigarette?
If you had used an e-cig, was it to (tick all that apply)
Have you heard of the local NHS Stop Smoking Service in Devon?
Have you ever used the NHS Stop Smoking Service?
If you decided to quit smoking in the future, which of the following support options could you see yourself using? (tick all that apply)
Where would you like to access personal support (ie, meeting up with a stop smoking adviser)? (tick all that apply)
When would you like to access personal support in quitting? (tick all that apply) 6
Age:
Gender:
Working Pattern:
Was you current/last form of employment:
What is the highest level of education you have completed?
Additional Feedback
Mental Health
Learning Disabilities
Appendix A11

## Introduction

Smoking is the largest single preventable cause of death, killing over 80,000 people annually in England alone. Total annual deaths in Devon caused by smoking are 1,225 but levels do vary greatly across local authority areas.<sup>1</sup>

NHS Stop smoking services (SSS) are a key intervention in reducing smoking prevalence. They have been in place since 1999 and are one of public health's biggest successes. The table below shows how prevalence has fallen since 2010.

noking Prevalence in Devon (Health Profile data)					
2010	2011	2012	2013	2014	
2010	2011	2012	2013	2014	
19.6	10 E	10.1	20.2	16 00/	
19.0	18.5	18.1	20.2	16.8%	

Smoking Prevalence in Devon (Health Profile data)

Healthwatch Devon was commissioned to undertake a survey to help understand what would encourage more people using the Stop Smoking Service, and how this would need to be delivered to make it more accessible.

The target groups for Healthwatch Devon to engage were:

Target populations:

- Routine and manual workers
- Mental Health
- Unemployed
- Those living in deprived areas

# **Key Findings**

- 1. Of those we spoke to, the majority, over 90%, smoked daily, and over threequarters of these started smoking within an hour of waking.
- 2. Approximately half of those spoken to had tried an e-cigarette, mostly to help cut down or to quit smoking.
- 3. Over three-quarters of respondents had heard of the Stop Smoking Service, but less than a third had actually used the service.
- 4. Approximately one-quarter of those spoken to did not ever see themselves quitting.
- 5. The majority of those that did want to quite were planning to do so alone using a mixture of e-cigarettes and nicotine patches.

<sup>&</sup>lt;sup>1</sup> Actual per year in period 2008-10. Health Profile 2012 Devon. APHO.

- 6. Of those that would like support, face-to-face was the most popular choice of support, delivered either at a GP/doctor's surgery or pharmacy.
- 7. For those with a mental health condition, face-to-face, one-to-one support would be the most welcome form of support. In addition providing peer support once an individual had quit would be welcomed.

## **Survey Report**

As part of this research a survey was made available online and in paper format and promoted to the target demographic. In addition, Ilfracombe and Newton Abbot were chosen as towns where we would engage members of the public on the street; both with the survey and to gather additional feedback.

Due to a series of volunteer and staffing set-backs the Newton Abbot street survey didn't take place.

The response to the survey was poor, 66 responses in total. The majority were gathered whilst in Ilfracombe. The results cannot therefore be considered representative of Devon, but may provide some insights.

#### **Survey Responses**

How often do you smoke?





If daily, how soon after waking up do you smoke?

32 34 •Yes •No

Have you ever used an e-cigarette?



### If you had used an e-cig, was it to (tick all that apply)



### Have you heard of the local NHS Stop Smoking Service in Devon?



Have you ever used the NHS Stop Smoking Service?

If you decided to quit smoking in the future, which of the following support options could you see yourself using? (tick all that apply)



# Where would you like to access personal support (ie, meeting up with a stop smoking adviser)? (tick all that apply)



#### When would you like to access personal support in quitting? (tick all that apply)



In addition a series of demographic questions because we were particularly interested in responses from people from certain demographic groups.





7



#### Was you current/last form of employment:





#### What is the highest level of education you have completed?

The demographic questions were asked in the main part to be able to break down the data and filter it to look at the attitudes toward the Stop Smoking Service and personal attitudes to quitting. These target demographics were:

Target populations:

- Routine and manual workers
- Unemployed
- Those living in deprived areas

However, due to the small sample size, the number of people fitting the routine and manual workers and unemployed categories was very small, 10 and15 respectively. These are too small to draw meaningful conclusions from.

# Additional Feedback

#### Additional Feedback from Street Engagement - Ilfracombe

From the conversations with members of the public on the street in Ilfracombe additional feedback was gathered. This can be summarised as follows:

- A number of respondents commented if they able to quit smoking as a regular activity, they were still wanted to continue to smoke as a social activity when with friends etc.
- There was reluctance to engage with anything that felt 'top-down' and formulaic, whether from central Government or Devon County Council.
- A more grass-roots approach, led by local people who had been former smokers would be more likely to resonate with those considering quitting smoking.

#### Mental Health

Another target population for this piece of work was those living with a mental health condition.

Working with Healthwatch Devon's metal health engagement partner, Be Involved Devon, a visit to the local Exeter's Eco Centre was arranged. 4 people were spoke to directly, and the summary of this engagement is enclosed as Appendix A.

From the responses given it is clear that there is a desire to quite, or at least cut down smoking. For the Stop Smoking service to be able to support the individuals spoken to it would need to be flexible in the support it offered, and for people with mental health conditions this might need to be more one-to-one.

In addition respondents also spoke of peer support. When spending time with peers that were smoking respondents were more likely to start again. Therefore positive peer support could be helpful to sustain those that have managed to stop smoking and reduce the risk of restarting.

#### **Learning Disabilities**

Through Healthwatch Devon's Learning Disability partner, Devon Link Up, sixty people living with a learning disability were spoken about the Stop Smoking Service.

None of those spoken to through Devon Link Up's Speak Up groups smoked. Many were aware of the negative impact of smoking and commenting:

"It's a bad habit" "It's a dirty habit" "It makes your clothes smell" **Appendix A** 

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# Stop Smoking Service Focus Group The ECO Centre Wednesday 18 February 2015 Notes



Helping people with mental health issus to have their say

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#### Background

Devon County Council are currently inviting feedback about the Stop Smoking Service. They have asked Healthwatch Devon and its partners, including Be Involved Devon, to help gather people's views about the bridges and barriers to giving up smoking and about the support services they might need if they were considering giving up smoking.

It was felt important to ensure that the views of people with mental health issues were heard as the Stop Smoking Service needs to particularly reach out to people who may be disadvantaged and/or vulnerable.

Staff at the ECO Centre kindly agreed to host a focus group and set aside a meeting room to enable people to discuss the issues with Martin Parkes, Healthwatch Devon and Charlotte Hubbard, Be Involved Devon. Some people preferred not to attend the focus group but were happy to give their views more informally.

Martin and Charlotte gathered the views of 4 people. Copies of the Stop Smoking Service survey were made available.

Feedback

#### Person 1

E-cigarettes are really helpful as it's more than just smoking, it's an addiction and you need to replace it with something else.

#### Person 2

I first gave up smoking in 2007 after attending a smoking group whilst still in hospital. It was a shock to hear what smoking does to your body and it made me stop for a while. Most people that attended the group started smoking again.

Being around others in hospital suffering from cancer also made me consider quitting.

It can become an accepted and routine habit, particularly if your parents and peers smoke. I have now given up smoking again. I haven't smoked for 3 weeks, but coming to the day service and seeing others, clients and workers, smoke, makes it difficult.

Knowing how it affects your health makes you more likely to give up smoking. Regular check-ups and phone calls might help to tell you well done and give positive comments.

80% of my friends smoke, so I'm trying to hang out with friends who don't smoke to avoid the temptation.

Smoking is very expensive, but the cost doesn't put people off. I think the government has a part to play in this. You could have better filters and less tar.

Feeling stressed leads to smoking. Patches are not helpful but e-cigarettes are, but because you still get your nicotine you can still become addicted.

#### Person 3

It's pointless giving your views as nothing changes. I've never heard of the Stop Smoking Service.

My partner and I both smoke so it's difficult to give up if one of you is still smoking. So we would both need to give up together. I smoke over 20 cigarettes a day. I did give up for 10 years but the older you get the more difficult it is.

I would need a weekly one-to-one service, not a group. They would need to come to my house and it would have to be after 5.00 pm as my partner works.

I gave up for about 6 weeks 3 years ago with the help of a nurse at the Walk-in Centre, but I was involved in a car crash shortly after this which was such a stressful situation that I immediately started smoking again.

I have tried patches and e-cigarettes, I've tried everything, but they haven't helped. I'm not sure if support along with other aids would help.

Everybody smokes at the day centre so it would make it very difficult to stop.

I don't listen to the radio or get a newspaper so I don't get to hear about services and campaigns this way. So I didn't know about the Stop Smoking Service and my GP never mentioned it.

#### Person 4

I am able to access cheap tobacco, £4 a packet rather than £8. I smoke 10 a day, but have cut down, used to be 24 a day. I didn't see a GP about this, I did it all by myself. I feel better for cutting down, but still need one when I'm feeling stressed.

When I was in hospital I was given no help or advice to help me stop.

I had a letter from the government about quitting smoking, but don't know about the Stop Smoking Service.

Most people who live in my house smoke. My social worker doesn't like me smoking, but doesn't help me to quit.