Thurrock's Joint Strategic Needs Assessment

04 Situation Report Series

Tobacco

JULY 2026



thurrock.gov.uk

A series of situation reports developed to provide an overview of the current situation of a topic of concern. The reports are purposely short and focused in order to provide timely updates allowing quicker response. Outcomes could range from informing colleagues, taking action or triggering a deep dive into the topic.

The report is produced by the Thurrock Public Health Intelligence team after reviewing available data.

Acknowledgements: This JSNA product has been developed with input from partner organisations represented through the JSNA Steering Group. The inclusion of partner logos recognises their contribution to the JSNA programme and does not necessarily indicate formal endorsement of the content of this document.

Look out for our upcoming reports on:



Cancer Screening in Thurrock



Oral Health in Thurrock



Respiratory Conditions in Thurrock

Background

Tobacco use is one of the leading causes of preventable illness, disability, and premature death worldwide. Smoking is a major risk factor for a range of chronic diseases, including cardiovascular disease, cancer, chronic obstructive pulmonary disease (COPD), stroke, and respiratory illnesses. It also contributes significantly to healthcare costs and places substantial pressure on health and social care services. Reducing tobacco use and exposure to tobacco smoke would mean improving population health, reducing inequalities, and preventing avoidable diseases and death.

Tobacco consumption has been identified as an area of concern in Thurrock as Thurrock experiences worse outcomes than both the East of England (EoE) and England averages across several tobacco-related indicators, including smoking-attributable mortality (262 per 100,000 compared with 202 nationally and 184.8 regionally), and mortality from COPD (62.3 per 100,000 compared with 45.5 nationally and 40.9 regionally).

The figures published by Action on Smoking and Health (ASH) Action on Smoking and Health (ASH), a public health charity set up by the Royal College of Physicians to end the harm caused by tobacco, estimate the annual cost of smoking in Thurrock across lost productivity, healthcare, social care and fire-related incidents.

The breakdown for Thurrock includes:

- £112 million in lost productivity
- £38.2 million in social care costs
- £6.22 million in healthcare costs
- £1.46 million in smoking-related fire costs

The high burden of smoking-related harm and mortality in Thurrock highlights the importance of the Tobacco Situation Report (SitRep).

It's important to highlight that much of the tobacco research and data is in relation to cigarette smoking in adults and therefore cigarette smoking is used as the primary metric in this report. Also, important to note that official data on smokeless tobacco at a subnational level (LA/ County level) in the UK is highly limited and hence we have used the available data on smoking.

Data Sources

The primary source of the data and information used in this report is Office of National Statistics (ONS) and NHS England data, presented by OHID – Public Health Fingertips https://fingertips.phe.org.uk/profile/tobacco-control.

The Sitrep also used insights and data from Action on Smoking and Health (ASH), a public health charity set up by the Royal College of Physicians to end the harm caused by tobacco.

Headlines

- Thurrock has the **second-highest** smoking prevalence in the East of England and continues to **exceed both regional and national averages,** with the gap widening in recent years.
- Despite a gradual decline over time, Thurrock records the **highest smoking-attributable hospital admission rate in the EoE,** indicating a substantial impact of smoking-related ill health.
- **Smoking at the time of delivery** has decreased over the past decade but remains **above regional and national averages,** posing ongoing risks to maternal and infant health.
- Adults in **routine and manual occupations** and people with **long-term mental health conditions** continue to experience high smoking prevalence, reinforcing the need for targeted tobacco control interventions.
- **Younger adults and men** are more likely to smoke than older age groups and women.
- There are significant inequalities in smoking prevalence across different ethnicities, religion and country of birth, reflecting the influence of cultural and demographic factors on smoking behaviours.
- People **reporting no religion,** those of **Mixed or Other ethnic backgrounds,** and people born in Poland show higher smoking prevalence nationally.

Public Health Response

This situation report highlights the significant challenges we still face in Thurrock regarding the harm caused by smoking. The gap in prevalence of smoking between Thurrock residents and the averages for both England and the East of England is growing despite considerable efforts detailed in the “what’s happening in Thurrock” section of this report. High risk/ priority groups include Routine and manual workers, women smoking during pregnancy and people with long-term mental health conditions.

Thurrock public health fully supports the smokefree 2030 ambition, the UK government ambition to reduce adult smoking rates to 5% or less, making smoking obsolete. The plan relies on rolling measures like raising the legal smoking age year-on-year so younger generations can never legally buy tobacco, alongside increased funding for local stop-smoking services. By increasing the outreach provision and targeting key areas including but not limited to large employers of manual workers, mental health services, substance misusers and global majorities.

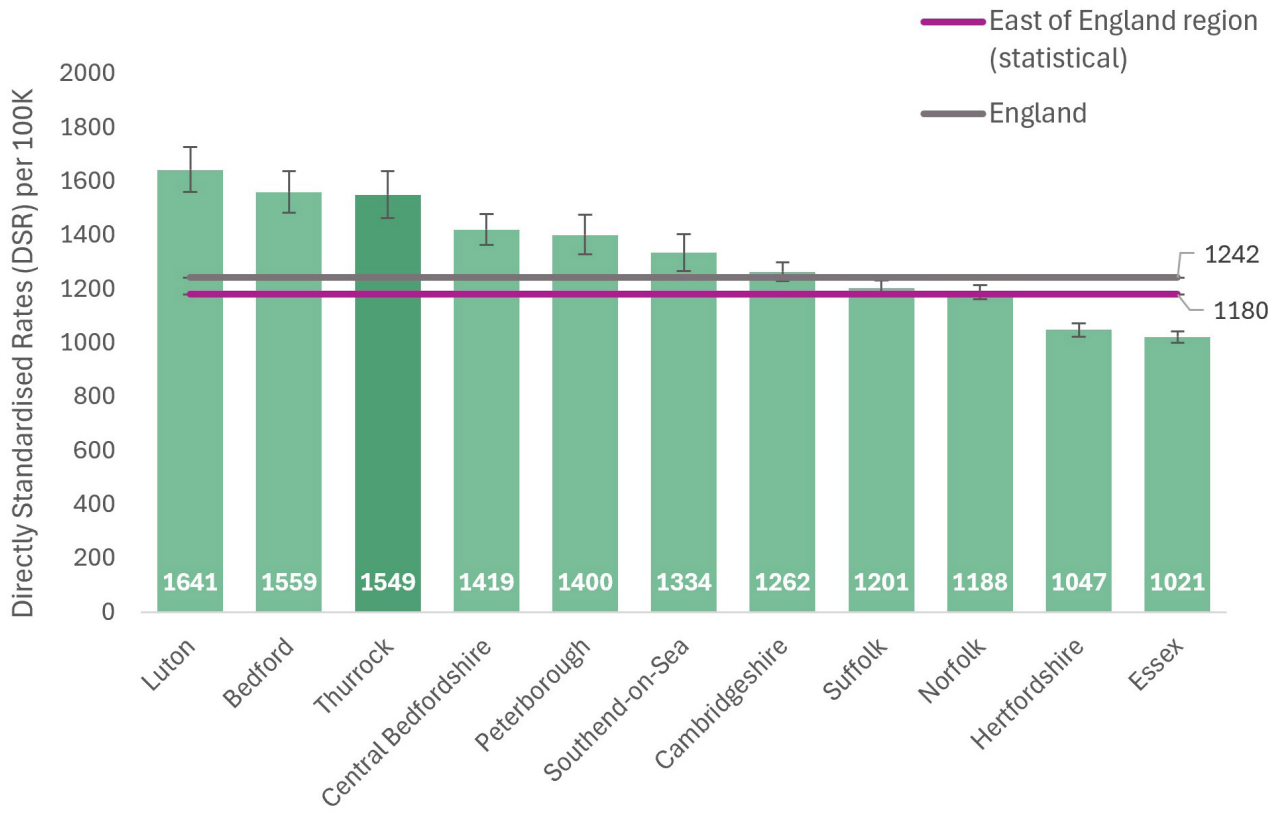


Smoking attributable hospital admissions (2022/23)

This indicator highlights the impact of high levels of smoking on hospital admissions. Thurrock has the third highest smoking attributable hospital admission rates in the East of England region (1549/ 100K). This is also higher than the National average (1242/ 100K) [Figure 1].

Although rates decreased during the period, Thurrock consistently continued to have a higher burden of smoking-related admissions than both EoE and England reaching 1,549/100K in 2022/23 as compared to 1,180/100K for EoE and 1242/100K for England.

Figure 1: Smoking attributable hospital admissions (2022/23



Source: OHID, based on Office for National Statistics data

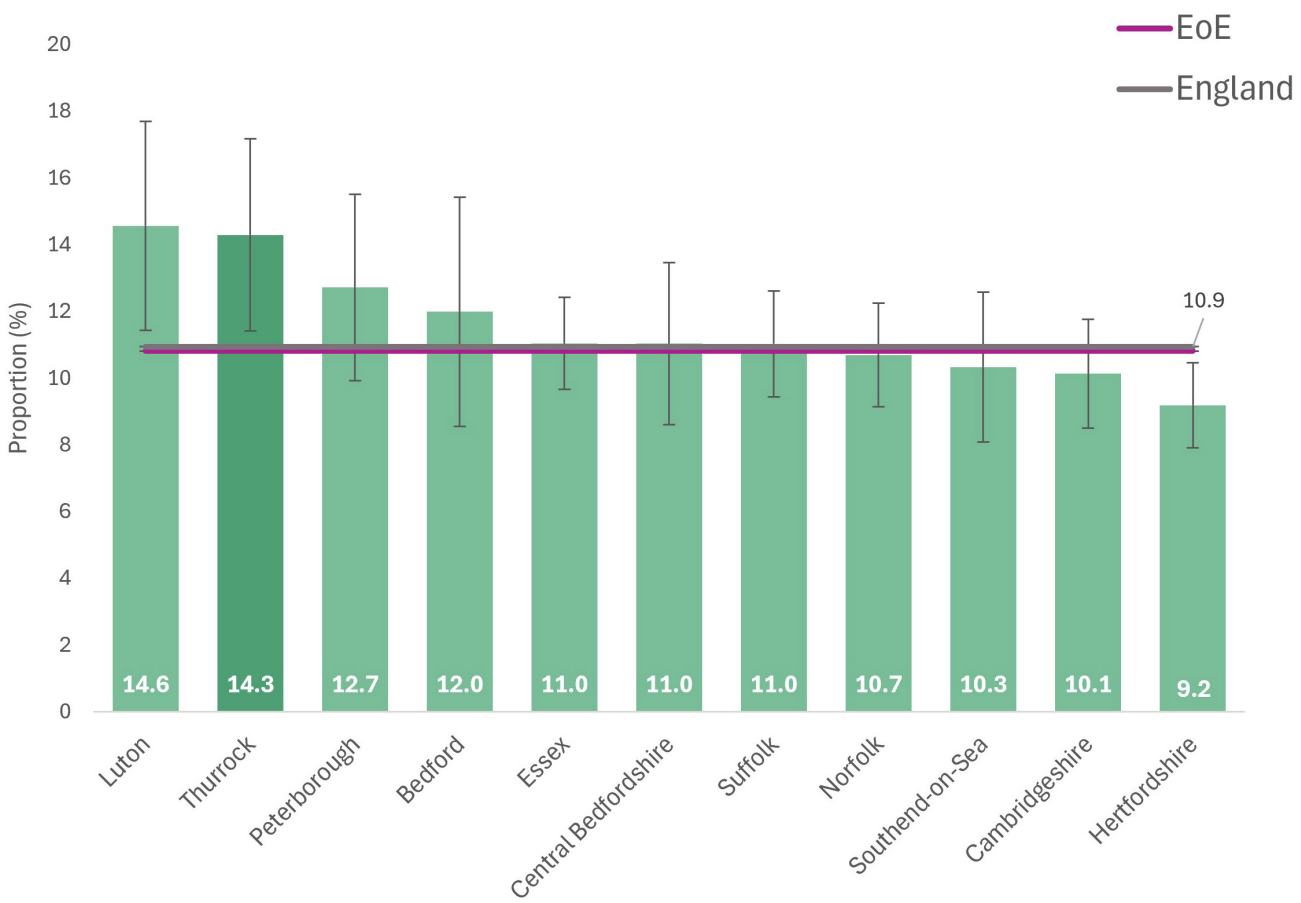
Smoking in Adults

Smoking Prevalence in adults (aged 18 and over):

Thurrock has the second-highest smoking prevalence (14.3%) in the East of England (EoE) region (10.8%), this is also greater than national average (11%) [Figure 2].

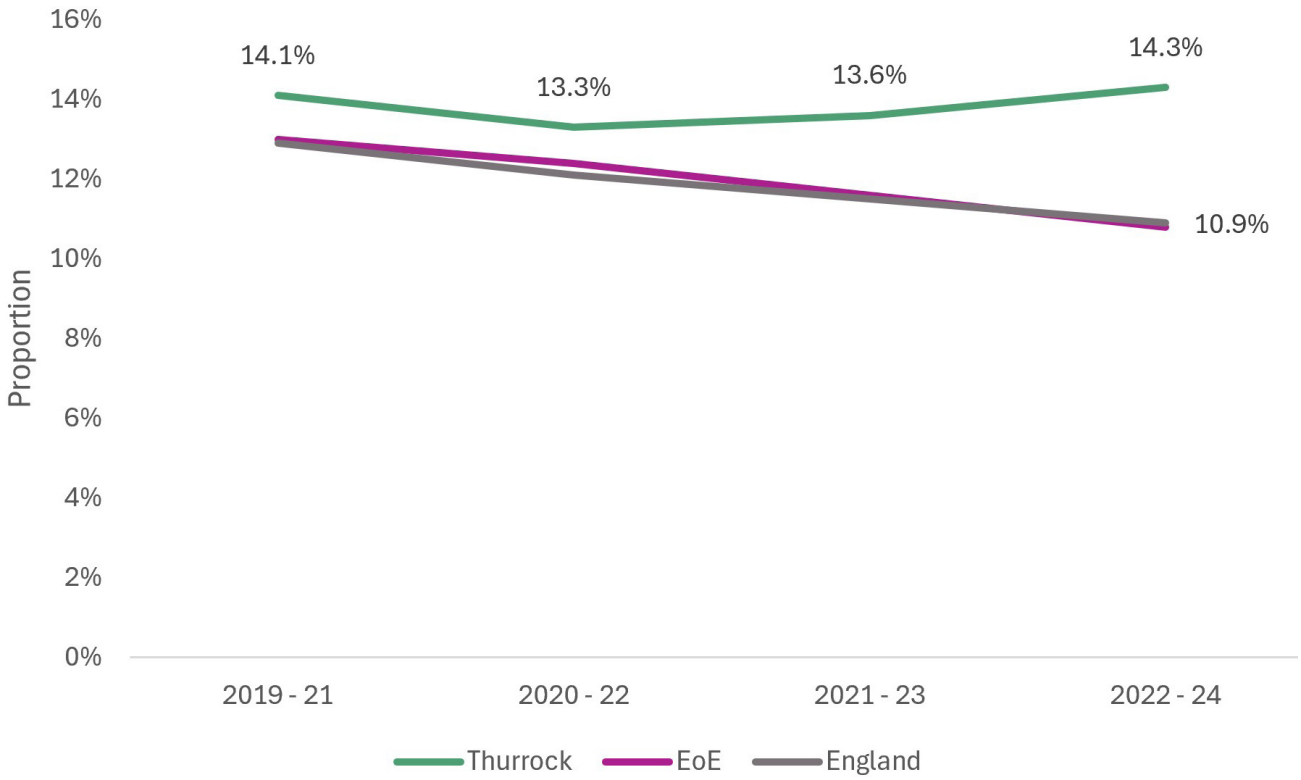
Smoking prevalence in Thurrock remained consistently higher than the Regional and National averages between 2019-21 and 2022-24, during which time both EoE and England rates continued to fall, as a result the gap between Thurrock and the regional and national averages has widened over time [Figure 3].

Figure 2: Smoking prevalence in adults (18+) – current smokers, APS (Annual Population Survey) (2022-24) (3 year range) Thurrock Vs EoE, England & EoE Statistical neighbours



Source: OHID, based on Office for National Statistics data

Figure 3: Smoking prevalence in Adults - APS trend (3 year range) - Thurrock Vs EoE & England



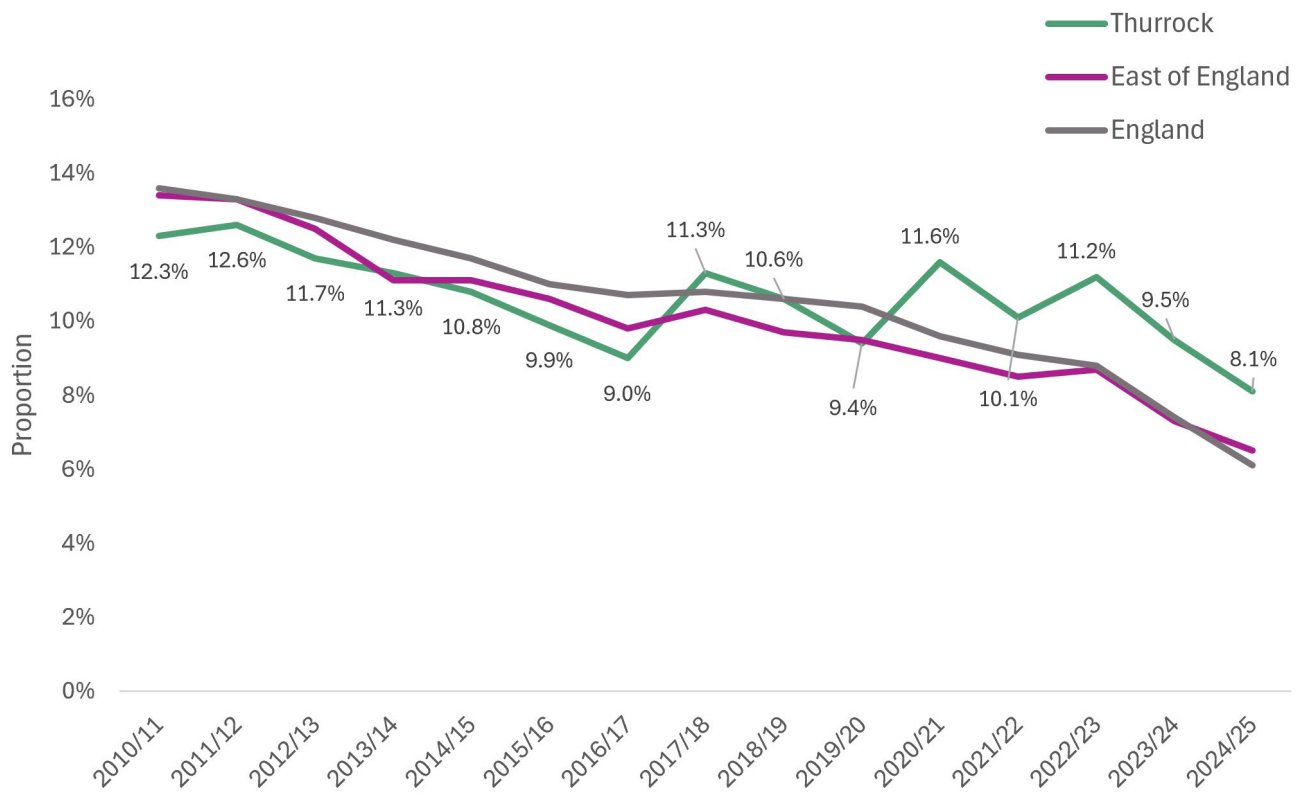
Source: OHID, based on Office for National Statistics data

Smoking status at the time of delivery:

Smoking in pregnancy has well known detrimental effects on both the baby and the mother. This leads to poor health outcomes for the baby throughout their childhood and adulthood as well.

The proportion of women smoking at the time of delivery in Thurrock has generally declined over the past decade, [from 12.3% in 2010/11 to 8.1% in 2024/25]. However, the rate remains higher than both the regional and National averages [EoE - 6.5% and England 6.1%]. A pattern shift appears to have occurred around 2017/18 in Thurrock, the cause of which is unknown. [Figure 4]

Figure 4: Smoking status at the time of delivery trend - Thurrock Vs EoE & England



Source: OHID, based on Office for National Statistics data

Inequalities in smoking prevalence

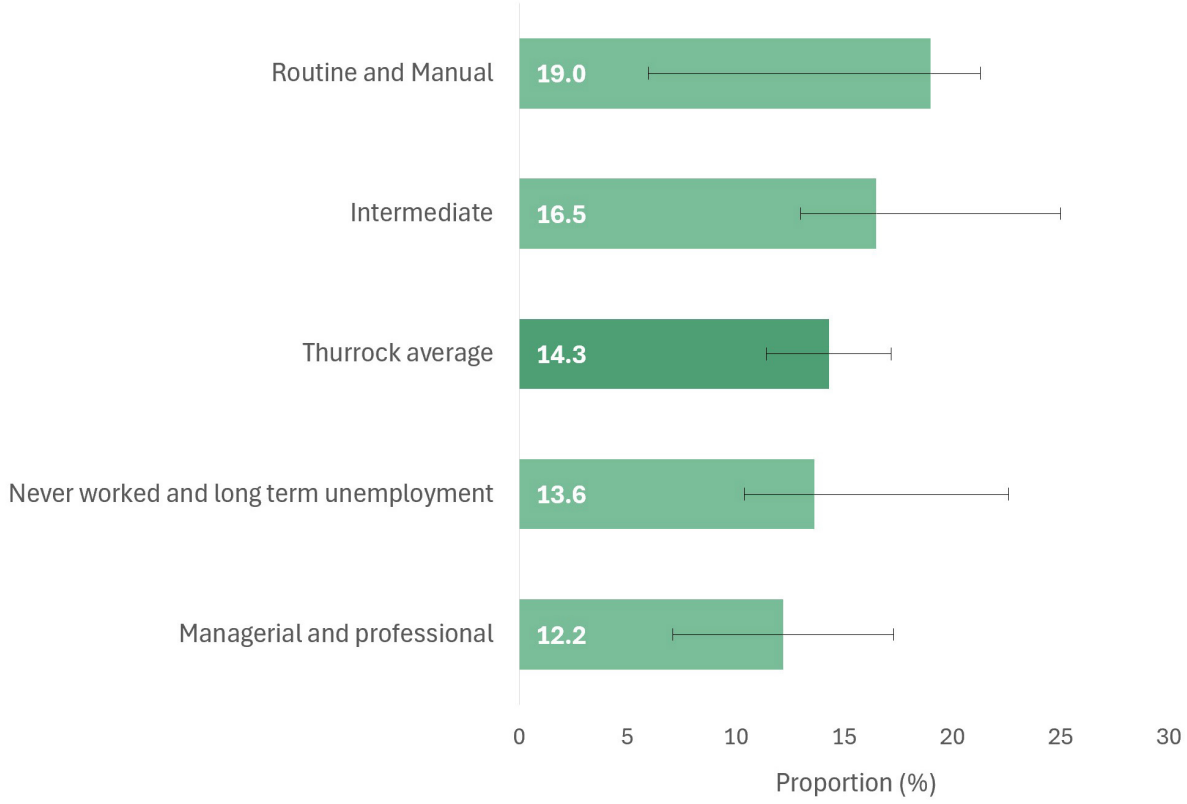
There are some groups that are disproportionately affected by smoking, which contributes significantly to health inequality in the borough. Smoking prevalence estimates for different population groups are often not available at regional or local authority level, but the national values can still provide some insight.

Smoking prevalence is highest among disadvantaged populations, including people living in deprived areas, those with lower incomes, younger adults, and individuals with mental health conditions. Smoking rates also increase with neighbourhood deprivation.

Occupation classification:

Nationally smoking prevalence varies according to occupation classification, and this is seen in Thurrock as well with smoking prevalence in the "Routine and Manual" group being the highest (19%) [Figure 5], similar to national average for the same group (19.2%). The trend for this group has been increasing since 2020 – 22.

Figure 5: Smoking Prevalence in adults (aged 18 and over) - current smokers (APS) (3 year range) by occupation classification, Thurrock

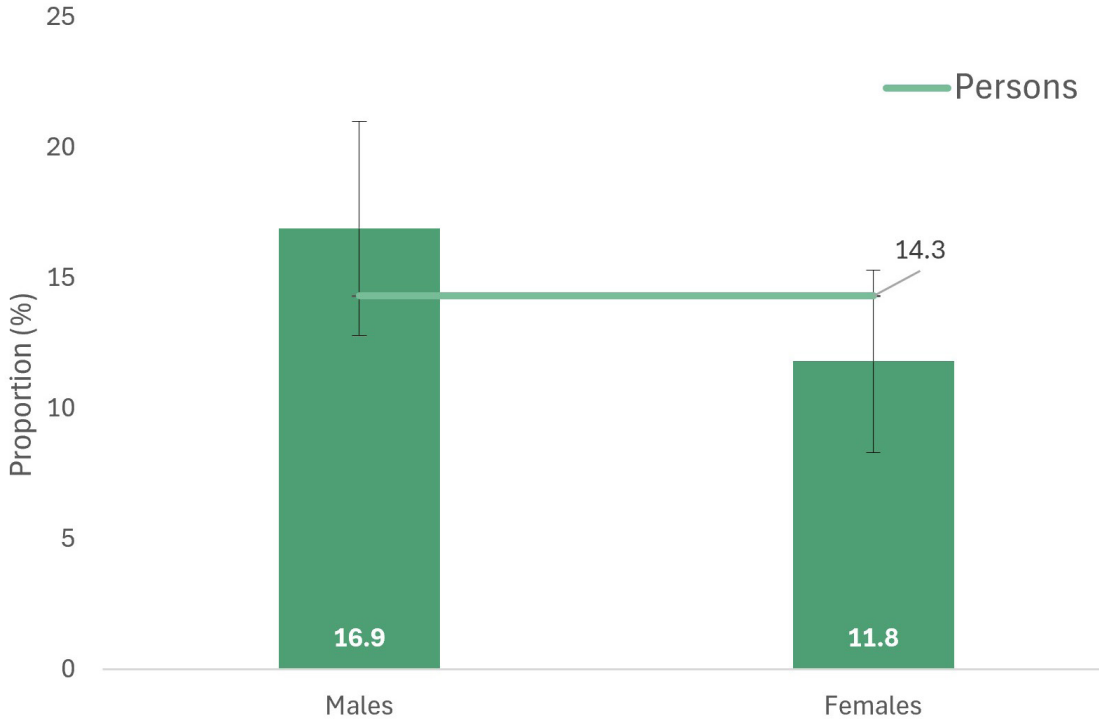


Source: OHID, based on Office for National Statistics data

Age and Sex:

Smoking prevalence also varies by age and sex; males and younger age groups being associated with greater smoking prevalence. Thurrock shows higher smoking prevalence in males than females [Figure 6]. For England, in 2022 – 24, the APS reported higher smoking prevalence in 25 – 29-year-olds (13.9%) compared to 11.1% and 10.1% in 60-64 year olds and 65-69 year olds respectively.

Figure 6: Smoking Prevalence in adults by sex (aged 18 and over) - current smokers (APS) (3 year range) (2022 - 24), Thurrock



Source: OHID, based on Office for National Statistics data



Ethnic groups, Religion and Country of birth:

Smoking prevalence varies considerably across ethnic, religious and country of birth groups, highlighting significant inequalities. According to APS (2022 - 24), the smoking prevalence in England was highest among people from Other ethnic group (19.6%), those of Mixed ethnicity (16.1%), people reporting no religion (12.8%), and those born in Poland (19.3%). In contrast, smoking prevalence was lowest among Black and Chinese ethnic groups (6.9% and 8.8% respectively), Sikhs (3.2%), Hindus (5.3%), Jewish people (5.4%), and individuals born in India (4.3%).

Adults with long-term mental health condition:

Individuals with mental health conditions are considerably more likely to smoke than those in the general population, and smoking prevalence tends to rise with increasing severity of mental illness. Tobacco use is a key factor contributor to the 10–20 year reduction in life expectancy observed among people with mental health conditions. People with a mental health condition are just as likely to want to stop smoking as those without, but they are more likely to be addicted to smoking and more likely to think it will be difficult to quit. The smoking prevalence in adults with a long-term mental health condition in Thurrock is 21.8%, which is notably higher than the borough's average (14.3%).



Smoking and Children

About 9.56k children in Thurrock live in smoking households. Each year around 370 children in Thurrock start smoking (Action on Smoking and Health – ASH, 2025). Children whose caregivers smoke are more than twice as likely to have tried cigarettes and four times more likely to regularly smoke. Two thirds of those trying one cigarette will go on to become daily smokers, at least temporarily.



What's happening in Thurrock

Supporting residents to stop smoking is included within the refreshed Thurrock Health and Wellbeing Strategy (Living Well domain) as a desired outcome, and relevant indicators are monitored as part of corporate performance requirements.

Additionally, our Tobacco Control Strategy 2023-2028 focusses on four priority areas:

1. Prevention

A new post especially aimed at youth vaping has been developed by Open Road Young Peoples Drug and Alcohol Service to include:

- Making contact with secondary and primary schools to promote vaping education, early intervention and referral pathways for young people.
- Developing partnerships with schools and secured interest in vaping awareness delivery, including planned programmes with Orsett Heath Academy and West Thurrock Academy.
- Introducing a referral pathway for young people aged 11-17 seeking support to reduce or stop vaping, including self-referrals and school referrals.
- Offering and arranging vaping-focused assemblies, classroom workshops and small group sessions tailored to school needs.
- Delivering outreach to schools experiencing concerns around vaping prevalence and confiscated vapes, including discussions around student workshops and staff training.
- Expanding the offer into primary schools with transition-focused Year 6 workshops covering vaping awareness, healthy decision making, resilience, energy drinks and alcohol education.
- Working with safeguarding and pastoral teams to identify young people requiring additional support and provide appropriate early intervention.

[1] Not yet published

Vaping-specific support available includes:

- Whole-school vaping awareness assemblies.
- Targeted classroom workshops.
- Small group interventions.
- 1:1 support for young people wanting to reduce or stop vaping.
- Education on nicotine dependence, health impacts, myths and misconceptions, marketing influences and peer pressure.
- Resilience and decision-making sessions.
- Staff training and awareness sessions.
- Advice and support around emerging vaping trends and harm reduction.

Thurrock Trading Standards have led Illegal Tobacco and Vapes enforcement visits and were accompanied by Community Tobacco Partnership Stakeholders namely Grays Town Police Officers, Thurrock Council's Public Health Officers, Wagtail UK Ltd's Tobacco Detection dogs and Thurrock Healthy Lifestyles Stop Smoking Team.

Prior to the Illegal Tobacco and Vapes enforcement visits, retailers within the Clarence Rd to Stanley Rd corridor (including High St Grays) were provided with advice/guidance on the consequences of selling/storing illegal tobacco & vapes. The retailers were provided with Illegal Tobacco and Vapes Posters (that included an anonymous reporting tool of illegal tobacco & vapes and under aged sales of illegal tobacco & vapes).

Overall, 88% of retailers were found to be compliant with Tobacco & Vapes legislation and did not have illegal tobacco & vapes displayed for sale at the time of the visits on the 9th and 10th July 2026.



2. Creating Smoke-Free Environments

Forward Trust Adult Substance Misuse Service has worked with stop smoking midwives throughout Essex to help them address continued smoking throughout pregnancy, sometimes due to cannabis use. All stop smoking midwives have attended specific tailored training and are able to access FT for further advice and guidance at any time.

THLS have accessed large employers including the Port of Tilbury and Amazon to offer support and interventions to those wanting to stop smoking

3. Helping Smokers to Quite

Thurrock Council's Healthy Lifestyle Service provides free specialist support, personalised quit plans and practical advice for residents who want to stop smoking, with access to free nicotine replacement therapy (NRT), vape and prescription only medications (subject to eligibility). In addition, for residents who would prefer an app-based support, can download a free Smokefree app, giving them up to six months of free premium access to stop smoking support.

The service also employs a team of Stop Smoking Outreach Health Trainers, tasked who play a key role in increasing access to stop smoking support, by delivering services in a wide range of community and non-traditional settings including community hubs, libraries, workplaces, social housing, mental health services, and substance misuse services.

They proactively engage disadvantaged and priority populations, using local insight to understand barriers to quitting and tailoring support for groups such as routine and manual workers, ethnic minority communities, LGBTQ+ people, asylum seekers, and people with serious mental illness. The role involves building strong partnerships with voluntary, community, faith and social enterprise organisations, housing providers, NHS services, and employers to deliver support in trusted environments. The outreach trainers have worked proactively with large companies including but not limited to The Port of Tilbury and Amazon.

The Outreach Health Trainers also improve accessibility through flexible appointments, digital support, vape initiatives and incentive schemes, while promoting services through targeted communications, community champions and national campaigns. In addition, they support workforce development by delivering Very Brief Advice (VBA+) training and encouraging frontline staff and clinical champions to identify, refer and support smokers to quit.

Health trainers and Forward Trust (adult substance misuse service provider for Thurrock) have worked in partnership with Essex, Southend and Thurrock midwives to ensure that pregnant women are given the correct information, advice and support to stop smoking (including cannabis) as this was a reason stated by some women for not stopping. All stop smoking midwives in the Greater Essex footprint are now trained in this area and have direct links into substance misuse services.

The Outreach team are working in partnership with Mid and South Essex Recovery College to develop and deliver a Pre-quit course aiming to provide a supportive, mental health-informed pathway that prepares participants successfully engage with formal stop smoking services and achieve a sustained quit attempt. This course is scheduled to start in October 2026 and will be fully evaluated using a combination of participant feedback, outcome measures of numbers going on to access services, set quit dates and achieve 4 and 12-week smokefree status, and accessibility and wider reach.

THLS is also working with the Tobacco Control Lead to implement the Cut Down To Stop (CDTS) programme alongside their Standard Treatment Programme delivery. CDTS involves setting progressive smoking reduction goals, with plan to stop completely within a specified period. Individuals who feel unable to commit to stopping abruptly can be supported to cut down the amount they smoke with the help of a stop smoking aid as part of a structured CDTS programme. This is supported by NICE guidance (NG209) and the 2024 Local Stop Smoking Services and Support: commissioning, delivery and monitoring guidance. Participants will initially be smokers from priority groups such as those experiencing mental health issues, substance misuse, and homelessness.

Thurrock Public Health has commissioned the smoke free app., an evidence-based mobile tool designed to help people stop smoking. The app is available in multiple languages and can therefore be used by people whose first language is not English to access support and access to stop smoking quit aids. To further increase uptake, we are using a VCFSE grants programme to support organisations to provide one to one support to residents whose first language isn't English.

Thurrock's health and wellbeing needs
Situation Report Series