

Trafford's Tobacco Alliance

The Trafford Tobacco Alliance is a collective partnership of stakeholders and local representatives. Its primary role is to provide strategic leadership to improve the health and wellbeing of Trafford's population and to reduce the inequalities in health experienced by some communities, through tobacco control.

Trafford's Tobacco Alliance will collaboratively develop and support the vision and strategy for tobacco control across the borough.

Trafford Tobacco Control Vision

Trafford's Tobacco Alliance envisage making Trafford Smokefree by 2030 (meaning less than 5% of the population would smoke) in line with the Government's ambition. In doing so, we will use opportunities to ensure the health and wellbeing of all Trafford residents is maximised and individuals and their families can avoid the detrimental consequences of tobacco harm.

Trafford Tobacco Control Strategy

Smoking is a primary cause of inequalities in health outcomes. This is the leading cause of preventable illness and premature death in England, with about half of all lifelong smokers dying prematurely, losing on average around 10 years of life.

In 2019, the Government set an objective for England to be smokefree by 2030, meaning less than 5% of the population would smoke by then.

When looking at Trafford's Smoking Prevalence, there are two primary data sources which include:

OHID National Data - This is pulled from the annual population survey (APS). The APS rate for Trafford (both the 1 year rate for 2023 and 3 year rate, 2021-2023) is [9.6%](#).

General Practice Data - From QOF indicators, this shows the current smoking prevalence per 1,000 based on data available for the 29% of patients who had their smoking status recorded in the last 24 months. This shows a smoking prevalence of [11.8%](#) for 2022/2023.

Both these data sources, suggest Trafford's smoking prevalence is estimated to be around 9-12% and therefore not yet meeting the Government's smokefree target for 2030.

To achieve the Government's smokefree target, the Trafford Tobacco Control Strategy will have four main areas of focus which include:

Reduce Variation in Smoking Rates

To address smoking related health inequalities, we must reduce the high variation in smoking rates seen across the borough in certain population groups and geographical areas in Trafford.

When considering Trafford Council's Needs Assessment on smoking, the following high priority groups were identified:

- **People with Severe Mental Illness (SMI)** – Someone with SMI is defined as anyone with a diagnosed mental illness such as schizophrenia or bi-polar. It does not include anxiety and depression. The SMI population in Trafford is around 2500 according to general practice data. The national smoking rate for people with SMI is 40.5%. This is over 3 times the rate when compared to the general population. In Trafford, our SMI smoking rate is 42.1% an increase from the previous year at 35%, slightly above the national averageⁱ.
- **Routine & Manual Workers** – Nationally the smoking rate is 22.5% for this population cohort, almost double the general population. In Trafford, our rate is slightly below the national average at 17.4%.ⁱⁱ
- **People living in Social Housing/Homeless** – The rationale for a higher smoking rate in people who are social renters is similar to routine and manual workers. 50% of social rented households are within the lower income quintileⁱⁱⁱ with a greater smoking prevalence in populations experiencing economic deprivation. In addition, high risk groups are more likely to live in social housing. In 2020-21, 55% of social rented households had at least one household member with a long-term illness or disability (2.2 million households). This contrasts with 28% of owner-occupied households, and 29% of privately rented households.^{iv} Research also shows that people that are homeless have the highest smoking rates, estimated to be at 60-80%^v.
- **People with Drug Dependence** – Smoking is highly prevalent among people in treatment services. Nationally, 41% of people receiving treatment for substance use were identified as smokers. Trafford data is slightly below this at 36% and equates to 59 people (2023).
- **The LGBT Community** – There are reports of higher smoking rates within the LGBT community. Trafford has an estimated 5,410 people who identify as LGBTQ+, and it is anticipated that approximately 649 of them are smokers.^{vi} We currently do not have robust data on the smoking rates of the trans community specifically, or the LGBT community in Trafford.
- **Other High Prevalence Groups** – We do not have local data available, but national data also shows that the following groups are more likely to smoke than the general

population: Carers providing unpaid care^{vii}, adults with disabilities^{viii}, people in the criminal justice system,^{ix} and people from Gypsy, Roma or Traveller communities.^x

- **West and North Neighbourhoods** – The West area of Trafford has a smoking prevalence of 13.4% which is above the national and Trafford average. The North's smoking prevalence is 15.4% in 2022, also above the national and Trafford average.

We must ensure these groups are offered stop smoking support. We will use a 'Making Every Contact Count' model, making sure our interventions are as accessible as possible across the borough. We will find people who have the motivation to quit smoking and support them to do, making sure our stop smoking services are delivering the support in line of NICE guidance. For those who don't want to quit smoking, we will take a harm reduction approach to reduce their smoking and the harms from second hand smoke.

Prevention & Reducing Risk

To ensure that we prevent the uptake of smoking and support those most at risk of the harms of tobacco to stop smoking.

To maintain a smokefree ambition, we must prevent the uptake of smoking. Smoking remains an addiction which is largely taken up in childhood, with the majority of smokers starting before the age of 18^{xi}. When considering risk of long-term use from those who already smoke, these are considered greater in women who are pregnant due to the harm to the unborn baby and for people with long-term health conditions.^{xii}

Here is what we know about these groups in Trafford:

- **Young people** – The 2022 Trading standards survey which interviewed 833 Trafford young people aged between 14-17 around their smoking behaviours. This survey shows us that Trafford aligns to the national average. 3% of young people surveyed claimed to be a regular smoker and 90% said they had never smoked, lower than the GM average of 81%. For vaping, Trafford also aligns to the national average with 10% of Trafford young people claiming to vape occasionally or regularly, below the GM average of 22%. 77% of people asked had never tried a vape, higher than the GM average of 59%. Trafford has an estimated population of 12,000 14–17-year-olds. Based on the Trading standards data, we can estimate that we can estimate that roughly 2775 young people have tried a vape, 1,600 regularly or occasionally vape and 360 smoke.
- **Pregnancy** - Smoking during pregnancy can cause serious pregnancy-related health problems. These include complications during labour and an increased risk of miscarriage, premature birth, stillbirth, low birthweight and sudden unexpected death in infancy. Trafford has the largest percentage of women whose smoking status was not known at time of delivery in the country at 36% which equates to 767 women. This is significantly above the national average of 4% and the Greater Manchester average which is 17.4%. Of the 63% of women, we do have known data on, only 4.9% are

smokers, which is significantly below the national average of 9.1% and represents 77 women.

- **People with Long-Term Conditions** - Smokers are more likely to live with a long-term illness and many long-term conditions are either caused or exacerbated by smoking. For example, Chronic Obstructive Pulmonary Disease (COPD) causes 30,000 deaths in England every year, and smoking accounts for as many of 80% of COPD related deaths^{xiii}.

To prevent the uptake in young people, we will use opportunities through the health curriculum in schools, so that children and young people are discouraged from taking up smoking. We will also offer a young people's service where they can access factual information and support to stop smoking, and other new and emerging substances such as illicit e-cigarettes (vapes).

Another effective way to reduce the number of young people smoking is to reduce the number of adults who smoke. We will use opportunities within our organisations to reach the whole population and warn about the dangers of smoking tobacco and help raise awareness of smoking cessation support and tools. On average, Greater Manchester campaigns reach 8 in 10 smokers and inspire 3 in 4 to take positive steps towards quitting either by seeking support, cutting down or stopping smoking entirely^{xiv}. We will work to promote both regional and national campaigns such as 'National No Smoking Day' & 'Stoptober' in the Trafford borough. We will also ensure stop smoking messages are incorporated into wider health campaigns such as cancer, and fire campaigns. It is also important we ensure organisations and shops are compliant with this messaging.

For pregnant smokers, maternity services are in an excellent position to engage with mothers, using carbon monoxide (CO) monitors to assess smoking status. We will also work with health services and the Voluntary, Community, Faith, and Social Enterprise (VCFSE) sector supporting people with long term conditions to deliver brief interventions and clear messaging about the benefit of stopping smoking.

We will seek to improve our baseline data to ensure that our programmes of work are having a positive impact.

Effective Enforcement

To deliver on the enforceable legislation and regulations in the borough.

We will improve compliance with produce safety and age restricted sales legislation. This will be delivered through numerous visits to premises and where appropriate, seizures and closures. We will also recruit volunteers age under 18 to support secret shopper initiatives.

To achieve this ambition, we must ensure this activity isn't delivered in isolation. This will depend on intelligence between partners and trading standards to identify which premises

are suspected of selling illicit tobacco and vapes and to identify volunteers to support this work.

We will also look at enforcement of additional legislation for example school policies and our own organisational policies around smoking and e-cigarettes (vapes), as well as enforcement of the Tobacco & Vapes Bill and disposable vapes ban.

Protect the Environment

To reduce the impact smoking has on both the individual's environment and the wider environment in Trafford.

Smokefree homes protect people from the risk of harm from smoking within their own environments. We will work with partners, including housing and the fire & rescue service to reduce associated risks such as fire hazards from smoking.

Smokefree spaces protect people from tobacco smoke and help smokers reduce their tobacco use. Making smoking less visible to children and young people also helps to stop normalising this behaviour. There is no safe level of exposure to second-hand smoke, even brief exposure outdoors can cause harm.

We hope to increase the number of smokefree spaces in Trafford, including partner buildings, school gates and play areas.

These spaces also help to reduce litter and waste which are toxic to the environment. Cigarette filters are made of a plastic called cellulose acetate. When tossed into the environment, they throw away not only that plastic, but also the nicotine, heavy metals, and many other chemicals they've absorbed into the surrounding environment.^{xv}

Although the UK ban on disposable vapes which came into force in June 2025 should address previous environmental concerns about their use, safe disposal of reusable vapes (or any outstanding disposable vapes still in use within the population) remains important to allow components to be recycled safely.^{xvi}

ⁱ [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

ⁱⁱ [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

ⁱⁱⁱ [English Housing Survey: Social rented sector, 2020-21 \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

^{iv} [Housing, England and Wales - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk)

^v Baggett 2013

^{vi} [The odds of smoking by sexual orientation in England, 2016 - Office for National Statistics](#)

^{vii} [Future Care Capital, 2019; Tseliou, 2019; Cottagiri, 2019](#)

^{viii} Emerson 2018

^{ix} [Rebalancing-Act.pdf \(revolving-doors.org.uk\)](#)

^x Aspinall and Mitton, 2014

^{xi} [Youth smoking - ASH](#)

^{xii} [Harms caused by smoking | Background information | Smoking cessation | CKS | NICE](#)

^{xiii} [BK2 COPD v4 downloadable PDF.pdf \(blf.org.uk\)](#)

^{xiv} [Make Smoking History 5 year Summary Report](#)

^{xv} [Cigarette butts are toxic plastic pollution. Should they be banned? \(nationalgeographic.com\)](#)

^{xvi} [Are disposable vapes bad for the environment? | Greenpeace UK](#)