

Statistical bulletin

# Adult smoking habits in the UK: 2017

Cigarette smoking among adults including the proportion of people who smoke, their demographic breakdowns, changes over time, and e-cigarettes.



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# 1 . Main points

- In the UK, 15.1% of people aged 18 years and above smoked cigarettes, which equates to around 7.4 million people in the population, based on our estimate from the Annual Population Survey.
- Of the constituent countries, 14.9% of adults in England smoked; for Wales, this figure was 16.1%; Scotland, 16.3% and Northern Ireland, 16.5%.
- In the UK, 17.0% of men smoked compared with 13.3% of women.
- Those aged 25 to 34 years had the highest proportion of current smokers (19.7%).
- In the UK, around 1 in 4 (25.9%) people in routine and manual occupations smoked, compared with just 1 in 10 people (10.2%) in managerial and professional occupations.
- In Great Britain, 60.8% of people aged 16 years and above who currently smoked said they wanted to quit and 59.5% of those who have ever smoked said they had quit, based on our estimates from the Opinions and Lifestyle Survey.
- In Great Britain, 5.5% of people in 2017 said they currently used an e-cigarette, which equates to approximately 2.8 million adults in the population.

## 2 . Collaboration

This publication is produced in partnership with Public Health England.



On 3 July 2018, Public Health England published an update to their [Local Tobacco Control Profiles](#). The update included: new smoking prevalence data for 2017; a new indicator measuring the gap between smoking prevalence in routine and manual and other occupations; updated data for lung and oral cancer registrations and new data on oesophageal cancer registrations; updated data for smoking related fires and fatalities caused by them.

On the same day, NHS Digital also published their [compendium of smoking statistics](#), which includes headline figures from this report. NHS Digital's report brings all the latest smoking statistics for England into one place, including smoking-related ill health, smoking patterns in children, and the availability and affordability of tobacco. The report also includes the latest data on "Women's smoking status at the time of delivery", which is also being published on 3 July 2018.

## 3 . Things you need to know about this release

This release describes data on smoking habits from two surveys. Data for the UK is taken from the [Annual Population Survey](#) (APS), a continuous household survey that covers adults aged 18 years and above. Data for Great Britain is taken from the [Opinions and Lifestyle Survey](#) (OPN). The OPN is a face-to-face interview of adults aged 16 years and above.

This bulletin describes headline smoking prevalence figures from the APS. Due to its large sample of around 320,000 households each year (the OPN covers around 16,000 households per year), this survey allows for greater precision when it comes to estimating the proportion of the population who currently smoke. The APS sample size also allows comparisons to be made at the level of local authority area. The OPN contains a wider range of smoking-related questions, such as average daily cigarette consumption, but is constrained by the smaller sample in the geographic breakdown it can provide. Combined, these two data sources provide a powerful tool to understand smoking habits.

There are limitations in using survey data to study smoking prevalence. The data described in this bulletin are based on self-reported behaviours. As such, it is likely that the findings underestimate cigarette consumption and, to a lesser extent, cigarette smoking prevalence. [Evidence suggests that when respondents are asked how many cigarettes they smoke per day, there is a tendency for respondents to round the figure to the size of the cigarette packet.](#) Underestimates of consumption are likely to occur in all age groups.

## 4 . Changes to this release

We have included new datasets looking at smoking prevalence by ethnicity, country of birth, religion and self-reported health status, to take fuller advantage of data available from the Annual Population Survey (APS). To improve the geographical coverage of our estimates, we have used data from the APS to produce several tables that we previously produced using data from the Opinions and Lifestyle Survey (OPN). These tables include economic activity, socio-economic classification, relationship status and highest educational attainment.

This year, our confidence intervals have been updated to reflect a change in the method used to calculate the standard error of our estimates. The impact of this change, on previously published estimates, is minimal. Further information on the new method can be found in the Quality and methodology section.

## 5 . The proportion who are current smokers in the UK, its constituent countries and local areas, 2011 to 2017

In this section, we describe data from the Annual Population Survey, which covers the UK and includes adults aged 18 years and above.

### **The proportion of current smokers in the UK has fallen significantly since 2016 to 15.1%**

In 2017, the proportion of current smokers in the UK was 15.1%, which equates to around 7.4 million in the population. The latest figure represents a significant reduction in the proportion of current smokers since 2016, when 15.8% smoked.

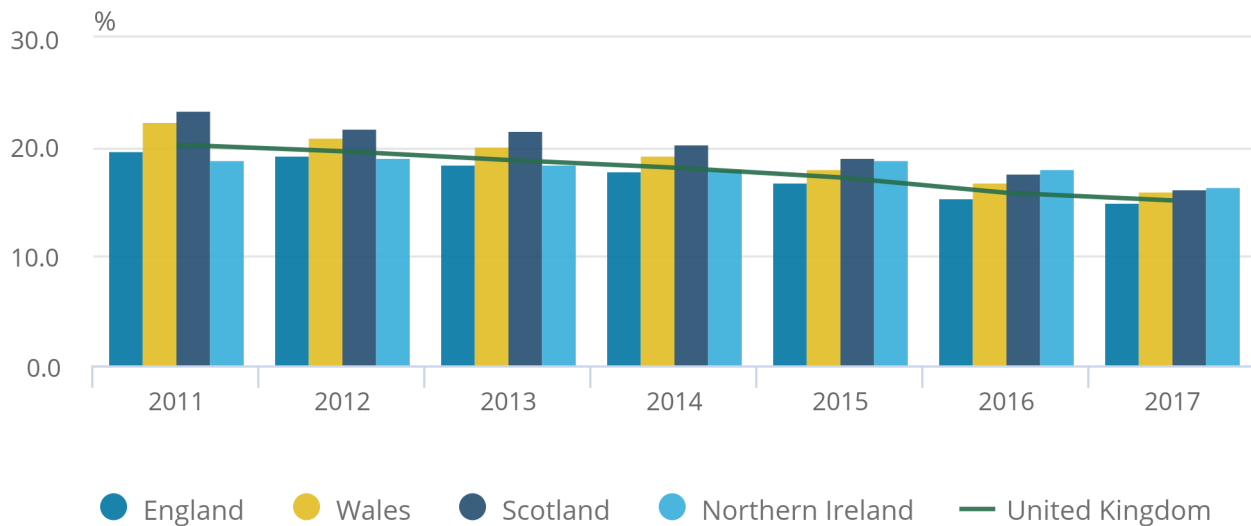
Of the constituent countries, Northern Ireland had the highest proportion of current smokers (16.5%, around 226,000 people). England continued to have the lowest proportion of current smokers (14.9%, around 6.1 million people), for the fifth consecutive year. In Wales and Scotland, the proportion of current smokers was 16.1% (around 386,000 people) and 16.3% (around 677,000 people), respectively (see Figure 1). Since 2011, there has been a statistically significant decline in the proportion of current smokers in England, Scotland and Wales. For Northern Ireland, the estimate over time has been more variable due to the smaller sample size.

**Figure 1: Proportion who were current smokers, all persons aged 18 years and over**

UK, 2011 to 2017

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UK, 2011 to 2017



Source: Annual Population Survey - Office for National Statistics

As in previous years, in 2017 more men smoked than women in the UK and within all constituent countries – in the UK, 17.0% of men (around 4.0 million) and 13.3% of women (around 3.3 million) reported being current smokers.

### Since 2011, the largest fall in smoking prevalence has been among 18- to 24-year-olds

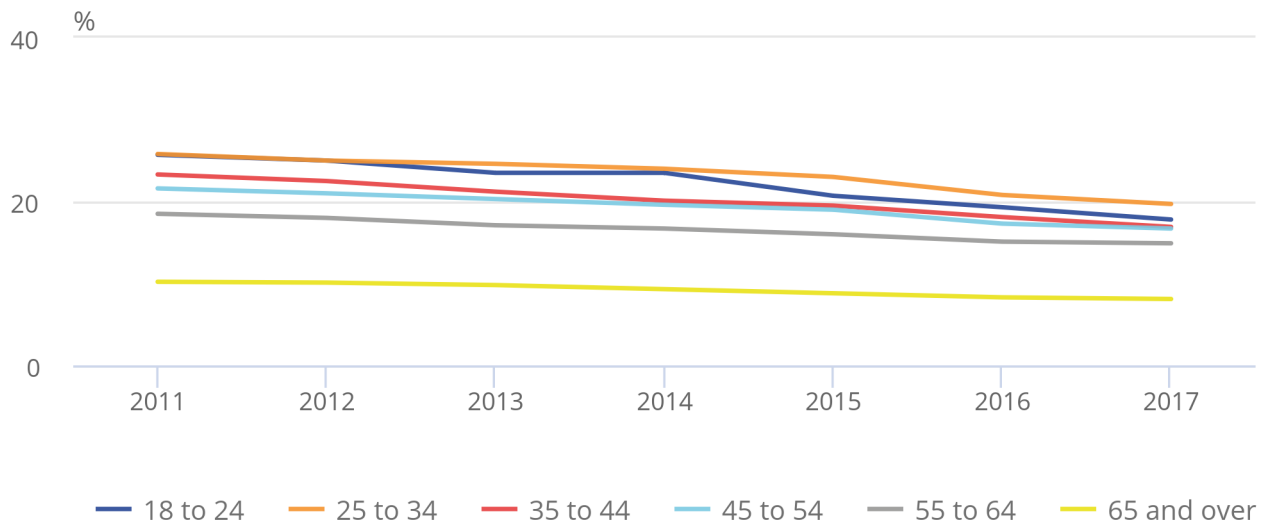
Those aged 25 to 34 years continue to have the highest proportion of current smokers (19.7%, around 1.6 million people), when compared with any other age group and those aged 65 years and above continue to have the lowest (8.1%, around 914,000 people). Across time, the largest reduction in smoking prevalence has been among 18- to 24-year-olds; 25.7% of this group smoked in 2011 compared with 17.8% in 2017, a reduction of around 8 percentage points (see Figure 2).

**Figure 2: Proportion who were current smokers, all persons by age group**

UK, 2011 to 2017

Figure 2: Proportion who were current smokers, all persons by age group

UK, 2011 to 2017



Source: Annual Population Survey - Office for National Statistics

## Blackpool has featured in the 10 local authorities with the highest prevalence since 2012

Smoking prevalence estimates by local authority area tend to fluctuate each year due to their small sample sizes producing more statistical uncertainty. Therefore, here we briefly describe local authorities where the proportion of smokers has been consistently high or low on a year-to-year basis. Please note, local authorities in Northern Ireland are not included as this level of detail is not available on the Annual Population Survey (APS).

Since 2012, Blackpool has consistently featured in the 10 local authorities with the highest smoking prevalence. This trend continued into 2017, with 22.3% of Blackpool's population reporting they smoked. Both Hastings and the City of Kingston upon Hull have featured in this group for the third consecutive year, with 22.2% and 23.1% of the populations reporting they smoked, respectively.

## Chiltern has featured in the 10 local authorities with the lowest prevalence for the fourth consecutive year

When looking at the local authorities with the lowest prevalence, Chiltern has featured for the fourth consecutive year, with 6.4% reporting they smoked in 2017.

To make our local authority data more accessible, this year we have produced two tools to help explore the data. Our interactive map (see Figure 3), shows the proportion of current smokers in local and unitary authorities of Great Britain for 2017. Our interactive chart (see Figure 4) allows you to select several local and unitary authorities, to see how smoking prevalence has changed since 2011. As noted, smoking prevalence estimates by local authority can fluctuate due to smaller sample sizes; quality measures for these estimates can be found in the associated datasets.

**Figure 3: The proportion of current smokers among adults aged 18 years and above by local authority, Great Britain, 2017**

**Figure 4: The proportion of current smokers across time among adults aged 18 years and above by local authority, Great Britain, 2017**

## **6 . Characteristics of current cigarette smokers in the UK**

In this section, we describe data from the Annual Population Survey, which covers the UK and includes adults aged 18 years and above.

Smoking habits are associated with a variety of different characteristics – examples include relationship status and education level. To show how smoking status tends to be associated with inequality, this year, we focus on [socio-economic status](#), based on the National Statistics definition. This is derived on the basis of which status a person's last meaningful occupation falls under and can include those who are currently employed, unemployed and economically inactive. Our analyses on socio-economic status are restricted to those of working age, 18 to 64 years.

**Around 1 in 4 people in routine and manual occupations smoked compared with just 1 in 10 people in managerial and professional occupations**

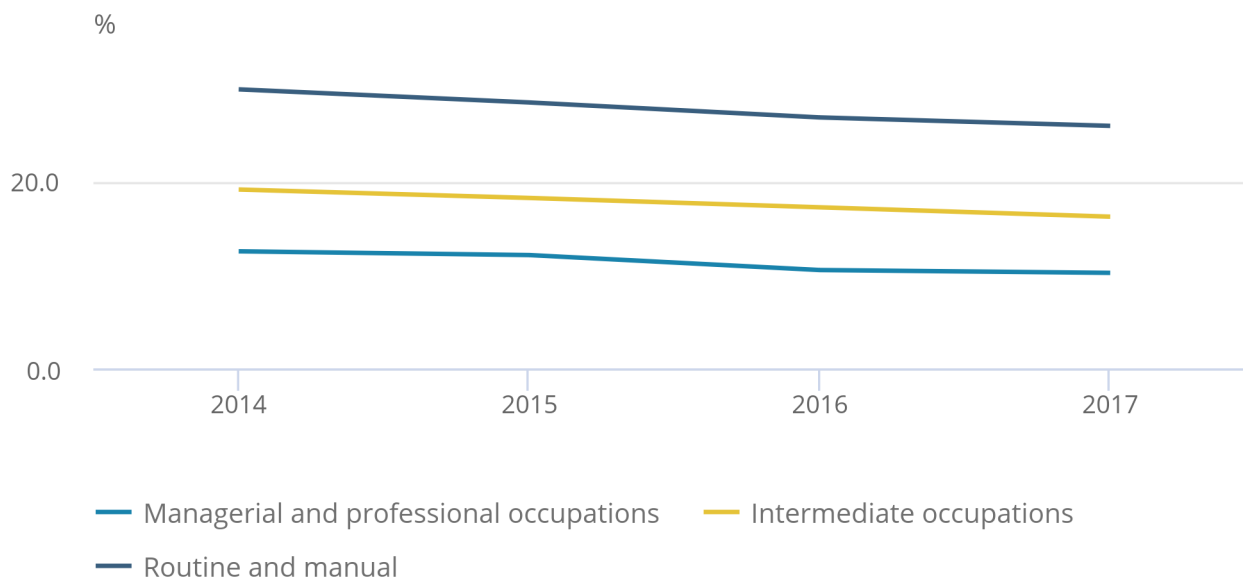
When looking at smoking prevalence by socio-economic status, 25.9% of those working in routine and manual occupations (for example, as labourers, bar staff, lorry drivers, receptionists and care workers) said they currently smoked in 2017. This proportion is significantly higher than those reported among managerial and professional occupations (10.2% – for those who work as lawyers, architects, nurses and teachers, for example) and intermediate occupations (16.2% – for those who work as office clerks, managerial assistants and administrative assistants, for example). Since 2014, there have been statistically significant declines in the proportion of current smokers among all socio-economic groups (see Figure 5). These findings are generally in keeping with those showing that, [as personal incomes increase people are less likely to smoke](#).

**Figure 5: The proportion who were current smokers by socio-economic status group, those aged 18 to 64 years**

UK, 2014 to 2017

Figure 5: The proportion who were current smokers by socio-economic status group, those aged 18 to 64 years

UK, 2014 to 2017



Source: Annual Population Survey - Office for National Statistics

## **In England, the gap in smoking prevalence between those in routine and manual occupations and those in other occupations has widened, significantly, since 2012**

The [Tobacco Control Plan for England \(2017\)](#) sets out the ambition to “reduce the inequality gap in smoking prevalence, between those in routine and manual occupations and the general population”. To assess the extent of the inequity, we calculated the odds of those in the routine and manual population being smokers compared with those in managerial and professional, and intermediate occupations.

Results showed that routine and manual workers in England were more than twice as likely to be smokers as other occupations and that the gap has widened significantly between 2012 (unadjusted odds ratio 2.27, 95% confidence interval 2.21 to 2.34) and 2017 (unadjusted odds ratio 2.44, 95% confidence interval 2.36 to 2.52). These data are available in Public Health England’s [Local Tobacco Control Profiles](#).

## **7 . Other characteristics of smokers in the UK**

In the datasets, we include a wider range of data on the characteristics of smokers from the Annual Population Survey. The main findings for 2017 include:

- economic activity: the proportion of current smokers was significantly higher among unemployed persons (29.6%) when compared with those who were employed (15.5%) and economically inactive (13.4%)
- relationship status: those who were married or in a civil partnership had the lowest proportion of current smokers (9.9%), which was around half the proportion among those who were cohabiting (22.1%), single (21.5%), or widowed, divorced or separated (17.7%)
- education: those with a degree had the lowest proportion of current smokers (7.6%), which is around a quarter of the proportion among those with no qualifications (29.1%)
- ethnicity: the proportion of current smokers ranged from 8.8% among Chinese respondents to 20.1% among respondents from the Mixed ethnic group
- country of birth: those who were born in Poland had the highest proportion of current smokers (27.1%), whereas those born in India had the lowest proportion of current smokers (4.7%)
- religion (England only): prevalence varies by sex, for example, the proportion of current smokers among Muslim men was 21.4%; among women this was just 3.8%
- self-perceived health: smokers were less likely to report having very good health and more likely to report having very bad health, when compared with those who have never smoked

Data from the Opinions and Lifestyle Survey includes figures on economic activity and income.

## **8 . Data on smokers who have quit and smokers who intend to quit, Great Britain, 1974 to 2017**

In this section, we describe data from the Opinions and Lifestyle Survey, which covers Great Britain and includes adults aged 16 years and above. Data from the Opinions and Lifestyle Survey benefits from a long time series, which began in 1974.

### **The proportion of smokers who have quit is at one of the highest levels to date**

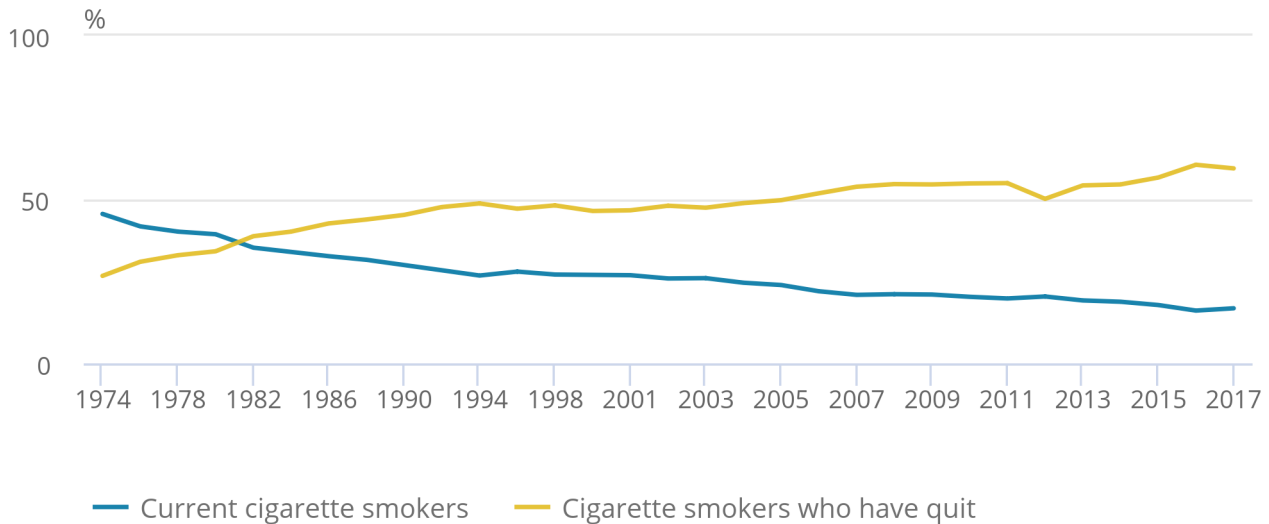
The prevalence of smoking among the population in Great Britain continues to fall whilst the proportion of cigarette smokers who have quit continues to increase (see Figure 6). Among those who have ever smoked, 59.5% said that they had quit in 2017; this is around 33 percentage points higher than that observed in 1974 (26.7%). Since 2016, there have been small, statistically insignificant, changes in the proportion of current cigarette smokers and the proportion of cigarette smokers who have quit.



**Figure 6: Proportion of smokers who have quit, all persons aged 16 and over**

Great Britain, 1974 to 2017

1982: The 80s and 90s saw a rise in anti-smoking evidence and campaigning which took off in the early 70s. 2006/2007: 2007: Smoking in the workplace and enclosed public places was made illegal for those below 18, so the age of being changed to 20.



Source: Opinions and Lifestyle Survey; General Lifestyle Survey; General Household Survey - Office for National Statistics

Notes:

1. The proportion of cigarette smokers who have quit is the proportion of all those who said that they have smoked cigarettes regularly, who do not currently smoke.
2. Data are weighted from 2000 onwards.
3. Data on cigarette use were collected on a 2-year basis prior to 2000.
4. Information on the changes in legislation and government policy can be found on the [action on smoking and health website \(ASH\)](#).

### Those who intend to quit smoking wait longer to have their first cigarette of the day

Of the people who currently smoke, 60.8% stated that they intend to quit smoking, with 11.3% of current smokers intending to quit within the next three months, at the time of interview.

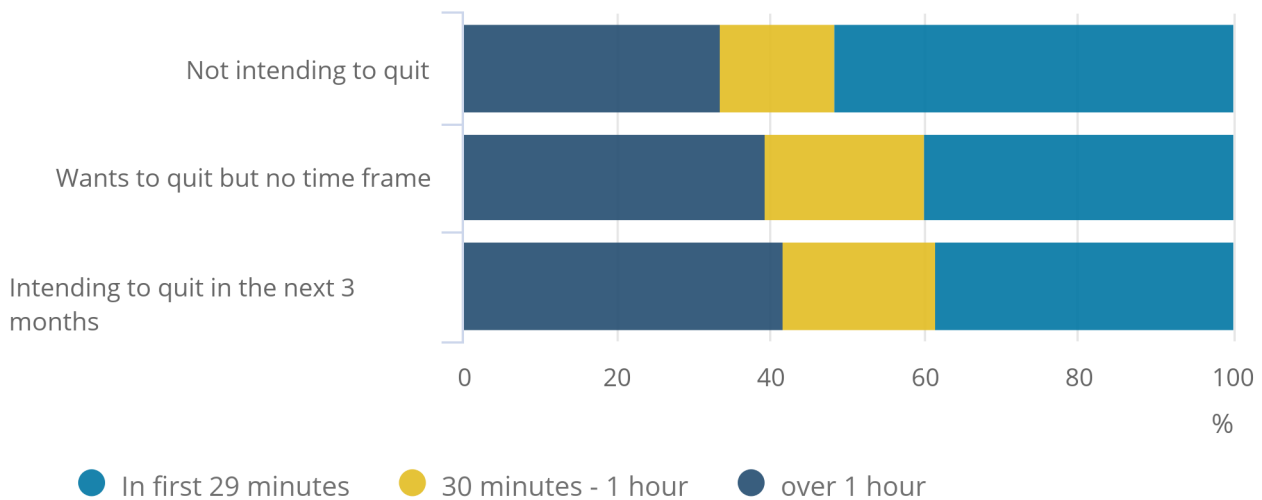
Current smokers who intend to quit also wait longer to their first cigarette of the day after waking (see Figure 7). When looking at those who intend to quit within the next three months, a higher proportion (41.7%) waited longer than an hour until they smoked their first cigarette of the day, compared with 33.4% for those who had no intention of quitting.

**Figure 7: Time waited until first cigarette of the day, intentions to quit**

Great Britain, 2017

Figure 7: Time waited until first cigarette of the day, intentions to quit

Great Britain, 2017



Source: Opinions and Lifestyle Survey

Notes:

1. Data refers to the amount of time cigarette smokers typically wait until they have their first cigarette after waking.

## 9 . The use of electronic cigarettes (e-cigarettes), Great Britain

In this section, we describe data from the Opinions and Lifestyle Survey, which covers Great Britain and includes adults aged 16 years and above.

E-cigarettes are increasingly being used by smokers to help quit smoking. In a recent evidence review, [Public Health England found that vaping poses a small fraction of the risk of smoking and that e-cigarettes could be contributing to at least 20,000 successful quits of smoking per year.](#)

### There are approximately 2.8 million vapers in Great Britain

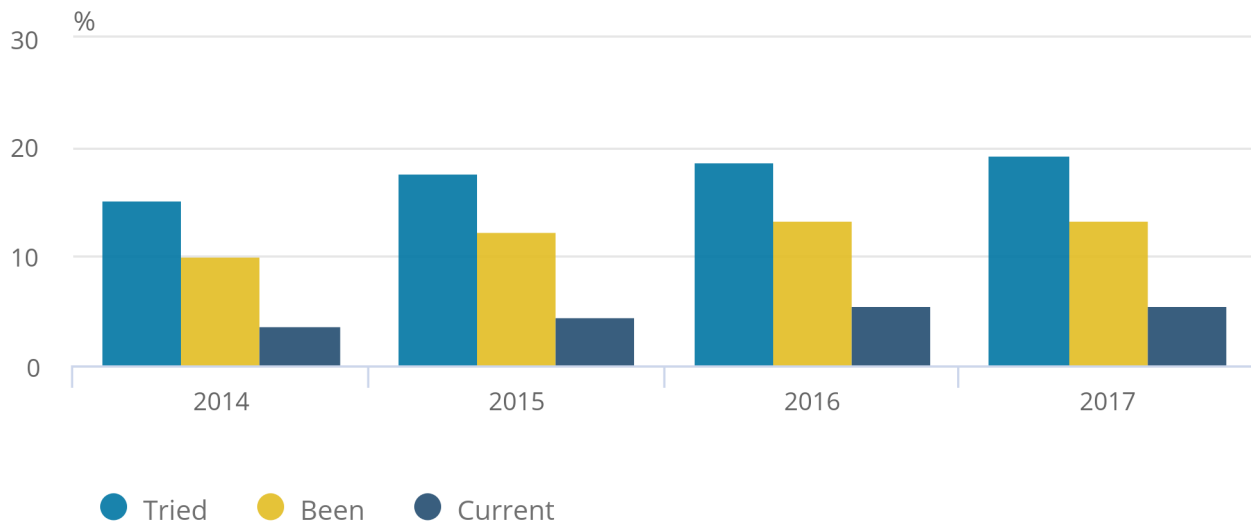
In 2017, 5.5% of people reported that they currently used an e-cigarette (vaped): this equates to approximately 2.8 million vapers in the population of Great Britain. This proportion is significantly higher than that observed in 2014 when only 3.7% vaped, when data collection began.

## Figure 8: E-cigarette usage (vaping)

Great Britain, 2014 to 2017

### Figure 8: E-cigarette usage (vaping)

Great Britain, 2014 to 2017



Source: Opinions and Lifestyle Survey

#### Notes:

1. "Tried" includes those who currently vape, those who previously vaped, and those who tried vaping but then decided not to vape.
2. "Been" includes those who currently vape in addition to those who previously vaped.
3. "Current" includes those who currently vape.

When looking at the prevalence of vaping by sex, a higher proportion of men reported vaping (6.5%) when compared with women (4.6%) in 2017. By age, those aged 35 to 49 years had the highest proportion of vapers at 7.4%.

In 2017, the proportion of vapers was highest among current cigarette smokers (14.9%) and ex-cigarette smokers (11.3%). Only 0.4% of people who have never smoked reported that they currently vape.

## The most common reason for vaping was as an aid to quit smoking (48.8%)

The most common reason given for vaping was as an aid to stop smoking, with almost half (48.8%) of vapers reporting using e-cigarettes for that purpose in 2017. The perception that they are less harmful than cigarettes was the second most common reason for vaping at 29.2%.

## Ex-smokers are also quitting vaping

2017 figures show that over 900,000 people have quit both smoking and vaping in Great Britain. In England, more than 770,000 had quit both smoking and vaping.

## 10 . Health consequences of cigarette smoking

Smoking is a leading cause of preventable death in the UK. In 2016, [around 78,000 deaths were attributable to smoking in England](#). Estimates from the governments of the devolved countries suggest that smoking was responsible for around [5,500 deaths in Wales](#), [10,000 deaths per year in Scotland](#) and [2,300 deaths per year in Northern Ireland](#). [Exposure to second-hand smoke \(passive smoking\)](#) can lead to a range of diseases, many of which are fatal, with [children especially vulnerable](#) to the effects of passive smoking.

In England, there were estimated to be around 485,000 hospital admissions attributable to smoking in 2016 to 2017. Reducing the prevalence of cigarette smoking is therefore a main objective for the government and devolved administrations. The [government set a smoking prevalence target for England](#) of 12% by 2022. The [Welsh Government has a target](#) of 16% by 2020. The [Scottish Government has a target \(PDF, 258KB\)](#) of 5% by 2034. The [Department of Health, Social Services and Public Safety in Northern Ireland has a target \(PDF, 3.1MB\)](#) of 15% by 2020.

The UK and devolved governments have published the following papers: [Tobacco Control Plan for England, Ten-year tobacco control strategy for Northern Ireland \(PDF, 3.1MB\)](#), [Tobacco Control Action Plan for Wales \(PDF, 528KB\)](#) and [Creating a Tobacco-Free Generation – A Tobacco Control Plan for Scotland \(PDF, 258KB\)](#). These set out their respective strategies for reducing the proportion of the population that smokes and the harm caused by tobacco use.

## 11 . Other sources of data to understand smoking and its impact

The devolved countries of the UK each have their own health surveys, which are used to provide official estimates of smoking in each country; these surveys are also used to track progress against each country's targets to reduce smoking. The Northern Ireland Health Survey shows that [20% of adults in Northern Ireland currently smoke cigarettes](#); The National Survey for Wales shows that [19% of adults in Wales currently smoke cigarettes \(PDF, 905KB\)](#); The Scottish Health Survey shows that [21% of adults in Scotland currently smoke cigarettes](#).

Public Health England, via their [Local Tobacco Control Profiles](#), detail data on a wide range of indicators related to the smoking of cigarettes including different measures of prevalence in adults and young people, smoking-related mortality and the wider impacts of smoking on health. The [Health Survey for England](#) also collects data on smoking habits.

NHS Digital produce an [annual compendium](#), bringing together an array of smoking-related data such as smoking-related hospital admissions and deaths, smoking-related prescriptions and expenditure. Their report also includes the prevalence data for adults reported here as well as prevalence data for children from their Smoking, Drinking and Drugs Survey. The NHS Digital report is published on the same day as this report.

## 12 . Changes to legislation and government policy

Information on the changes in legislation and government policy can be found on the [action on smoking and health website \(ASH\)](#).

## 13 . Quality and methodology

The [Annual Population Survey](#) and [Opinions and Lifestyle Survey](#) Quality and Methodology Information reports contain information on:

- the strengths and limitations of the data
- the quality of the output: including the accuracy of the data and how it compares with related data
- uses and users
- how the output was created

### The Annual Population Survey

The data on smoking habits in the UK come from the Annual Population Survey (APS). This survey has an annual sample size of approximately 320,000 respondents, making it possible to generate statistics for small geographical areas. The data on smoking are collected on the Labour Force Survey, which forms a component of the APS. [Further information on the survey and survey methodology](#) is available.

The data on smoking from the APS concern all respondents aged 18 years and above; this differs from smoking data from the Opinions and Lifestyle Survey, which also collects data from 16- and 17-year-olds.

From 2016, there has been [a change in the questions in the APS](#), which has had an impact on the calculation of ex-smokers.

### The Opinions and Lifestyle Survey

The data on smoking habits in Great Britain were collected on the Opinions and Lifestyle Survey (OPN) – an omnibus survey run by Office for National Statistics. The survey is run monthly and is open for both government and non-government organisations to run questions.

More information on the survey and survey methodology can be found in the [Opinions and Lifestyle Survey Information Guide \(PDF, 175KB\)](#).

The data from the OPN (2012 to present) follow on from a series of releases from the General Household Survey (GHS) and General Lifestyle Survey (GLF; 1974 to 2011). The OPN and GLF or GHS provide comparable results. However, there are some differences in the design and content of the two surveys. More information can be found in the [Opinions and Lifestyle Survey – Smoking Habits amongst Adults, 2012 \(PDF, 139KB\)](#) publication.

### Official estimates of smoking prevalence in the devolved countries of the UK

The smoking data for the UK reported in this bulletin allow for comparisons to be made across each constituent country due to the consistent methodology. Official estimates of smoking prevalence in the devolved countries, however, should be taken from the respective health surveys of [Wales](#), [Scotland](#) and [Northern Ireland](#).

## Change to the method used to calculate the standard errors of our estimates

This year, our confidence intervals have been updated to reflect a change in the method used to calculate the standard error of our estimates. The standard error now takes into account the design of the surveys used to produce the estimates in addition to other factors that can impact the precision of our estimates such as sample size and variability in the population of the characteristic of interest. This update has produced very small differences in the range of the confidence intervals that were previously published. See [further information on the approach ONS takes when calculating standard errors for social surveys](#).

## Reliability

It is likely that the survey underestimates cigarette consumption and, to a lesser extent, cigarette smoking prevalence. Evidence suggests that [when respondents are asked how many cigarettes they smoke per day, there is a tendency for respondents to round the figure down to the nearest multiple of 10](#). Underestimates of consumption are likely to occur in all age groups.

Under-reporting of prevalence, however, is more likely to occur among young people, in particular those aged under 18 years (as a result of the legal age of purchase for cigarettes in the UK). To protect their privacy, those aged 16 and 17 years are given the option to complete the smoking section of the Opinions and Lifestyle Survey themselves, so that neither the questions nor the responses can be heard by any of the other persons present.