

# Action on smoking is good value for money ASH Scotland Viewpoint



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## Smoking costs Scotland more than half a billion pounds a year

Up to £780 million is spent each year by Scotland's NHS on treating tobacco-related illness, which would equate to 6.4% of NHS Scotland's £13.2 billion budget. This is more than the total budget of NHS Highland, and almost as much as the new Queen Elizabeth University Hospital in Glasgow cost to build. That excludes the cost of ill-health relating to second-hand smoke, and takes no account of the knock-on effects of smoking-related ill-health to the economy.

Just £12.2 million is spent on tobacco control by the Scottish Government each year, compared to more than £500 million on sport in the 2016/17 financial year (a key part of the Government's strategy to tackle the obesity epidemic). Maintaining and increasing the budget for cutting smoking won't just make people healthier – it will save the country money too.

## Investment in tackling smoking could save money

In general, action to promote public health is incredibly good value, with a recent study suggesting that each pound spend creates a return of £14, as illnesses (and therefore care requirements) are prevented. A report for Westminster's All-Party Parliamentary Group on Smoking and Health found that preventive spending on tobacco and public health could lead to a 1,100% return on investment over just five years, and economic analyses have consistently found that smoking cessation and prevention programmes offer extremely high value for money compared to other health interventions.

## Cutting smoking makes Scotland richer

It's no secret that the costs of smoking land most heavily on the poorest people. One in three adults in the 20% most deprived areas of Scotland smoke, compared to around one in ten in the 20% least deprived. Incidence of lung cancer is around three times higher in the 20% most deprived areas of Scotland than in the 20% least deprived. But poor people

are just as likely to want to quit as rich people – across all social groups, around two thirds of smokers want to stop.

Almost half of adults who are permanently sick or disabled are current smokers, and almost half of adults who are unemployed and seeking work are current smokers. People with mental health problems are far more likely to smoke than those in good health, using one third of the tobacco smoked in the UK.

Smoking costs, on average, £1,600 a year, and can effectively push some of the poorest people into poverty. For example, it has been estimated that more than 30,000 households in Scotland are effectively in poverty thanks to the money lost to tobacco. However, if the smoking rate in the 20% most deprived areas of Scotland fell just 1%, Scotland's poorest communities would save £14.5 million a year. A drop of 4% would more than cancel out the £50 million annual cost of the bedroom tax. Action to reduce tobacco use won't just save the NHS money – it will put cash in the pockets of the people who need it most.

### **How to save money and improve Scotland's health**

There are a wide range of well-evidenced, cost-effective preventative tobacco control measures available.

Mass media advertising is a key tool in the fight against tobacco, recognised by the World Health Organisation as one of the components of best practice tobacco control. Mass media campaigns can have several goals which may overlap – promoting smoking cessation, preventing smoking uptake, and reducing exposure to second-hand smoke by non-smokers. One study on campaigns in England between 2002 and 2009 suggested that each additional quit effectively cost around £406, less than half the cost per smoker of stop-smoking services (themselves highly cost-effective). Recent research in Scotland suggests that this cost may be even lower.

There is currently a great deal of pressure on the budgets of stop smoking services. This is a false economy, as these services have repeatedly been found to be one of the most effective methods of quitting. These services cost less than £1,000 per quality adjusted life year (QALY), compared to up to £130,000 per QALY treating chronic obstructive pulmonary disease and more than £40,000 per QALY in the case of some lung cancer medications. Sustained and increased investment in cessation services targeted at the poorest fifth of Scots will save money and save lives.

Help for smokers should take a range of forms to reflect the range of ways smokers quit, and should be delivered in a wide variety of settings to meet smokers where they are. ASH Scotland's [IMPACT](#) project (working with people who have poor mental health) and work

with money advice services provide models to widen access to stop-smoking assistance. 14% of adults in Scotland are smokers who say that they want to stop. It is hard to think of any other intervention that could deliver as much health benefit as helping them to do so.



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