

Statistical bulletin

Adult smoking habits in the UK: 2019

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



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1 . Main points

- In the UK, in 2019, 14.1% of people aged 18 years and above smoked cigarettes, which equates to around 6.9 million people in the population, based on our estimate from the Annual Population Survey (APS).
- The proportion of current smokers in the UK has fallen significantly from 14.7% in 2018 to 14.1% in 2019.
- Of the constituent countries, 13.9% of adults in England smoked, 15.5% of adults in Wales, 15.4% of adults in Scotland and 15.6% of adults in Northern Ireland.
- In the UK, 15.9% of men smoked compared with 12.5% of women.
- Those aged 25 to 34 years had the highest proportion of current smokers (19.0%).
- In the UK, around 1 in 4 (23.4%) people in routine and manual occupations smoked, this is around 2.5 times higher than people in managerial and professional occupations (9.3%).
- In Great Britain, more than half (52.7%) of people aged 16 years and above who currently smoked said they wanted to quit, and 62.5% of those who have ever smoked said they had quit, based on our estimates from the Opinions and Lifestyle Survey (OPN).
- In Great Britain, 5.7% of respondents in 2019 said they currently used an e-cigarette, which equates to nearly 3 million adults in the population.

The coronavirus (COVID-19) has meant changes for Annual Population Survey (APS) and Opinions and Lifestyle Survey (OPN) data collection in 2020; see [Measuring the data](#) for more information.

2 . Collaboration



This publication is produced in partnership with Public Health England.

As part of a cross-government approach to improve the coherence of statistics on tobacco and e-cigarette use, this release is published on the same day as Public Health England's update to their [Local Tobacco Control Profiles](#). The Local Tobacco Control Profiles include new smoking prevalence data for 2019 including the gap between smoking prevalence in routine and manual and other occupations; updated data for lung, oral and oesophageal cancer registrations; and updated data for smoking-related fires and fatalities caused by them.

3 . The proportion who are current smokers in the UK, its consistent countries and local areas, 2011 to 2019

In Sections 3 and 4, we describe data from the Annual Population Survey (APS); these cover the UK and include adults aged 18 years and above.

The proportion of current smokers in the UK has fallen significantly since 2018 to 14.1%

In 2019, the proportion of current smokers in the UK was 14.1%, which equates to around 6.9 million in the population. The latest figure represents a significant reduction in the proportion of current smokers since 2018, when 14.7% smoked, and continues the trend in falling smoking prevalence since 2011.

Official smoking prevalence estimates for Wales, Scotland and Northern Ireland should be taken from devolved health or national surveys – see Section 10.

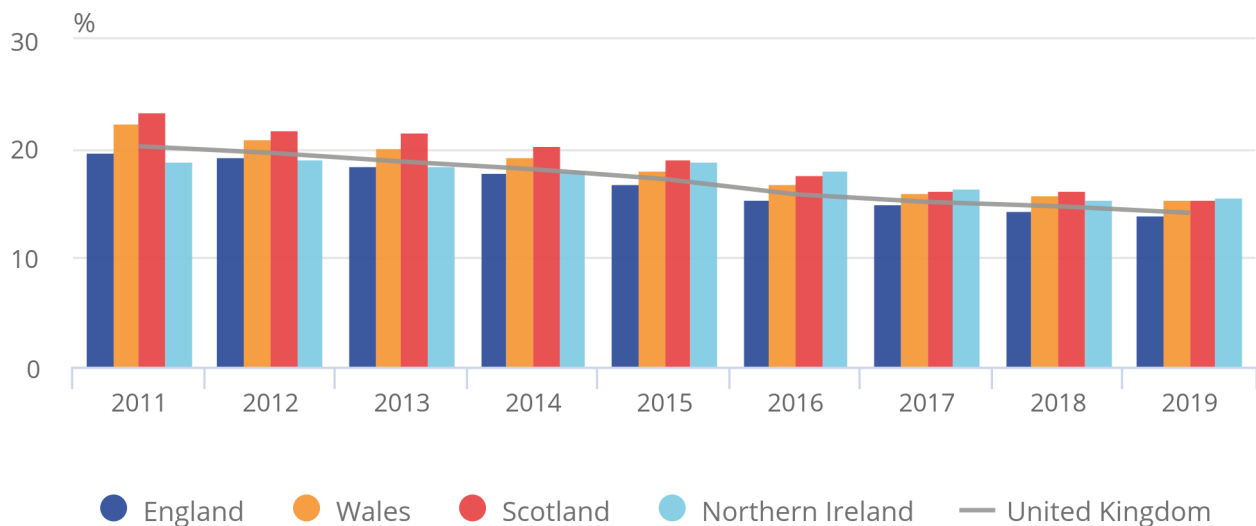
Of the constituent countries, Northern Ireland had the highest proportion of current smokers (15.6%, around 215,000 people). Similar to previous years, England continued to have the smallest proportion of current smokers (13.9%, around 5.7 million people). In Wales and Scotland, the proportion of current smokers was 15.5% (around 372,000 people) and 15.4% (around 638,000 people), respectively. Since 2011, there has been a [statistically significant](#) decline in the proportion of current smokers in England, Scotland, Wales and Northern Ireland. For Northern Ireland, the estimate over time has been more variable because of the smaller sample size.

Figure 1: Smoking prevalence has fallen in all four countries of the UK since 2011

Proportion who were current smokers, all persons aged 18 years and over, UK, 2011 to 2019

Figure 1: Smoking prevalence has fallen in all four countries of the UK since 2011

Proportion who were current smokers, all persons aged 18 years and over, UK, 2011 to 2019



Source: Office for National Statistics – Annual Population Survey

As in previous years, in 2019 more men smoked than women in the UK. Within all constituent countries of the UK, 15.9% of men (around 3.8 million) and 12.5% of women (around 3.1 million) reported being current smokers.

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

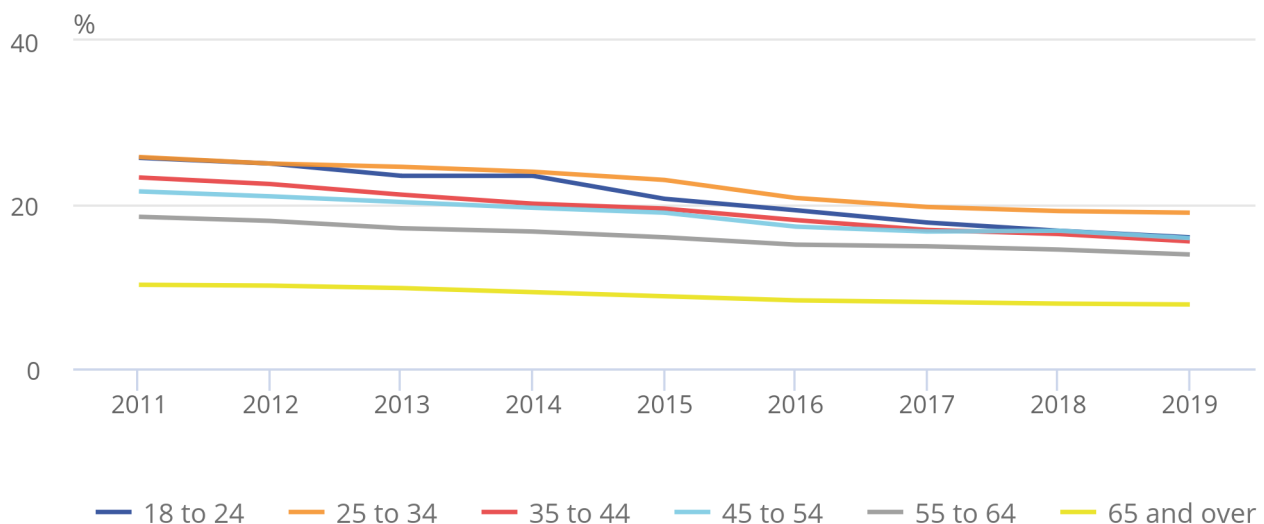
Those aged 25 to 34 years continued to have the highest proportion of current smokers (19.0%, around 1.6 million people), when compared with any other age group, and those aged 65 years and above continued to have the lowest proportion of current smokers (7.8%, around 904,000 people). Across time, the largest reduction in smoking prevalence has been among 18- to 24-year-olds; 25.7% of this group smoked in 2011 compared with 16.0% in 2019, a reduction of almost 10 percentage points (see Figure 2).

Figure 2: People aged 25 to 34 years continued to have the highest smoking prevalence

Proportion who were current smokers, all persons by age group, UK, 2011 to 2019

Figure 2: People aged 25 to 34 years continued to have the highest smoking prevalence

Proportion who were current smokers, all persons by age group, UK, 2011 to 2019



Source: Office for National Statistics – Annual Population Survey

The City of Kingston Upon Hull and Blackpool have been in the 10 local authorities with the highest proportion of current smokers at least seven times since 2012

Smoking prevalence estimates by local authority area tend to fluctuate each year because of 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 APS.

Since 2012, the City of Kingston Upon Hull and Blackpool have been in the 10 local authorities with the highest proportion of current smokers at least seven times, with 22.2% and 23.4% reporting they smoked in 2019, respectively.

When looking at the local authorities with the lowest prevalence, Ribble Valley and Rushcliffe have featured in the bottom 10 of local authorities ranked by smoking prevalence at least three times since 2012. In 2019, the prevalence of smoking in these areas was 5.1% and 5.9% respectively. This is around eight percentage points lower than the level of smoking in the broader population of the UK. See Table 4 in the [accompanying dataset](#), 'smoking habits in the UK and its constituent countries 2019', for smoking prevalence in local and unitary authority areas of England, Scotland and Wales by sex, between 2012 and 2019. Additional data for local areas in England can be found in Public Health England's [Local Tobacco Control Profiles](#).

4 . Characteristics of current cigarette smokers in the UK

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, 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 it can include those who are currently employed, unemployed and economically inactive. Our analyses on socio-economic status are restricted to those of working age, at 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

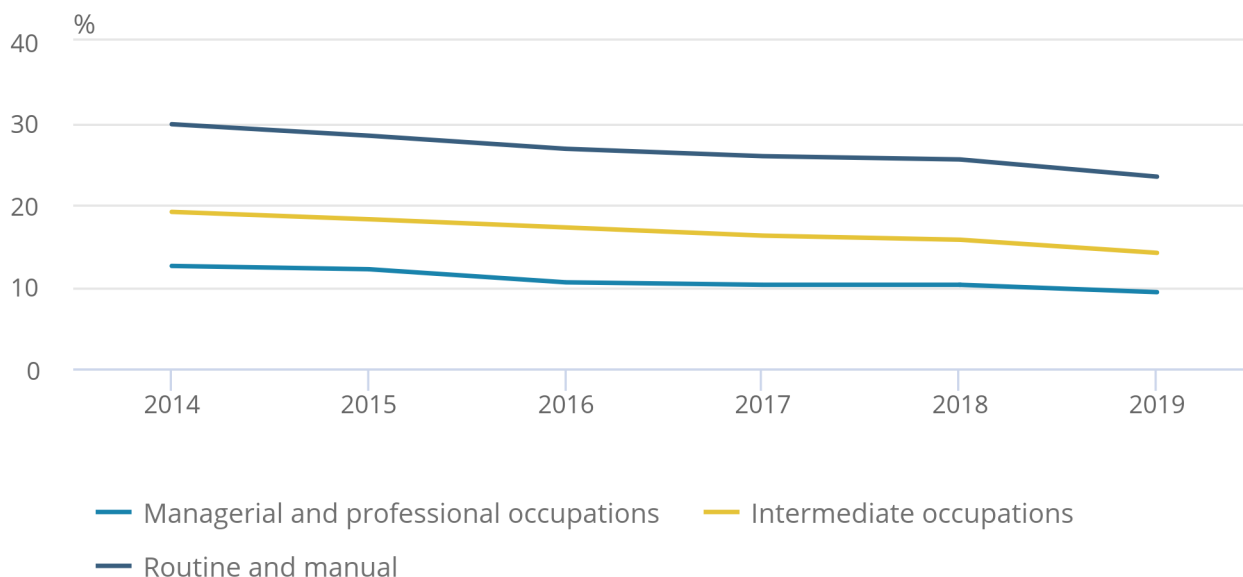
When looking at smoking prevalence by socio-economic status, 23.4% of those working in routine and manual occupations (for example, as labourers, bar staff, lorry drivers, receptionists or care workers) said they currently smoked in 2019. This proportion is significantly higher than those reported among managerial and professional occupations (for example, as lawyers, architects, nurses or teachers), at 9.3%, and intermediate occupations, at 14.1% (for example, as office clerks, managerial assistants or administrative assistants). Since 2014, there have been [statistically significant](#) declines in the proportion of current smokers among all socio-economic groups (see Figure 3). These findings are generally in keeping with those showing that as personal incomes increase, people are less likely to smoke (see Table 10 in [Adult smoking habits in Great Britain](#)).

Figure 3: In 2019, smoking prevalence continued to be higher in routine and manual occupations than in managerial and professional occupations

The proportion who were current smokers by socio-economic status group, all persons aged 18 to 64 years, UK, 2014 to 2019

Figure 3: In 2019, smoking prevalence continued to be higher in routine and manual occupations than in managerial and professional occupations

The proportion who were current smokers by socio-economic status group, all persons aged 18 to 64 years, UK, 2014 to 2019



Source: Office for National Statistics – Annual Population Survey

Notes:

1. Socio-economic class is defined using the [National Statistics Socio-economic classification \(NS-SEC\)](#).
2. "N.e.c." refers to not elsewhere classified.
3. We have restricted the data to those aged 18 to 64 years, those of working age.

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 \(2017\)](#) set 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 2019 (unadjusted odds ratio 2.46, 95% confidence interval: 2.37 to 2.55). These data are available in Public Health England's [Local Tobacco Control Profiles](#).

Other characteristics of smokers in the UK

In the [reference tables](#), we include a wider range of data on the characteristics of smokers from the Annual Population Survey (APS). The main findings for 2019 include:

- economic activity: the proportion of current smokers is significantly higher among unemployed persons (26.8%) when compared with those who are employed (14.5%) and economically inactive (12.8%)
- relationship status: those who were married or in a civil partnership had the lowest proportion of current smokers (9.2%), which is less than half the proportion among those who are cohabiting (20.3%) or single (20.4%); the proportion of current smokers in widowed, divorced or separated respondents was 16.1%
- education: those with a degree had the lowest proportion of current smokers (7.3%), which is around a quarter of the proportion among those with no qualifications (29.1%)
- ethnicity: for both men and women, the highest smoking prevalence was seen in the Mixed ethnic group, but large differences were seen between sexes particularly in Asian (13.9% in men and 2.9% in women), Chinese (12.6% in men and 4.0% in women) and Black (12.9% in men and 6.9% in women) groups
- country of birth: those who were born in Poland had the highest proportion of current smokers (24.5%), whereas those born in India had the lowest proportion of current smokers (5.3%)
- religion (England only): prevalence varies by sex, for example, the proportion of current smokers among Muslim men is 18.4%, whereas among Muslim women this is just 3.9%
- self-perceived health: smokers are 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
- housing tenure: there was a significantly lower proportion of current smokers in those who owned their property outright (7.9%) or with a mortgage (10.1%), compared with those who rented (29.8% of local authority or housing association renters and 22.2% of private renters)
- sexual orientation: for data collected in 2018, the latest available, the proportion of current smokers was significantly higher among people who identified as gay or lesbian (22.2%) than among heterosexual (straight) people (15.5%)

5 . Data on smokers who have quit and smokers who intend to quit, Great Britain, 1974 to 2019

In Sections 5 and 6, we describe data from the Opinions and Lifestyle Survey (OPN), which cover Great Britain and include adults aged 16 years and above.

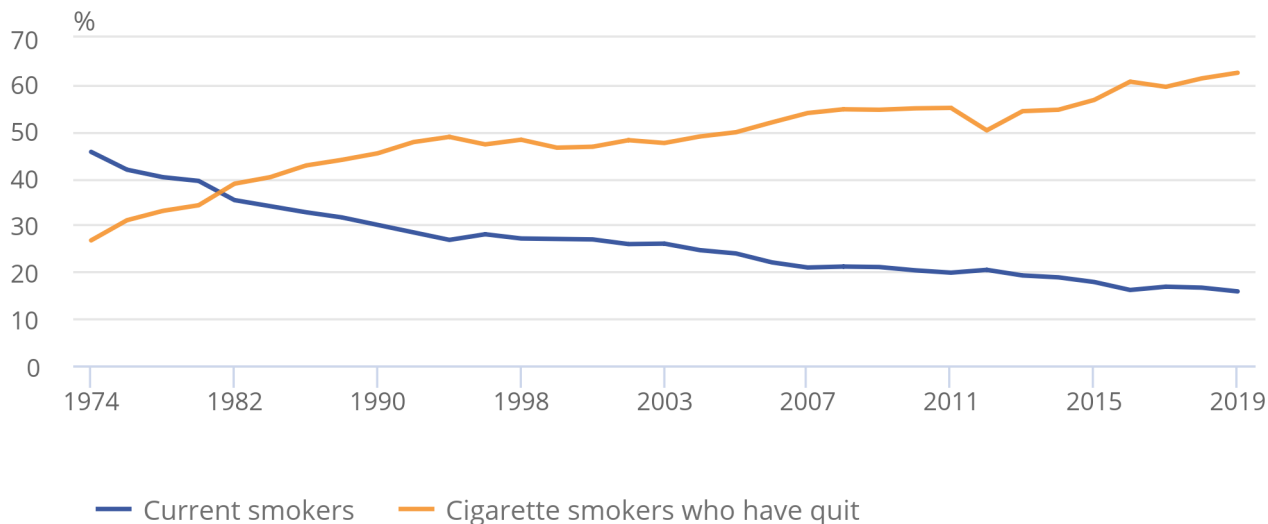
The proportion of smokers who have quit was at the highest level since 1974

The prevalence of smoking among the population in Great Britain continued to fall, while the proportion of cigarette smokers who have quit continues to increase (see Figure 4). Among those who have ever smoked, 62.5% said that they had quit in 2019; this is around 35 percentage points higher than that observed in 1974 (26.7%).

Figure 4: The proportion of cigarette smokers who have quit continued to increase

The proportion of smokers who have quit, all persons aged 16 years and above, Great Britain, 1974 to 2019

80% in the 1980s. Growing evidence of smokers who have quit to reduce the proportion of current smokers, heavily due to the health consequences of smoking, such as heart disease, which took off in the early 70s. Also became illegal for those below 18 to purchase tobacco.



Source: Office for National Statistics – Opinions and Lifestyle Survey

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 collected in 2018 and 2019 were collected using a telephone-only questionnaire, whereas previously data were collected using a face-to-face interview; further information on this can be found in [Measuring the data](#).
3. Data are weighted from 2000 onwards.
4. Data on cigarette use were collected on a two-year basis prior to 2000.
5. Information on the changes in legislation and government policy can be found on the [action on smoking and health website \(ASH\)](#).

Those who intended to quit smoking waited longer to have their first cigarette of the day

Of the people who currently smoked, 52.7% stated that they intended to quit smoking, with 21.1% of current smokers intending to quit within the next three months at the time of interview.

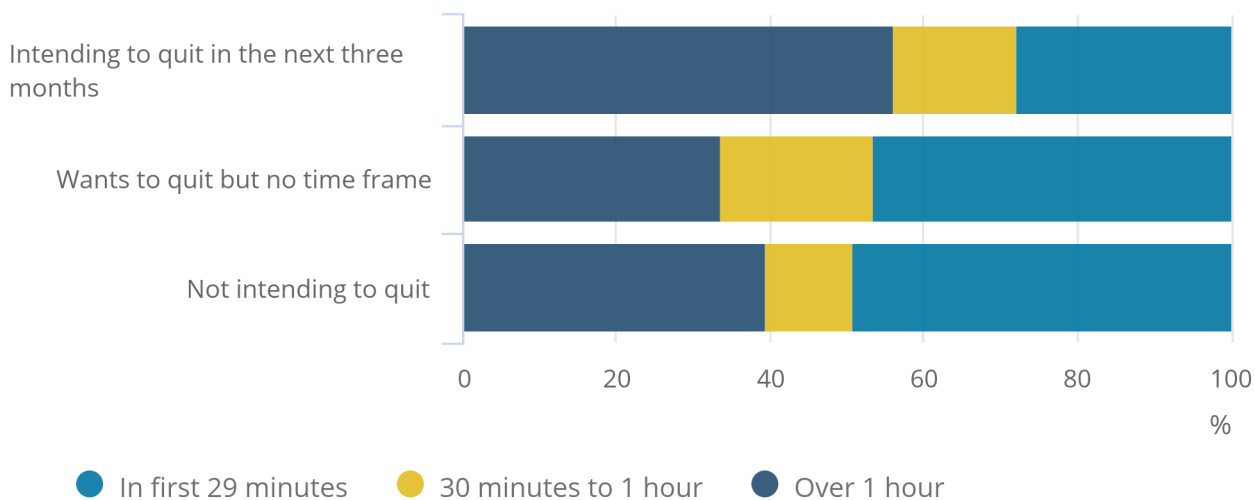
When current smokers intended to quit, they also waited longer to have their first cigarette of the day after waking (see Figure 5). Among those who intended to quit within the next three months, 43.9% had their first cigarette within the first hour of waking compared to 60.4% of those not intending to quit.

Figure 5: Current smokers who intended to quit waited longer to have their first cigarette of the day

Time waited until first cigarette of the day by intention to quit, Great Britain, 2019

Figure 5: Current smokers who intended to quit waited longer to have their first cigarette of the day

Time waited until first cigarette of the day by intention to quit, Great Britain, 2019



Source: Office for National Statistics – Opinions and Lifestyle Survey

Notes:

1. The data refer to the amount of time cigarette smokers typically waited until they had their first cigarette after waking.

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

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 when e-cigarettes are used as part of a quit attempt, success rates are comparable with or higher than licensed medication alone. [Welsh Government have also reported](#) that the most common reason for using e-cigarettes was to help stop smoking tobacco (76% of current users).

There are approximately 3 million vapers in Great Britain

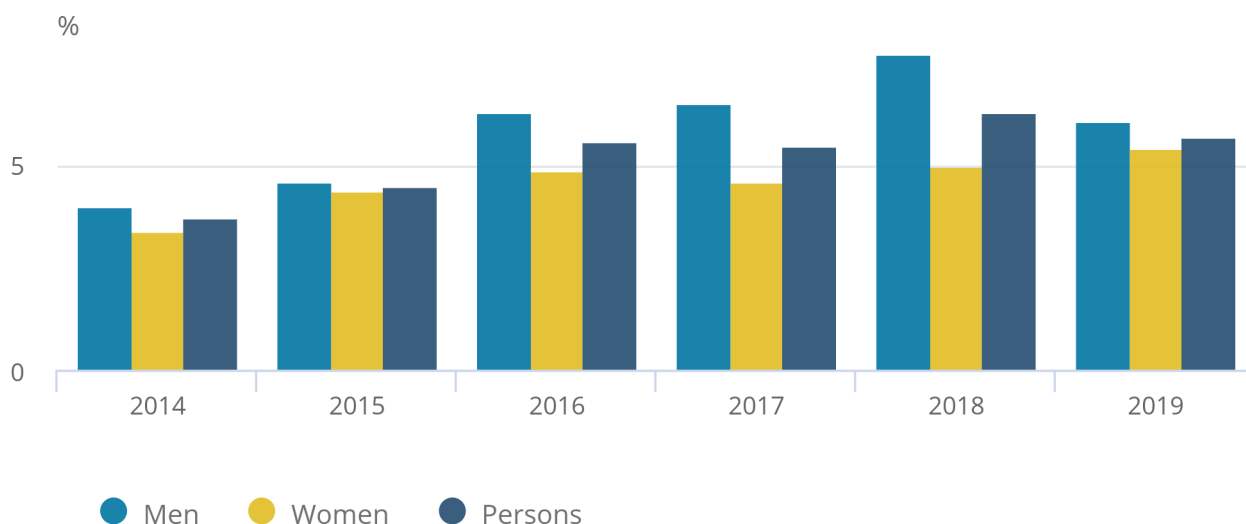
In 2019, 5.7% of survey respondents reported that they currently used an e-cigarette (vaped); this equates to almost 3 million vapers in the population of Great Britain. This proportion is significantly higher than that observed in 2014, when data collection began, when only 3.7% vaped. In 2019, changes in proportions of those who said they vaped were not [statistically significantly](#) different from the previous year.

Figure 6: The proportion of current vapers in 2019 has significantly increased since 2014

Proportion who were current vapers, Great Britain, 2014 to 2019

Figure 6: The proportion of current vapers in 2019 has significantly increased since 2014

Proportion who were current vapers, Great Britain, 2014 to 2019



Source: Office for National Statistics – Opinions and Lifestyle Survey

Although a higher proportion of men reported vaping (6.1%) than women (5.4%) in 2019, this is the first year since data collection began in 2014 that there has been a decline in the proportion of male vapers (down from 7.7% in 2018) – this was not a statistically significant difference. By age, those aged 25 to 34 years had the highest proportion of vapers, at 9.2%.

Half of vapers use their e-cigarette as a means to stop smoking

In 2019, the proportion of vapers was highest among current cigarette smokers (15.5%) and ex-cigarette smokers (11.7%). Only 0.4% of people who have never smoked reported that they currently vape.

The most common reason given for vaping was as an aid to stop smoking, with approximately half (50.6%) of vapers reporting using e-cigarettes for that purpose in 2019.

7 . Health consequences of cigarette smoking

Smoking is a leading cause of preventable death in the UK. [Between 2016 and 2018, 77,600 deaths were attributable to smoking per year in England](#). Estimates from the governments of the devolved countries suggest that smoking is responsible for over 5,000 deaths each year in [Wales](#), 10,000 deaths each year in [Scotland](#) and 2,300 deaths each 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 [more than 500,000 hospital admissions attributable to smoking in 2018 to 2019](#). 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](#) of 5% by 2034. The [Department of Health, Social Services and Public Safety in Northern Ireland has a target](#) 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](#)
- [Tobacco Control Delivery Plan for Wales](#)
- [Creating a Tobacco-Free Generation – A Tobacco Control Plan for Scotland](#)

These set out their respective strategies for reducing the proportion of the population that smokes and the harm caused by tobacco use.

8 . Adult smoking habits in the UK data

[Smoking habits in the UK and its constituent countries](#)

Dataset | Released 7 July 2019

Annual data on the proportion of adults who currently smoke, the proportion of ex-smokers and the proportion of those who have never smoked, by sex and age.

[E-cigarette use in Great Britain](#)

Dataset | Released 7 July 2019

Annual data on the proportion of adults in Great Britain who use e-cigarettes, by different characteristics such as age, sex and reason for vaping.

[E-cigarette use in England](#)

Dataset | Released 7 July 2019

Annual data on the proportion of adults in England who use e-cigarettes, by different characteristics such as age, sex and reason for vaping.

[Adult smoking habits in Great Britain](#)

Dataset | Released 7 July 2019

Annual data on the proportion of adults in Great Britain who smoke cigarettes, cigarette consumption, the proportion who have never smoked cigarettes and the proportion of smokers who have quit, by sex and age over time.

[Adult smoking habits in England](#)

Dataset | Released 7 July 2019

Annual data on the proportion of adults in England who smoke cigarettes, cigarette consumption, the proportion who have never smoked cigarettes and the proportion of smokers who have quit, by sex and age over time.

9 . Glossary

Current cigarette smokers

The Annual Population Survey (APS) defines current cigarette smokers as those who said they smoke cigarettes nowadays. With the Opinions and Lifestyle Survey (OPN), current cigarette smokers are those who said they smoked cigarettes, even if occasionally. Current cigarette smokers are provided as a proportion of those in the population.

Ex cigarette smokers

Ex cigarette smokers are those who do not currently smoke cigarettes but previously they smoked cigarettes regularly. Ex cigarette smokers are provided as a proportion of those in the population.

Never smoked

Never smoked refers to those who do not smoke cigarettes, including the present day and in the past. Never smoked is provided as a proportion of those in the population.

Cigarette smokers who have quit

From the OPN, those who said they have smoked cigarettes regularly, but they do not currently smoke, are cigarette smokers who have quit. This is provided as a proportion of those who have ever smoked cigarettes regularly.

Current vapers

From the OPN, those who said they currently use e-cigarettes, a vaping device, or both are current vapers. Current vapers are provided as a proportion of those in the population.

10 . Measuring the data

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 geographic areas. The data on smoking are collected on the Labour Force Survey (LFS), which forms a component of the APS. [Further information on the APS 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 (OPN), 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.

Opinions and Lifestyle Survey

Data on smoking and e-cigarette use for Great Britain come from the OPN. The survey has an annual sample size of around 8,000 respondents. Compared with the APS, the OPN contains a wider range of smoking-related questions, such as average daily cigarette consumption. [Further information on the OPN and survey methodology](#) is available.

As part of the [census and Data Collection Transformation Programme \(DCTP\)](#), the OPN was transformed from a face-to-face interview to online with telephone follow-up (mixed mode). This change applies to data collected since 2018. [Several pilot tests have been conducted](#), the results of which show minimal impact on the data because of switching from face-to-face to telephone data collection. Further information can be found in our [previous release](#).

Analysis

The analysis reported in this release used survey weights to make estimates representative of the population. Survey weights take into account non-response and attrition as well as the distribution of population characteristics such as sex and age, where someone lives, and socio-economic characteristics.

In the commentary, we often refer to findings in terms of [statistical significance](#). Significance has been determined using [95% confidence intervals](#), which provide the range of values within which we are 95% confident that the true value lies. Instances of non-overlapping confidence intervals between figures indicate the difference is unlikely to have arisen from random fluctuation. The 95% confidence intervals for the estimates are available in the [accompanying datasets](#).

Impact of the coronavirus (COVID-19) on survey data collection

Because of the impact of the coronavirus (COVID-19), there have been several changes to data collection on the APS and OPN. The APS forms part of the LFS, and prior to COVID-19 LFS data collection involved a face-to-face interview, with these [interviews now being conducted via the telephone](#).

At present, the OPN is predominately being used to understand the [impact of the coronavirus on people, households and communities](#). Consequentially, the number of questions relating to smoking and vaping habits on the OPN are restricted to understanding: the proportion of those who smoke cigarettes; the proportion of people who vape; smoker's quit intent; and time to first cigarette.

Currently, we do not have enough information to understand the impact of these changes on the data described in this bulletin. When more data become available, we will communicate the impact of the changes to users.

The data presented in this bulletin were collected in 2019 and therefore were not impacted by the coronavirus.

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 [18% of adults smoked cigarettes in 2018 to 2019](#)
- the National Survey for Wales shows that [17% of adults smoked in cigarettes in 2018 to 2019](#)
- the Scottish Health Survey shows that [19% of adults smoked cigarettes in 2018](#)

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.

11 . Strengths and limitations

Strengths

- Robust methods are adopted for the Annual Population Survey (APS) and Opinions and Lifestyle Survey (OPN) sampling and weighting strategies to limit the impact of bias.
- Quality assurance procedures are undertaken throughout the analysis stages to minimise the risk of error.
- The sample size of the APS is large, approximately 320,000 respondents, making it possible to generate statistics for small geographic areas.

Limitations

- Comparisons between periods and groups must be done with caution as estimates are provided from a sample survey; as such, [confidence intervals](#) are included in the [accompanying datasets](#) to present the sampling variability – these should be taken into account when assessing differences between periods, as true differences may not exist.
- The sample size of the OPN is relatively small, around 8,000 respondents, meaning that detailed analyses for small geographies and other sub-groups are not possible.
- The data described in this bulletin are based on self-reported behaviours; it is possible that the findings underestimate cigarette consumption and, to a lesser extent, cigarette smoking prevalence (for example, [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.
- There are differences when comparing estimates of smoking prevalence from different surveys; these differences are attributable to a range of factors, for example: different survey questions, different methods of sampling and different methods of weighting.

12 . Related links

[Public Health England: Local Tobacco Control Profiles](#)

Web page | Updated as and when new data become available

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.