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LETTER TO THE EDITOR

Response to Winter: 'Hardcore smoking does not necessarily indicate hardening'

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We thank Winter[1] for her interest in our paper and for raising important issues. We suggested that the slight increase in smokers with higher dependence and low motivation to quit between 2006 and 2009 may be due to the introduction of smoke-free laws in England in 2007 [2]. Despite substantial support for smoke-free laws there are some who oppose it, and one recent study using data from the United States suggested that there are some smokers who become more comfortable with their behaviour (and therefore less likely to quit) now that a smoke-free law is in place due to smoking behaviour affecting non-smokers to a much lesser extent [3]. Also, given the relatively small proportion of smokers in our hardcore category (12.8%), we do not think this explanation necessarily conflicts, as Winter suggests, with the findings from the Hackshaw paper [4] that report a similar proportion of quit attempts attributable to the smoke-free legislation across different social groups (reported in the Results section of the paper for July and August only). The Hackshaw paper does not comment on the outcome of quit attempts, which would also be important in understanding the impact of smoke-free legislation.

Secondly, Winter points out that hardcore smoking is not synonymous with hardening. As we discussed in our papers and in our Table 1 [2], there are no accepted definitions of these terms (and we believe it would be good to have agreement on them). In our paper, we used hardcore smokers as one measure of assessing hardening, as has been conducted in various other studies, which we cited in the paper. Winter suggests that such research might not be productive. In our commentary [5] we stated: 'From an academic point of view, we believe there is merit in future research exploring and improving our understanding and measurement of hardcore smoking'.

We stand by this statement, and in our research we separated motivation and dependence factors which had been conflated in many previous papers. In our view it is important to look at both these measures in order to increase our understanding of any trends in outcome data. In our commentary we also argued that regardless of the outcomes of academic research into hardening, efforts to reduce smoking among the most disadvantaged are a priority, which concurs with Winter's views. We also agree with Winter that qualitative methods would be useful in exploring why 'hardcore' smokers are resistant to tobacco control interventions.

Declaration of interests

None.

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