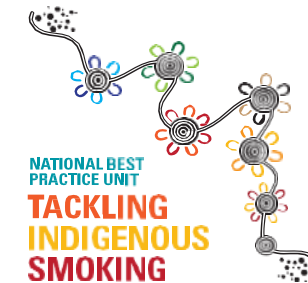


NBPU TIS guide to activities for the Tackling Indigenous Smoking (TIS) Program July 2024-2027



The TIS program uses population health promotion activities to reduce the prevalence of smoking in Aboriginal and Torres Strait Islander communities. TIS is a tobacco control program, not a smoking cessation program. It aims to **reduce smoking prevalence by preventing the uptake of smoking, as well as encouraging people who smoke to quit**. Regional Tobacco Control Grant (RTCG) teams are funded to provide **community outreach**, not clinical individual level action to improve the health and wellbeing of all Aboriginal and Torres Strait Islander people. **The program has recently been extended to include locally tailored activities targeted at preventing the uptake of recreational vaping, as well as encouraging people who vape to quit.**

A list of eligible TIS activities is provided in the [Grant Opportunity Guidelines](#) (GOGs) issued by the Australian Government Department of Health and Aged Care. These activities are all evidence-based. The most recent evidence to support these activities has come from:

- TIS Program Impact evaluation (ANU 2018-2022)
- TIS Program Process evaluation (CIRCA 2015-2022)

The listed activities are all population health promotion activities which are:

- designed to reach groups or communities of people, not individuals on a one-to-one basis;
- able to reach all Aboriginal and Torres Strait Islander people within your Indigenous Region (IREG), not just current service-users.

The table below provides examples of best practice for each of the eligible activities. However, you must still consider how these activities will translate to your local context. Wise practice means looking beyond this formal evidence to ask:

- How will community members feel about this activity?
- Does the activity fit with the values and preferences of the people living in my IREG?

Activities will only be effective if they align with local values and preferences. You can answer these questions by:

- reflecting on your own experiences working in community (has this activity been well received and had good outcomes before?)
- considering local evidence (for example, organisational reports and data, your team's TIS Activity Intensity Report provided by the ANU Impact evaluation team)
- consulting with local community at the very first stages of designing an activity. This co-design process is the most important part of ensuring best practice.

It is also important to remember that:

- Activities should include a clear '[Call to Action](#)';
- A comprehensive approach to population health promotion means using a combination of activities to increase reach across the population;
- Activities can be targeted to priority groups or appeal to the whole of community. Having a mix of approaches works well;
- As well as designing activities to increase the reach of your program (number of people participating in activities), remember that population health promotion works best when activity is high intensity (a regular and repeated program of activities) as this increases the impact of your messaging;
- Working in partnership with other organisations and local ambassadors can increase activity reach and community engagement;
- Monitoring and evaluation should be built into your activities from the start. Choosing outcomes that are relevant to each activity and that matter to your community is essential. Seeking participant feedback on activities is also central to continual quality improvement and performance reporting.



Figure 1: Using evidence to develop locally relevant services

Community education and engagement: A key component of population health promotion is providing information and education to increase people’s understanding of the harms of smoking and vaping, the benefits of being smoke and vape free and pathways to quitting. Education and community engagement can take many forms, but typically includes prevention programs delivered to youth in schools, youth groups, or through sports programs, education delivered at social activities (for example women’s groups, art groups, men’s sheds, bush camps, mums and bubs group), or at community events and festivals (for example, NAIDOC)

Best practice for Youth Programs	What should you monitor?	Outcomes for education programs	Suggested evaluation methods
<p>Youth prevention programs work best if they:</p> <ul style="list-style-type: none"> • are interactive; • include social influences and peer leadership; • use culturally appropriate activities; • are tailored for the age of the children; • include 15 or more sessions delivered at least up until the ages of 14 or 15 years; • are provided as part of a multi-component community outreach program. 	<p>Exposure: Number of people exposed to the TIS message, for example the number of youths invited to attend the program.</p> <p>Engagement: Number of people engaging with the message, for example the number of youths who participated in education sessions.</p>	<p>As this is a prevention activity, outcomes are chosen from Aim 1 (Reduce uptake of smoking or recreational use of vapes):</p> <ul style="list-style-type: none"> • Percentage of participants increasing knowledge about harms of tobacco and vape use • Percentage of participants increasing knowledge of benefits of not using tobacco or vapes • Percentage of participants decreasing their intention to use tobacco or vapes • Other prevention outcomes include increase in positive attitudes towards being smoke and vape free and increased self-efficacy. 	<p>Pre-post program surveys of knowledge and smoking/vaping intentions.</p> <p>Post session survey of knowledge change, attitudes and intentions.</p> <p>Pledges to stay smoke and vape free.</p> <p>Focus groups held during the final program session to evaluate student ‘take home message’ (knowledge), attitudes, and intentions.</p>
Best practice for Community education and engagement	What should you monitor?	Outcomes for community events	Suggested evaluation methods
<p>Health education at community groups or events should include:</p> <ul style="list-style-type: none"> • Information on harms of smoking and vaping/benefits of being smoke and vape free; • Active promotion of a smoke free lifestyle; • Promotional material to increase awareness of quit support pathways (e.g., Quitline number; local clinics or cessation groups); • Interactive and engaging displays/activities. 	<p>Exposure: Number of people exposed to the TIS message, for example the number of people invited to attend the education session or number of people at an event.</p> <p>Engagement: Number of people engaging with the message, for example the number of people who participated in education sessions/had a yarn at the TIS stall/took promotional information.</p>	<p>For this activity we have chosen outcomes under Aim 2 (Increase smoking or recreational vaping cessation):</p> <ul style="list-style-type: none"> • Percentage of participants increasing their knowledge about the benefits of quitting • Percentage of participants increasing their intentions to take steps towards cessation of tobacco or vape use. <p>We have also chosen to write our own outcome under ‘other cessation outcome’:</p> <ul style="list-style-type: none"> • Percentage of participants increasing their awareness of where to get support to quit. 	<p>Short surveys/quizzes or competitions can be used at events to engage the audience and evaluate message impact.</p> <p>For group education run over more than one session consider pre-post program surveys of knowledge and intentions or Focus groups held during the final program session.</p> <p>Post session survey of knowledge change, attitudes and intentions for single sessions.</p> <p>Pledges to stay smoke and vape free.</p>
<p>Additional information:</p>	<p>https://tacklingsmoking.org.au/young-people/</p>		

Smoke free activities (policies): Smokefree environments protect people from the harms of second and third hand smoke and vape aerosol. They also demonstrate changed social norms, which provides a supportive environment for people who have recently quit and those starting out on their smoke and vape free journey. Policies to support smoke and vape free workplaces, and public spaces (e.g. sporting venues, remote community stores) along with smoke and vape free homes, cars and community events are an important part of a comprehensive approach to tobacco control.

Best Practice for Smoke-free workplaces	What should you monitor?	Outcomes for smoke-free policies	Suggested evaluation methods
<p>Smoke-free policies are important for tobacco control. They protect people from second and third hand smoke and foster a supportive environment for people trying to quit. A co-design process supports the development, implementation and maintenance of a smoke-free workplace policy which includes:</p> <ul style="list-style-type: none"> • Strong leadership; • Engagement of the workforce (especially tobacco users); • Workforce empowerment; • Identification of workplace support. 	<p>Exposure: Number of people exposed to the TIS message, for example the number of employees in an organisation.</p> <p>Engagement: Number of people engaging with the message, for example the number of employees pledging to be smokefree at work.</p> <p>AWP Section 2: Number of workplaces assisted to:</p> <ul style="list-style-type: none"> • develop a policy • review a policy • implement a policy. 	<p>As this activity is focused on smoke-free environments outcomes are chosen under Aim 3 (Reduce exposure to second hand smoke or vape aerosol):</p> <ul style="list-style-type: none"> • Percentage of participants increasing their knowledge about the benefits of creating and maintaining smoke-free spaces • Percentage of participants increasing their intentions to avoid second hand smoke: • Percentage of participants increasing their intentions to create smoke-free environments. 	<p>Environmental scan, or workforce survey.</p> <p>Surveys of knowledge and intentions.</p> <p>For smaller workplaces, Focus groups held during an education session.</p> <p>Pledges to be smoke free at work.</p>
Best Practice for Smoke-free homes and cars	What should you monitor?	Outcomes for smoke-free homes	Suggested evaluation methods
<p>In 2017 a review of approaches to establishing smoke free homes in Indigenous populations in Australia, New Zealand, Canada and the United States found that pregnant women are highly motivated by strong beliefs about protecting children from second hand smoke to create a smoke-free home. Implementing and maintaining a smoke free home requires strength and confidence to:</p> <ul style="list-style-type: none"> • enforce strict rules • give strong instructions to prevent visitors or family members from smoking in the home <p>Role modelling by Elders or other respected community members was also important.</p>	<p>Exposure: Number of people exposed to the TIS message, for example, number of people at an event where smoke-free and vape-free home and cars are promoted.</p> <p>Engagement: Number of people engaging with the message, for example number of event attendees pledging to be smoke free and vape free at home and in the car.</p> <p>AWP Section 2:</p> <ul style="list-style-type: none"> • Number of homes supported to be smoke free and vape free (counts of the number of smoke-free/vape-free signs distributed) • Number of smoke free and vape free home pledges. 	<p>As this activity is focused on smoke-free environments outcomes are chosen under Aim 3 (Reduce exposure to second hand smoke or vape aerosol):</p> <ul style="list-style-type: none"> • Percentage of participants increasing their knowledge about the benefits of creating and maintaining smoke-free spaces • Percentage of participants increasing their intentions to avoid second hand smoke • Percentage of participants increasing their intentions to create smoke-free environments. 	<p>Surveys of knowledge and intentions.</p> <p>Number of pledges to have a smoke free home/car.</p>
<p>Additional information:</p>	<p>https://tacklingsmoking.org.au/introduction-to-activities/smoke-free/</p>		

Community events: World No Tobacco Day (WNTD), NAIDOC week activities.... whether you are hosting a big event, event or partnering with others, your approach to ensuring a smoke free environment and the outcomes you will measure will be the same.

Best practice for smoke free events	What should you monitor?	Expected outcomes	Suggested evaluation methods
<p>Smoke-free community events should be seen as part of a comprehensive approach to tobacco control. One off smoke-free events like WNTD carnivals or sports festivals might be able to reach the whole community. But they are low intensity – that is their duration is too short and isolated to have a big impact on smoking related knowledge, attitudes, or behaviour. They are, however, useful as part of a program of activities.</p> <p>Choose appropriate activities that are locally appealing to your target population. Is a fun run a good idea in your community if it will only be attended by people already committed to be healthy and are smoke free? Are there better events that will have a broader appeal?</p>	<p>Exposure: Number of people exposed to the TIS message, for example the number of people at the event.</p> <p>Engagement: Number of people engaging with the message, for example the number of event attendees pledging to be smoke free and vape free at home and in the car, number taking information brochures etc. You could also undertake an Environmental scan, to observe compliance with smoke-free messaging at the event.</p> <p>AWP Section 2: Number of events supported to be smoke and vape-free.</p>	<p>Choose your outcomes depending on the message you want to share at the event. Your focus might be on preventing uptake, promoting quitting, or encouraging people to have smoke and vape free homes and cars.</p>	<p>Short surveys/quizzes or competitions can be used to engage the audience and evaluate message impact.</p> <p>Response to your event call to action. For example:</p> <ul style="list-style-type: none"> • number of pledge to have a smoke and vape free home; • number of people taking information on where to get quit support.
<p>Additional information:</p>	<p>https://tacklingsmoking.org.au/introduction-to-activities/smoke-free/ https://tacklingsmoking.org.au/resources/resources-to-support-activities-that-work/34509/?title=Smoke+free+organised+under+18+sporting+events&contenttypeid=1&contentid=34509 <u>1</u></p> <p>https://tacklingsmoking.org.au/resources/resources-to-support-activities-that-work/34508/?title=A+guide+to+tobacco+free+mega+events&contenttypeid=1&contentid=34508 <u>1</u></p> <p>https://tacklingsmoking.org.au/resources/resources-to-support-activities-that-work/36858/?title=Smoke+free+environments&contenttypeid=1&contentid=36858 <u>1</u></p>		

Mass media and/or social media campaigns: social Marketing campaigns are good way to extend program reach across your IREG. Using a combination of traditional communication channels (TV, radio, print media) and social media channels (Facebook, Instagram, TikTok) can be very effective if you want to reach an entire population as different media will appeal to different groups. Exposure to the message will also be increased if messages are displayed in different locations (e.g. TV ad, poster on the bus, Facebook 'social tile'). This repetition strengthens the message. It is important to choose the communication channel that will have the best reach for your context and target group.

Best practice for social marketing	What should you monitor?	Expected outcomes	Suggested evaluation methods
<p>Social marketing delivered either through traditional media or social media is most effective when:</p> <ul style="list-style-type: none"> • the people delivering the message are local respected community members; • messages focus on topics that matter to the audience e.g. family/relationships; • messages and messenger are relatable ('that could be me'); • Strengths based positive messaging empowers people to act ('I did it, you can too'). 	<p>Exposure: For traditional social marketing, the number of people who may be exposed to the TIS message via posters, leaflets, TVCs – for example number of people within a TV broadcasting area (number of audience members when campaigns are aired is better data, but not always available).</p> <p>For social media campaigns, metrics like reach provide an estimate of message exposure.</p> <p>Engagement: For traditional social marketing, the number of people who engage with the message can be difficult data to collect for activities like posters and TVCs. If you have brochures/information sheets as part of the campaign, you could count the number people take away from events/education groups etc. If you have posters or other resources with a QR code which links to your website or FB page where someone can find more information, then counting the number of scans can help estimate message engagement.</p> <p>For social media campaigns, engagement is the number of interactions with campaign posts - metrics like reactions, click throughs, comments and shares.</p>	<p>Choose your outcomes depending on your campaign message. Your focus might be on preventing uptake, promoting quitting, or encouraging people to have smoke and vape free homes and cars.</p> <p>It can be challenging to measure outcomes for social media and social marketing campaigns so choose your outcomes carefully.</p> <p>Two good measures of social marketing impact are branding recognition and message recall. You could write your own outcomes under 'other' prevention, cessation or exposure outcome depending on the campaign focus. For example:</p> <ul style="list-style-type: none"> • Percentage of participants recognising (program name) brand and its meaning • Percentage of participants recalling campaign message. 	<p>Please see evaluation advice described under other activities for measuring response to the campaign message/call to action.</p> <p>Surveys of message recognition and/or recall.</p> <p>Surveys of brand awareness.</p>
<p>Additional information:</p>	<p>https://tacklingsmoking.org.au/introduction-to-activities/media/ https://tacklingsmoking.org.au/introduction-to-activities/social-media-and-social-networking/</p>		

Developing promotional resources: All promotional resources, from posters, pamphlets, smoke/vape free signage and other collateral should be based on the latest evidence as provided by trusted sources such as the [TIS website](#) including updates from the NBPUE evidence guru [Connie the Clover Cockatoo](#). [Tobacco in Australia](#) is another trusted source of information, facts, and figures about tobacco and e-cigarettes.

Remember as well that co-design, local messaging and using local ambassadors or other 'heroes' is most effective for persuasive population health promotion messaging.

These resources will usually be used as a part of the different activities described above.

Additional information:

<https://tacklingsmoking.org.au/>
<https://www.tobaccoinaustralia.org.au/home.aspx>
<https://tacklingsmoking.org.au/tis-team-activities/news/>

Anti-vaping activities: Evidence suggests that anti-vaping activities should use same population health promotion techniques described above. This includes developing vaping prevention resources and targeted vaping prevention and cessation messaging.

Activities will often combine anti-vaping and anti-smoking messages and information. For example, with youth, who are a priority focus for anti-vaping activities, integrating education about vaping into school programs and other tobacco control activities is appropriate.

However, it is important not to mix your messaging – be clear about the differences between vaping and smoking and well as what they have in common (e.g. nicotine addiction, tobacco industry interference).

Additional information:

<https://tacklingsmoking.org.au/young-people/>
<https://tacklingsmoking.org.au/e-cigarettes/>