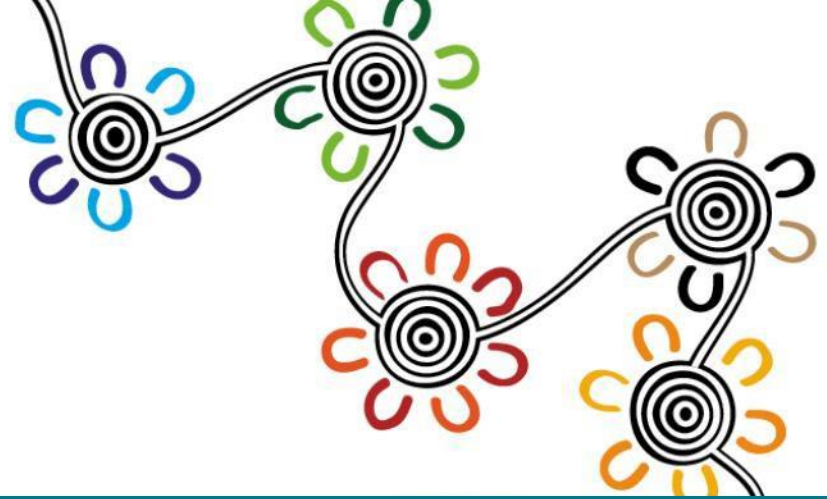


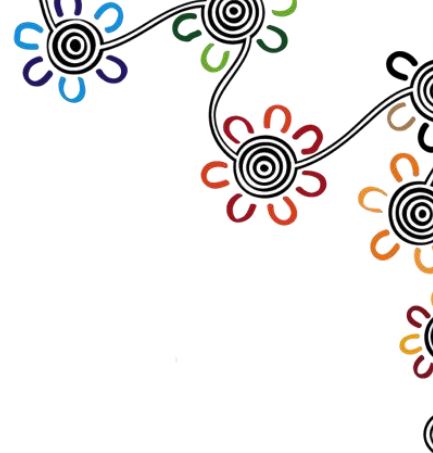
NATIONAL BEST  
PRACTICE UNIT

**TACKLING  
INDIGENOUS  
SMOKING**



# WELCOME

South Australia TIS Jurisdictional Workshop  
Wednesday 19<sup>th</sup> October 2016



# HOUSEKEEPING

NATIONAL BEST  
PRACTICE UNIT  
**TACKLING  
INDIGENOUS  
SMOKING**

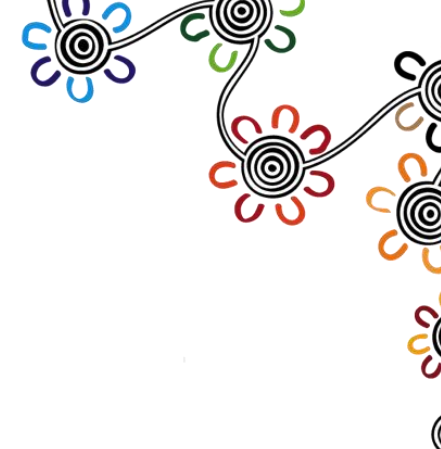


# INTRODUCTIONS

**Team Leaders to introduce the team:**

- **the name of the organisation your representing**
- **the region you service**
- **name and title of the workers**

# Overview of TIS Programme



**Professor Tom Calma AO**  
**National Co-ordinator TIS**

# **“TIS SA Workshop”**

**19 October 2016**

**Nunkuwarrin Yunti of SA**



**Professor Tom Calma AO**  
National Coordinator Tackling Indigenous Smoking





**North**

Kundjey'mi

Gagudju

Amarak

Bukurnidja

C Croker

Croker I

Iwaidja

C Van Diemen

Melville I

Konbudj

Ngombur

Bathurst I

Tiwi

Endyalgout I

Nguiu

Mbukarla

Van Diemen

Limilngan

Gulf

Field I

Beagle Gulf

DARWIN

East

Gumbalunya

Obiri Rock

Belyuen

Woolna

Larrakia

Jabiru

Gunv

Wadyiginy

Batchelor

Kungarakany

Kakadu

Wuningangk

Tjerratj

Anson Bay

Kuwema

Malak

Warray

Daly River

## Tackling Indigenous Smoking Programme 2016 - 18

- We must **learn from** past experience
- We must **gather the evidence** as we deliver our services
- We must **perform** – strategically and regionally
- We must **report accurately** and **timely**
- We must **leverage the support of** the community, NGOs and other stakeholders including States/ Territory and local Govts

# What is TIS?

1. **NCTIS**
2. **NBPU**
3. Grants to orgs - **37** Individual orgs funded
4. **Quit skills** training
5. **Quitline** enhancement
6. Evaluation Framework
7. Targeted projects – pregnant mothers, youth and remote populations



# The Old TIS Programme

- TIS Teams hosted by orgs
- Smoking cessation and healthy lifestyle
- Referral to smoking cessation support
- Population health approach
- NCTIS
- Quit Skills support
- **Quitline** enhancement
- Regional Tobacco Fund
- National Office provided policy advice **and some grant funding – Regional Grants and marketing**
- Managed other chronic disease programmes

## New TIS Programme

- Grant Recipients (GR)
  - Whole of service approach – population health + smoking cessation
  - Greater discretion to GR – outcomes focused
  - Smoking cessation and healthy lifestyle
  - No healthy lifestyle funded – *Some TIS priority projects*
  - NCTIS
  - Quit Skills support
  - Quitline enhancement
  - Dedicated TIS policy section at national office
  - Grants Services Division
  - NBPU
  - Evaluation Framework
- No Marketing \$

Engagement with grant recipients and other stakeholders and disseminating evidence and information on best practice for the TIS program

**NBPU TIS team works with grant recipients to discuss**

- Priorities for NBPU TIS **organisational support** and **workforce development** including developing and implementing **local performance indicators**
- **Existing systems** for data collection and reporting
- Process and timing **for reviewing grant recipient action plans**
- **Tackling Indigenous Smoking Resource and Information Centre** – Prev called National Operational Guidelines  
**see Portal**

## NBPU initiated and supported initiatives

- **HealthInfoNet TIS section**
- **NBPU TIS website**
- Social media accounts
- Mailing list/ register protocols
- eNews
- Promotion strategy
- **Performance monitoring, analysis and reporting systems in association with program evaluators**

## Evidence-based approaches to tobacco control

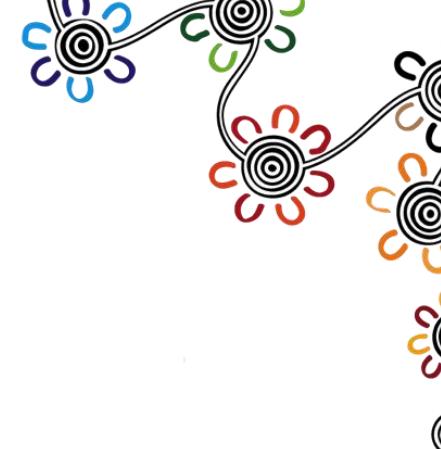
- **Identify and prioritise new products** required for NBPU TIS to effectively support grant recipients **based on external research, evidence base**, stakeholder feedback and grant recipient experience (peer to peer learning)
- **TIS Advisory Group – Brad Brown, Cancer Council Vic**
- **TIS Resource and Information Centre**
- annual **regional and national** meetings / workshops

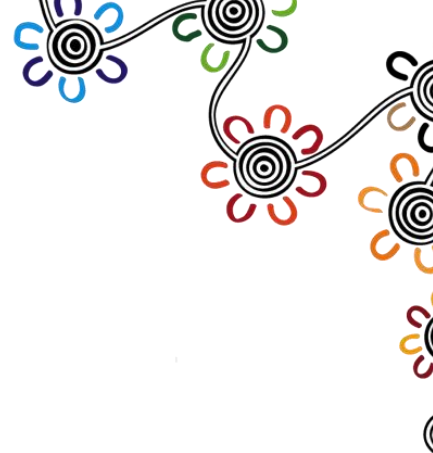
# Impact assessment, performance indicators and data collection and reporting on results

- To enable GRs **to adopt evidence-based and results-oriented approaches** in order to reduce rates of smoking among Indigenous people
- **Monitoring and Evaluation framework** and **program performance indicators**
- **final year of funding for grant recipients relies on evaluation results in March-June 2017**

# The TIS Portal

**Kathy Ride**  
**Health/InfoNet**





# MORNING TEA



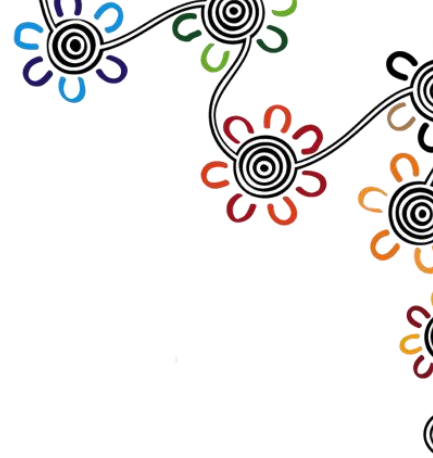
# Quitskills and Quitline

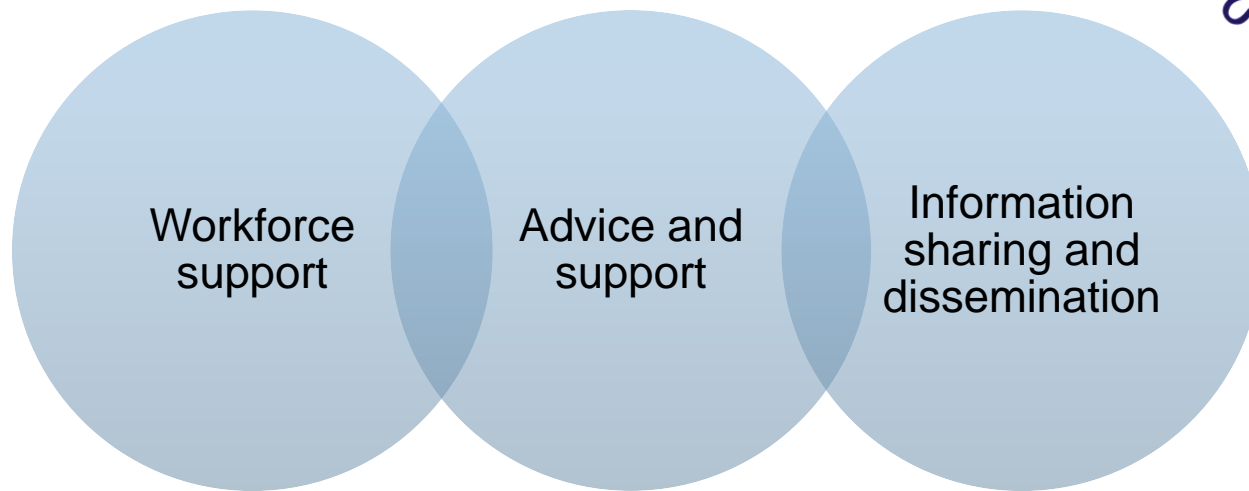


**Nathan Rigney**  
**Cancer Council SA**

# Role of the National Best Practice Unit (NBPU)

**Desley Thompson**  
**Ninti One**





Works with grant recipients to develop

**Action Plans:**

- Strategy and theory of change
- Roles and responsibilities
- Timelines

**Monitoring and evaluation plans:**

- Performance indicators
- Data collection

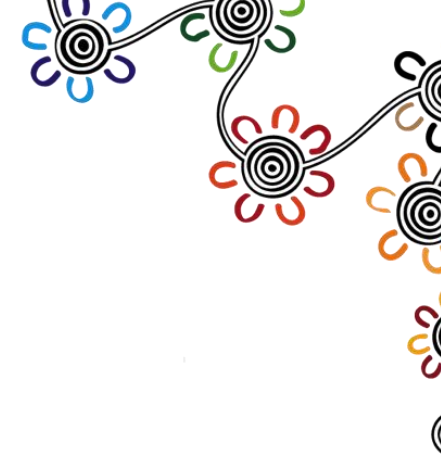
**GRANT RECIPIENTS**  
(TIS-Funded Organisations)





# Sharing our Stories – Group 1

- ❖ Nunkuwarrin Yunti of SA
- ❖ Pangula Mannamurna Aboriginal Corp.



# LUNCH

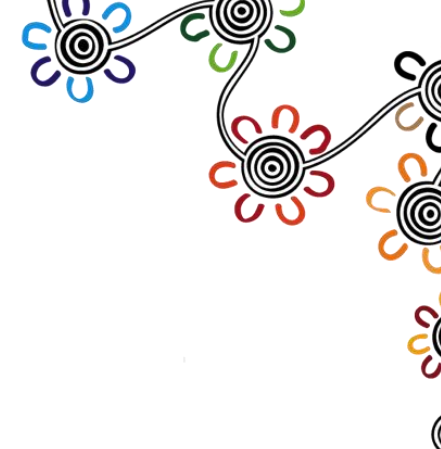


# Strategies for a successful TIS Program



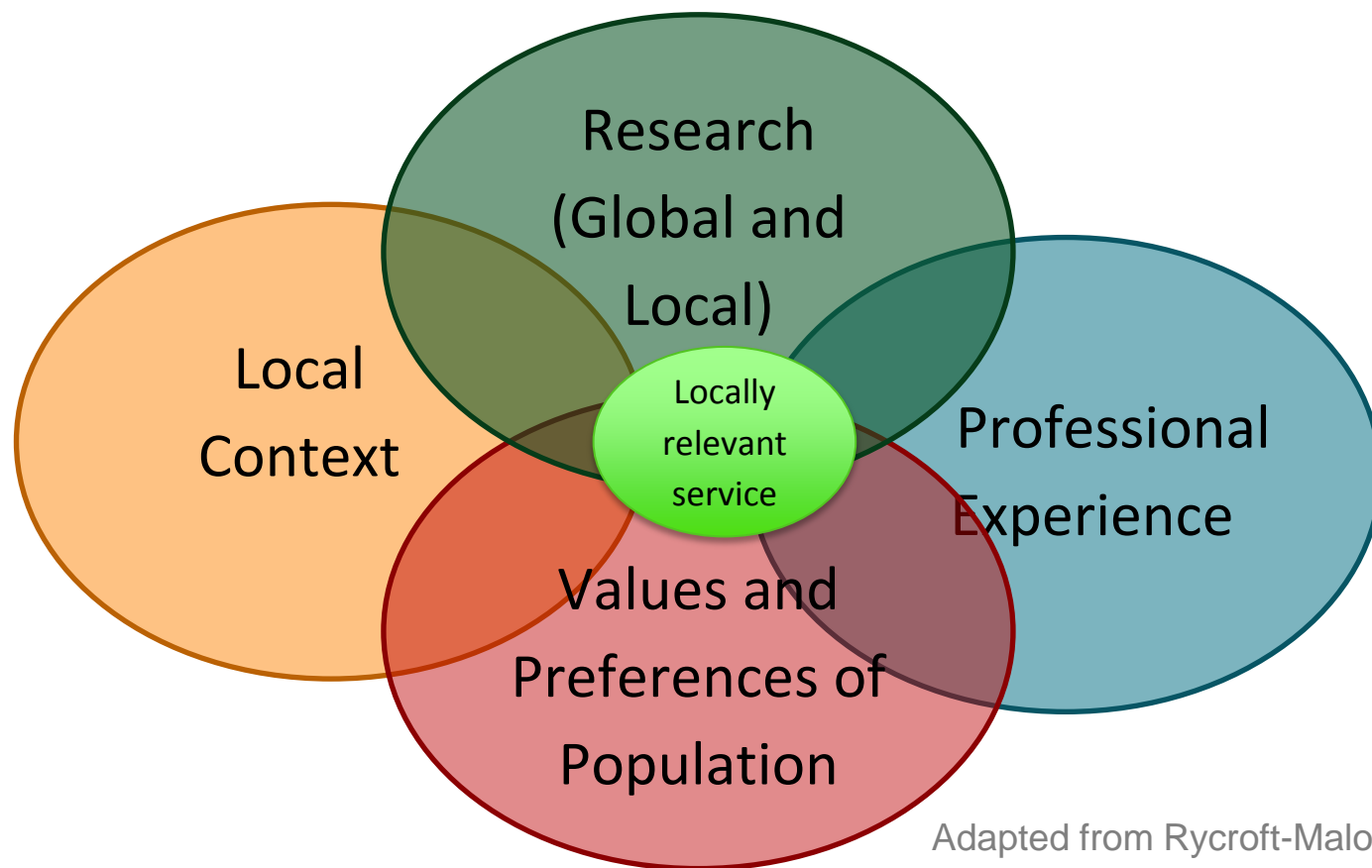
# TIS Principles:

- Regional reach, meeting local needs
- Evidence based activities
- Outcomes focus - intended impact
- Multi component approach
- Systems Thinking
  - Community leaders
  - Local and regional organisations
  - Healthcare services
  - Quit services





# What do we mean by 'evidence'?



Adapted from Rycroft-Malone et al. 2004

# Outcomes based

## Output

- TIS activities



## Outcome

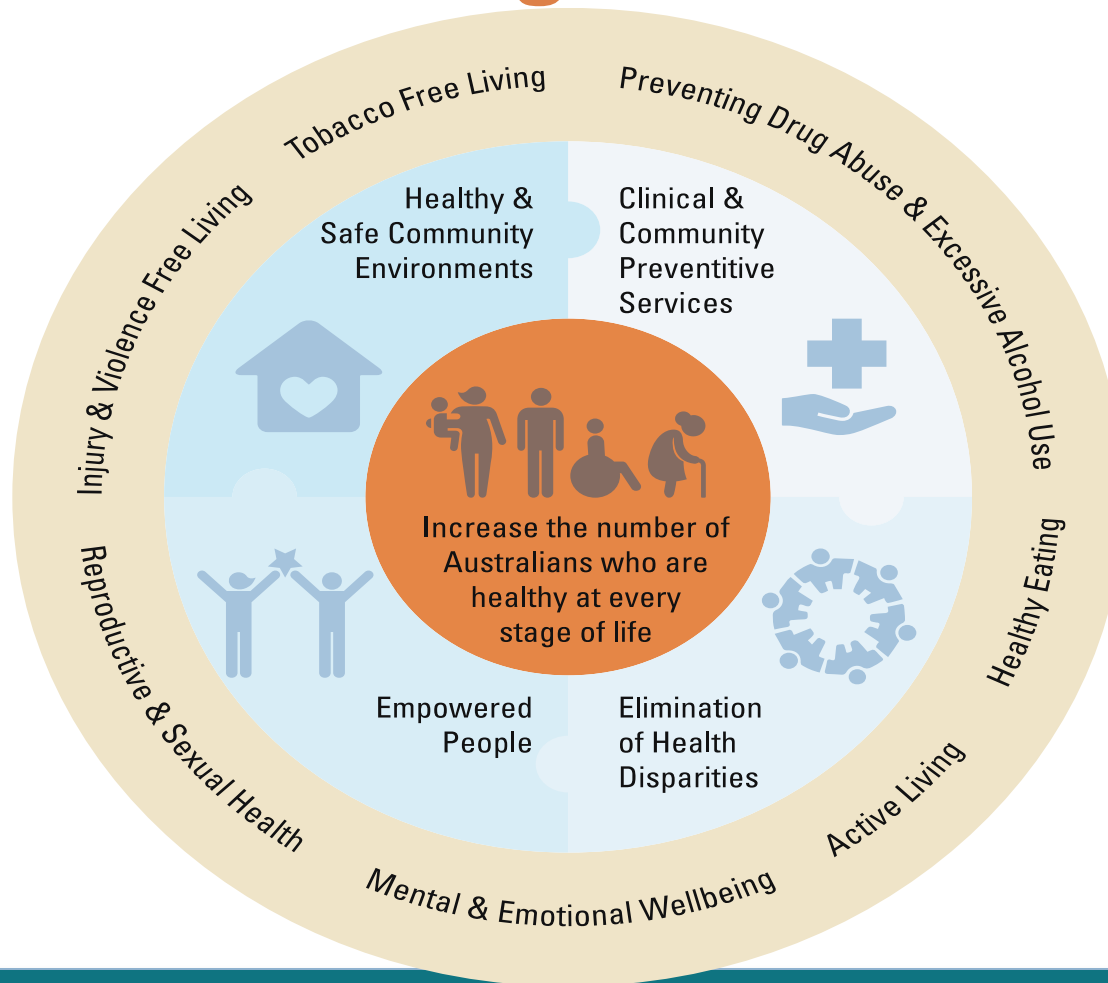
- TIS impact



# Multi-component approach



# Systems thinking



# Action Plan: Expectations



## TIS Principles & Objectives

## ACTION PLAN



## Tobacco-related outcomes

- Locally owned solutions
- Progress measured in terms of outcomes
- Partnerships to extend reach
- 'Be the change': smoke-free policies, spaces, and events
- Applies evidence to local context
- Community more aware and involved
- Key professionals better equipped
- Advancements in research and practice
- Reduction in active and passive tobacco consumption



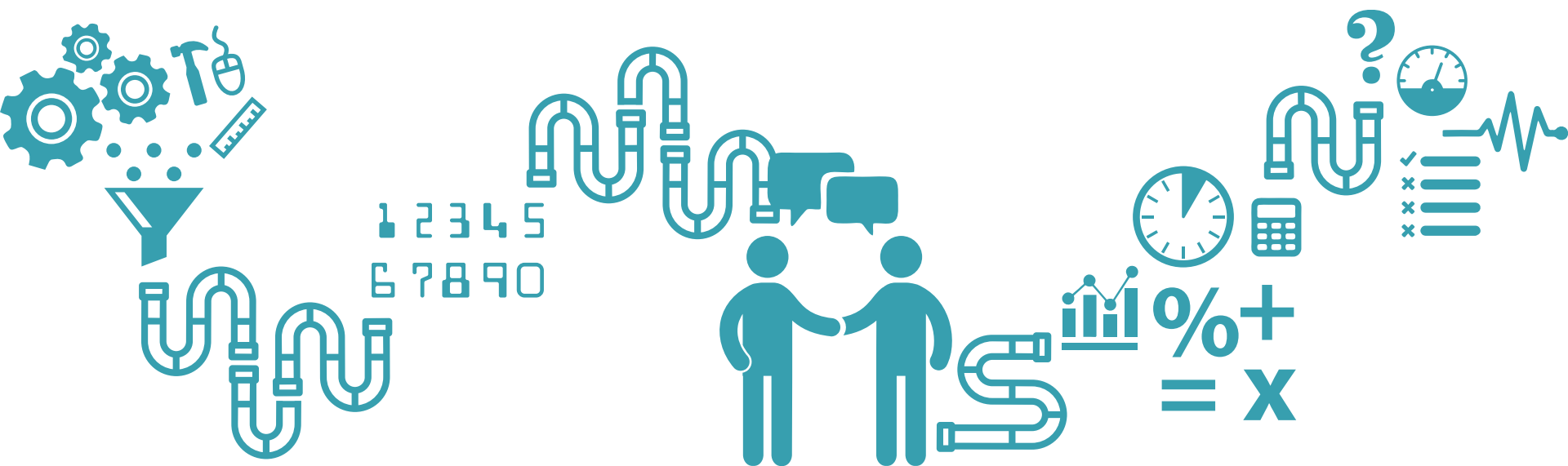
## Exercise

**Please use the butchers paper to write down:**

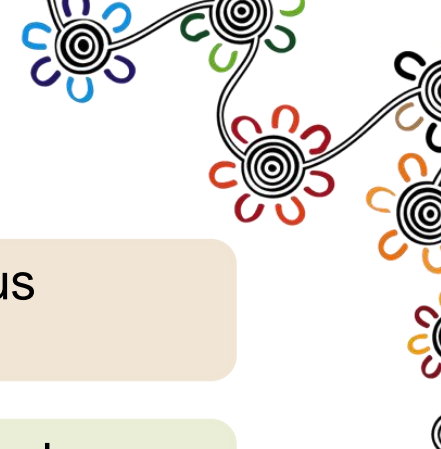
- 1. What data collection methods would you like to know more about?**
- 2. What would you like to know about the National Indicators?**



# Data collection methods



# Monitoring and measuring for TIS: Key terms



## Data

- Information of any kind that helps us measure changes due to TIS

## Indicator

- Measures that show progress toward desired changes

## Data collection

- Process used to gather information

## Impact

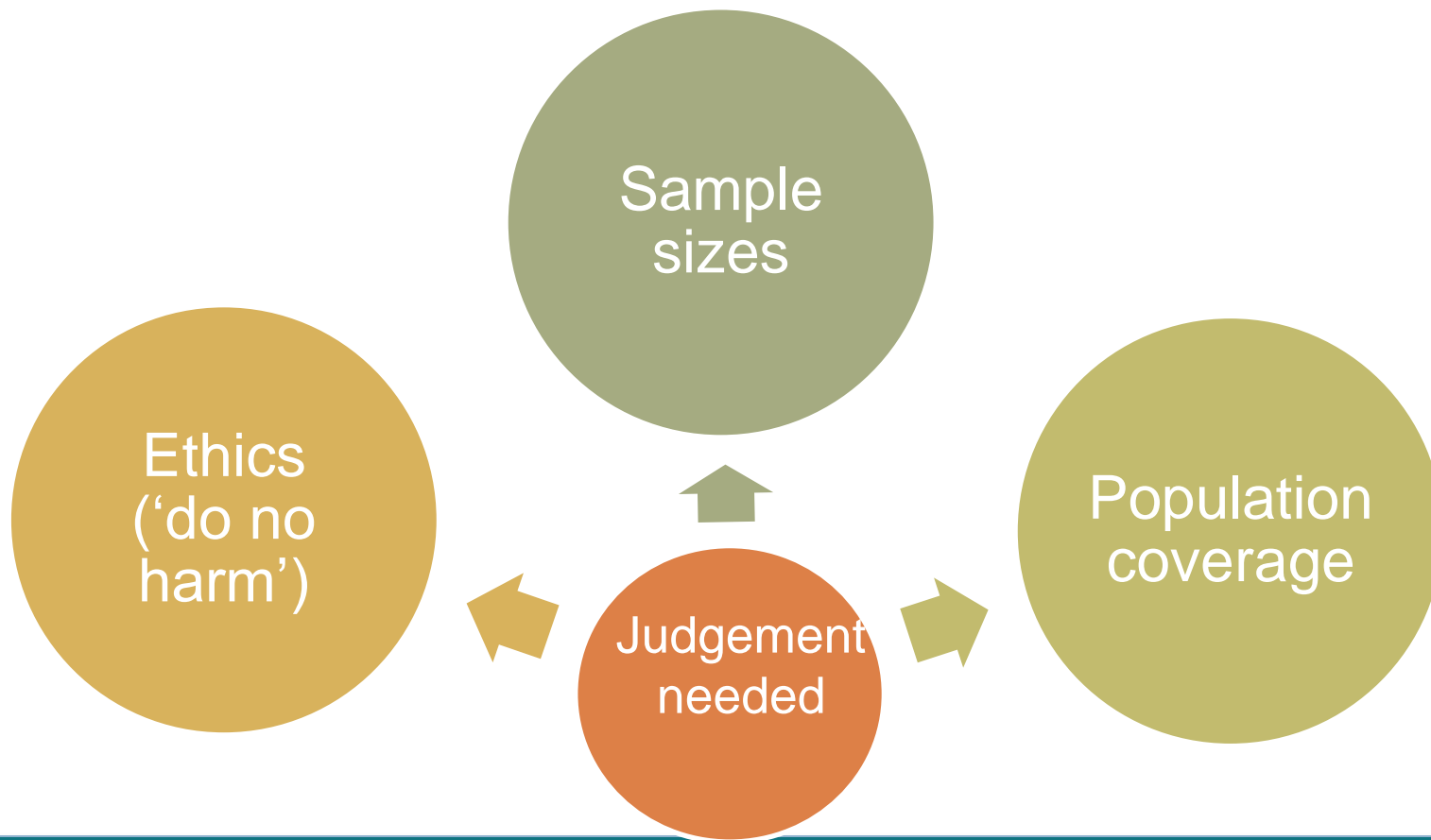
- Desired long-term changes

## Methods

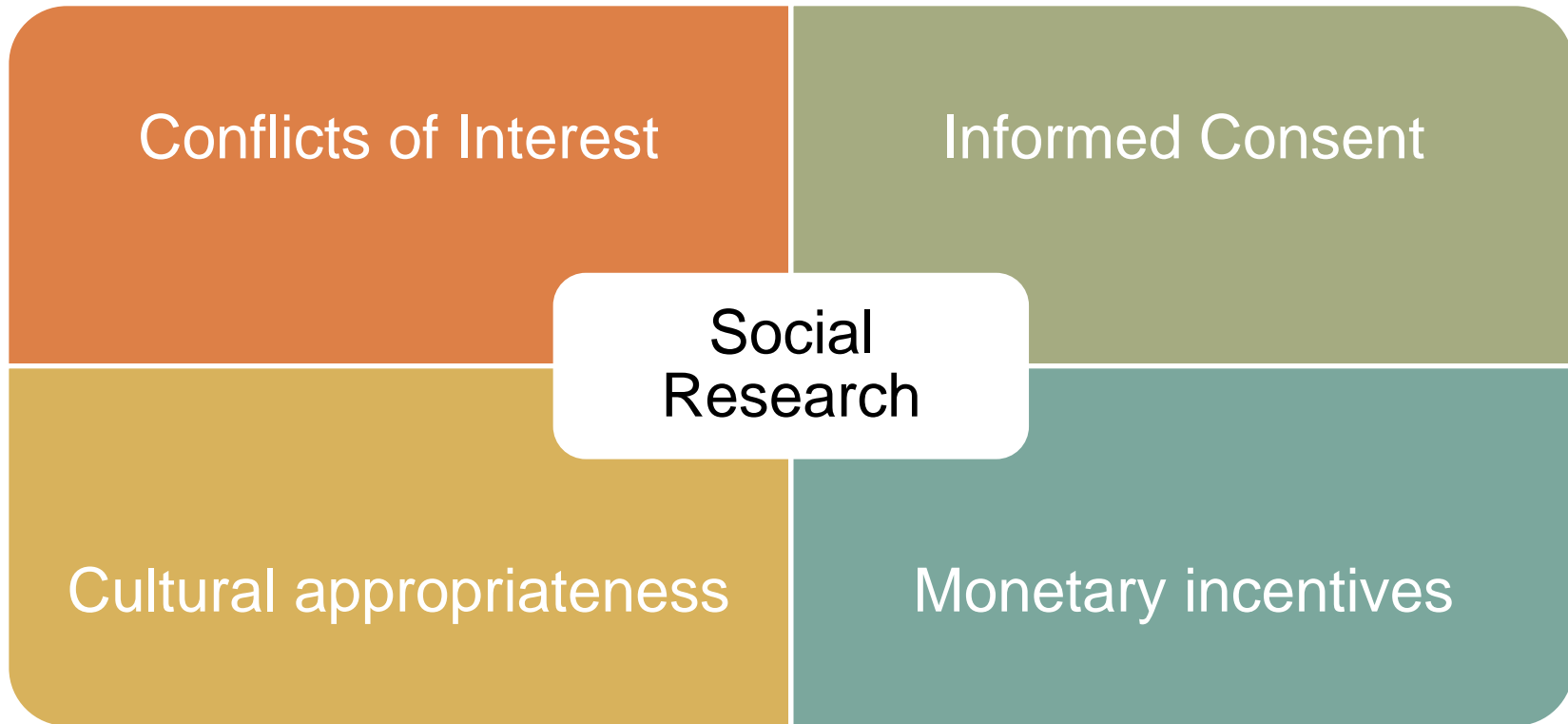
- Ways to collect data



# Key considerations for collecting data



# Ethical Considerations



See also: [Ethics Guidelines from the Australasian Evaluation Society](#)

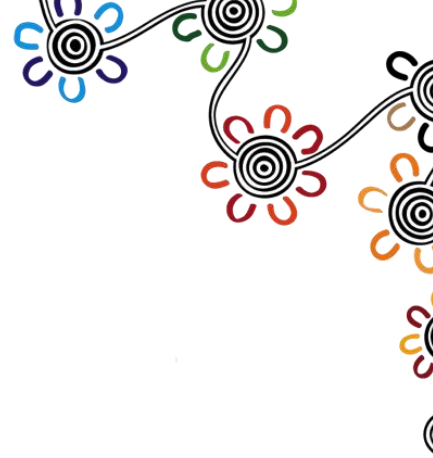
# Do I need ethics approval?

Does the activity pose a risk to:

- Privacy or well-being of participants?
- Professional reputation of providers or organisations?
- Do you intend to publish?

Then YES. For further info

- [Human Research Ethics Committees with focus on Aboriginal and Torres Strait Islander populations](#)



# Data that tells a story

## Quantitative

**Numbers** that tell us a little about a lot of people



## Qualitative

**Conversation** that tells us a lot about a few people



## Mixed methods

Both reach and detail

# Making use of existing data

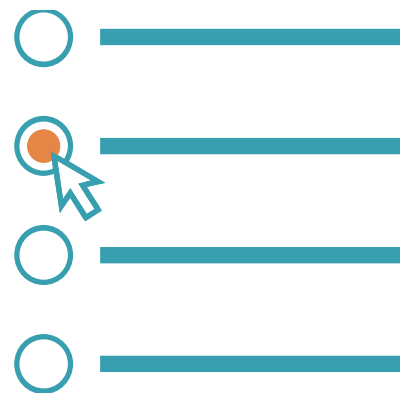


How can you draw from existing data to tell a story of change?

- What are useful sources of information?
- How are they relevant to your local TIS activities?
- What connections can we make between different data we collect?
- Where are the gaps?
- **Efficient but needs access**

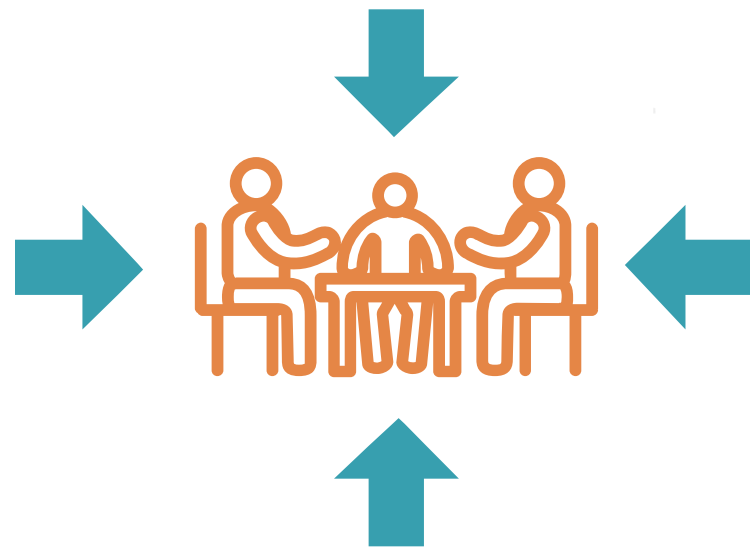
# Questionnaire Surveys

- Reach (and require) large samples
- Limited exploration of answers
- Simple to analyse, but limited data
- Can be done online and via social media (e.g. [Survey Monkey](#))
- **Flexible, adaptable but questions need care**



# Focus Groups

- Small samples
- Enable variety of questions and exploration of answers
- Rich, complex data
- **In-depth, enables opinions and subtle changes to be picked up BUT group may be swayed by one strong opinion**



# Interviews

- Very small samples
- Very rich data
- Time intensive
- Can be done via phone/skype



- **Enables a unique community focus**



# Case Studies

Examine stories, e.g.

- Individuals who have quit
- Homes becoming smoke-free
- Workplaces staying smoke-free
- Partnerships and networks
- People-centered, based on relationships



Ethel-Anne Gundy talks about quitting



Marlene talks about quitting



Ray talks about quitting

# Story telling

- Capture individual or group experiences
- Focus on how people make sense of significant change
- Uses creative approaches such as story boards or photo essays, video, painting, dance or drama
- A reflective approach to evaluation
- **Using imagery can be more powerful than words but may needs careful interpretation**





# Measuring change: Defining Indicators



# National Indicator 1

Quality and reach of community engagement



National  
Outcomes

Geographical  
reach

No. and type of  
contacts across  
the population

No. of meeting  
groups for  
specific people  
eg pregnant  
women

No. and quality  
of partnerships

Examples of local measures

# National Indicator 2

Organisations involved in tobacco reduction in the region



National Outcomes

No. and quality of partnerships

Quality of networks

New initiatives with other organisations

Formation of coalitions and alliances

Examples of local measures

# National Indicator 3

Building capacity to support quitting



National  
Outcomes

No. and  
effectiveness of  
ambassadors,  
advocates, etc.

School-based  
knowledge and  
support

No. and  
effectiveness  
of brief  
interventions

No. and  
effectiveness of  
Yarning Groups


Examples of local measures

# National Indicator 4

Referrals to appropriate quitting support




National  
Outcomes



No. and  
effectiveness of  
referral  
pathways



Outreach to  
new groups  
eg in disability  
and mental  
health



Availability and  
quality of local  
quitting support



Effective  
partnerships  
with clinical  
services

Examples of local measures

# National Indicator 5

Supporting smoke-free environments



National  
Outcomes

Population  
reach

Effectiveness of  
advocacy on  
smoke-free  
places

No. of  
smoke-free  
homes, cars  
and workplaces

Compliance  
with  
smoke-free  
agreements

Examples of local measures

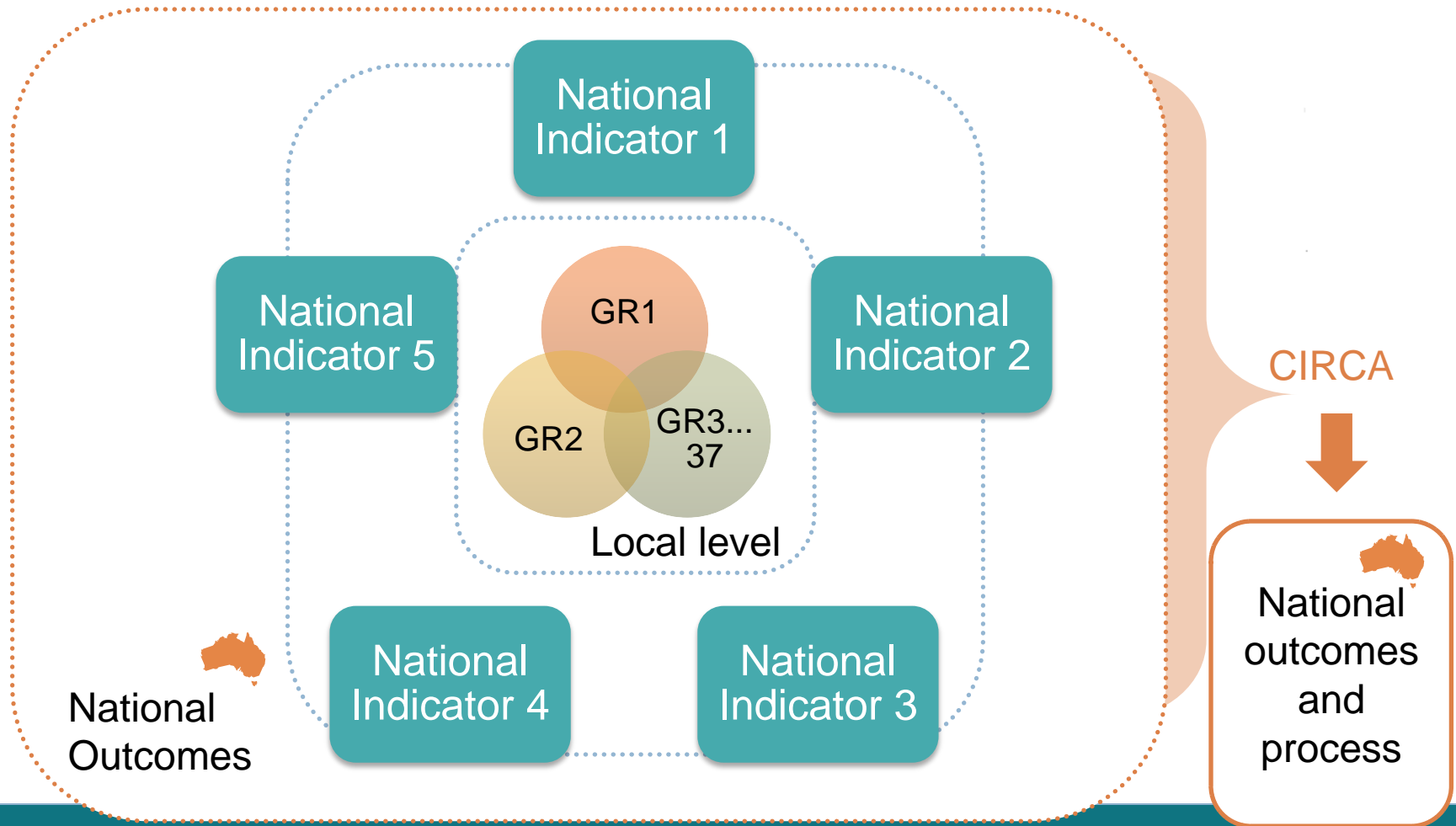




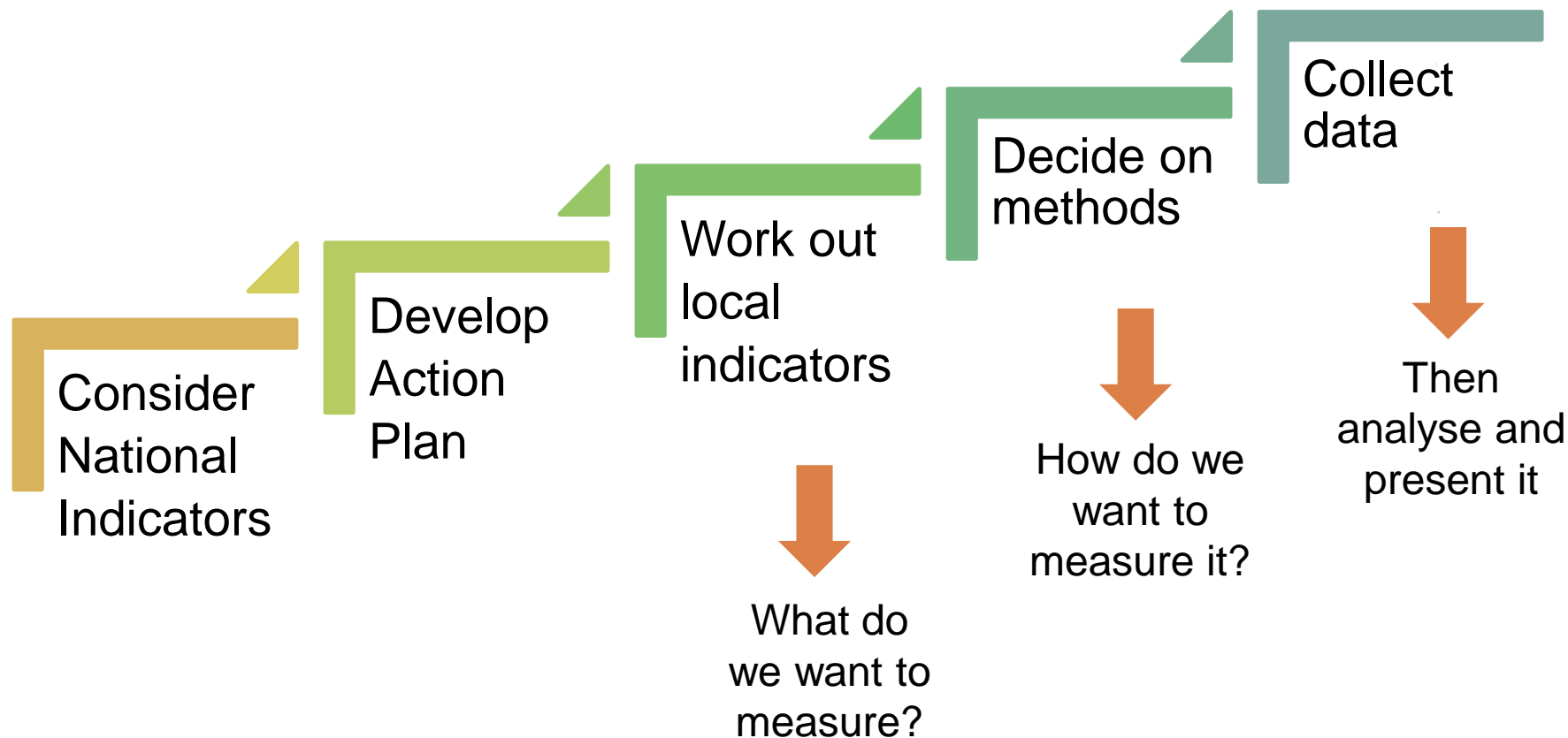
# Measuring change: Collecting information



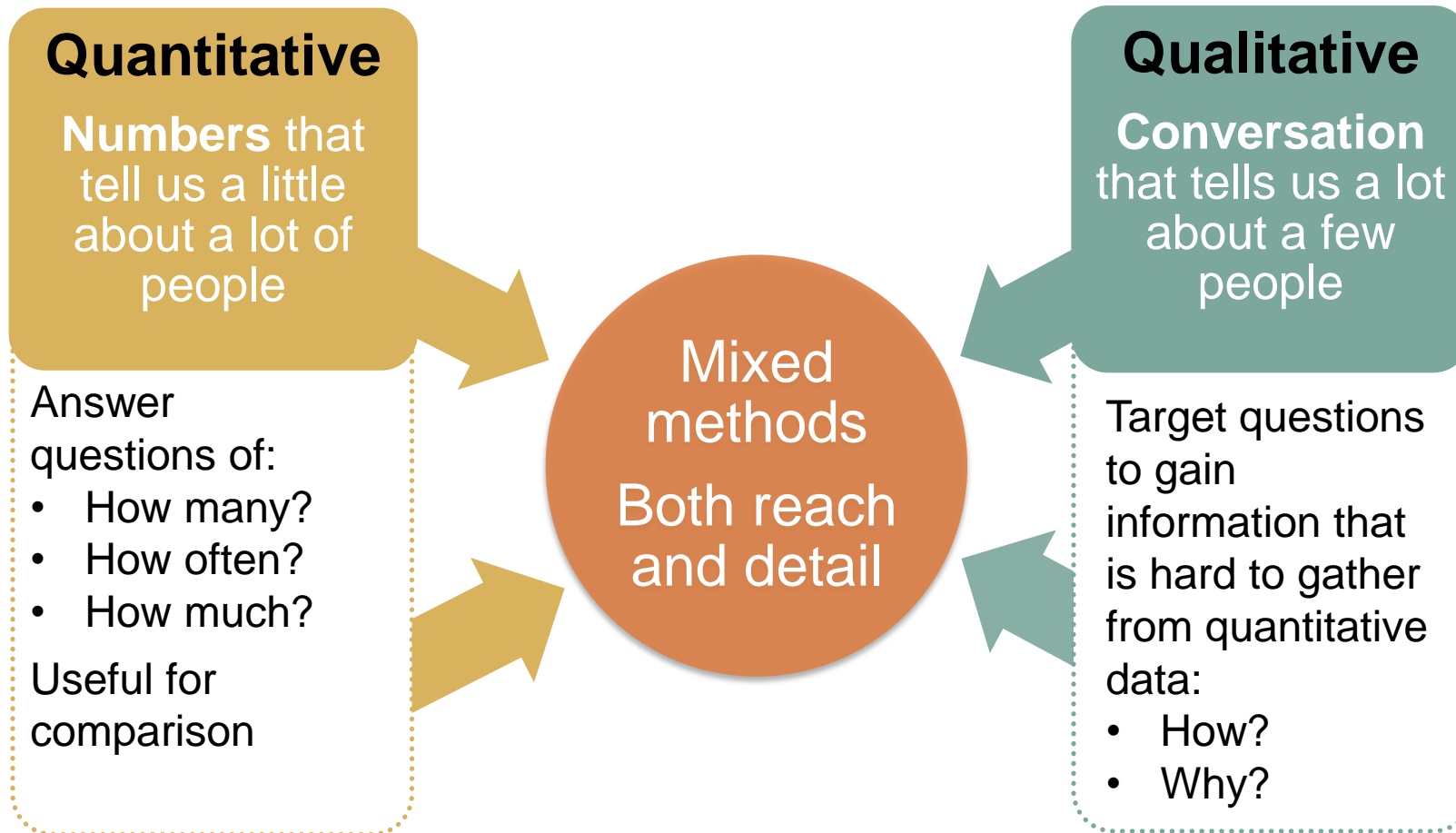
# Levels of measuring change in TIS



# Steps for measuring change



# Developing research questions



# Choosing reasonable measures

You are not expected to measure all possible outcomes. When choosing what to measure, it is important to be reasonable in terms of:

## Number

- How many measures
- What is a reasonable set of measures to include? How can we best decide that?

## Reach

- What is being measured
- Example – You may not be able to measure whether a school program prevents smoking, but you may be able to observe quality of engagement (KPI1)

# Effective local measures for TIS



Measure outcomes, not just outputs

Use mixed methods

Represent local TIS strategies

Align with national indicators (KPIs)

Cost effective

# Data analysis in practice



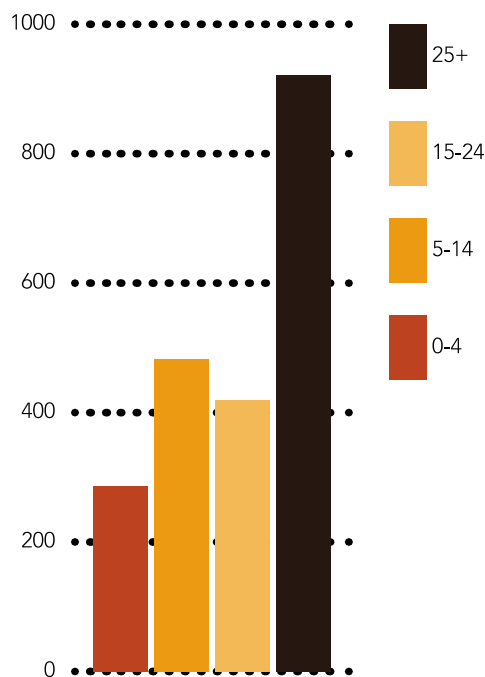
Method	Analysis
Using <b>existing data</b> (eg. referrals, sales of cigarettes)	Descriptive, pre-/post-activity
<b>Surveys</b> , including online and social media	Descriptive, pre-/post-activity
<b>Case studies</b> (eg. Janine's story of reducing and quitting)	Content analysis, observation (e.g. visits to quit-support groups)
<b>Focus groups</b> (eg. school students or mums and bubs)	Content analysis, observation (e.g. body language), pre-/post-activity
<b>Interviews</b> (eg. council workers, AHWs, school principals)	Content analysis, pre-/post-activity

# Approaches to analysing and presenting evidence...

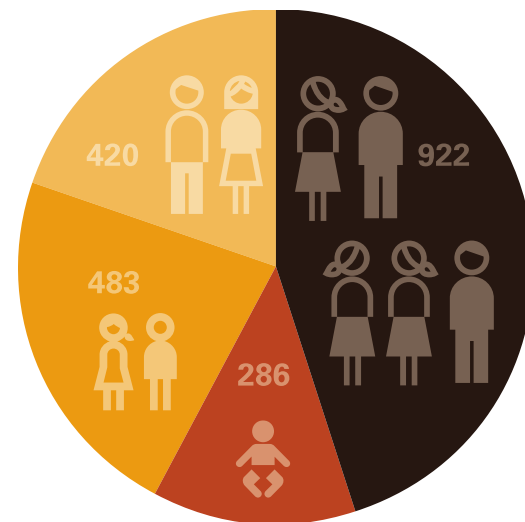
Once information is collected, it can be presented in different ways according to local preferences.

Age	Population
Children 0 – 4	286
Children 5 – 14	483
Young adults 15 – 24	420
Adults 25+	922
Total Population	2,111

Simple numbers



Bar chart



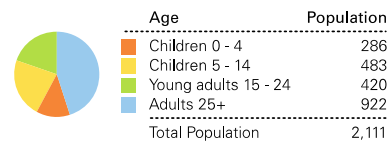
Pie chart



# Example of a Dashboard

## WADEYE

### Stronger Communities for Children Community Dashboard



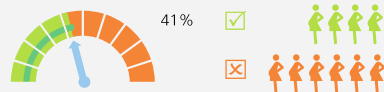
#### Colour Key

- Wadeye percentage result achieved
- Wadeye percentage result not achieved
- Northern Territory remote average
- National average

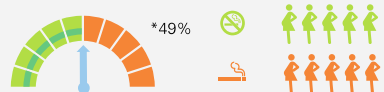
### 1. Good Start

#### Children have a good start in life and grow up healthy.

1.1 Pregnant mums going to clinic for check ups.

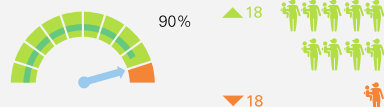


1.2 Pregnant mums who don't smoke.

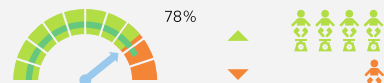


\*This is the NT remote average as data for Wadeye is not yet available.

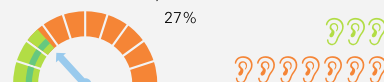
1.3 Mums aged 18 years and older.



1.4 Healthy birth weight babies (2,500g or more).



1.5 Children with healthy ears.

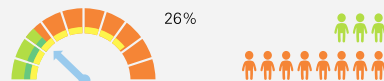


### 2. School

#### Children engage with school and have success in their learning.

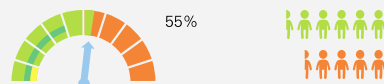
2.1 Children ready for school learning.

Australian Early Developmental Index (AEDI) (2012) children aged 5 years.

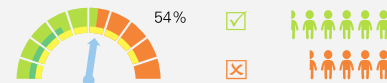


2.2 Children needing special learning support.

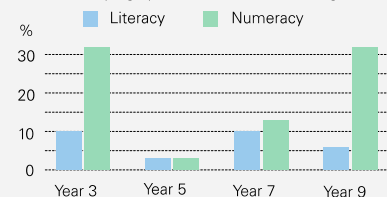
AEDI (2012) children aged 5 years.



2.3 Children attending school regularly.



2.4 Children keeping up with their school learning.



Percentage of Wadeye students with 2014 NAPLAN scores at or above the National Minimum Standard.

2.5 Vocational Education and Training (VET) in school enrolments.

There were 23 VET in school enrolments in 2012.

### 3. Safety

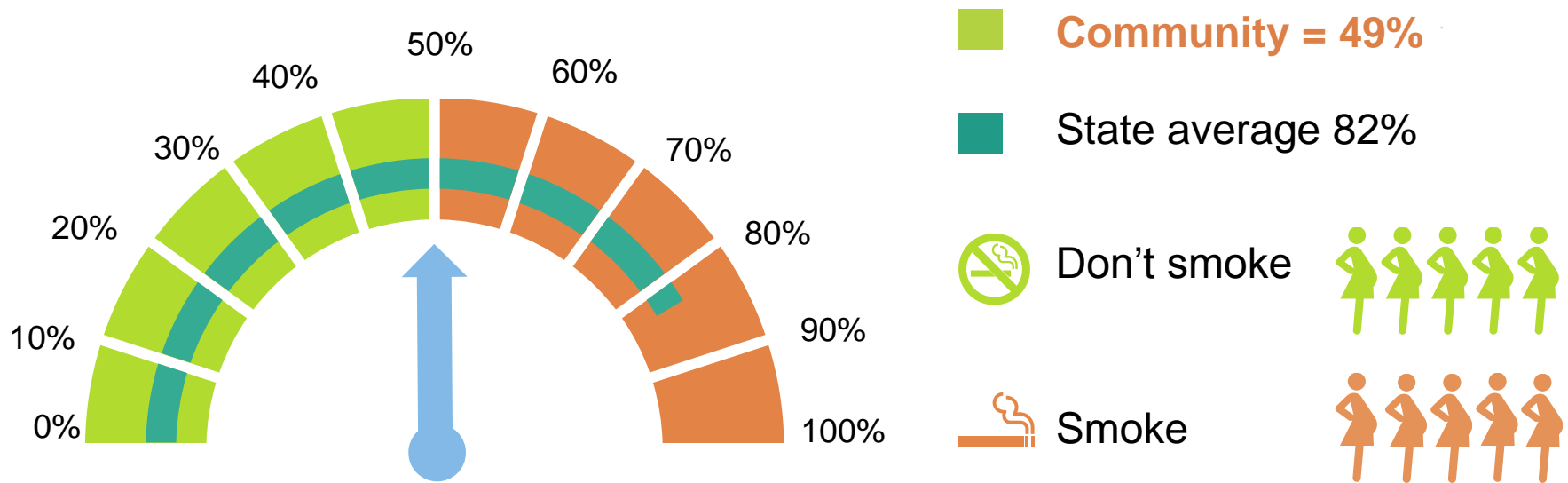
#### Children and young people are loved and safe.

- Percentage of kids 10-18 in trouble with the law
- Annual rate of repeat youth offending
- Annual rate of substantiated child protection reports
- Percentage of children in families where family violence is reported

#### What's the local story?

# Example of a dashboard adapted from Stronger Communities for Children

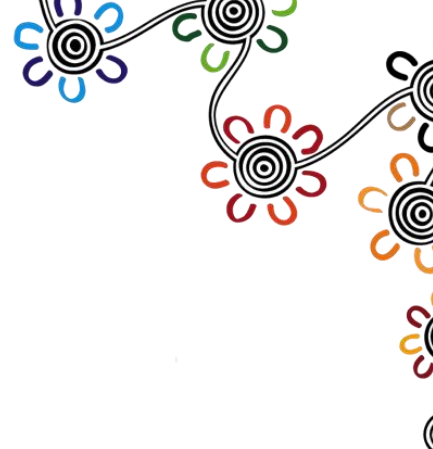
## Pregnant mums who don't smoke



Dashboards are a good way of showing progress over time

# Next Steps

- **Schedule for local measurement**
- **Dates for delivering local data**  
Next national reporting date
- **Further support needs?**
- **NBPU can provide support for planning your monitoring and evaluation**





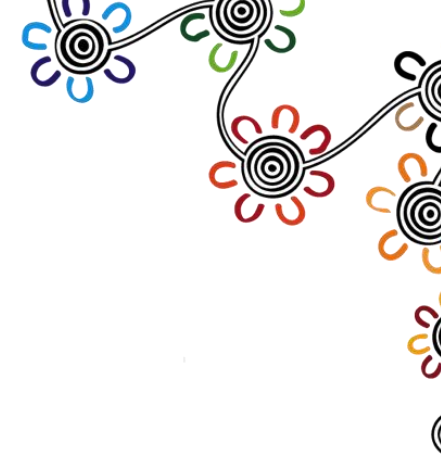
# Concurrent session



# Exercise

Please use the cards to write down:

1. Where you have confidence and clarity – purple
2. Areas of support and assistance needed – yellow
3. Anything you find puzzling or unclear - green



# AFTERNOON TEA

NATIONAL BEST  
PRACTICE UNIT  
**TACKLING  
INDIGENOUS  
SMOKING**



## Sharing our Stories – Group 2

- ❖ Aboriginal Health Council of SA
- ❖ Griffith Aboriginal Medical Service



# Wrap-up

**Desley Thompson**



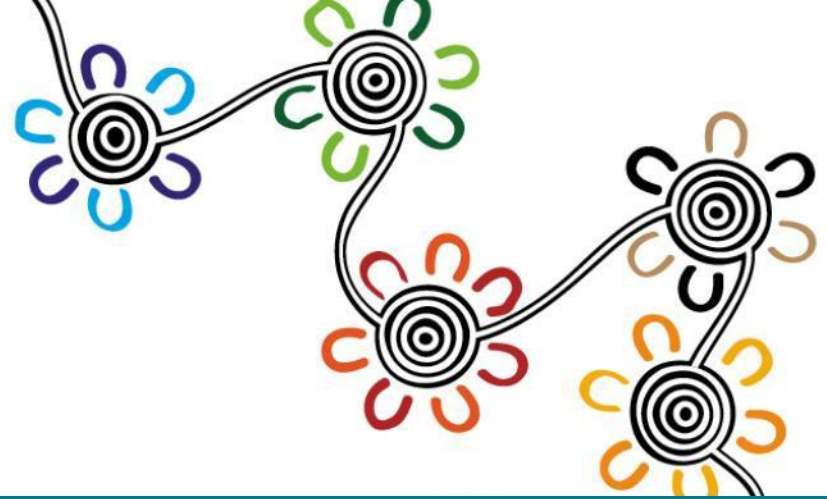


# Closing remarks

**Professor Tom Calma AO**

NATIONAL BEST  
PRACTICE UNIT

**TACKLING  
INDIGENOUS  
SMOKING**



***Thank you for your attendance***

**South Australia TIS Jurisdictional Workshop  
Wednesday 19<sup>th</sup> October 2016**