# Evaluating the impacts of TIS regional grants on smoking outcomes

**Ray Lovett & Katie Thurber** 

Aboriginal and Torres Strait Islander Health Program Research School of Population Health, Australian National University

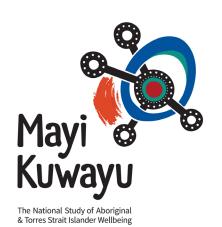
## **WHO WE ARE**





#### **Evaluation Team**

- Led by researchers from:
  - Aboriginal and Torres Strait Islander Health Program (Australian National University)
  - Tobacco Control Research Program (Menzies School of Health Research)
- Working together with:
  - You (organisations with regional grants)
  - Other Aboriginal Community Controlled Health Services
  - NBPU
  - © CIRCA (other part of Evaluation)
  - QuitVictoria



## **Aboriginal and Torres Strait Islander Health Program**

We want to answer: what works to improve health and wellbeing?

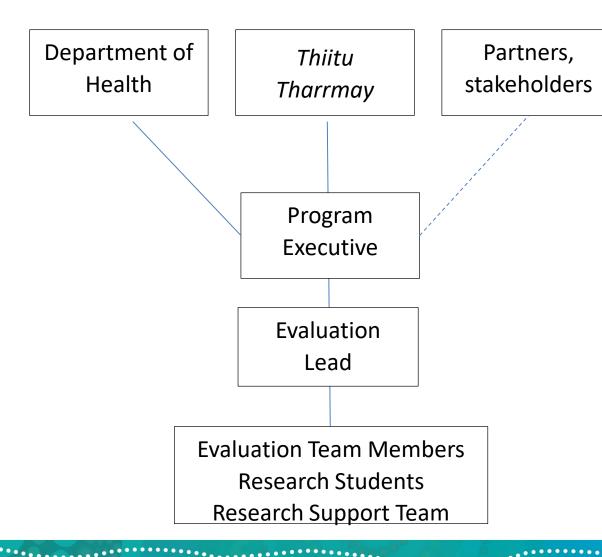
#### Ways of working:

- Aboriginal leadership, governance
- Indigenous data sovereignty
- © Community-driven research
- Partnership approaches
- Strengths-based
- Mixed methods



## THE EVALUATION

#### Governance



#### **Program Executive:**

- Ray Lovett (Wongaibon) Director
- David Thomas
- Katie Thurber
- Jill Guthrie (Wiradjuri)

#### Reference group, Thiitu Tharrmay:

- "to share knowledge" (Ngiyampaa)
- Aboriginal and Torres Strait Islander only
- Representation from Department
- Representatives from TIS services?
  - If you want to join, please nominate yourself or any staff members

# What are we trying to answer?

Have smoking related-outcomes *improved faster* in areas with TIS funding compared to areas without TIS funding?

#### This includes changes in:

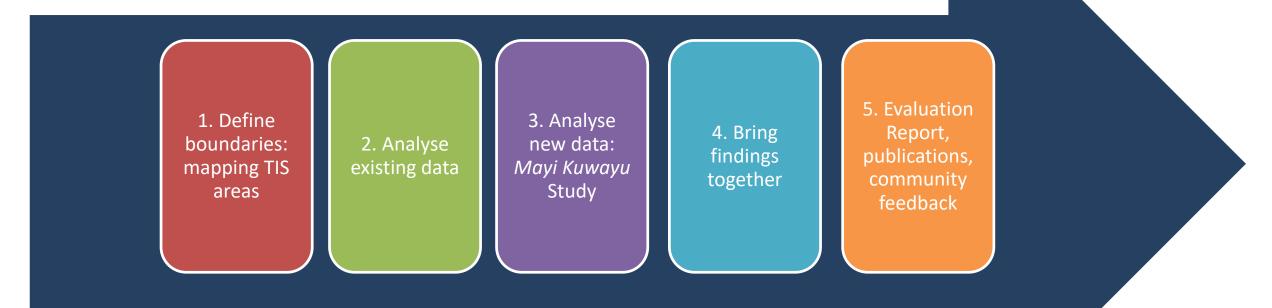
- % of people who smoke
- % of people who quit and stay quit
- Behaviours related to quitting (e.g. calls to Quitline; stop smoking medications)
- Smoking initiation
- Second-hand smoke exposure, including such as smoke-free homes
- % of women who smoke during pregnancy
- Attitudes about smoking and quitting
- Recording smoking status in health services

# Why do we need to do this?

If we have evidence that TIS RTCGs are helping improve smoking-related outcomes, this can be used to support TIS expansion.

If we have evidence that TIS RTCGs are *not* contributing to improvements, we can try to understand what is not working, why, and how it can improve.

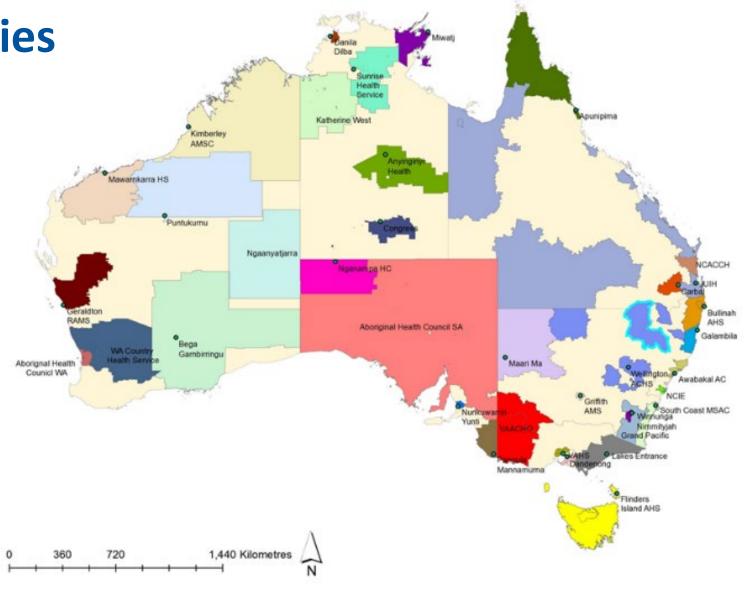
## What are we going to do?



At each stage: discussions with and feedback from stakeholders

1. Defining boundaries

Draft map – to be updated



### 2. Analyse existing data

- No single data source can tell us everything -- look at multiple data sources
- No new data collection -- analyse data that already exist

ABS nationally representative surveys

The National Perinatal
Data Collection
(smoking during
pregnancy)

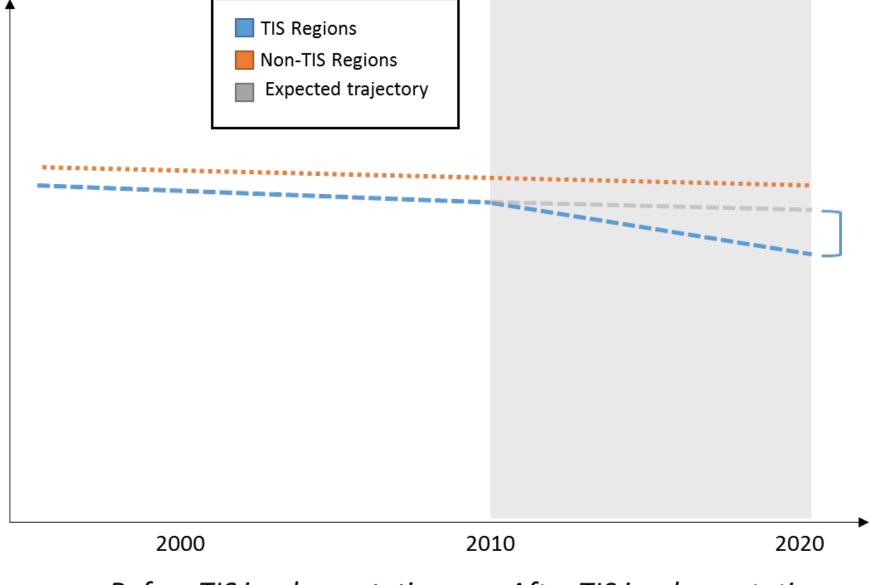
**Health services data** 

Pharmaceutical
Benefits Scheme (stop smoking medications)

**Quitline** (quit attempts)

#### **Example**

% Aboriginal and Torres Strait Islander mothers smoking during pregnancy



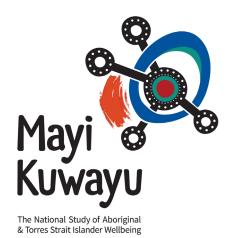
Before TIS implementation

After TIS implementation

#### https://mkstudy.com.au/

### 3. Analyse new data

- Mayi Kuwayu: the National Study of Aboriginal and Torres Strait Islander Wellbeing
  - Study about culture and wellbeing
  - Aboriginal led, governed
  - © Conducted in partnership
- Data collection underway (~8,000 so far)
- Measure change 2019 to 2021 in:
  - Smoking behaviours
  - Participation in tobacco control programs
  - Smoking attitudes and beliefs
  - ©Can look at relationship with culture, trauma, racism, other









SMOKING	Answer Questions 70 to 78 if you currently smoke	Answer Questions 79 to 87 if you used to smoke
69. Do you smoke?  O Yes, I currently smoke - Answer Questions 70 to 78	70. How often do you smoke?  Capable Less than weekly  Weekly (not every day)  Every day	79. When you used to smoke, how often did you smoke?  O Less than weekly O Weekly (not every day) Every day
I smoked in the past, but don't smoke now     Answer Questions 79 to 87	71. How many cigarettes do you usually smoke in one <u>day</u> ?	80. When you used to smoke, how many cigarettes did you usually smoke in one <u>day</u> ?
<ul> <li>○ I have never been a smoker</li> <li>- Go to Question 88</li> </ul>	72. How soon after waking do you usually have your first smoke?  ○ 5 minutes or less ○ 6-30 minutes ○ 31-60 minutes	81. How soon after waking did you usually have your first smoke?  ○ 5 minutes or less  ○ 6-30 minutes
88. Does anyone smoke in your home or in your car?  ○ No □ Yes, inside the home	61 or more minutes	O 31-60 minutes O 61 or more minutes O Don't smoke every day  82. How old were you when you started smoking?
Yes, outside the home Yes, in the car	74. Do you want to quit smoking?  ○ Not at all - Go to Question 76	83. How long ago did you quit?  O 1 to 5 months O 6 months to a year
89. How much do you agree? Not A little A fair A at all bit bit lot	<ul><li>○ A little bit</li><li>○ A fair bit</li><li>○ A lot</li><li>○ Unsure</li></ul>	O 1 to 2 years O 2 to 5 years O More than 5 years
Non-smokers miss out on gossip or yarning.	75. Why do you want to quit? Select all that apply.  ☐ Advertising against smoking ☐ Medical advice ☐ My health	84. What led you to quit? Select all that apply.  Advertising against smoking  Medical advice My health
My community disapproves OOOO	☐ Health of my family ☐ Cost ☐ Pregnancy	☐ Health of my family ☐ Cost ☐ Pregnancy ☐ Too many non-smoking areas ☐ Pressure from family or friends
Smoking is not that risky.	☐ Too many non-smoking areas ☐ Pressure from family or friends	Other:
92. Have you ever participated in: Select all that apply.  Deadly Runners or Indigenous Marathon Project  Koori or Murri Knockout Traditional Owner Group Ranger program Indigenous Protected Areas Native Title group Family Wellbeing Program Deadly Choices Language program NDIS Any Quit Smoking Program, Service or Activity ANFPP	Other:  76. In the last year, have you tried to quit or reduce the amount you smoke? Select all that apply.  ☐ Tried to quit smoking ☐ Tried to reduce smoking ☐ Have not tried to quit or reduce smoking  77. Do you think your smoking has made you sick? ☐ No ☐ Yes ☐ Unsure	85. What helped you quit? Select all that apply.  Smoking program Quitline Online support Health professional Family or friends Patches, gum, inhaler (NRT) Stop smoking medication Quit on my own Other:  86. Do you think your smoking has made you sick? No Yes Unsure
O None of these	78. Do you think your smoking will make you sick in the future? ○ Not at all ○ A little bit ○ A fair bit ○ A lot ○ Unsure	87. Do you think your past smoking will make you sick in the future?
	Now go to Question 88	O Not at all O A little bit O A fair bit O A lot O Unsure

# Mutual capacity building

- Learning from service providers and partners
- Increased investment in Aboriginal tobacco control research
- Dissemination of research findings and materials
  - Research, policy, and community formats
  - Mayi Kuwayu Study data back to services, communities at the regional level
- Recruitment, training, support of Aboriginal and Torres Strait Islander staff, students