



TIS EVALUATION (PART A) MID-TERM EVALUATION FINDINGS

Presentation to SA TIS Teams at Jurisdictional Workshops

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National evaluation - Part A

From 2018-2022 the national evaluation of TIS program will assess:

Implementation



Use of evidence based and best practice population health promotion approaches

Appropriateness



Fit between the TIS program & the needs of Aboriginal & Torres Strait Islander communities

Outcomes



How well the TIS program is achieving the short-term and medium-term outcomes

Qualitative and quantitative data collection





FINDINGS

IS TIS EVIDENCE BASED, APPROPRIATE, AND SUPPORTED?

Goals	Evidence of achievement?	Goals	Evidence of achievement?
Increased understanding among TIS teams about evidence	Somewhat	Evidence-based pop health approach supported by NBPU and National Coordinator	Yes
TIS teams are monitoring performance	Yes	RTCG recipients mentored by National Coordinator	Somewhat
It's clear to teams what works and what doesn't	Yes	Increased leadership and advocacy by ACCHS management	Not at this point
Cultural appropriateness	Yes	TIS teams improve their monitoring and reporting via support from NBPU	Somewhat
Evidence-based	Yes, but room for improvement	Improvement of monitoring by teams	Yes, but room for improvement
Reached populations beyond ACCHS clientele	Yes, but unclear of the impact		
NBPU identifies and promotes evidence-based approaches	Yes		

IS TIS ACHIEVING SHORT-TERM OUTCOMES?

Short-term outcome goals	Evidence of achievement?	Barriers:
Community members reached	Yes	<ul style="list-style-type: none"> - limited capabilities to capture data - logistical challenges of reaching a large number of people with messages - limited staff capacities - limited literacy and numeracy in communities - tensions between the population-level and one-on-one personal approaches - limited community interest in TIS work
Activities are locally relevant and have community support	Yes, but room for improvement	
Activities aimed at minimising exposure to second-hand smoke	Yes	
Increased focus on priority groups	Yes	
Strong collaborations and partnerships	Yes	

IS TIS ACHIEVING MEDIUM-TERM OUTCOMES?

Medium-term outcome goals	Evidence of achievement?
Evidence that priority groups are being reached	Yes, but there are some data limitations
Increase in smoke free homes, workplaces, and public spaces	Yes
Increase in the leadership and advocacy roles of community leaders	Yes

IS TIS ACHIEVING MEDIUM-TERM OUTCOMES?

Medium-term outcome goals

Increased geographical reach and reach to community members who do not attend ACCHSs

Increase in community involvement in and support for tobacco control

Increase in understanding by community of health impacts of smoking

Prevention of smoking uptake

Barriers/Challenges:

- Distance
- Bad weather conditions
- Competing commitments to DOH and to community
- Not having the right staff on board to reach priority groups
- Duplication in community
- Difficulties enforcing smoke-free policies

DISCUSSION: Have you encountered these enablers? Which of these could your team consider focusing more on to achieve medium-term outcomes? (2 mins as a table + report out)

Enablers:

- Collaborations and partnerships
- Staffing of TIS teams by Aboriginal and Torres Strait Islander individuals
- Taking an educational approach with community members
- Funding smoke-free events
- Legislation that outlaws smoking in certain circumstances
- Creating opportunities for local leaders to step-up into leadership and advocacy roles for tobacco control
- Creating space for community involvement in TIS program design
- Focusing on young people for prevention

DISCUSSION: Have you encountered these barriers? What can/does your team do to navigate them? (2 mins as a table + report out)

IS TIS IMPROVING ACCESS TO QUIT SUPPORT?

The TIS program is expected to improve Aboriginal and Torres Strait Islander peoples' access to and uptake of services that can help them quit smoking.

Goals	Evidence of achievement?
Collaborations to improve access to culturally appropriate quit support	Somewhat
Promotion of Quitline	Mostly
Referrals to quit support services	Yes
Improved access to culturally appropriate Quit support	Yes, but room for improvement
Increasing tobacco control skills among health professionals who engage with Aboriginal and Torres Strait Islander peoples	Somewhat

IS THE PROGRAM WORTH MAINTAINING?

Is the TIS program as implemented worth maintaining?

Goals	Evidence of achievement?
Supporting smoking cessation	Yes
Preventing uptake of smoking	A bit, but not entirely clear



Our mid-term evaluation has revealed that in many ways the TIS program is operating as intended and is having the desired initial outcomes. Our recommendation overall is for the program to continue as it is currently being implemented. But there are some opportunities for improvements...

RECOMMENDATIONS

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- Improve the planning and reporting processes for TIS teams
 - Update AWP's more regularly
- Increase TIS teams' capacity to gather evidence
 - Continue improving data collection, management, and analysis systems
- Improve access to and create pathways to culturally appropriate quit support
 - Collaborative planning of TIS teams and Quitline
 - Encourage TIS teams to make referrals to a variety of quit support providers
 - Explore ways that Quitline services can become closer connected to communities

HELP TEAMS REFLECT AND TAKE TIME TO CONSIDER IMPLICATIONS

● Reflect on approaches that seem to be working:

- making messaging clearly visible,
- active enforcement of no-smoking areas at events,
- educating youth about harms of smoking,
- utilising hands-on tools to convey messages,
- using social and traditional media, distributing incentives, and
- working through Ambassadors.

● Reflect on ways to mitigate and navigate challenges:

- limited coordination and connections between TIS teams and Quitline,
- limited monitoring by TIS teams to identify longer-term impacts on people they interact with,
- difficulties addressing smoking among young women and pregnant women in remote areas, and
- challenges influencing the wider community to understand and adopt a population health promotion approach.

Would any of these approaches be new in your team? If so, which might be useful to consider taking on?

DISCUSSION: How could your team better address these challenges so that outcomes could be more visible?
(2 mins as a table + report out)

IMPROVE PROCESSES AND APPROACHES TO ACHIEVING TIS PROGRAM OUTCOMES

- **Continue educating ACCHS management** about population-health promotion
- **Include community members more** in design
- Continue partnership efforts and **identify ways to navigate the challenges associated with staff turnover** and its effects
- Improve methods of garnering **community involvement and support or gauging extent of it**
- **Create opportunity for young people and Elders** to share messages about smoking cessation, as well as other leaders from a variety of backgrounds
- **Normalise leadership in tobacco control** and **fight stereotypes** that ex-smokers do not have the right to be role models

What is your TIS team doing in any of these areas? Which of these could your team consider doing more effectively or more of?



Any questions?

• Any points you'd like to discuss later? Contact me:

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