

NATIONAL BEST
PRACTICE UNIT

**TACKLING
INDIGENOUS
SMOKING**



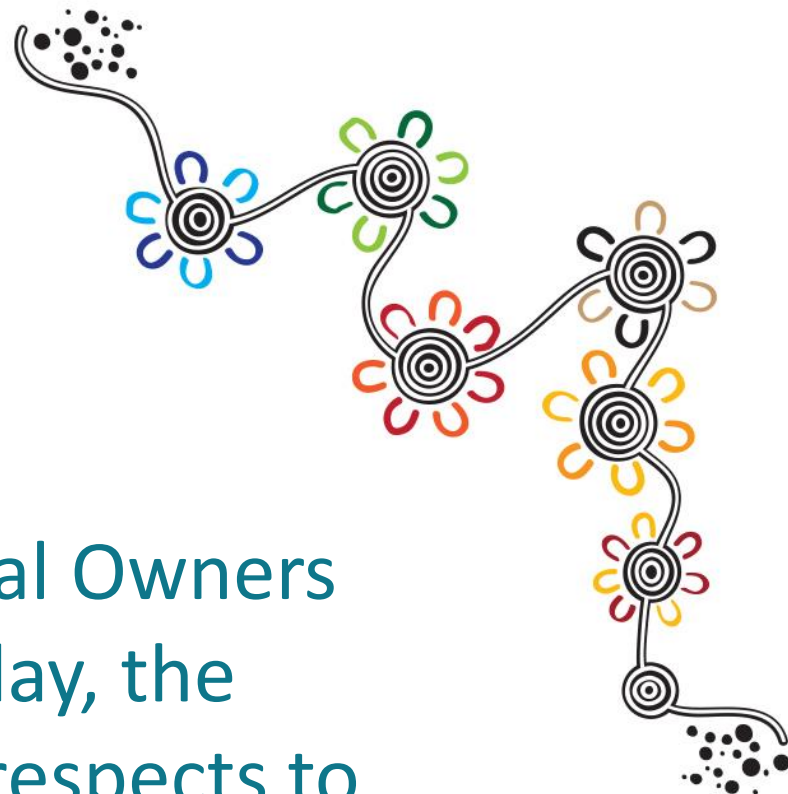
Navigating the TISRIC

WA/Vic/Tas Jurisdictional Workshop

18 May 2022

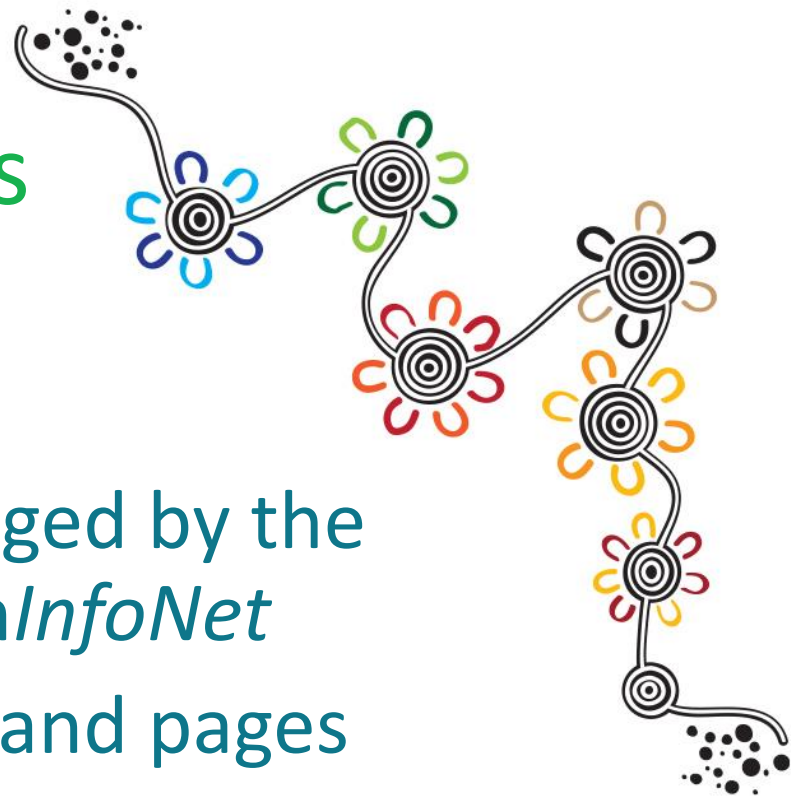
Ashleigh Parnell
Senior Research Officer

Acknowledgment of Country



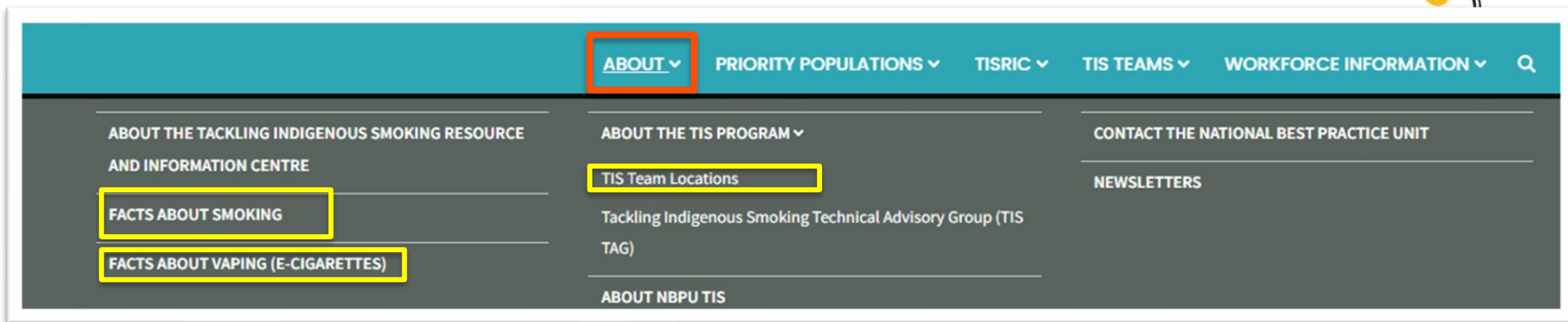
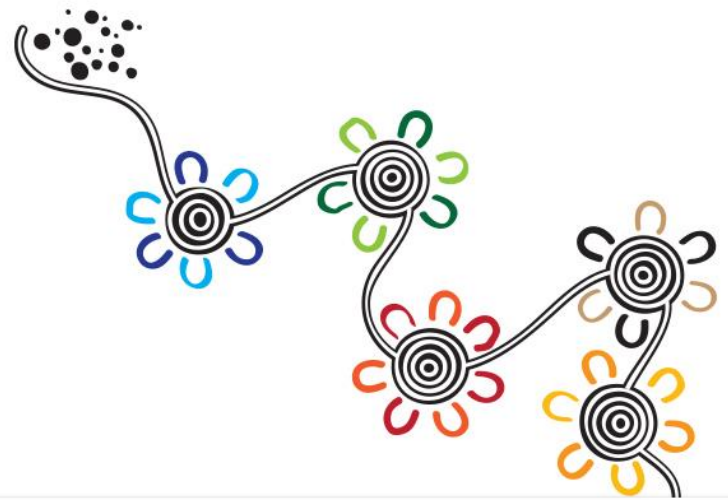
I acknowledge the Traditional Owners
of the land we are on today, the
Kurna people. And pay my respects to
Elders past, present and emerging.

The Tackling Indigenous Smoking website



- Designed, created and managed by the Australian Indigenous Health *InfoNet*
- Has custom-built navigation and pages
- TISRIC
- Sections for Grant Recipients to showcase their work

About



About – Facts About Smoking

Extent of tobacco use among Aboriginal and Torres Strait Islander people

The latest data about smoking prevalence among Aboriginal and Torres Strait Islander people comes from the 2018-19 National Aboriginal and Torres Strait Islander Health Survey. The picture is a positive one, with the strong downward trend in smoking prevalence over the last 15 years leading to fewer tobacco related illnesses and many lives saved. There are now more Aboriginal and Torres Strait Islander people who do not smoke, than do smoke.



37%

37% of people aged 15 years+ reported that they currently smoked daily



47%

The age-group with the highest proportion of people who smoked daily was 35-44 years



39%

Men



36%

Women



49%

Remote areas



35%

Non-remote areas

People living in remote areas reported a higher proportion of people who currently smoked daily than those living in non-remote areas

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About – Facts About Vaping

Facts about vaping (e-cigarettes)

Vaping (e-cigarettes) in Australia

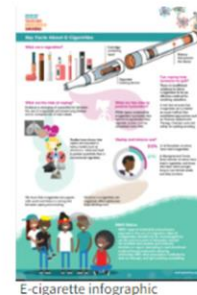
The use of vapes (e-cigarettes) to quit tobacco smoking is a controversial topic which continues to be debated internationally. In Australia the sale and use of non-nicotine vapes by adults is controlled by state and territory laws. This means restrictions vary across the country. For example, vapes may be sold by retailers in all states and territories except Western Australia, but may not be sold to minors. In some states and territories, they can only be sold by licensed retailers. Nicotine vapes are covered by federal law, because nicotine is regulated as a poison by the Therapeutic Goods Administration (TGA). The sale and use of nicotine vapes is illegal without a valid prescription as described below. Despite this, around 30% of all Australian people who smoke have tried vaping. According to the Talking About the Smokes survey 21% of Aboriginal and Torres Strait Islander people who smoke have tried vapes. Aboriginal and Torres Strait Islander people who had tried vaping were:

- younger
- living in non-remote areas or more advantaged areas
- people who smoke daily
- wanting to quit, having made a quit attempt/used NRT in the past year.

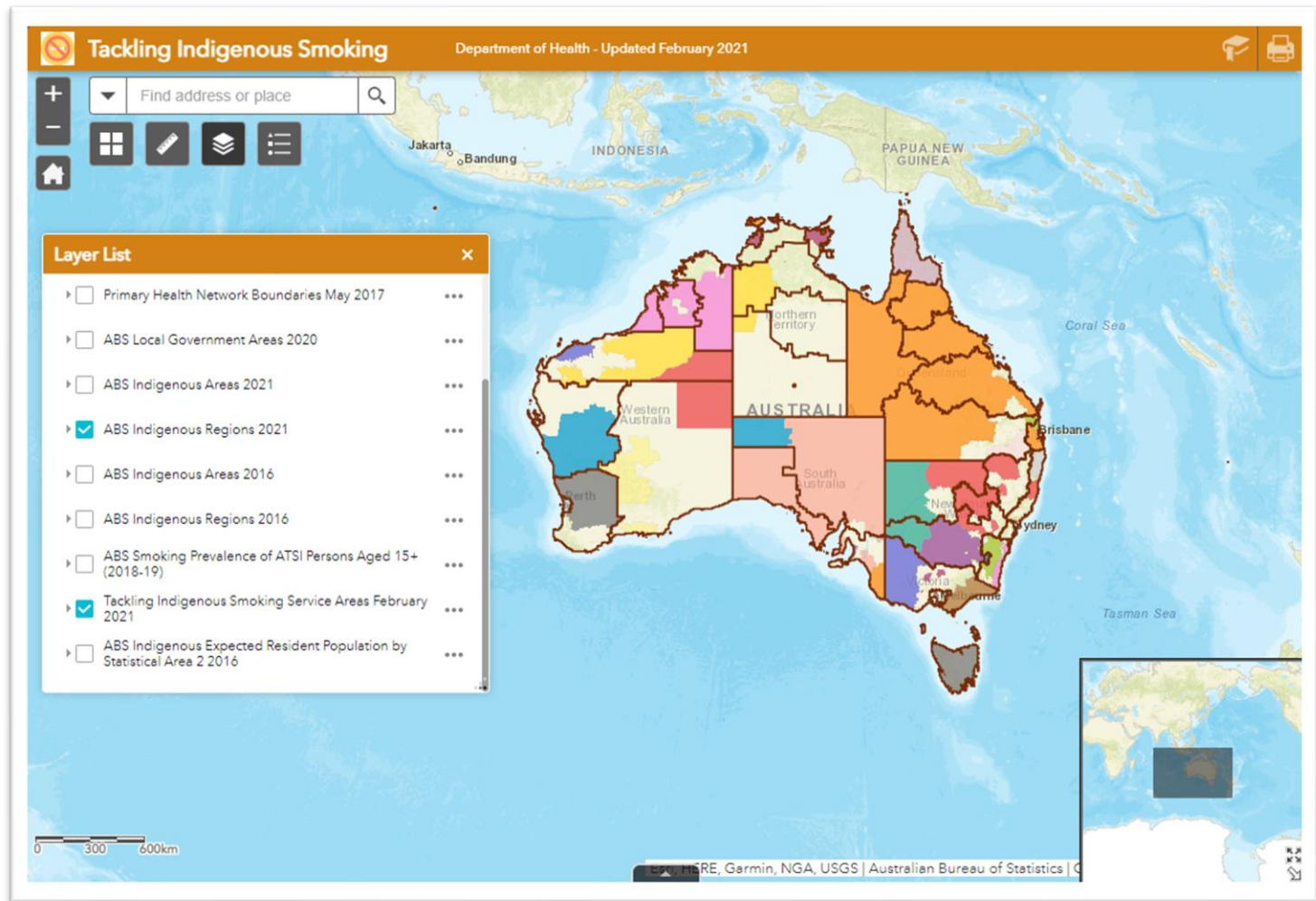


We also know from a recent survey that vaping is increasingly popular in Australia, with vapes containing nicotine and flavourings preferred by young people, many of whom have never smoked conventional cigarettes. This suggests that many people in Australia who vape are not using vapes to help them quit. It is therefore important to stay up-to-date with the evidence in the area. Much of this evidence comes from studies and surveys carried out in the USA and UK, where vapes are more readily available.

The NBPUI has created a factsheet and an infographic. Click on the images below to access them.



About – TIS Team Locations



Priority populations



Priority populations – Remote communities

Remote communities

The 2018-19 National Aboriginal and Torres Strait Islander Health Survey shows a strong downward trend in smoking prevalence, with many lives saved. There are now more Aboriginal and Torres Strait Islander people who do not smoke, than do smoke. However, the reduction in smoking prevalence is very evident in urban areas, there has been little change in rates of daily smoking in remote areas. Reducing the prevalence of tobacco use in remote areas is therefore a priority focus for the TIS Program.



There is some evidence from the ABS data and the Talking About the Smokes Study (TATS), that smoking behaviours in remote regional areas:

- fewer young people are taking up smoking in remote as well as non-remote areas.
- there has been an increase in cessation attempts in remote areas.
- motivation to quit or making a quit attempt is the same in remote and non-remote areas – it is just that people in remote areas take longer.

Smoking rates among 15-17 year olds living in remote areas have decreased from 30% in 2012 to 23.5% in 2014-15



Priority populations – Pregnant women and families

Pregnant women and families

According to data from the Australian Institute of Health and Welfare (AIHW), less than half of all pregnant Aboriginal and Torres Strait Islander women smoke (43%). This has reduced from 50% in 2009.



In 2018, AIHW found that the proportion of Aboriginal and Torres Strait Islander women who quit smoking after 20 weeks of pregnancy was 10%. We know that Aboriginal and Torres Strait Islander women have strong protective feelings for their unborn babies and a desire to quit in pregnancy and data from AIHW shows a high rate of quit attempts by pregnant Aboriginal and Torres Strait Islander women. However these quit attempts are often not sustained. Some evidence suggests that continued smoking is sometimes seen as a necessary response to stressful situations in life. Educating mums-to-be about how smoking increases stress rather than reduces it, and providing alternative strategies to manage stress is important. To find out more about strategies for people who are quitting smoking to manage stress read the *Key facts about smoking and stress factsheet*.

Emerging evidence also suggests that Aboriginal and Torres Strait Islander women are unable to sustain their quit attempts because of a lack of culturally appropriate support. They may also be encouraged to cut down rather than quit by health professionals. There is evidence that women's interest in quitting is hindered by:

- the attitudes of maternity care professionals
- poorly communicated information about quitting in pregnancy
- a lack of culturally sensitive support.

Evidence that is emerging from the community-led *Which Way? Smoking Cessation Study* shows that:

- Only 36% of women had ever tried medications to quit smoking
- 64% of women who want to quit smoking want the support of an Aboriginal Health Worker
- 66% of Aboriginal and Torres Strait Islander women reported trying to cut down smoking in the past month
- Smoke-free pregnancies were 4.54 times higher among women who used Aboriginal Health Services.

This study is a response to Aboriginal and Torres Strait Islander women's stated need for non-pharmaceutical quit support when pregnant. *Which Way?* is co-developing an Indigenous-led evidence base for a smoking cessation intervention to support Aboriginal and Torres Strait Islander mothers to be smoke-free during pregnancy and beyond by exploring:

- Aboriginal and Torres Strait Islander women's preferences for cessation support
- what non-pharmacological approaches are already being used in communities
- healthcare provider attitudes and beliefs about non-pharmaceutical approaches to quit support.



Which way?

Priority populations – Young people

School-based education and awareness activities

It is important to provide health promotion for primary and secondary school age people. There is evidence that school-based activities have an increased chance of working if they:

- are interactive
- include social influences and peer leadership
- use culturally appropriate activities
- are tailored for the age of the children.



Graduates of the Deadly Choices Tobacco Education Program

Linking school-based interventions into wider community activities as part of a multi-component program also seems to boost impact. This is thought to be because the effects of school-based smoking prevention programs are sustained when changes in the larger community are also present and when there is reinforcement of the program over time. A review of the evidence also recommended that 15 or more sessions are delivered to young people at school, at least up until the ages of 14 or 15 years.

Evaluated school-based health education activities for Aboriginal and Torres Strait Islander young people, include the Deadly Choices program, an interactive education program of eight weeks which encourages young people to be positive lifestyle role models. Since 2010 this program has been delivered to more than 250 Aboriginal and Torres Strait Islander students across 20 schools and training centres throughout South East Queensland and has been found to have a positive impact in the urban setting on students' knowledge, attitudes and self-efficacy regarding leadership, chronic disease and the impact of risk factors including smoking. These are recognised as important steps towards reducing the number of young people taking up smoking and increasing the number of young people who quit smoking.

For more information on strategies for engaging children and young people to promote anti-smoking messages, view the NBPUI's *Child youth and engagement resource package*.

Vaping: an emerging priority for action

Around 14% of all Australian secondary school students aged 12-17 years have tried e-cigarettes. Almost half of youths who said they had ever tried vaping had not previously smoked a cigarette. We do not currently have Aboriginal and Torres Strait Islander specific data on vaping, but anecdotal evidence suggests vaping is an emerging issue in urban and regional communities. This is a concern because evidence suggests:

- vaping can be a gateway to smoking
- it is not harm free
- e-cigarettes can contain high levels of nicotine (even if labelled as nicotine free)
- nicotine is a toxin, especially for young people – it affects brain development.

Much of the e-cigarette market is owned by the tobacco industry and evidence suggests that the industry is targeting youth through marketing on social media, particularly Instagram. This marketing glamorises vaping and presents it as being 'cool'. Products are misrepresented as being harm free and even as healthy. Vaping flavours such as bubble-gum, banana milkshake and strawberry slushie appear to be designed to appeal to young people. Vaping also has its own etiquettes and social scene with its own jargon (e.g. cloud chasing). These social norms support the uptake and maintenance of vaping in the same way that social networks support and normalise tobacco use.

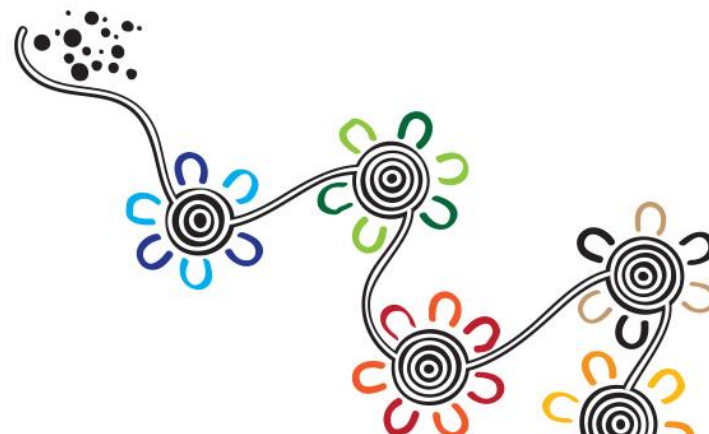
Addressing vaping

The published evidence around addressing vaping in youth comes mainly from mainstream work in the USA and Canada. That evidence shows that



Source: World Health Organization

TISRIC

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Planning

Community asset mapping

Working out your local system and identifying resources and possible partnerships to support your activities, is important for successful TIS activities. Asset mapping is a very flexible approach that can easily be adapted to local community needs. One advantage of asset mapping is that it is **strengths-based**. Asset mapping helps you to:

- identify community strengths and resources
- ensure your activities are relevant to community needs
- identify effective solutions for change
- increase community engagement.

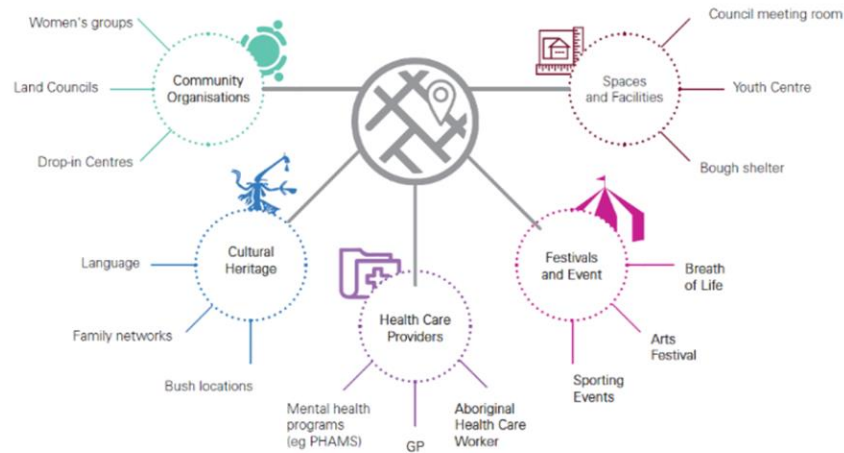
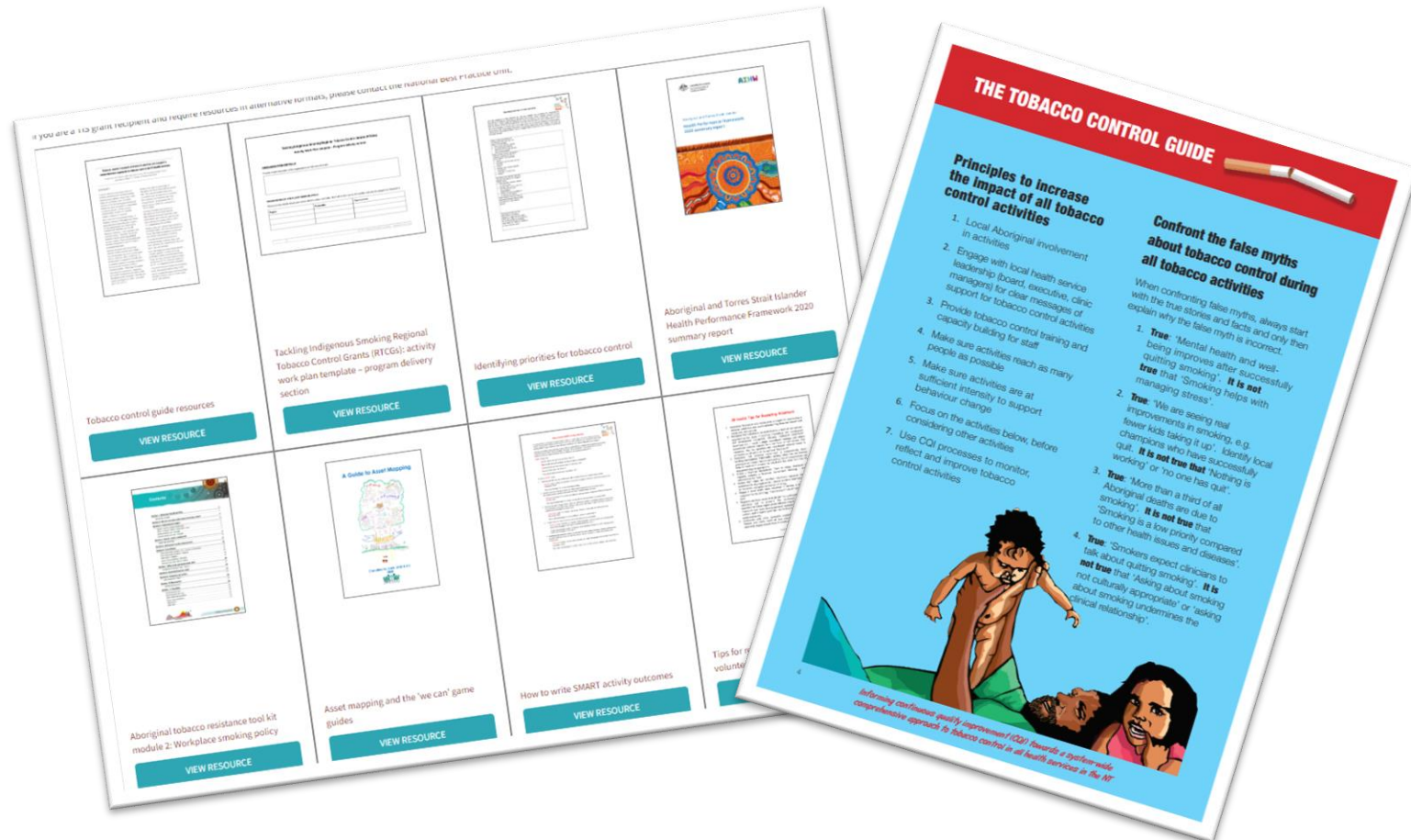


Figure 1. Asset mapping

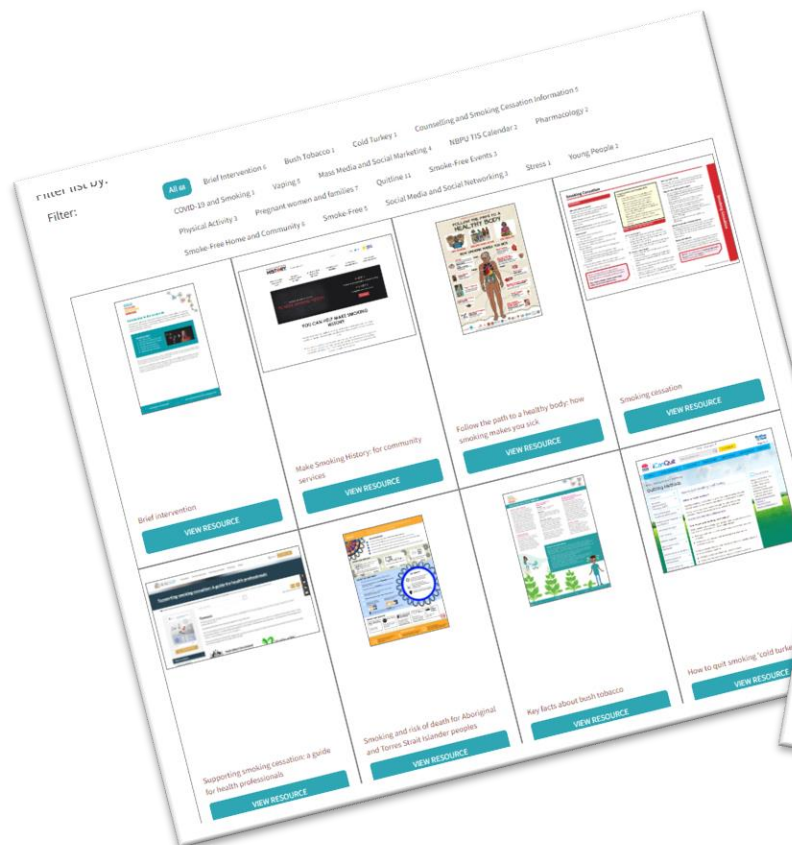
The three main stages of asset mapping are to:

1. identify the strengths (assets) of relevant individuals and groups
2. build the connections that will help these individuals and groups work together

Resources - Planning tools



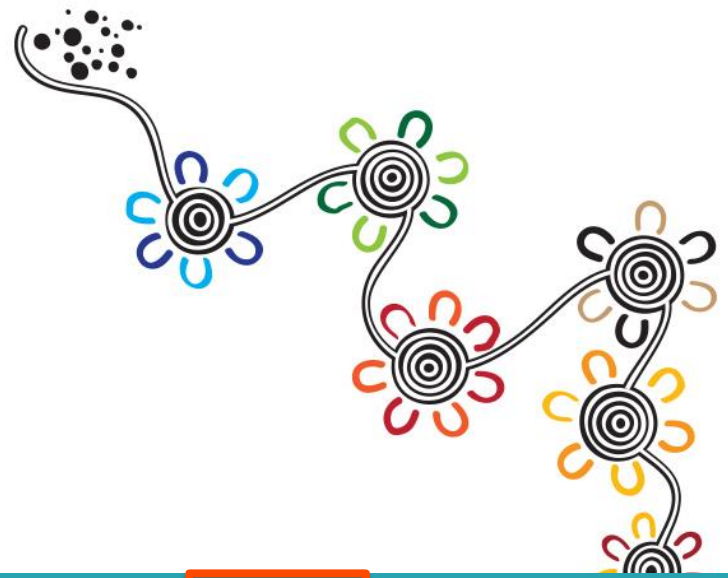
Resources to support activities



Resources to monitor and evaluate your program



TIS Teams

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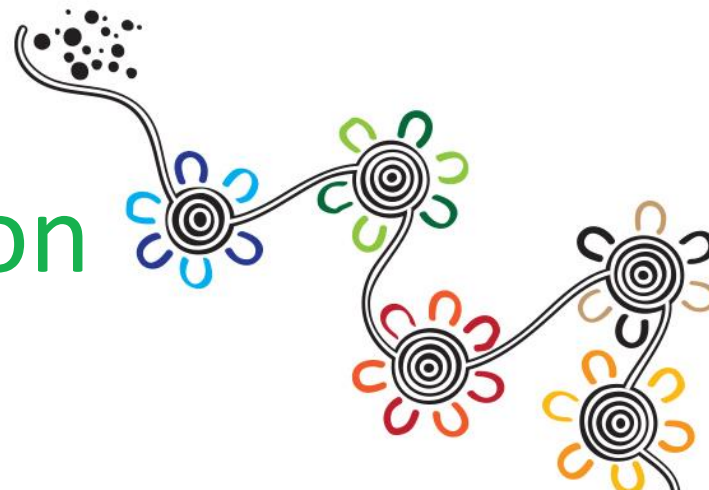
TIS Teams – TIS Team Activities

West Australian Country Health Service (Ngamari Free)	
Program status	
DATES NOT SPECIFIED	
Description	
<p>Western Australia's Wheatbelt Tackling Indigenous Smoking (TIS) program is a federally funded program that takes a culturally safe approach to reducing the impact of smoking on the health and wellbeing of all Aboriginal and Torres Strait Islander people in the Wheatbelt. This includes engaging with the community, collaborating with other organisations, empowering others to support clients to quit, providing referrals to quit supports, and supporting smoke-free environments. The priority populations that they work with include those with a chronic condition, young people, Boodjari Yorgas (pregnant women) and men.</p>  <p>The Wheatbelt is a highly complex geographical region that contains 43 local government areas, 27 hospitals, 73 towns and an Aboriginal and Torres Strait Islander population that is diverse and includes Noongar, Ballardong, Yuat, Willman and Nyaki Nyaki people (all spellings have been advised by local Elders but it is acknowledged that at times these may differ within groups). The Aboriginal and Torres Strait Islander population is also scattered throughout the Wheatbelt contributing to 6% of the total population of 77,780 (2016 Census). TIS operate from a base at Wheatbelt Aboriginal Health Service (WAHS) in Northam and have staff within the Primary Health Teams in Merredin, Moora and Narrogin.</p> <p>The team aims to promote and strengthen the TIS message in order to create a Ngamari Free (Smoke Free) future for all Aboriginal and Torres Strait Islander people living in the Wheatbelt.</p> 	

TIS Teams – Sharing Our Stories



Workforce information



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Training

Events

Funding

Job Opportunities

NBPU TIS WORKSHOP AND TRAINING MATERIALS ▾

TIS Workers Induction Pack

Jurisdictional Workshop Presentations

Remote Services Workshop Presentations 2022

National CEO's Workshop Presentations

Pregnancy Roundtable 2020

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Workforce information – Induction pack

Tackling Indigenous Smoking Workers Induction Pack

Induction pack

The NBPU has created this induction pack as a useful resource for new staff in the Tackling Indigenous Smoking program. The induction pack provides an overview of topics such as:

- The background of the TIS program and the National Best Practice Unit
- Planning
- Activities
- Reporting
- Monitoring and evaluation
- Development opportunities.

Please note: Download the PowerPoint and play as a slideshow so that you can click the links on the slides.



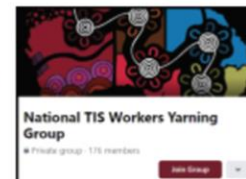
Tackling Indigenous Smoking Workers Induction Pack

▶ Play as slideshow to click links on slides

If you are a new TIS worker, please join the National TIS Workers Yarning Group on Facebook. The group is a culturally-safe online community where TIS workers from across Australia can connect with their colleagues to share ideas about what's working and what's not, and seek advice and feedback. To join: follow this link – National TIS Workers Yarning Group, click 'Join' ([only if you are a TIS Worker](#)) and then enter the TIS team you belong to and your position title.

You can also subscribe to the NBPU TIS's monthly newsletter to keep up-to-date with all of the latest TIS news. The newsletter includes a monthly message from National TIS Coordinator Professor Tom Calma as well as success stories from TIS teams from around Australia, and much more. You can read previous issues [here](#).

Archived NBPU TIS workshop and training materials can be accessed [here](#).



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Tackling Indigenous Smoking Workers Induction Pack

▶ Play as slideshow to click links on slides

Workforce information – Workshop presentations

Remote Services Workshop Presentations 2022

On 22 February 2022, the NBPU TIS hosted an online workshop for the 22 Tackling Indigenous Smoking teams who service communities in remote and very remote Australia.

NBPU TIS Remote Services Workshop Report 22 February 2022 – This report provides a summary of the workshop and feedback.

National Remote Regions TIS Workshop: 'Strategic overview and what for the future' 22 February 2022 – presented by National Coordinator TIS, Professor Tom Calma AO

This presentation was delivered by Professor Tom Calma AO at the 2022 Remote Services Workshop. Information covered in the presentation includes: an overview of the TIS Program processes; Aboriginal and Torres Strait Islander smoking rates; and vaping.

Department of Health Update Remote Services 22 February 2022

This presentation was delivered by Katherine McHugh from the Department of Health. The presentation provides information on: policy context; Government announcement of TIS Program extension; TIS Program – Key priorities post June 2022; and TIS Program components and funding.

TIS Program Impact and Outcome Evaluation

This presentation was delivered by Raglan Maddox from the Australian National University (ANU). The presentation provides information on: Thilutu Tharmay Aboriginal and Torres Strait Islander Reference Group; smoking rates among Aboriginal and Torres Strait Islander people by Indigenous Region; defining boundaries and intensity of the TIS Program; ABS TIS coverage; Mayi Kuwu study findings about the TIS Program; effective program characteristics; the WHO Framework Convention on Tobacco Control; next steps and questions; and reductions in smoking since 200

CIRCA TIS evaluation (Part A) final evaluation findings 22 February 2022

This presentation was delivered by Lena Etuk from CIRCA and includes information on: the evaluation methods used by CIRCA; and the evaluation findings, including areas of strength and opportunities for improvement.

The Tobacco control guide 22 February 2022

This presentation was delivered by Professor David Thomas about the *Tobacco control guide*. The guide aims to assist NT health services to make achievable improvements in tobacco smoking prevalence. Although developed specifically for use by NT services, it is expected that the guide can be used in other remote and very remote regions of Australia. It was created by the Aboriginal Medical Services Alliance Northern Territory (AMSANT), supported by funding from the Australian Government (Department of Health) under the TIS Program.

Please note: Presentations from the 2021 Remote Services Workshop can be accessed [here](#).

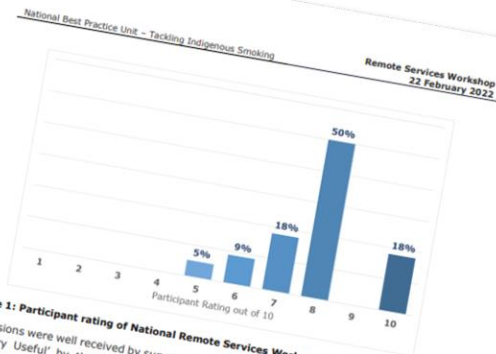


Figure 1: Participant rating of National Remote Services Workshop (scale of 1 to 10)

All sessions were well received by survey respondents (Figure 2). Most sessions were rated as 'Very Useful' by the majority of respondents. The most popular session was the Departmental update on the TIS program extension which was rated as very useful by 92% of participants who completed the evaluation.

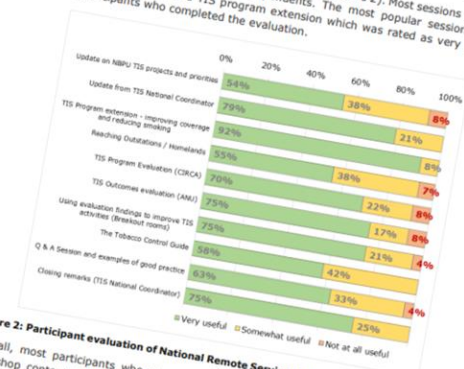


Figure 2: Participant evaluation of National Remote Services Workshop sessions, Feb 2022

Overall, most participants who responded to the survey were very satisfied with the workshop content (71%), with the remainder somewhat satisfied (29%). One person

April 2022

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Now what?

- Think of the TIS website as a living resource!
- There are lots of ways GRs can have input into the website:
 - send us content to personalise your TIS Team Activities page
 - Get in touch with your Project Officer about information you would like to see on the website

Please contact us

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