Connie the Clever Cockie Presents

Tobacco Control News

November 2026

Protection, Not Blame
Looking Back on a Year in Tobacco Control



Hello TIS Teams!

Across this year's tobacco control updates, one message came through again and again. Smoking and vaping are shaped less by personal willpower than by the products, marketing and systems around people. Here are some of the themes that ran through the year, and what they mean for the TIS program.

The Industry Designs for Uptake

Recent research shows tobacco and nicotine industries continue to target young people and put their health at risk. They shape the health information people see online, interfere in government decisions and flood the market with nicotine products. They also use colonial and racist systems to create and maintain health inequities for Aboriginal and Torres Strait Islander peoples.

The evidence of Industry deliberately targeting young people was clear. Globally, adolescents aged 13–15 are nine times more likely to vape than adults, and between 2017 and 2022 vapes with a nicotine strength of 5% or higher jumped by 1,486% in sales share. Industry and investor communications openly describe young people as essential to the future of the nicotine market, yet the public line is that young people "chose" to vape. This shifts responsibility for industry-driven harm onto young people themselves, rather than recognising the role of tobacco and nicotine companies in creating and sustaining demand.

At the PHAA Public Health conference in Geelong, Professor Becky Freeman warned that new "anywhere, anytime" nicotine products risk adding new forms of addiction on top of existing nicotine use. She also emphasised that cutting tobacco taxes is not a solution to illicit tobacco trade.

What does this mean for TIS:

- Talk about how the industry practices shape young people's choices.
- Run workshops to build skills in recognising misinformation and understanding industry tactics.
- Keep advocating for fewer tobacco retailers near schools, other youth spaces, and health services.

Progress is Real, But the Job is Not Done

Between 2011 and 2022, the overall burden of disease among Aboriginal and Torres Strait Islander peoples fell by 6.3%, while early deaths fell by 11%. These gains reflect progress in prevention, education, community leadership and tobacco reduction, and show the strength of Aboriginal and Torres Strait Islander-led health initiatives.

However, there is still much work to do. The AIHW First Nations Burden of Disease 2022 study measures how much healthy life is lost to illness, disability and early death. In 2022, Aboriginal and Torres Strait Islander peoples lost 317,083 years of healthy life. Cardiovascular disease and cancer each made up 11% of the total burden and respiratory disease 7.8%.

Research marking 40 years of the Ottawa Charter reinforces the importance of community leadership, highlighting that health promotion works best when programs are designed and led by Aboriginal and Torres Strait Islander communities.

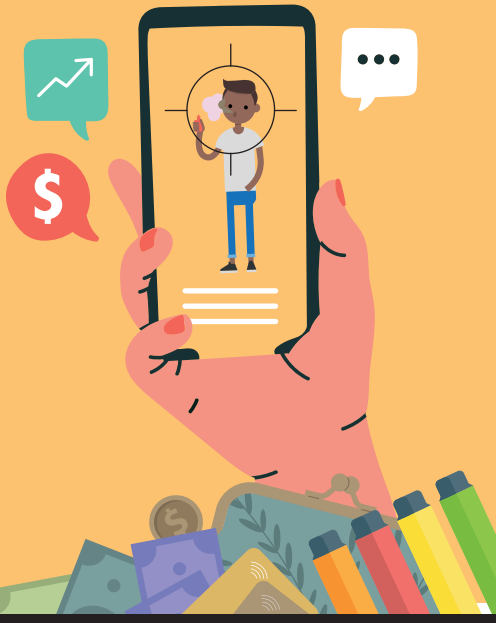
What this means for TIS teams: Share evidence of progress with communities, keep community-led approaches at the centre of your work, and keep promoting quitting and quit services, reminding people it is never too late to quit.

Together, these three factors make uptake among young people a completely predictable outcome of the system – not a failure of individual willpower.

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NATIONAL BEST PRACTICE UNIT

TACKLING INDIGENOUS SMOKING

Young People: Protection, Not Blame

Aboriginal and Torres Strait Islander young people already show strong leadership through art, cultural continuity and community action, and Australian evidence shows what helps keep them smoke- and vape-free. The Next Generation – Aboriginal Youth Wellbeing Study, led by Professor Sandra Eades AO, follows young people aged 10 to 24. Friends who don't smoke or vape, good mental health and no negative contact with the criminal justice system protected against both smoking and vaping. Smoke-free homes, school engagement and sport were linked to never smoking, while employment, higher income and freedom from racism and discrimination were linked to never vaping.

Researchers caution against calling communities "vulnerable". The problem is not the community; it is that systems have failed to protect it. So, the message is not "the community is at risk" but "the community deserves better protection."

What does this mean for TIS teams:

- Make smoke- and vape-free visible and normal in families, peer groups, schools and community settings.
- Create chances for young people to connect with culture, community and positive role models, and use sport, recreation and education as positive alternatives.
- Keep spaces safe and trusted, mindful of racism and experiences with the justice system.
- Help young people who are already vaping find quit support. Quitting support is not a TIS role, but connecting people to it is.

Centring Community-led work

At the World Indigenous Cancer Conference in Aotearoa (New Zealand), the message was that communities already hold the solutions, culture is a strength, and traditional tobacco is different from commercial tobacco. Speakers also challenged deficit-based thinking: health inequities are not caused by Indigenous identity or biology but shaped by broader social, environmental and colonial factors. Self-determination needs accountability, with real support, shared responsibility and ways to measure what matters.

A review of 94 Commonwealth, state and territory health policies found only 18 (19%) explicitly addressed the commercial factors that shape health. Tobacco was the strongest example of action, with much less action on alcohol, unhealthy food and drinks, gambling and fossil fuels. The review also flagged "lifestyle drift": a policy recognises the commercial and structural factors that shape health, but the actions that follow shift back to getting individuals to change their behaviour.

What this means for TIS teams: Keep community decision-making, governance and control at the centre, and continue to celebrate Aboriginal and Torres Strait Islander identity, culture and connection in your TIS activities, branding and messaging. Meet people where they are with honest, non-judgmental conversations.

Celebrating a year of community led action

This year has seen some wonderful achievements across the TIS program. From the launch of the Digital Repository (DR TIS), new campaigns such as Flip the Vape, Voices of Resistance, and Rise Up, to TIS teams sharing learning and work at the PHAA conference and Apunipima's recognition at the NIMAs.

Across the NRPP projects and TIS team activities, there have also been many examples of innovative community-led action, new resources, positive evaluation findings and practical learning that can inform health promotion practice more broadly.

These are just some of the highlights from a year of innovation, learning and community-led action across the program.



Take Home Message for TIS

Prevention is a long-term commitment, and ongoing evaluation helps programs to keep meeting community needs. Young people's uptake of nicotine products does not happen in isolation. Industry practices shape the environments in which choices are made, reinforcing the importance of community-led prevention. Looking ahead, keep an eye on:

- **New nicotine products** and where they are being taken up.
- **Policy follow-through**, including whether policy tackles the conditions that shape smoking and vaping, not just individual behaviour.
- **Links between prevention and quit support** for young people who already vape.
- **Keeping communities in control** of deciding what works and how it is delivered.

Nicotine pouches: new rules from 24 July 2026

From 24 July 2026, nicotine pouches can no longer be legally bought or imported in Australia. They can't be sold (including online), prescribed, supplied by pharmacies, brought in by travellers or importers (even with a prescription), or advertised. The changes respond to rising unlawful sale and social media marketing, and the risk of nicotine dependence, particularly among young people. TIS teams should encourage people who have been using pouches to seek culturally safe quit support from services they trust including their doctor, Aboriginal Health Practitioner or Quitline.

