

## **National research shows the way to reduce Aboriginal and Torres Strait Islander smoking**

A landmark series of 15 scientific papers published today in the Medical Journal of Australia from the national Talking about the Smokes research project shows that reducing Aboriginal and Torres Strait Islander smoking is achievable, how this is happening now, and why continued government investment is justified.

The papers show that similarly high proportions of Aboriginal and Torres Strait Islander and of all Australian daily smokers want to quit, have made a quit attempt in the last year, live in smoke-free homes, and work in smoke-free workplaces. Most reported knowing about the most harmful health effects of smoking and hold negative attitudes towards smoking.

“This gives us great confidence that messages and advice about quitting will be welcomed and understood,” said study leader Associate Professor David Thomas from Menzies School of Health Research in Darwin.

“Aboriginal Community Controlled Health Services are now all smoke-free and have increased their focus on tobacco control. We found that a greater proportion of Aboriginal and Torres Strait Islander smokers recalled being advised to quit by a health professional in the past year than of a similar sample of all Australian smokers,” he said. “But still more can be done to help people to stay quit once they have tried to quit,”

The national prevalence of daily smoking in the Aboriginal and Torres Strait Islander population is falling, but at 42% is still 2.6 times that of other Australians. Smoking causes one-sixth of the health gap and one-fifth of all Aboriginal and Torres Strait Islander deaths.

“Our new research evidence justifies continued significant government investment in Aboriginal and Torres Strait Islander tobacco control. We found that many of the different types of tobacco control activities were associated with people wanting to quit and making quit attempts”.

This included not only activities funded by the Australian Government’s Tackling Indigenous Smoking Program but also mainstream tobacco control activities (advertising campaigns, pack warnings and plain packaging, and smoke-free regulation) and activities already incorporated into routine health care (brief advice and individual cessation support).

**Talking about the Smokes is a national research project led by a partnership between Menzies School of Health Research, the National Aboriginal Community Controlled Health Organisation (NACCHO) and all its Affiliates, University of Melbourne, and Cancer Council Victoria, together with 34 Aboriginal Community Controlled Health Services and the Torres Shire Council. It is funded by the Australian Government Department of Health.**

The series of 15 papers is available at: <https://www.mja.com.au/journal/2015/202/10/supplement>

The results will be launched by the Hon Sussan Ley Minister of Health at 10.00 am in the Senate Alcove, Parliament House, Canberra.

A summary of key facts and figures follow.

**Media note:**

Associate Professor David Thomas leads the Talking About The Smokes project and has led the Tobacco Control Research Program at Menzies since 2007.

View his profile at: [http://www.menzies.edu.au/page/Our\\_People/Researchers/David\\_Thomas/](http://www.menzies.edu.au/page/Our_People/Researchers/David_Thomas/)

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**Menzies Background**

Menzies School of Health Research is Australia's leading Medical Research Institute dedicated to improving Indigenous, global and tropical health. We have a 30 year history of scientific discovery and public health achievement. Menzies works at the frontline, joining with partners across the Asia-Pacific as well as Indigenous communities across Northern and Central Australia. We collaborate to create new knowledge, grow local skills and find enduring solutions to problems that matter.

## Key facts and figures from Talking about the Smokes: 1 June 2015

We interviewed a nationally representative sample of 2,522 Aboriginal and Torres Strait Islander people from 35 locations, including 1,643 smokers (1,392 daily smokers).

### Quitting

- 70% of daily smokers want to quit.
- 48% of daily smokers had made a quit attempt in the last year.
- 47% of daily smokers who had made an attempt in the last five years had sustained an attempt for at least one month.

### Second-hand smoke

- 53% of daily smokers reported that smoking was never allowed anywhere inside their home.
- 88% of employed daily smokers reported that smoking was not allowed in any indoor areas at their work.

### Knowledge of the health effects of smoking and second-hand smoke

- Almost all daily smokers reported knowing that smoking causes lung cancer (94%), heart disease (89%), low birth weight (82%), but less were aware that it makes diabetes worse (68%).
- Almost all smokers reported knowing that secondhand smoke is dangerous to non-smokers (90%) and children (95%), and causes asthma in children (91%).

### Attitudes and social norms about smoking

- 78% of daily smokers agreed that if they had to do it over again, they would not have started smoking.
- 62% of daily smokers agreed that mainstream society disapproves of smoking and 40% agreed that community leaders disapprove of smoking.
- 90% of daily smokers agree that being a non-smoker sets a good example to children.

### Anti-tobacco health information

- 65% of smokers recalled *often* noticing pack warning labels in the last month.
- 45% of smokers recalled *often* noticing anti-smoking advertising or information the last six months, most commonly on television.
- 48% of smokers recalled *ever* noticing any targeted advertising or information featuring Aboriginal and Torres Strait Islander people or artwork in the last six months, with 16% noticing information with local people or artwork.

### Support to quit

- 75% of daily smokers who had seen a health professional in the last year had been advised to quit.
- 37% of daily smokers had *ever* used nicotine replacement therapy or other stop-smoking medicines, and 23% had used them in the *last year*.

All these results are from our baseline survey conducted from April 2012 to October 2013. We are now analysing results from our follow-up surveys conducted a year later.