

Are Aboriginal and Torres Strait Islander People making Deadly Choices?



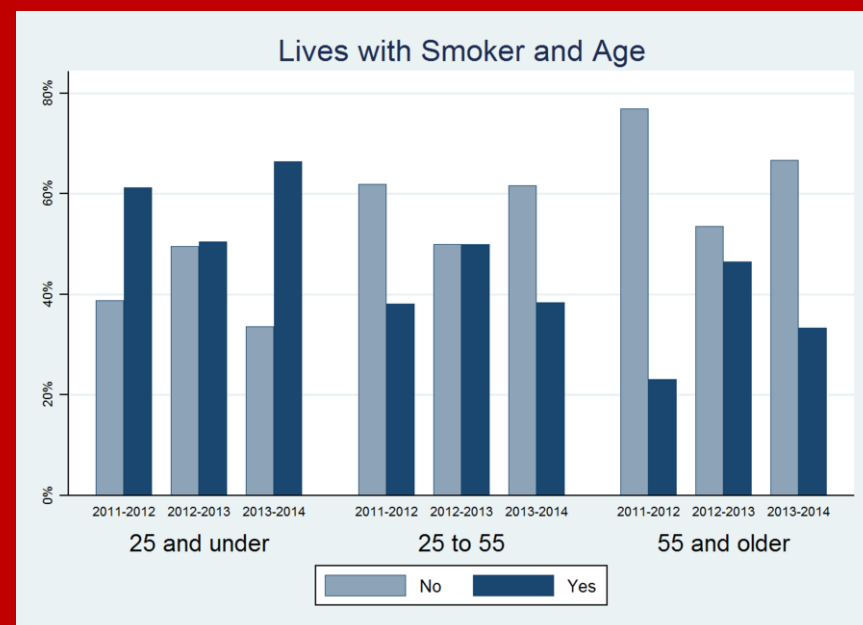
A quantitative analysis of Deadly Choices tobacco survey data

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Over time, the number of people who have never smoked has increased and the number of people who identify as smokers has decreased.

In 2012/2013, 28.1% of Deadly Choices respondents were current smokers whereas 65% of TATS respondents were current smokers.



Across all three years, people aged 25 and under were most likely to live with a smoker.

The regressions also show that people who live with a smoker are 53%, 56% and 47% less likely to be in the never smoked category across the three years.



Background:

Deadly Choices was developed by UIIH as part of their integrated health system approach towards closing the gap in health outcomes in the SEQ Aboriginal and Torres Strait Islander population. Nationally, 42% of this group smoke (Thomas et al 2015). As no previous studies have analysed or compared SEQ and national Aboriginal and Torres Strait Islander smoking trends, this research fills that important gap in knowledge. Literature shows that family and peers play a large role in initiation to smoking (Johnston et al. 2012). Health promotion initiatives often focus on assisted quitting despite the literature indicating that many people quit unassisted (Smith, Chapman & Dunlop 2015).

Research Questions:

What are the trends associated with initiating and ceasing smoking in the SEQ Aboriginal and Torres Strait Islander population over the period 2011 to 2014?

How does this data compare to the national findings from the Talking About The Smokes (TATS) project?

Methods:

UIIH requested for this research that we use quantitative methods to analyse their existing survey data. We received 1,468 responses to a community smoking survey that spanned across three financial years (2011/2012, 2012/2013 and 2013/2014). We used Stata to conduct descriptive analyses, graphs showing change over time, logistic regressions and hypothesis tests comparing Deadly Choices findings with national TATS findings.

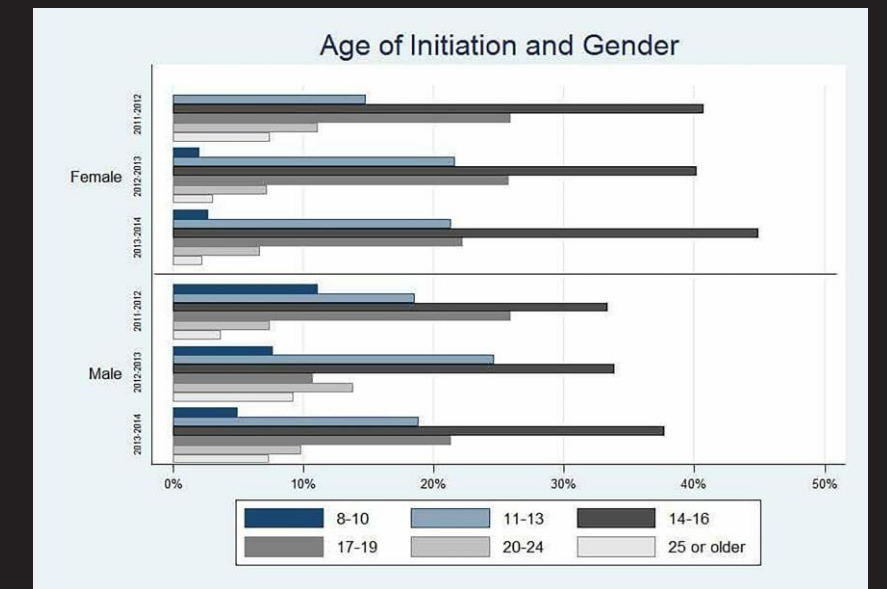
Discussion & Conclusions:

Over time, the number of people who have never smoked has increased and the number of smokers has decreased. Smoking status is statistically different between the Deadly Choices and TATS samples, indicating that Aboriginal and Torres Strait Islander people in SEQ smoke at lower rates than they do in the national population. Our regressions show that living with a smoker influences the likelihood of taking up smoking. Importantly, this aligns with the literature in demonstrating that family and peers play a large role in influencing smoking behaviours, especially in younger people (Johnston et al. 2012). Indeed, initiation to smoking is most likely to occur within the 14-16 year age bracket. While most cessation literature focuses on assisted quitting (Smith, Chapman & Dunlop 2015), our analyses show that cold turkey is the most common quit method in the SEQ Aboriginal and Torres Strait Islander population. As Deadly Choices results are positive in terms of reducing smoking overall in SEQ, further investigation should focus on exploring the impact of their unique integrated health system approach.

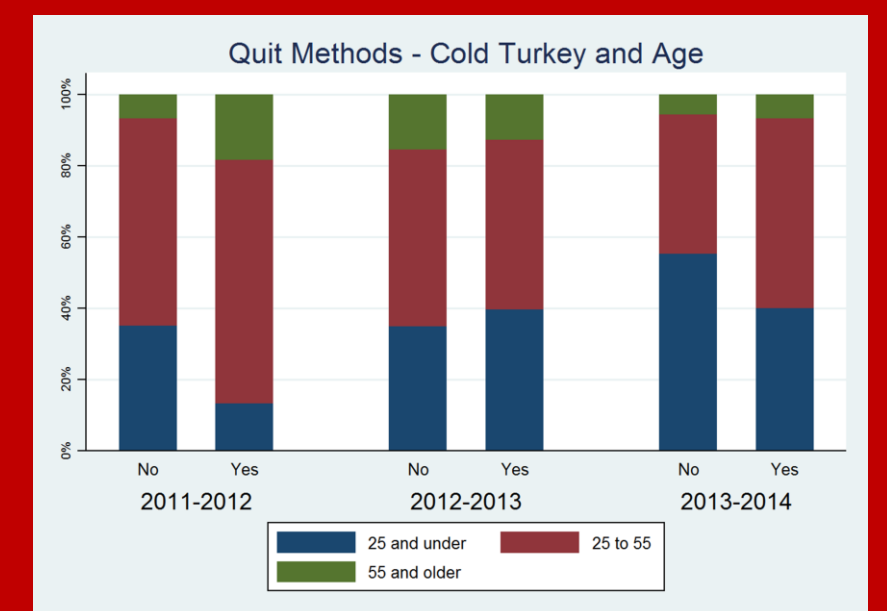
Special thanks to our Academic Advisor Joni Parmenter and those that have helped us along the way, Dr Sarah Bennett, A/Prof Lynda Cheshire & Dr Suzanna Fay-Ramirez. Also many thanks to the Institute of Urban Indigenous Health and Deadly Choices.

References:

- Johnston, V, Westphal, D.W., Earnshaw, C. and Thomas, D.P. 2012, 'Starting to smoke: a qualitative study of the experiences of Australian indigenous youth', BMC public health, vol.12, no. 1, pp.1-14.
- Smith, AL, Chapman, S & Dunlop, SM 2015, 'What do we know about unassisted smoking cessation in Australia? A systematic review, 20 05-2012', Tobacco Control, vol. 24, no. 1, pp. 18-27.
- Thomas, DP, Davey, ME, Briggs, VL & Borland, R 2015, 'Talking about the smokes: Summary and key findings,' Australian Medical Journal, vol. 202, no. 10, pp. 53-54.



Females were more likely to start smoking at 14-16 across all years. This is the same for males, but females are more likely than males to start at 14-16.



The most common quit method was cold turkey, and the above graph shows an increase in quitting via cold turkey for under 25s, and an decrease for over 55s, from 2011 to 2014.

Health implications was the primary reason for wanting to quit smoking.



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