

Introduction to the resources

In 2017-2018 the National Best Practice Unit Tackling Indigenous Smoking (NBPU TIS) undertook to develop a set of resources for community workers and health professionals that would provide relevant information in relation to the Tackling Indigenous Smoking Program. These videos and fact sheets are the result of this activity.

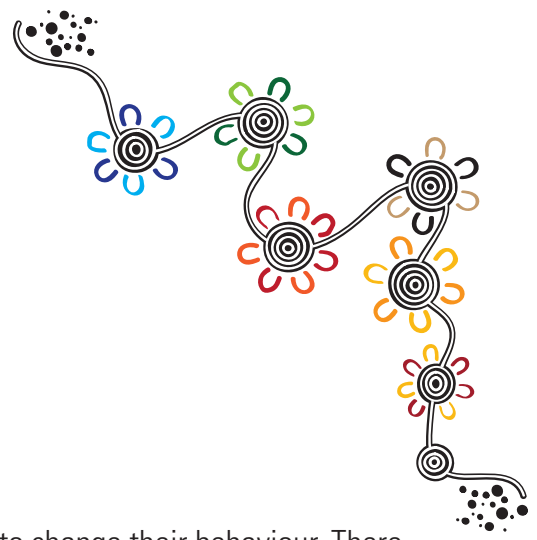
THE VIDEOS COVER:

1. Brief Intervention
2. Activities for children and youth
3. Nicotine Replacement Therapy
4. Smoking and Pregnancy
5. Smoke-free Environments
6. Harmful effects of smoking



Each video showcases the work of a number of different Tackling Indigenous Smoking (TIS) teams from across Australia. Each one is also accompanied by a fact sheet which provides a brief evidence-based overview of the topic and explains how the activities fit into the Population Health Promotion approach adopted by the program.

In addition to this work, NBPU TIS undertook a desktop review of the currently available evidence-based obesity and nutrition resources of relevance to Aboriginal and Torres Strait Islander people. A summary of the activities and information identified, along with a set of downloadable resources is also available on this USB. A fact sheet describing the relationship between nutrition and smoking is provided to accompany these resources.



Key Facts About Brief Intervention

Brief Intervention uses counselling skills to motivate current smokers to change their behaviour. There is good evidence that this approach is effective at increasing quitting rates and quit attempts.

What is brief intervention?

Brief intervention makes the most of any opportunity to raise awareness, share knowledge and get someone to think about making changes to improve their health and behaviours. Brief intervention:

- Takes as little as 3 minutes;
- Is usually carried out on a one-to-one;
- Uses counselling skills such as motivational interviewing, problem solving and goal setting;
- Uses the Stages of Change Model to judge whether a smoker is ready and motivated to quit;
- Uses the 5As approach to educate, encourage and support the smoker to quit. The 5As are:
 - **Ask** about smoking at each visit;
 - **Assess** the patient's willingness and confidence to quit;
 - **Advise** the smoker of the benefits of quitting in a clear but non-confrontational way;
 - **Assist** the patient with quitting;
 - **Arrange** follow up so that the smoker can continue to be supported and encouraged.

Who can do brief interventions?

In many organisations only health professionals, such as Aboriginal Health Workers, nurses, doctors, and dentists, are trained to do brief interventions. However, because brief intervention is focused on motivation and education not therapy, you do not need a health background to do this training. They are also opportunistic, meaning that they do not need to take place in a medical setting. This means anyone can do brief intervention training including:

- Staff from health organisations, who are the first point of contact for clients (e.g. receptionists and drivers);
- Staff from non-health organisations that have regular contact with Aboriginal and Torres Strait Islander clients;
- Smoke-free ambassadors or other volunteers who work on community events/outreach activities;

Several organisations and programs around the country provide brief intervention training. For example, Cancer Council SA runs the Quitskills program Tackling Indigenous Smoking Brief Intervention, a three-day nationally recognised training package. Quitskills provides the skills, knowledge and confidence to discuss smoking behaviour with Aboriginal and Torres Strait Islander people.

Simple advice, delivered in the right way can have a significant effect on smoking cessation. Increasing the number of people in different organisation trained in brief interventions, will increase our capacity to tackle smoking rates. This is why **increasing access to brief intervention training is an effective part of a Population Health Promotion approach.**