

2022–2026

TASMANIAN TOBACCO ACTION PLAN

Reducing the use of tobacco
and related products



**Tasmanian Tobacco Action Plan:
Reducing the use of tobacco and related products 2022–2026**

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For further information, please contact:

Department of Health

Public Health Services

GPO Box 125

Hobart TAS 7001

Telephone: 1300 135 513

Website: www.health.tas.gov.au

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ACKNOWLEDGEMENT OF COUNTRY

The Department of Health Tasmania and the Tasmanian Tobacco Control Coalition respectfully acknowledge Tasmanian Aboriginal people as the traditional custodians of the land on which we live, work and play, and pay respect to Aboriginal Elders past and present.

Recognition statement

Tasmanian Aboriginal peoples' traditional lifestyle promoted physical and emotional health and wellbeing, centred around Country, Kin, Community and Spirituality. Aboriginal people continue to value the importance of culture, community connection and being on Country as vital components of health and wellness. Through colonisation Aboriginal people experienced displacement and disconnection, which has significantly affected their health and wellbeing. We recognise that Aboriginal people are the knowledge holders and provide best practice in promoting health and wellbeing for Aboriginal people. We acknowledge the ongoing work of Aboriginal organisations in ensuring continued health and wellness. We commit to working in partnership with Tasmanian Aboriginal communities and health leaders now and into the future.

Trawtha makuminya meaning 'Big River Country tracks', renamed from 'Gowan Brae' property (Central Highlands of Lutruwita, Tasmania). Trawtha makuminya was returned to the Aboriginal community in May 2013. No original name for this place is known, Aboriginal community suggestions were made over some months and the Tasmanian Aboriginal Centre's 2014 AGM voted to adopt this name. Photographer – Jillian Mundy.

STRATEGY AT A GLANCE



OUR VISION

Tasmania is a place where supportive environments ensure that people do not take up smoking and where help is provided for people to quit so that everyone can live healthy lives.



OUR GOAL

To improve the health and wellbeing of Tasmanians by reducing the prevalence of smoking and the harm it causes.



OUR OUTCOMES

Fewer Tasmanians take up smoking

More Tasmanians quit smoking

More smoke free environments are established

Decreased access to smoking products

OUR ACTION AREAS



1 Encourage and help all people who smoke to quit for good

More people who smoke will be reached with effective campaigns and smoking cessation support



2 Prevent Tasmanians from taking up smoking

We will work with young people, families and communities to prevent the uptake of smoking



3 Prioritise support for people with the greatest needs

We will co-develop targeted initiatives to support priority groups at risk from smoking related harm



4 Create supportive environments that protect Tasmanians from tobacco industry harms

We will strengthen laws to protect more Tasmanians from smoking products and create more smoke free public spaces



5 Strengthen and use the evidence base

We will build our local evidence base and ensure that research translates into action

OUR PRINCIPLES



Equity



Evidence Based



Community Voice



No Industry Interference

The Department of Health Tasmania wrote this document. When you see the words 'we', 'us' or 'our', it can mean the Tasmanian Government or Tasmanian Department of Health.

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PREMIER'S MESSAGE



We know that smoking has a significant negative impact on people's health, as well as the community more broadly.

With more than 500 Tasmanians dying each year from smoking, the Tasmanian Government is committed to reducing this further.

We have made some inroads to address this including trialling the provision of free nicotine replacement therapy, funding cessation projects, introducing and maintaining laws on the sale, use and display of e-cigarettes and requiring pharmacies to be licenced to sell such nicotine containing products on prescription.

Yet we acknowledge, more needs to be done and we are heading in the right direction.

We want a Tasmania where young people are not growing up exposed to smoking, and where supportive environments assist people to quit these addictive and harmful products.

That is why we have prioritised creating 'Smoke Free Communities' in our latest *Healthy Tasmania Five Year Strategic Plan 2022-2026*, launched in March. As our core preventative health strategy, the Healthy Tasmania plan outlines broad approaches required to address the high rates of smoking. This document builds on this foundation.

The *Tasmanian Tobacco Action Plan: reducing the use of tobacco and related products 2022-2026* provides clear and comprehensive direction to further reduce use of tobacco and related products and its harms through actions that all sectors and levels of government can take over the next five years.

Building upon our learnings from the previous *Tobacco Control Plan 2017-2021* and the *Tasmanian Tobacco Control Plan Progress Report 2021*, we will continue effective action to reduce smoking including ongoing mass media campaigns, a focus on priority groups to ensure that support reaches the people that need it most and building our local evidence base around what works.

We have created a new action area focusing on supportive environments. Through this, we acknowledge that the places we live, work, play and study can positively impact our health and if we smoke.

We will also implement new initiatives including our *Smoking Prevention Package for Young People*, enhancement of smoke free areas around our schools and hospitals, as well as continue action to protect Tasmanians from the harms of electronic cigarettes.


This Plan has been developed in collaboration with our Tasmanian Tobacco Control Coalition expert advisory group, other key stakeholders as well as people with lived experience of smoking and quitting. These collaborations will continue throughout the life of the plan to ensure actions are effective in our local context.

I invite you to join with the Tasmanian Government in welcoming this Plan. We know we need to do more to improve the health of Tasmanians and I look forward to seeing these initiatives implemented and smoking rates reduce further in our State.

Hon Jeremy Rockliff MP

Premier

Minister for Mental Health and Wellbeing



We want a
Tasmania where
young people
are not growing
up exposed to
smoking.



INTRODUCTION

Tasmanians overwhelmingly want to see an end to the harms caused by smoking and the loss of over 500 Tasmanian lives per year on average

While smoking remains the number one cause of preventable illness and death in Tasmania, sustained action over many years has reduced the prevalence of smoking.

Most recently, the 2017–2021 Tasmanian Tobacco Control Plan Progress Report shows that initiatives delivered by Government, health and community services, local councils, universities and the community have reduced harms from smoking:

- There are more ex-smokers in Tasmania, with 33 per cent of Tasmanians classifying themselves as ex-smokers compared to 23 per cent in 1989.
- Young Tasmanians are increasingly getting the message about the harms from smoking, with 95 per cent of secondary school students remaining smoke free.
- The availability and visibility of smoking products is also decreasing, with businesses choosing not to sell these products and councils establishing smoke-free areas.
- Free nicotine replacement therapy for people from priority populations has shown promise as a way of supporting people to quit smoking.

Despite this progress, there is more work to do.

Tasmania has the second highest smoking prevalence in Australia.

E-cigarettes are being promoted online to young people and those who have never smoked before, risking hard-won progress to reduce nicotine addiction in Tasmania.

Meanwhile, the most disadvantaged people in our community continue to bear the brunt of smoking-related harms.

People who are experiencing mental ill-health in Tasmania are almost two times more likely to smoke, while those living in the most disadvantaged areas of the State are three times more likely to smoke as those living in the least disadvantaged location.

The Tasmanian Tobacco Action Plan 2022–2026 will continue to build on this foundation to ensure that Tasmanians do not take up smoking and that support is provided for people to quit and live healthy lives.

EVOLVING TOBACCO TERMINOLOGY

‘Reducing the use of tobacco and related products’

Action plans to reduce smoking in Tasmania have previously focussed on tobacco. The inclusion of ‘related products’ in this plan acknowledges that a broader scope is required to prevent people from replacing one addiction with another.

The tobacco industry is constantly adapting and developing innovative products to appeal to new generations of smokers. This includes e-cigarettes (see below) and ‘smokeless’ products such as heat-not-burn products. These products may or may not include tobacco or nicotine, but by Tasmanian law they all fall under the umbrella of ‘smoking products’.

In this Plan:

- The term ‘smoking products’ refers collectively to cigarettes, e-cigarettes and other tobacco industry products. ‘Smoking’ refers to the use of these products.
- Smoke-free communities are places where the access and use of smoking products is rarely seen.

WHAT ARE E-CIGARETTES?

Electronic cigarettes, or e-cigarettes, replicate smoking behaviour without the use of tobacco.

Electronic cigarettes, or e cigarettes, replicate smoking behaviour without the use of tobacco. They are battery operated devices designed to heat a liquid (which may or may not contain nicotine) to produce a vapour that is inhaled. The vapour resembles tobacco smoke. The inhalation of this vapour is referred to as vaping.

Vaping and e cigarette products have been associated with immediate harms including E cigarette or Vaping Use Associated Lung Injury (EVALI), other respiratory illness, and death.

The effects from longer term use of e cigarettes remain unclear. The World Health Organisation (WHO) has stated that conclusive evidence about the association of e cigarettes with diseases such as cancer will not be available for years, even decades.

The tobacco industry claim that e cigarettes can help people to quit smoking. However, recent national and international reports conclude that there is currently insufficient evidence to support the use of e cigarettes as an effective cessation aid.

The majority of e cigarette use is not for smoking cessation. Evidence shows that e cigarettes have the potential to reverse recent gains made to reduce smoking rates and tobacco related harms, and “re normalise” smoking within the community. Non smokers, including young people, are more likely to take up traditional cigarettes after trying e cigarettes.

The Tasmanian Government continues to assert that the use of e cigarettes should not be encouraged, particularly in relation to young people.



TOBACCO ACTION IN TASMANIA

OUR VISION



Tasmania is a place where supportive environments ensure that people do not take up smoking and where help is provided for people to quit so that everyone can live healthy lives.

OUR GOAL



To improve the health and wellbeing of Tasmanians by reducing the prevalence of smoking and the harm it causes.

OUR OUTCOMES



Fewer Tasmanians take up smoking
More Tasmanians quit smoking
More smoke free environments are established
Decreased access to smoking products

GUIDING PRINCIPLES



1. Equity

People experiencing disadvantage are disproportionately impacted by the harms of smoking.

While protection from the harms of smoking needs to be available for all Tasmanians, services and support must also be provided equitably to people with the greatest needs.

We will engage and collaborate with communities and partners across sectors and agencies to ensure that action reaches the people who need it most.

All Tasmanians must have access to culturally safe smoking cessation services, support, information and environments that encourage them to be smoke free.

Advocacy and action must address the social determinants of health to reduce inequities.



2. Evidence based

Evidence about the harms of smoking is clear.

The best available evidence will inform actions within the Tobacco Action Plan to reduce smoking in Tasmania. This includes drawing upon the latest state, national and international research.

Where the evidence does not yet exist, we commit to testing initiatives, authentically engaging with people with lived experience and building a local evidence base that can best support Tasmanians to be smoke free.



3. Community voice

People who smoke or have quit smoking provide invaluable insights into how to reduce smoking in our State.

We will engage young Tasmanians, people who smoke, as well as those that have quit, to inform and guide action to reduce smoking in Tasmania.

Tasmanians are experts in their own lives. In addition to professional support, we will encourage people who smoke to learn from one another's experiences in making quit attempts, preventing relapse and ultimately staying smoke free.



4. No industry interference

Australia is a signatory to the World Health Organization's Framework Convention on Tobacco Control (FCTC). This is an evidence-based international treaty that reaffirms the right of all people to the highest standard of health.

The FCTC sets a clear standard in regard to protecting public health policy and tobacco legislation from the interests of tobacco companies. Article 5.3 states that:

In setting and implementing their public health policies with respect to tobacco control, Parties shall act to protect these policies from commercial and other vested interests of the tobacco industry in accordance with national law.

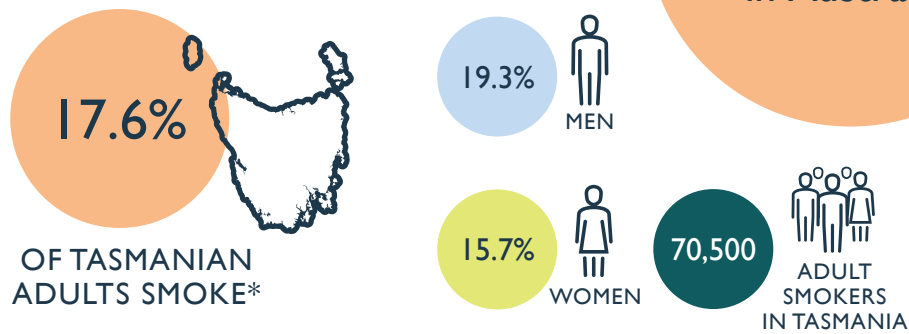
As such, all forms of consultation with the tobacco industry and lobbyists are not permitted within Tasmania.

We will protect the development and implementation of this Plan from all commercial and other vested interests.



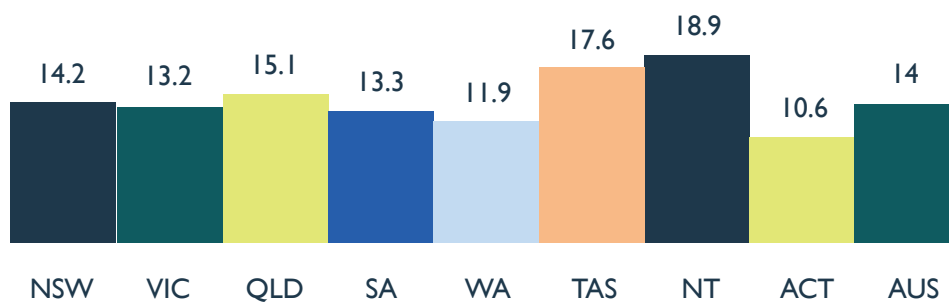
TOBACCO USE IN TASMANIA

Tasmania has
the second highest
smoking rate
in Australia.

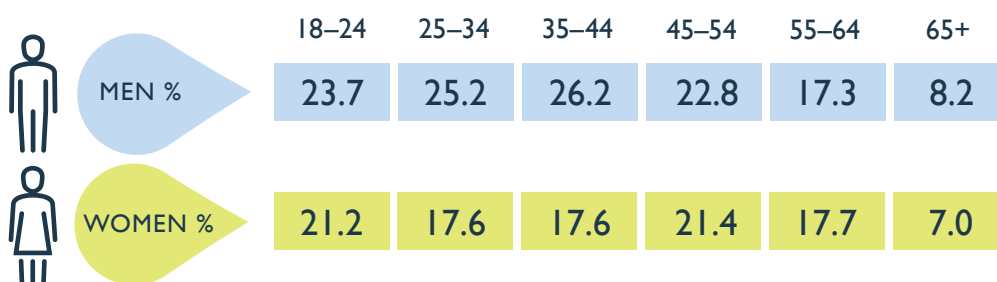


*People who smoke either daily or occasionally

SMOKING % RATES BY STATE IN AUSTRALIA

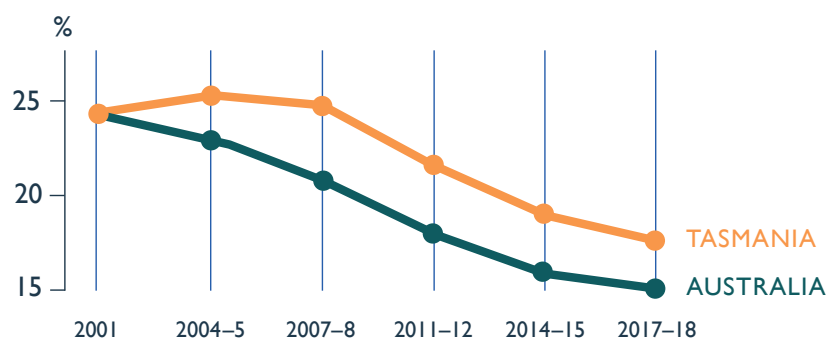


SMOKING RATES VARY BY AGE AND GENDER



SMOKING RATES ARE GRADUALLY DECLINING

% of population who are current smokers



Data from the National Health Survey 2017-10 (NHS), the primary indicator of smoking prevalence in Tasmania.

THE PROBLEM

“ I’ve had addictions to other things.
I think cigarettes is the hardest.

– current smoker

”

SMOKING KILLS:

- Smoking is still the leading cause of preventable death and disease in Australia.
- Smoking causes premature death in two out of three people who smoke.
- In Tasmania, an average of 559 people die each year from smoking.
- Exposure to secondhand smoke can be deadly.
- Exposure to smoking during pregnancy can lead to stillbirth.

SMOKING IS COMMON:

- 17.6 per cent of Tasmanians over 18 smoke, higher than the national average.
- Nicotine is highly addictive. Nicotine withdrawal makes quitting difficult.
- Smoking products are still widely available and accessible despite being a restricted product.
- While smoking indoors is rare, it is not uncommon to see people smoking in public places every day.
- People, particularly young Tasmanians, are more likely to smoke if their friends and family smoke.

“ I have parents that used to smoke...
And grandparents that used to be heavy smokers. And then great-grandparents that used to be heavy smokers. All before me. It was very social and very routine for them to constantly be smoking.

– current smoker, 21 years old

”



“ It costs me \$400 a fortnight for smokes. That’s a lot of money.

– current smoker

”

SMOKING DISPROPORTIONATELY IMPACTS ON PEOPLE EXPERIENCING DISADVANTAGE:

- People experiencing socio-economic disadvantage and mental ill-health are disproportionately impacted by the harms of smoking.
- Experiencing multiple types of disadvantage increases the likelihood of a person smoking.
- Smoking remains the leading burden of disease for Aboriginal people.
- Smoking is often passed from one generation to the next.
- The cost of addiction to cigarettes contributes to financial stress.

TOBACCO INDUSTRY:

- The tobacco industry financially benefits from the sale of addictive and deadly products.
- Industry continually adapt products, language and marketing of harmful smoking products to recruit new generations of smokers.
- The tobacco industry invests heavily in e-cigarettes. This investment risks reversing recent gains made in reducing smoking.

SMOKING CESSATION SUPPORT IS NOT ALWAYS A PRIORITY:

- Very few people who smoke are referred to specialist smoking cessation support.
- Self-reported confidence to provide smoking cessation support is reducing among Tasmanian Health Service staff.
- Community service organisations report that smoking cessation support is often not a priority or part of their skill set.
- Personal attributes, family relationships, negative life events, financial stressors and other contextual factors can negatively impact on individuals' quit attempts.

“ Everyone around I know, all my friends, I don’t think there’s one that doesn’t smoke.

– current smoker

”

Most people
who smoke
want to quit
smoking.



ACTION AREAS



Encourage and help all people who smoke to quit for good

Most people who smoke want to quit smoking.

Cigarettes and nicotine containing e-cigarettes are designed to be highly addictive. This means that once someone has started smoking it can be difficult to quit. Relapse is common. However, people can and do quit.

Evidence tells us that mass media campaigns, behavioural support and pharmacotherapy, brief intervention at critical teachable moments (e.g. hospitalisation) and increased taxing of smoking products are effective in supporting people to quit – and should continue.

With the rise of new and novel products it is essential that the health workforce has up-to-date evidence-based information to guide smoking cessation support.

Collective support for people to quit together with family and social networks has been identified as a new strategy to test. This can ensure that people who are trying to quit are not prompted to relapse by being around other people who smoke.

Our messaging needs to be specific to the issues raised by people who smoke in Tasmania – and include developing an understanding of the role of the tobacco industry in addiction and ill health, and the health, financial, social and emotional benefits of being smoke free.


“The biggest factor in me giving up was that my partner and I gave up at the same time and we were both strong.

– **successful quitter**



We will:

- I.1 Deliver mass media and localised campaigns to increase public awareness of the harms of smoking, nicotine dependence, prompt quit attempts and address relapse
- I.2 Build capacity within the health sector (including doctors/GPs, nurses, dentists, pharmacists) to provide smoking cessation support and evidence-based information on smoking products, including e-cigarettes
- I.3 Reinstate mandatory smoking cessation brief intervention training for all health care workers in public hospitals
- I.4 Promote the Tasmanian Quitline as a place of contact for people who smoke, and further personalise the Quitline service
- I.5 Develop and communicate a clear continuum of support for people who smoke to ensure help is available throughout different stages of their quit journey
- I.6 Develop a stronger understanding of what helps people quit 'cold turkey' (without assistance)
- I.7 Trial initiatives to support people to quit together with family, social networks, within workplaces and broader communities
- I.8 Embed smoking cessation activity and smoke free workplace requirements into government funding agreements.



The social acceptability of smoking is declining, and fewer young people are growing up in households where people smoke.

ACTION AREAS



2 Prevent Tasmanians from taking up smoking

Most young Tasmanians are smoke free, and the proportion of adults who have never smoked is increasing.

The harms of smoking are well known. The social acceptability of smoking is declining, and fewer young people are growing up in households where people smoke.

While smoking prevalence is reducing, there is significant concern that traditional cigarettes are being replaced with other smoking products, such as e-cigarettes.

We need ongoing action to prevent the uptake of smoking, particularly by young people.

We will:

- 2.1 Deliver a Smoking Prevention Package for Young People to encourage young people to be smoke free
 - 2.1.1 Implement evidence-based smoking prevention initiatives in schools
 - 2.1.2 Further develop and promote the Smoke Free Generation... be a part of it! initiative, including marketing the website as a central point of information on protecting young people from smoking and the harms it causes
 - 2.1.3 Implement smoke free areas where children and young people learn, play and work
 - 2.1.4 Prevent smoking uptake by young people through intergenerational initiatives targeting households where adults smoke

“It’s important to make sure everyone is educated. Once you know what it does, smoking becomes much less fascinating”

– **smoke free young person, 14 years old**

”

-
- 2.2 Educate Tasmanians, particularly young people, on the known harms of e-cigarettes, and other emerging product

“I tried vaping once. It tasted like cancer”

– **14 years old**

”

-
- 2.3 Understand and address the significant increase in smoking prevalence between school aged children and 18 - 24 year old Tasmanians.

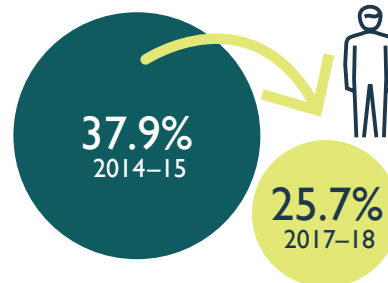


WHERE IS THE GREATEST NEED?

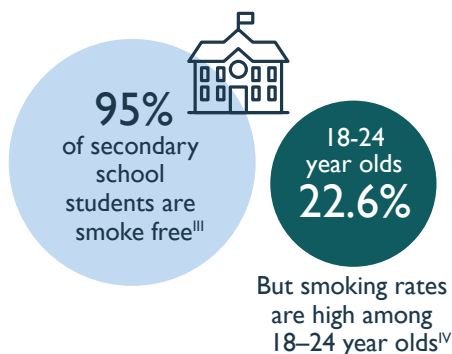
PREGNANT WOMEN^I



MEN 25–44^{II}

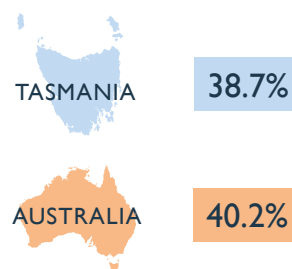


YOUNG PEOPLE



ABORIGINAL PEOPLE^V

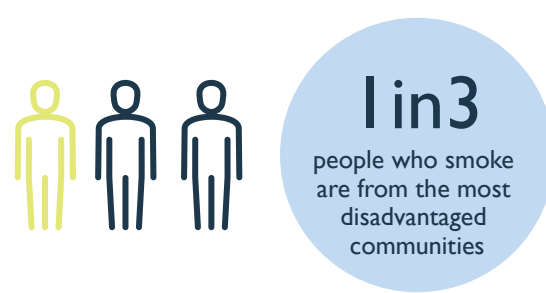
The smoking rate in Tasmania is lower than Australia



PEOPLE EXPERIENCING MENTAL ILL-HEALTH^{VI}



SMOKING AND DISADVANTAGE^{VII}



PEOPLE EXPERIENCING ISSUES WITH ALCOHOL AND DRUGS



Smoking rates in Tasmania are not known, but predicted to be high.

^I Tasmanian perinatal database, 2018; ^{II} National Health Survey 2017–18; ^{III} Australian Secondary Students' Alcohol and Drug Survey (ASSAD) 2017; ^{IV} National Health Survey 2017–18; ^V National Aboriginal and Torres Strait Islander Health Survey 2018–19, aged 18+; ^{VI} Tasmanian Population Health Survey 2019; ^{VII} National Health Survey 2017–2018

ACTION AREAS



3 Prioritise support for people with the greatest needs

Smoking is more common in certain population groups. This is because certain groups of people are exposed to environments that are not supportive of being smoke free. For example, we know that people experiencing disadvantage and people with mental ill-health are more likely to smoke than the general population.

Smoking can also present a greater risk of harm in certain population groups. For example, people who are pregnant and/or their partners, exposing a foetus to smoking can impact the baby's lifelong health and development.

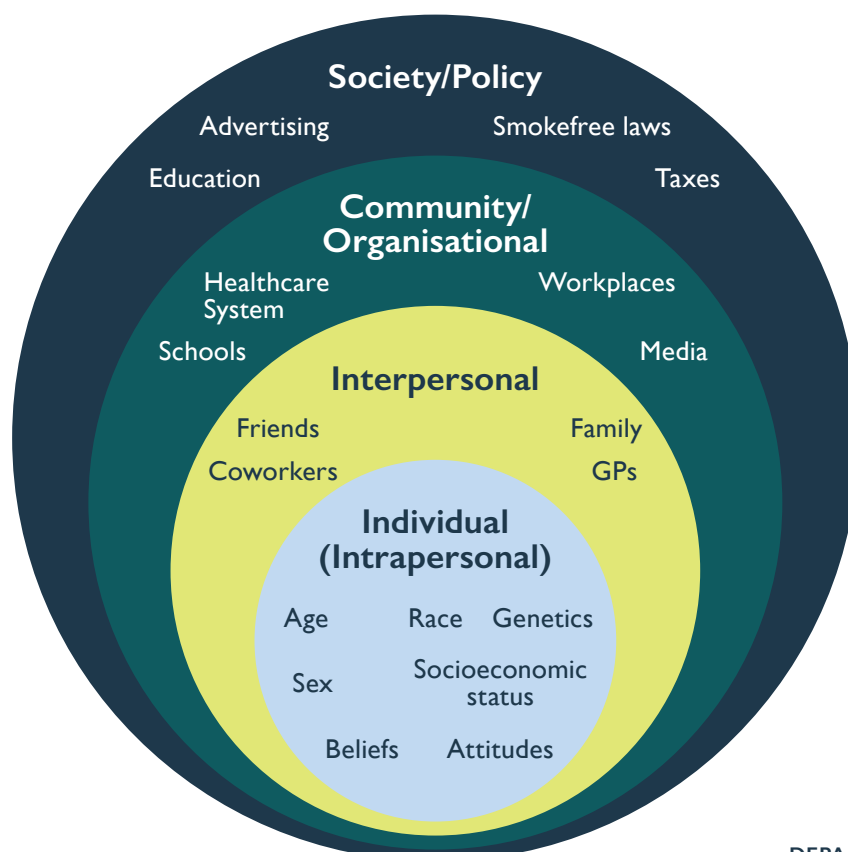
Therefore, these populations are a priority for targeted interventions to support quit attempts translating into sustained cessation.

In Tasmania, this includes:

- People from socioeconomically disadvantaged areas
- People living with mental ill-health
- People experiencing issues with alcohol and other drugs
- People of childbearing age, particularly those who are pregnant
- Aboriginal and Torres Strait Islander people
- Young people, including Tasmanians aged 18–24
- Men aged 25–44

It is important to note that these are not discreet groups, rather overlapping populations exposed to similar risk factors.

Factors associated with taking up smoking





We will:

- 3.1 Resource and support communities where there are ongoing high levels of smoking to implement targeted initiatives
- 3.2 Enhance the role of community service organisations to support smoking cessation among their clients

“Smoking cessation used to be something we all knew was extremely important but it was at the side of my desk. Now it’s everybody’s business.

—service provider,
community service
organisation

”

- 3.3 Seek input from people with lived experience in the development of tobacco policy and targeted programs
- 3.4 Improve access to best practice smoking cessation support, including behavioural interventions and nicotine replacement therapy
- 3.5 Address smoking prevalence among people who work with priority populations, including supporting staff in schools, health and community services

- 3.6 Recruit and support Smoke Free Champions to influence and distribute smoking cessation messaging among priority populations
- 3.7 Implement antenatal smoking cessation programs, including targeted initiatives to support pregnant people under 20 to be smoke free

“I stopped smoking after I saw the breath test result. The CO program was ultimately what made me give up. It made me accountable.

—pregnant woman
and successful quitter

”

- 3.8 Embed smoking cessation support into preventative health initiatives within the mental health sector as part of Rethink 2020’s focus on improving physical health of people living with mental ill-health
- 3.9 Educate school staff in brief intervention to support young people to quit.

ACTION AREAS



4

Create supportive environments that protect Tasmanians from tobacco industry harms

The environments in which people are born, grow, work, live and age affect their health, wellbeing and smoking status.

Our laws and consequently the visibility and availability of smoking products in Tasmania influence the uptake of smoking, the difficulty in quitting, as well as contribute to people relapsing back into smoking.

With ongoing demand for smoking products, the tobacco industry is financially benefitting from selling these addictive and deadly products.

We are aware that the activities of the tobacco industry remain one of the most significant challenges in reducing smoking prevalence and smoking-related harm in Tasmania.

Our actions must be stronger.

We will:

- 4.1** Undertake compliance activities to facilitate the monitoring and enforcement of our smoking laws
- 4.2** Strengthen laws to reduce the visibility and availability of smoking products, and regulate new and emerging tobacco industry products

- 4.3** Build on initiatives to reduce retail availability, particularly in low socioeconomic areas
- 4.4** Review aged-based laws in relation to the sale of smoking products to guide action, including monitoring the progress of New Zealand's 'Smokefree Generation' and consultation with Tasmanians
- 4.5** Expand smoke free areas around Department of Health sites to include building, land and surrounds, and provide enhanced support for staff to quit
- 4.6** Develop a statewide approach to smoke free areas, including consistent, feasible and acceptable ways to manage compliance in these spaces
- 4.7** Continue to regulate access, display and use of e-cigarettes and explore other ways to reduce the growing use of these products
- 4.8** Engage and inform elected representatives regarding their responsibilities to adhere to the World Health Organisation Framework Convention on Tobacco Control, including not engaging with tobacco industry representatives.

“ If it's not around, you're not going to buy it and you're not going to smoke.

– current smoker

”



NATIONAL ADVOCACY

There are actions that would contribute to reducing smoking in Tasmania that are best addressed in collaboration with the Australian Government and other states and territories.

This includes:

- Banning the online sales of smoking products
- Regulating smoking products so that they are less palatable and appealing to young people
- Plain packaging of e cigarettes and other emerging tobacco industry products
- Further increases in tobacco product excise
- Minimising the presence of illicit tobacco
- Improving availability of nicotine replacement therapy on the Pharmaceutical Benefits Scheme



ACTION AREAS



5 Strengthen and use the evidence base

The best available evidence underpins actions within the Tobacco Action Plan.

Where the evidence does not yet exist, we commit to testing initiatives and building an evidence base which can best support Tasmanians to be smoke free.

This includes tailoring initiatives to our unique State considering our communities, environments, services and laws.

We commit to continuing to evaluate our impacts to accelerate our progress towards the tobacco endgame.

We will:

- 5.1** Develop a Tasmanian Tobacco Research and Evaluation Strategy to determine research priorities and unmet needs, as well as create a framework to measure the impact of Tobacco Action Plan initiatives
- 5.2** Increase quality, coverage and frequency of qualitative and quantitative data about smoking, including data on e-cigarettes and other related products, to better guide and evaluate tobacco action

5.3 Build knowledge of health professionals, advocates and the general public on tobacco related issues through publicly available, plain language, up to date evidence briefs

5.4 Monitor volume sales of smoking products and use insights to target support for smoking cessation

5.5 Determine the most effective way for people who smoke to access nicotine replacement therapy and support services to help them successfully quit.

“No one has said to me ‘if you quit smoking we will support you’. Everyone just said ‘you have to stop smoking, you will die’. A hundred per cent. If I hadn’t been offered NRT I wouldn’t have gone on it.

– **successful quitter**





We commit to
continuing to
evaluate our impacts
to accelerate our
progress towards
the tobacco
endgame.

IMPLEMENTATION

Effective implementation will include the following:

1. Governance

The Minister for Mental Health and Wellbeing has overall responsibility for the Tasmanian Tobacco Action Plan, which sits under the Healthy Tasmania Five Year Strategic Plan.

Public Health Services will lead the implementation of this plan, in conjunction with a wide range of stakeholders who can support us to achieve our vision.

This will include development of an Implementation Plan outlining more specific actions, timelines and partnerships required for successful implementation.

Public Health Services will also develop a Communication Plan with key messages updated on an annual basis.

2. Collaboration

Reducing smoking in Tasmania is a shared responsibility. We are more effective when everyone plays a role.

Action to address smoking in Tasmania has in the past received support from all political parties. There are also existing partnerships with federal, state and territory governments and the non-government sector.

The Tasmanian Tobacco Control Coalition is the key advisory group supporting the development and implementation of this Plan. It includes members with expertise in health and tobacco control from government and non-government sectors.

The Coalition will expand to include other key stakeholders that can both inform and influence action relevant to 'hard to reach' priority populations.

Working groups and other collaborations will assist with implementation, extending reach and including new partners who want to make a difference.



3. Monitoring and Evaluation

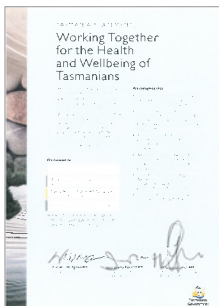
Public Health Services, with the support of the Tobacco Control Coalition, will monitor and report on the progress made throughout the plan.

This will include a midway progress report in 2024, providing an opportunity to review priorities and shift work if required. We will complete a final report in 2026.

The evaluation framework in the research and evaluation strategy will guide the progress reports, including new and ongoing indicators to gauge progress.

We will share progress with the Healthy Tasmania Steering Committee, the Department of Health's Interagency Drug Policy Committee, relevant stakeholders and the Tasmanian community.

APPENDIX I: GUIDING DOCUMENTS



The Tasmania Statement: Working together for the health and wellbeing of all Tasmanians

The Tasmania Statement, originally signed in 2019, is a commitment to collaboration on long term solutions to address the social and economic factors that influence health. It recognises that Tasmania's open spaces, diverse communities and strong relationships are key to supporting continued improvements in health and wellbeing. The Statement was updated in October 2021 to directly reference the impact of climate change and poverty on health and wellbeing.



Tasmanian Tobacco Control Plan Progress Report 2021

This Report describes progress made in reducing smoking prevalence in Tasmania over the life of the Tasmanian Tobacco Control Plan 2017–2021. It includes an overview of key actions, data trends and recommendations for future actions. It provides a foundation for this Tobacco Action Plan.



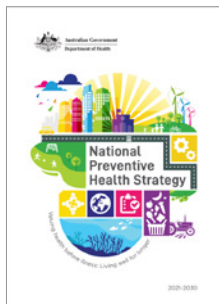
Healthy Tasmania Five-Year Strategic Plan 2022–2026

Developed by the Tasmanian Department of Health, this Strategic Plan guides preventative health activity across the whole of government and with communities. Smoke-free communities is one of eight focus areas. Actions include:

- Strengthen tobacco control laws to reduce the visibility and availability of smoking products, and regulate new and emerging tobacco industry products
- Deliver a Smoking Prevention Package for Young People to encourage young people to be smoke free
- Deliver media campaigns to increase public awareness of the health risks of smoking, prompt quit attempts and address relapse
- Strengthen efforts to support Tasmanians from priority populations to quit smoking through community-led, culturally appropriate approaches that are tailored to families, social networks, workplaces and local communities
- Implement initiatives within our health systems to support both staff and patients to be smoke free, including antenatal interventions, enhanced brief intervention practices, and support for sites to become smoke free.

The Tobacco Action Plan sits subordinate to this Strategic Plan.

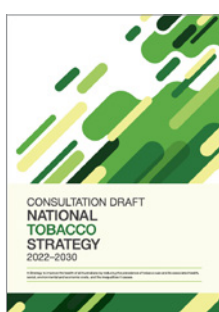
APPENDIX I: GUIDING DOCUMENTS



4

National Preventive Health Strategy 2021–2030

Developed by the Australian Department of Health, this Strategy aims to build a sustainable prevention system to address the increasing burden of disease, reduce inequity and increase preparedness for emerging health threats. A key action is reducing tobacco use.



5

National Tobacco Strategy 2022–2030

Developed by the Australian Department of Health, this Strategy aims to improve the health of all Australians by reducing the prevalence of tobacco use and its associated health, social, environmental and economic costs, and the inequities it causes. In developing the Tasmanian Tobacco Action Plan, it is acknowledged that action is required at both a state and national level to reduce the harms from smoking.

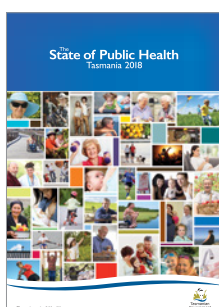


6

WHO FCTC

This is a global health treaty that was developed by the World Health Organisation to advance international cooperation to protect present and future generations from the ill-effects of tobacco use.

Australia is a signatory to the FCTC and reports on progress to implement the convention every two years. This plan aims to be consistent with the FCTC.



7

State of Public Health Report 2018

This is a report to the Tasmanian Parliament that is required by the Public Health Act 1997 every five years. It provides an appraisal of trends in performance across public health and makes recommendations as required to promote and improve the health status of Tasmanians.

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We are grateful to people who smoke and recent quitters who participated in focus groups discussions. Through sharing your lived experiences on barriers and enablers to quitting smoking we can continue to adapt and progress strategies to support more Tasmanians to be smoke free.

Thank you to the many stakeholders who enthusiastically participated in workshops in the north and south of the state to develop this Plan. Your diverse perspectives have helped in determining strategies to address this complex health, social and economic issue. In particular, we are grateful to members of Tasmania's Tobacco Control Coalition who have been generously sharing their expert advice to Public Health Services on tobacco issues since 2004.

NOTES

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