



# Policy and Practice Brief

After our final Policy and Practice Brief, a peak Aboriginal organisation asked us to re-analyse our results just for people from *remote* areas. We have now written a paper describing the predictors and reasons for quitting in *remote* areas.

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## Predictors of *starting* and *sustaining* quit attempts in remote areas

Health staff in remote areas can be encouraged to continue their focus on promoting smoke-free homes to protect children from secondhand smoke. We found that smokers who lived in smoke-free homes were more likely to start and sustain quit attempts than those who lived in homes where people smoked inside.

Health staff in remote areas can be encouraged to continue their excellent work in providing regular encouragement to all smokers to quit. More smokers who recalled receiving this advice to quit had made a quit attempt. Smokers with higher nicotine dependence may require more support to stay quit, but non-daily and other less dependent smokers are more likely to stay quit.

Family and friends are an important source of support to quit smoking. Health staff could encourage smokers to draw on support from their friends and family to quit.

We found different factors predict starting and sustaining quit attempts.

Wanting to quit and other indicators of motivation only predict starting but not sustaining quit attempts.

Health concerns, price, setting an example to kids and concerns about the effects of secondhand smoke on others were the most common reasons for smokers thinking about quitting.



Local research assistants Bianca Turney and Tina Ewan from Puntukurnu Aboriginal Medical Service in remote WA

## Why remote areas?

Most Aboriginal and Torres Strait Islander people live in cities and towns where smoking prevalence is falling. Smoking prevalence is higher in remote areas than non-remote areas.

Smoking prevalence has not fallen in remote areas, but there are encouraging improvements in smoking initiation, quit attempts in the past year (but not successful quitting), smoking intensity and smoke-free homes.

# For more information

- Thomas DP, Panaretto KS. Predictors and reasons for quitting smoking in remote Aboriginal and Torres Strait Islander communities. Health Promot J Austral 2021 <https://doi.org/10.1002/hpia.485>.

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## Key findings

*We analysed data from the 539 Aboriginal and Torres Strait Islander adults from remote areas who reported smoking at least weekly when they completed their baseline survey at either Wave 1 (April 2012 – October 2013) or Wave 2 (August 2013 – August 2014).*

### Predictors of quit attempts

- Smokers were more likely to have made a quit attempt in the past year if they were younger, were unable to buy essentials due to money spent on smokes (known as smoking-induced deprivation), were more stressed, reported several pro-quitting motivations and attitudes (wanting to quit, very worried that smoking will damage their health, they would benefit very much from better health if quit, and disagreed that they enjoy smoking), had an effective smoke-free home, or were encouraged to quit by a health professional or by family/friends.

*Local research assistants Bianca Turney and Tina Ewan from Puntukumu Aboriginal Medical Service in remote WA*

- In contrast, these smokers who had made a quit attempt were more likely to have sustained their last quit attempt for one month or more if they had year 12 or higher education, were employed, had no smoking-induced deprivation, were less nicotine-dependent, chewed pituri or an had an effective smoke-free home.



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