

Barwon South West Public Health Strategy

Forum 2 - Strengthening regional collaboration to improve health



BARWON
SOUTH
WEST
Public Health Unit

Strengthening a regional approach to reducing harm from nicotine

Purpose

The Barwon South West (BSW) Public Health Unit Catchment Plan (2023-2029) outlines the direction for improving health and well-being for the next six years and identifies eight health priority areas, including reducing tobacco and e cigarette related harm. The second BSW Public Health Strategy Forum provided prevention ecosystem partners with an opportunity to identify opportunities to strengthen a regional approach to reducing harm from nicotine.

Who attended?

A total of 68 participants attended the forum, 35 % representing health services, 35 % representing local government, 25 % NGOs and 5 % state government.

What we did

Prevention partners were asked to identify regional opportunities to strengthen a regional approach to reducing harm from nicotine across three domains, cessation, community/ people and systems. A total of 253 opportunities were identified.

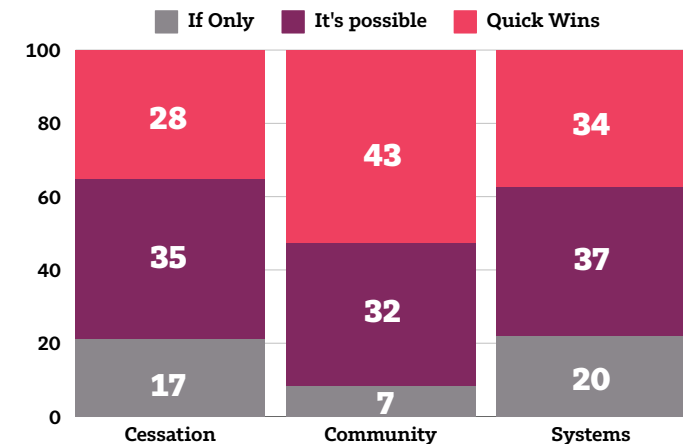
Domain	Description	Number of opportunities identified
Cessation	Opportunities to access and participate in cessation supports and programs	80
Community	Develop skills and knowledge of individuals through education and resource development. Engage with community members to better understand needs and codesign local and regional strategies.	82
Systems	Opportunities to influence policy development and implementation and the creation of supportive environments.	91

Partners were asked to classify each opportunity as either a 'quick win', 'it's possible' or 'if only'.

Quick wins were opportunities that could be actioned or changed to produce a noticeable improvement or progress in a relatively short period and were within the sphere of influence of the BSW ecosystem partners.

It's possible were opportunities that could be actioned or changed to produce a noticeable improvement or progress but over a longer period of time. These usually require higher levels of collaboration and resources but still within the partners sphere of influence.

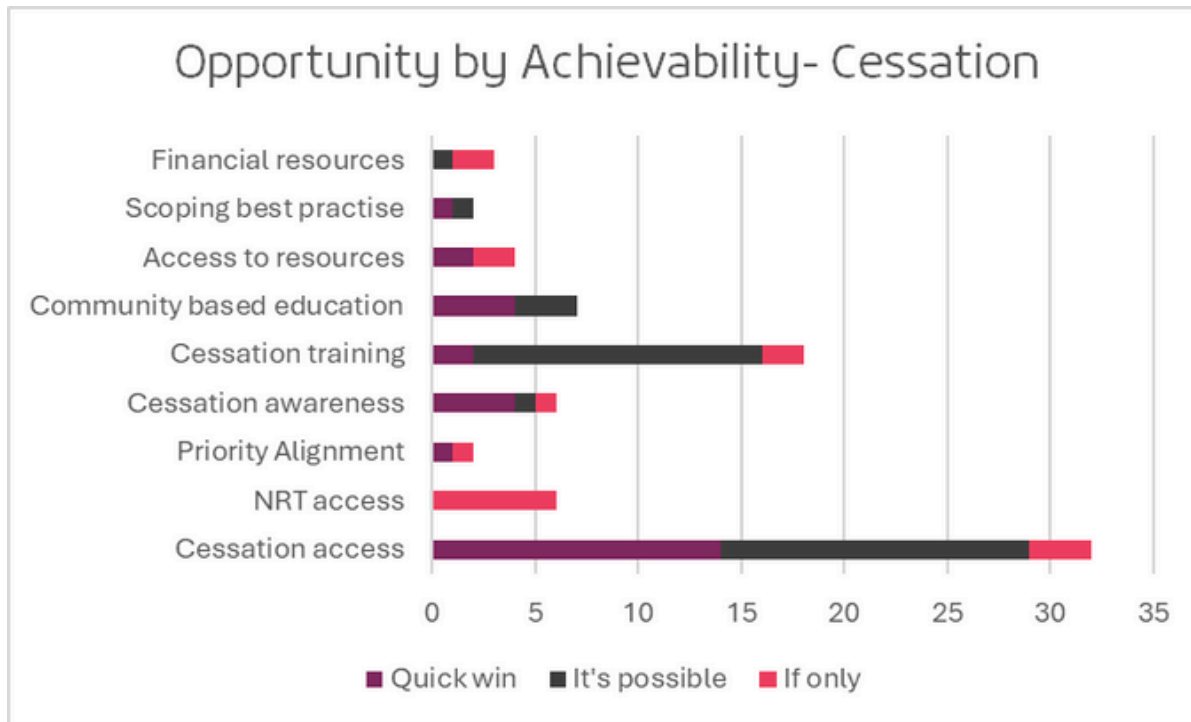
If only requires action from organisations with influence and resources outside of the BSW prevention ecosystem and requires prevention partners to advocate for change. Graph One provides a summary of the Number of opportunities by domain and achievability.



Cessation



What we heard...



Achievability

Cessation awareness was viewed as a 'quick win'. Community based education was also viewed as both a 'quick win' and 'it's possible'.

Cessation training was largely viewed as 'it's possible' requiring a longer period of time to achieve.

NRT access was viewed as 'if only' and therefore an action that requires influence and resources from outside of the prevention sector.



Cessation



What we heard...

Financial Resources (3 responses)

- Funding to increase cessation supports and collaborations.

Scoping best practices (2 responses)

- Promote cessation success stories across the region and build evidence-based practice and research.

Access to Resources (4 responses)

- Create and share resources across the prevention sector, including resources in different languages.

Community based education (7 responses)

- Community events are used as opportunities to increase knowledge of the impacts of smoking/vaping. For example, Read the Play, Field Days.

Cessation

80

Opportunities

Organisational
Development

Resources

Regional
Partnerships

Developing
Skills

Workforce
Development

Cessation Access (32 responses)

- Scope existing cessation supports across the region.
- Identify service demand - including priority population groups.
- Identify, standardise and expand service referral pathways and follow-up.
- Incorporate nicotine use in intake assessment procedures patient records, and care plans.
- Cessation promotion - QR codes to access cessation supports are available across diverse settings.
- Strengthen partnerships to co-ordinate approaches to cessation access.

Access to Nicotine Replacement Therapy (6 responses)

- Scope availability, affordability and funding for NRT, particularly for priority population groups.

Priority Alignment (2 responses)

- Cessation access and education prioritised across government (DH and DET).
- Audit Local Government Municipal Health and Wellbeing plans for nicotine priority.

Cessation awareness (6 responses)

- Build awareness of cessation supports across health and community workforce.

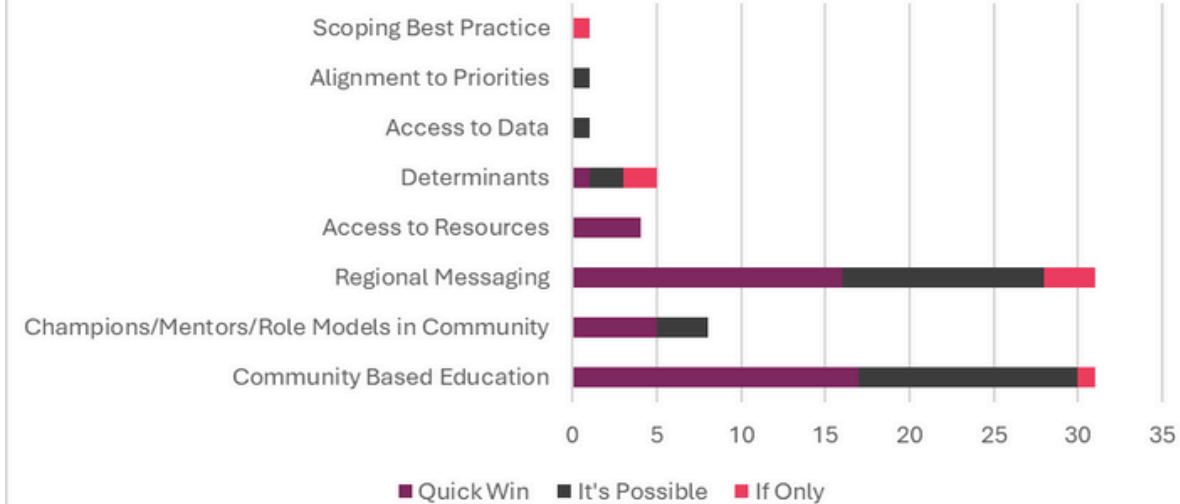
Cessation training (18 responses)

- Identify qualifications required for cessation support program delivery.
- Scope the regional workforce that could be trained to deliver cessation programs, including health practitioners, GPs, clinicians, maternal child health.
- Facilitate a regional approach to workforce training.
- Establish a community of practice to enable knowledge sharing and practice development.
- Facilitate access to professional development for cessation workers, including the establishment of a workforce network.

Community

What we heard...

Opportunities by Achievability- Community



Achievability

'Quick wins' were identified in access to resources and engaging champions/mentors as role models in community.

The highest number of opportunities identified were regional messaging and community-based education. These were also regarded as both 'quick wins' and 'it's possible'.



34

Quick Wins



37

It's Possible

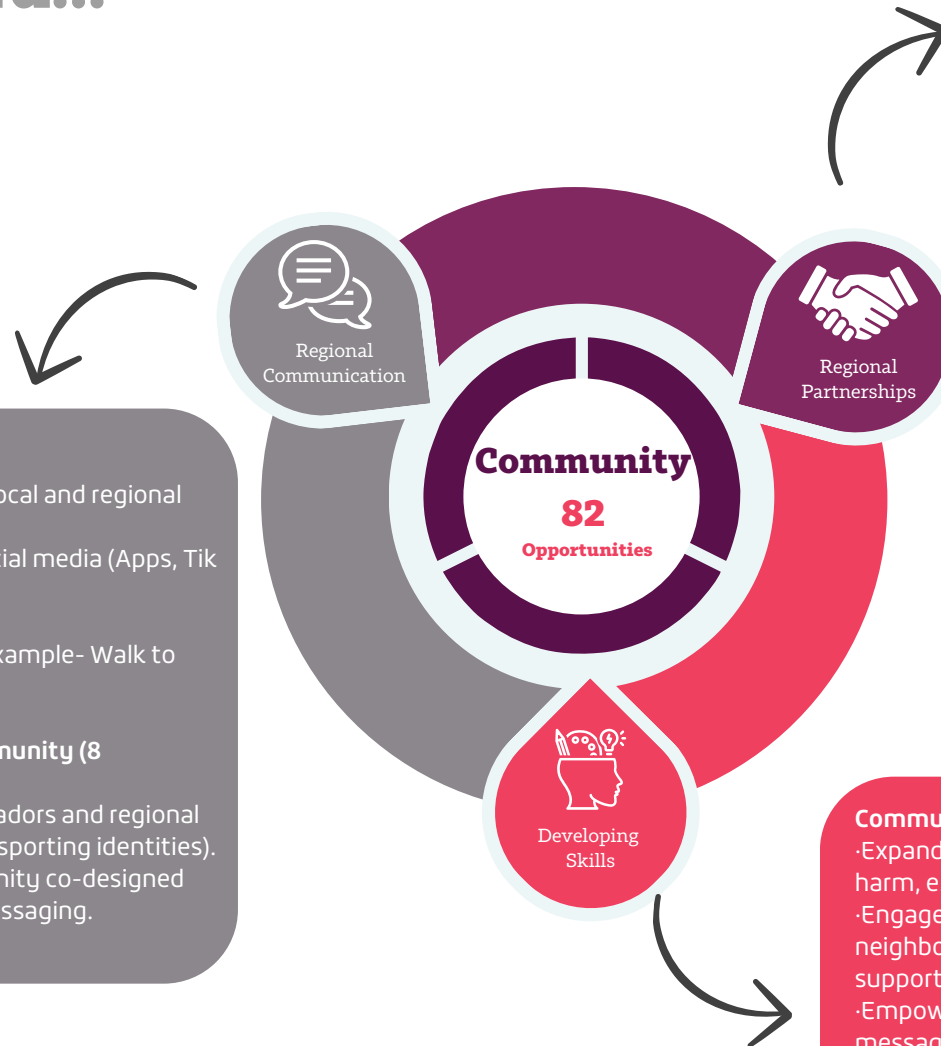


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If Only

Community

What we heard...



Regional Messaging (31 responses)

- Develop a regional messaging guide for local and regional campaigns.
- Disseminate regional messages using social media (Apps, Tik Tok, Podcasts).
- Develop strategic communication plan.
- Community call to action activities (for example- Walk to QUIT).

Champion/Mentors/Role Models in Community (8 responses)

- Identify community champions, ambassadors and regional identities to deliver messages (e.g. peers, sporting identities).
- People with lived experience and community co-designed processes inform content for regional messaging.

Access to resources (4 responses)

- Develop nicotine management resources/toolkits for sporting clubs, maternal child health services and local government.
- Engage young people to design resources and educational material.

Scoping best practice (1 response)

- Evidence and research used to expand knowledge of the drivers of nicotine use.

Access to Data (1 responses)

- Data sharing.

Determinants (5 responses)

- Expand knowledge and awareness of the impacts of the psychological, social and economic determinants of health on nicotine use.

Alignment of priorities (1 response)

- Collaboration between government agencies and sector.

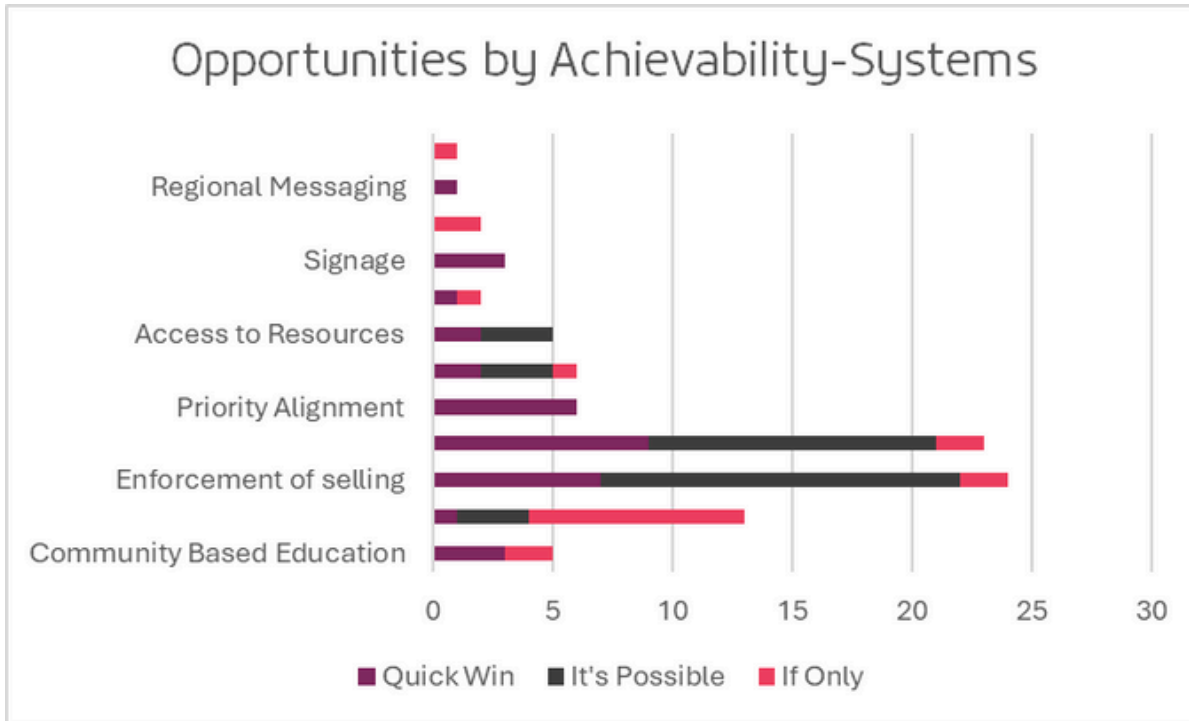
Community Based Education (31 responses)

- Expand existing community education programs to include nicotine harm, e.g. heart safe, schoolies week, immunization, safe partying.
- Engage local workplaces, community groups, sporting clubs, and neighborhood houses to educate community on harms of nicotine and support for cessation.
- Empower local communities to codesign initiatives and tailor messages for priority population groups. For example Changing the Festival Culture (18–25-year-olds).
- Parent education.

Systems



What we heard...



Achievability

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34
Quick Wins

37
It's Possible

20
If Only

Systems



What we heard...

Resources (1 response)

- Funding

Enforcement of selling (24 responses)

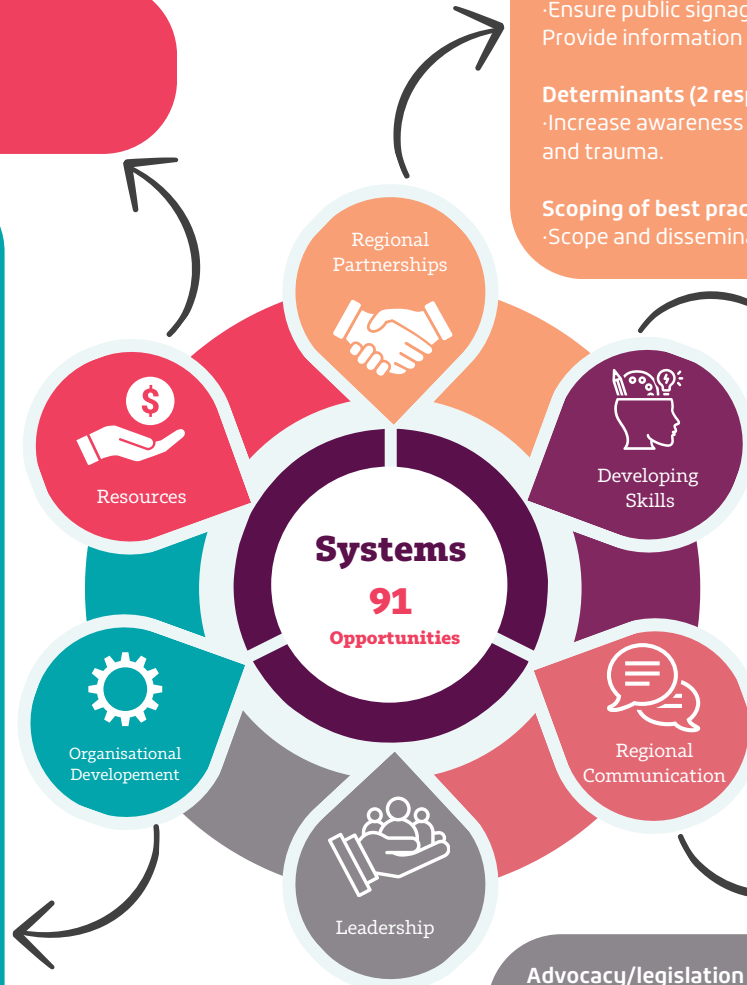
- Build public and retailer awareness of the tobacco reforms.
- in surveillance and enforcement.
- Partner with retailers, local government and police to clarify roles and responsibilities ensure compliance.
- Build the capacity of local government (EHOs) to monitor and enforce regulations relating to the sale to minors.
- Increase inspections of premises to educate retailers on new reforms.
- Address non-compliance through education and fines.
- Reporting of illegal supply
- Advocate for resources to enforce fines.

Nicotine free spaces (23 responses)

- Monitor smoke free spaces to ensure compliance e.g dining, sporting clubs, schools, public spaces.
- Extend current smoke free areas eg community events, festivals, sporting events, night clubs.
- All council run and funded events become smoke and vape free.
- Remove cigarette dispensers from bars, clubs and taverns.
- Incentivise nicotine free policies in community/sporting groups in local government lease agreements – e.g required a tobacco policy or nicotine free area
- Support community / sporting groups to develop smoke free policies.
- Regional messaging to create awareness of smoke free zones and legislation.

Priority Alignment (6 responses)

- Nicotine management identified as a priority across local government departments and other ecosystem partners
- Consistent goals and KPIs used across the region.
- Reporting and monitoring on policy development and implementation.
- Local government policy and services are aligned to the Health and Wellbeing Act.



Access to data (6 responses)

- Improve access to and use of local and priority population smoking and vaping data to inform planning and management strategies

Access to resources (5 responses)

- Enable access to shared resources to support the development of policies, procedures and frameworks in various settings.

Signage (3 responses)

- Ensure public signage and butt bins includes vaping free zones.
- Provide information on cessation support through QR code on signage.

Determinants (2 responses)

- Increase awareness of the drivers of nicotine use and determinants such as housing stress and trauma.

Scoping of best practice (2 responses)

- Scope and disseminate best practice.

Community Based Education (5 responses)

- Advocate for nicotine education to be compulsory in primary and secondary schools.
- Profile promising practice examples across community and school settings.
- Advocate for the Koori Education Support Officers to deliver health promotion education.

Regional Messaging (1 response)

- Dob in a vaper

Advocacy/legislation (13 responses)

- Advocate for policy change at all levels of government
- Review federal supply policy.
- Advocate for private health insurance agencies to incentivise cessation.
- Advocate for legislation to phase out vapes and cigarettes.
- Marketing- cigarette packages should also show harms of vaping.
- Medicare access from 13 years of age.
- Increase restrictions on the environmental impacts of nicotine.



Partners in the Barwon South West prevention ecosystem will be invited to work with the BSWPHU to prioritise and translate these opportunities into regional action.

Acknowledgements

Thank you to those organisations that gave their time and their knowledge and expertise to workshop opportunities and ideas.

Ambulance Victoria
Barwon Health
Barwon South West Public Health Unit
City of Greater Geelong
Colac Area Health
Colac Otway Shire
Corangamite Shire
Cultura
Department of Families Fairness and Housing
Glenelg Shire Council
Hesse Rural Health

Meli
National Centre for Farmer Health
QUIT
Surf Coast Shire Council
Timboon District Health Service
Terang & Mortlake Health Service
Timboon and District Healthcare Service
Wathaurong Aboriginal Cooperative
Western District Health Service
Western Victorian Primary Health Network Pty Ltd

Glossary:

Developing Personal Skills- Upskill and educate in key settings
Organisational Development- Policies, regulations, structures and processes
Workforce Development- Skills development, training and professional support
Regional Communications- Engage, Develop and Inform
Regional Partnerships -Resources, evidence-based practice and collaborative action
Leadership- Advocate for change
Resources - Financial