



Measuring progress against the National Tobacco Strategy 2012–2018

Introduction

The National Tobacco Strategy 2012–2018 (NTS) sets out the current framework to reduce tobacco-related harm in Australia. Progress was measured against each of the outcome indicators specified in the NTS (and an additional 6 indicators), at the midpoint of the Strategy (up to 2015). These indicators cover five smoking phases: exposure, uptake, transition, established smoker and cessation.

Method/Approach

Seven national data sources were used, with at least two collection periods for each indicator—baseline (collected prior to the commencement of the NTS) and midpoint (up until the end of 2015). Significance testing was undertaken for survey data and trends between collection years for each indicator were presented as: statistically significant decrease from baseline data; statistically significant increase from baseline data; or no statistically significant change.

Data sources	Years
National Drug Strategy Household Survey (NDSHS)	2010 and 2013
Australian Secondary School Students' Alcohol and Drug Survey (ASSAD)	2011 and 2014
National Health Survey (NHS)	2007–08 and 2014–15
National Aboriginal and Torres Strait Islander Social Survey (NATSISS)	2008
Australian Aboriginal and Torres Strait Islander Health Survey (AATSISHS)	2012–13
National Perinatal Data Collection (NPDC)	2011 and 2013
National Prisoner Health Data Collection (NPHDC)	2010 and 2015

Key findings

The majority of indicators showed positive progress, particularly for exposure to tobacco smoke, uptake of smoking, transition to established smoking, and regular smoking among young people, adults and Aboriginal and Torres Strait Islander people. Statistically significant improvements from the baseline to the midpoint estimates were reported in 11 of the 14 indicators and the remaining 3 indicators showed no significant change. None showed a significant, unfavourable change.

Indicator results, by smoking phase

		Baseline ^(a)	Midpoint ^(b)
Exposure	Indicator 5.2: Fewer women smoking while pregnant (first 20 weeks)	12.9%	11.3%
	Indicator 6: Fewer children exposed to second-hand smoke at home	6.1%	3.7%
	Indicator 7: Fewer adults exposed to second-hand smoke at home	4.0%	2.4%
Uptake	Indicator 9: People are delaying the onset of tobacco smoking	15.4 years	15.9 years
	Indicator 10: Fewer people trying cigarettes (secondary school students)	23.3%	19.1%
	Indicator 10: Fewer people trying cigarettes (adults)	62.5%	57.0%
Transition	Indicator 2: Fewer young people making the transition to established patterns of smoking (secondary school students)	3.5%	2.7%
	Indicator 2: Fewer young people making the transition to established patterns of smoking (young adults)	29.4%	23.2%
Established Smoker	Indicator 1: Fewer young people smoking regularly	6.7%	5.1%
	Indicator 13: Fewer young people smoking	8.9%	7.5%
	Indicator 3: Fewer adults smoking regularly	18.9%	14.5%
	Indicator 14: Current adult smokers smoking occasionally (weekly or less than weekly)	9.0%	9.6%
	Indicator 8i: Fewer adults smoking regularly among Aboriginal and Torres Strait Islander people	47.7%	44.4%
Cessation	Indicator 8ii: Fewer adults smoking regularly among people of low socioeconomic status ^(c)	28.5% ^(d) 21.4% ^(e)	22.1% ^(d) 17.4% ^(e)
	Indicator 4: More smokers attempting to quit	44.8%	46.7%
	Indicator 11: Adult ever-smokers are quitting at a younger age	35.3 years	35.4 years
	Indicator 12: More adult ever-smokers no longer smoking	47.4%	51.8%

✓ significant and favourable trend ≈ no significant change

(a) Baseline data collection year ranges from 2007–08 to 2011. (b) Mid-point data collection year ranges from 2013 to 2014–15.

(c) Index of Relative Socio-Economic Advantage and Disadvantage 2011. (d) Lowest socioeconomic quintile. (e) Second-lowest socioeconomic quintile.

Watching the gap

While improvements to smoking rates were seen across all population groups, greater progress was achieved for some groups than for others, with the gap in smoking rates within particular groups increasing for some indicators between the baseline and midpoint time points.

The rate ratio and rate difference can both be used to measure the gap. Rate ratio, which is used in this analysis, measures the relative gap while the rate difference measures the absolute difference and provides information on the magnitude of improvements required to close the gap.

The gap in smoking rates between Indigenous and non-Indigenous people widened between baseline and midpoint for most indicators despite the fact that Indigenous rates are declining, with similar findings for people living in *Remote and very remote* areas (compared with *Major cities*) and single-parent households (compared with couple parent households).

There were mixed findings for people living in the lowest socioeconomic area (compared with those living in the highest area).

Is the gap between population groups widening or narrowing between baseline and midpoint?^(a)

	Exposure			Established smoker	
	Women smoking during the first 20 weeks of pregnancy	Children exposed to second-hand smoke at home	Adults exposed to second-hand smoke at home	Adults smoking regularly	Young people (secondary school students) smoking regularly
Aboriginal and Torres Strait Islander people (compared with non-Indigenous people)	↔	↔	→←	↔	↔
People living in <i>Remote and very remote</i> areas (compared with <i>Major cities</i>)	↔	↔	→←	→←	↔
People living in the lowest socioeconomic areas (compared with those living in the highest area)	↔	→←	→←	↔	—
Single-parent households (compared with couple parent households)	↔	→←	↔	↔	..

↔ The gap in rate ratios has **widened** (by at least 0.2) between baseline and midpoint.

→← The gap in rate ratios has **narrowed** (by at least 0.2) between baseline and midpoint.

— There was no change to the gap in rate ratios between groups, between baseline and midpoint.

.. Not applicable.

(a) Selected indicators.

Conclusion

The headline results indicate desirable progress in meeting a substantial number of the NTS objectives, with additional analysis revealing that some groups did not achieve progress equal to that of their more advantaged counterparts.

Implications for policy

Reporting midpoint progress on the indicators assists the Australian, state and territory governments in monitoring progress towards the achievement of the goal, objectives and targets of the NTS 2012–2018.

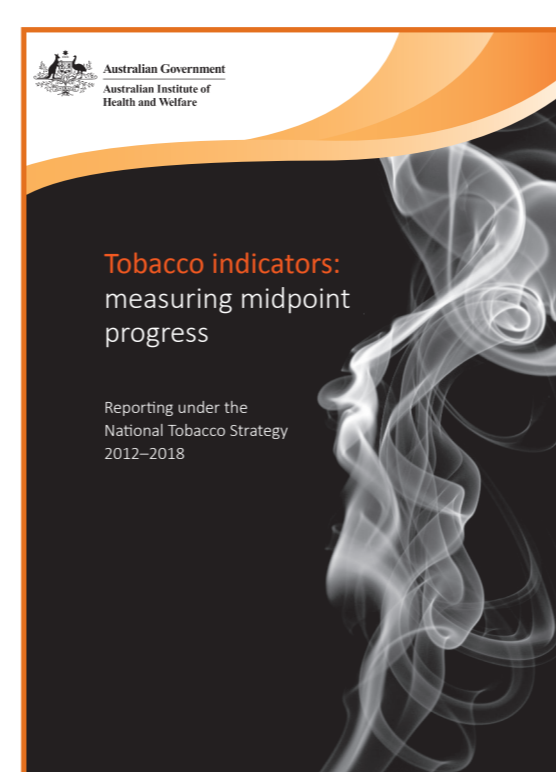
There have been significant reductions in the smoking rate in Australia but the impact of tobacco use is still high (AIHW 2016a) and efforts to continue the reduction of harm from smoking remain vital.

Find out more

Australian Institute of Health and Welfare 2016. Tobacco indicators: measuring midpoint progress—reporting under the National Tobacco Strategy 2012–2018. Drug statistics series no. 30. Cat. no. PHE 210. Canberra: AIHW.

Contact

Cathy Claydon, Australian Institute of Health and Welfare
Phone: (02) 6249 5159, email: cathy.claydon@aihw.gov.au
Web: www.aihw.gov.au/alcohol-and-other-drugs/



References

AIHW (Australian Institute of Health and Welfare) 2016. Australian Burden of Disease Study: impact and cause of illness and death in Australia 2011. Australian Burden of Disease Study series no. 3. Cat. no. BOD 4. Canberra: AIHW.

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