2018
Annual Report
Cancer Society Social & Behavioural Research Unit
Te Huka Rakahau ārai Mate Pukupuku

Department of Preventive and Social Medicine
University of Otago, New Zealand
Our Vision
To make real differences to the well-being of others via high-quality research
## Contents

**Foreword** 3  
**Our People (during 2018)** 4  
**SBRU Collaborators** 6  

### Project reports

1. **Smokefree** 8  
   1.1 Estimating the effect of a potential policy to restrict tobacco retail availability in NZ 8  
   1.2 Exploring small retailers’ claims of reliance on tobacco sales 9  
   1.3 Geospatial mapping of different tobacco retail reduction policies 10  
   1.4 Systematic review on retail access to tobacco and smoking 10  
   1.5 Electronic nicotine delivery systems retailing 11  
   1.6 Dual use of electronic cigarette and smoked tobacco: A qualitative analyses 12  
   1.7 Information-seeking by electronics cigarette users: what do they look for and what do they find? 13  

2. **Supportive care in cancer** 14  
   2.1 Returning to work after a cancer diagnosis 14  
   2.2 Oranga Tu: Movember TrueNTH Māori Prostate Cancer project 15  
   2.3 Citizens’ deliberation on the merits of changing the law to allow euthanasia and physician-assisted dying 16  
   2.4 How New Zealanders talk about assisted dying online 17  
   2.5 Spirituality in Public Health Study 18  

3. **Ultraviolet radiation (UVR) studies** 19  
   3.1 Sun protection in educational contexts 20  
   3.2 An audit of cosmetic tanning providers and monitoring of TradeMe®, for second-hand sunbed sales 21  
   3.3 Testing a sun protection intervention at secondary school sports days 22  
   3.4 Using wearable cameras to assess sun protection and shade availability in New Zealand’s outdoor recreational spaces 23  
   3.5 Using Google Earth to assess shade for sun protection in urban recreational spaces 24  
   3.6 Unintended sunburn in a NZ population 25  
   3.7 Unintended sunburn as an explanation for sunburn paradoxes 26  
   3.8 Traditional media coverage of sun protection issues during springtime in NZ 26  

4. **Health related policy documents in National Sporting Organisations** 27  
   4.1 Consideration of Healthy Food and Beverage and Alcohol Policy by New Zealand National Sporting Organisations 27  
   4.2 Consideration of SunSmart Policy: Documents by New Zealand National Sporting Organisations 28  
   4.3 Consideration of SmokeFree Policy: Documents by New Zealand National Sporting Organisations 29  

**Contributions to teaching** 30  
**Contribution to student supervision** 30  
**Community contribution** 30  
**SBRU staff publications for 2018** 31
We are very pleased to present our annual report on the Cancer Society’s Social and Behavioural Research Unit (SBRU) for 2018. The important research undertaken by the SBRU over this time period would not have been possible without funding and support from the Cancer Society of New Zealand. This is our 28th year of research to inform efforts for cancer control in Aotearoa New Zealand, and 20 years since the SBRU produced its first annual report. The 1998 SBRU annual report highlighted the importance of communicating our cancer prevention findings to those most at risk, in order to be successful at reducing cancer rates. This is something that the SBRU currently focuses very strongly on when disseminating our research findings. We now have new technology and communication methods available, which we apply to ensure that our research knowledge reaches the people that need it the most. The numerous methods we use to communicate our research findings are highlighted in this report.

We are very proud of our postgraduate students. During the 2018 year Bronwen McNoe began her PhD in the area of the primary prevention of skin cancer. Four students undertook research for their Master of Public Health qualification. One of these, Sarah Wood, graduated during the year, her Masters project explored how planning and evaluation happens in New Zealand’s health promotion work. Mary Cane Demecillo also completed a Bachelor of Medical Science with Honours. Noeleen Venter undertook a summer studentship looking at nutrition and alcohol policies in national sporting organisations.

We welcome Dr Rachael McLean to the SBRU team as Co-Director and Principal Investigator in nutrition and alcohol related research. Dr McLean's research expertise is in the field of public health nutrition and epidemiology, including risk factors for prevention and better management of chronic disease. Dr McLean also has an interest in public health approaches to improving nutrition at an individual and population level with research into measurement, policy and strategies for individuals who struggle to maintain optimal nutrition in an environment that encourages over-consumption of energy, alcohol, sodium and sugars. Dr McLean’s work is directly relevant to the Cancer Society’s priority areas.

Although many of the researchers within the SBRU have changed over time, Professor Rob McGee has been a part of the SBRU since 1990. Professor McGee will be retiring from his academic position in early 2019, and he will be sorely missed from the unit. His research interests have included tobacco control, programme evaluation in health promotion, and the health and well-being of adolescents and young adults. Professor McGee has made significant contributions to public health in New Zealand during this time, and has published 135 peer reviewed journal articles, and supervised 20 PhD and 13 Master students in his career. In addition to his research, Rob has also been Head of the Department of Preventive and Social Medicine, and a long serving board member of the Otago/Southland branch of the Cancer Society. We thank Rob for the contribution he has made, and wish him all the best in his retirement.

Finally, each year we wish to send a big thank you to all our Unit staff, our collaborators and most importantly the participants of our 2018 research programme for the collective contributions to help reduce the impact of cancer in Aotearoa New Zealand.

CO-DIRECTORS LOUISE MARSH, RICHARD EGAN & RACHAEL McLEAN, MARCH 2019
Our People (During 2018)

FTE = Full Time Equivalent

Dr Louise Marsh
(Smokefree)
Co-Director
Senior Research Fellow
Funded 0.5 FTE by The Cancer Society.

Dr Richard Egan
(Supportive Care)
Co-Director and Senior Lecturer
Funded 0.2 FTE by The Cancer Society.
Holds a full time position at the Department of Preventive and Social Medicine, University of Otago.

Dr Rachael McLean
(Nutrition)
Co-Director and Senior Lecturer
Funded 0.4 FTE by The Cancer Society.

Professor Rob McGee
(Smokefree and Alcohol)
Professor
Funded 0.2 FTE by The Cancer Society.

Associate Professor Tony Reeder
(UVR studies)
Research Associate Professor
Funded 0.2 FTE by The Cancer Society.

Mrs Bronwen McNoe
(UVR studies)
Senior Research Fellow
Funded 0.6 FTE by The Cancer Society.

Dr Lindsay Robertson
(Smokefree, until June 2018)
Research Fellow
Funded 0.4 FTE by The Cancer Society.

Dr Jerram Bateman
(Supportive care & Smokefree, from June 2018)
Research Fellow
Funded 0.8 FTE by The Cancer Society.
Anna Graham-DeMello  
(Supportive Care)  
Assistant Research Fellow  
Funded 0.2 FTE by The Cancer Society.

Shawnee Brausch  
(Alcohol)  
Assistant Research Fellow and Master’s student  
Funded 0.4 FTE by The Cancer Society.

Sarah Wood  
(Supportive Care, from April 2018)  
Assistant Research Fellow  
Funded 0.5 FTE by The Cancer Society.

Anne Cathrine Petersen  
Research Support Officer  
Funded 0.68 FTE by The Cancer Society.

Judy Clarke  
Master’s Student

Mary Cane Demecillo  
Bachelor of Medical Science Student

Linda Buxton  
Master’s Student

Noeleen Venter  
Summer Student
SBRU Collaborators

Department of Preventive & Social Medicine
Professor John Broughton
Elizabeth Butcher
Dr Claire Cameron (biostatistician)
Professor Jennie Connor
Dr Kimberly Cousins
Associate Professor Brian Cox
Associate Professor Sue Crengle
Dr Andrew Gray (biostatistician)
Dr Elia Iosua (biostatistician)
Professor Bob Hancox
Dr Rebecca Lilley
Dr Kate Morgaine
Professor Charlotte Paul
Dr Judith Sligo
Dr Mary Sneyd
Dr Trudy Sullivan
Faumuina Associate Professor Faafetai Sopoaga
Associate Professor Sheila Williams
Dr Emma Wyeth

Associate Professor Chrystal Jaye, Department of General Practice & Rural Health
Bernadette Jones, Department of Medicine, Wellington
Dr Lynette Jones, Physical Education
Paul Kane, Department of Radiation Therapy, Wellington
William Leung, Department of Public Health, Wellington
Dr Geraldine McLeod, Department of Psychological Medicine, Christchurch
Penny Minnoch, School of Physiotherapy, Christchurch
Dr Sue Pullon, Primary Health Care & General Practice Department, Wellington
Dr Robin Quigg, Manager, Undergraduate Entrance Scholarships
Dr Rose Richards, Centre for Pacific Health in Va’a o Tautai
Associate Professor Louise Signal, Department of Public Health, Wellington
Prof Sheila Skeaff, Department of Human Nutrition
Dr Paula Skidmore, Department of Human Nutrition
Moira Smith, Department of Public Health, Wellington
James Stanley, Department of Public Health, Wellington
Dr Rachael Taylor, Edgar Diabetes and Obesity Research Centre
Louise Thornley, Department of Public Health, Wellington
Dr Simon Walker, Bioethics Centre
Dr Sue Walthert, Dunedin School of Medicine
Dr Derek Woodward-Lehman, Centre for Theology & Public Issues, Department of Theology & Religion
Jessica Young, Department of General Practice & Rural Health

Other University of Otago Departments
Michelle Barr, Department of Public Health, Wellington
Associate Professor Joanne Baxter, Kōhatu – Centre for Hauora Māori, Division of Health Sciences
Mei-Ling Blank, Department of Marketing
Professor Andrew Bradstock, Department of Theology and Religion
Tim Chambers, Department of Public Health, Wellington
Frederieke Sanne Petrović-van der Deen, Department of Public Health, Wellington
Ryan Gage, Department of Public Health, Wellington
Professor Andrew Geddig, Faculty of Law
Dr Phil Gendall, Department of Marketing
Professor Grant Gillet, Bioethics Centre
Associate Professor Paul Hansen, Department of Economics
Professor Janet Hoek, Department of Marketing and Department of Public Health, Wellington
Dr Tristram Ingham, Department of Medicine, Wellington
Dr Chris Jackson, Department of Medicine

Other New Zealand Organisations
Associate Professor Martin Allen, Electrical and Computer Engineering, University of Canterbury
Aspire 2025, University of Otago Research Collaboration
Danny Bedingfield
Grant Berghan, Te Poari Matua o Raukawa
Hilda Johnson-Bogaerts, Director of The Selwyn Institute (of ageing and spirituality), Selwyn Foundation, Auckland
Cheryl Davies, Tu Kotahi Māori Asthma Trust
Dr Crile Doscher, Lincoln University
Marama Fox, Māori Party Co-Leader
Kathryn Fletcher, St Hilda’s Collegiate School, Dunedin
Dr Vanessa Hammond, Public Health South, Southern District Health Board, Wanaka
Hāpai Te Hauora, Auckland
Rachael Hart, CEO, Otago/Southland Cancer Society of New Zealand
Barbara Hegan, Health Promotion Agency, Wellington
Karen Hicks, Unitec
Marieke Jasperse, Victoria University, Wellington
Professor Ross Lawrenson, University of Waikato
Dr J. Ben Liley, NIWA, Lauder
Dr Sarah Lovell, School of Health Sciences, University of Canterbury
Dr Stephen Mark, Urologist
Dr Christina McKay, Victoria University School of Architecture
Dr Richard McKenzie, NIWA, Lauder
Dr Blair McLaren, Oncologist, Southern District Health Board
Associate Professor Sandy McLeod, OPMH, Burwood Hospital, Christchurch, Adjunct Associate Professor, Health Sciences Dept., University of Canterbury
Dr Bridget Mirtin-Veitch, Donald Beasley Institute: Disability Research and Education
Dr Lisa Te Morenga, Victoria University of Wellington
Professor John Raeburn, School of Public Health and Psychosocial Studies, Auckland University of Technology
Laurianne Reinsborough, Health Promotion Agency
Mary Schumacher, Hospice New Zealand
Tiffany Schwass, Prostate cancer specialist nurse
Professor Robert K. R. Scragg, School of Population Health, Auckland University
Trevor Simpson, Health Promotion Forum of New Zealand
Professor Alistair Stewart, School of Population Health, Auckland University
Jo Tuaine, Oncology nurse, Southern District Health Board
Marie Wales, Cancer Society Supportive Care
Graham Woodside, CEO Prostate Cancer Foundation

Dr Lisa Henriksen, Senior Research Engineer, Medicine - Stanford Prevention Research Center, Stanford University, USA
Dr Gill Hubbard, Co-Director Cancer Care Research Centre, School of Nursing, Midwifery and Health, University of Stirling, Highland Campus, Centre for Health Science, Inverness, Scotland
Trent Johnson, Medicine - Stanford Prevention Research Center, Stanford University, USA
Professor Rod MacLeod, Hammond Care and University of Sydney
Professor Rod MacLeod, Senior Staff Specialist, HammondCare and Conjoint Professor in Palliative Care, University of Sydney
Associate Professor Christina M. Puchalski, Medicine and Health Sciences, Director, George Washington Institute for Spirituality and Health, The George Washington University School of Medicine and Health Sciences, Washington, D.C., USA
Nina Schleicher, Medicine - Stanford Prevention Research Center, Stanford University, USA
Dr Lucy Selman, Department of Palliative Care, Policy & Rehabilitation, Cicely Saunders Institute, King’s College, London, England
Associate Professor Craig Sinclair, Director, Cancer Prevention Centre, Cancer Council Victoria, Australia Director, World Health Organisation Collaborative Centre for UV Radiation, Australia
Dr Lucy Popova, School of Public Health, Georgia State University, USA
Associate Professor Shane Sinclair, Spiritual Care Coordinator, Alberta Health Services, Cancer Care, Tom Baker Cancer Centre, Adjunct Assistant Professor, Division of Palliative Medicine, Department of Oncology, Faculty of Medicine, University of Calgary, Canada
Associate Professor Fiona Timmins, School of Nursing and Midwifery, Trinity College Dublin, Ireland
Pavla Vaneckova, Cancer Council NSW, Australia
Dr Caradee Wright, Environment and Health Research Unit, South African Medical Research Council, Pretoria, South Africa; Dept Geography, Geoinformatics and Meteorology, University of Pretoria, South Africa

Overseas Collaborators
Associate Professor Laurence Lepherd, School of Nursing and Midwifery, University of Southern Queensland, Australia
Professor Pamela Ling, University of California, San Francisco, USA
Professor Rod MacLeod, HammondCare and Conjoint Professor in Palliative Care, University of Sydney
In 2018, the SBRU Smokefree team continued its important work focusing on tobacco retailing to achieve a Smokefree Aotearoa 2025, aligning closely with the priorities identified in the tobacco control sector plan ‘Achieving Smokefree Aotearoa by 2025’. Three projects were published in Tobacco Control in 2018, one examining a retail reduction policy option, and the other examining tobacco retailers’ claims of their reliance on tobacco sales. Our research was also presented at international conferences as well as workshop presentations in New Zealand.

Progress was also made on several other projects, including two geospatial studies examining policy options for tobacco retail reduction in NZ, a systematic review focusing on the impact on youth of the density and proximity of tobacco retail outlets, and two projects exploring the sale of electronic nicotine delivery systems (ENDS) products in tobacco retail outlets. Three new projects were developed and funded in 2018 which will be undertaken in 2019. These include a study looking at the sale of tobacco in on-license premises, exploring the public’s perceptions of tobacco retail reduction policies, and a larger national study following up the work on tobacco retailers’ claims of their reliance on tobacco sales.

1.1 Estimating the effect of a potential policy to restrict tobacco retail availability in NZ

Substantially reducing tobacco retailer density is a key component of the Achieving Smokefree Aotearoa by 2025 Action Plan. Internationally, few jurisdictions have implemented tobacco retail reduction policies and where these policies do exist, ‘grandfathering’ is typically used, meaning existing retailers are exempt from restrictions.

Study aims

This study examined the possible impact on tobacco outlet density in New Zealand of a policy prohibiting new retail outlets from selling tobacco, but allowing existing retail outlets to continue selling tobacco until they ceased trading or relocated. We obtained data on numbers of tobacco outlets and the number of outlet ‘deaths’ recorded annually from 2006 to 2016.

Progress / results

Based on mean annual death rates, the total number of tobacco outlets could decrease by 50% by 2032 and a 95% reduction could be achieved by 2072. By the year 2025, the number of tobacco outlets could decrease by 27%; by 2050 this reduction could reach 84%. A policy that prohibited new retail outlets from selling tobacco, and grandfathered existing retailers, would be unlikely to achieve New Zealand’s target of a 95% reduction in tobacco outlet density within several decades of being enacted. Nonetheless, this policy could achieve a 50% reduction in tobacco retail availability in the first decade of implementation.

Dissemination

This study was published in Tobacco Control. A press release “Potential for less smoking with new tobacco retailer restrictions” also received considerable media attention. Furthermore, Louise Marsh presented the results at the In-House convention at the Department of Preventive and Social Medicine at University of Otago.

Project team

Lindsay Robertson and Louise Marsh.

Funding

Cancer Society of New Zealand.
1.2 Exploring small retailers’ claims of reliance on tobacco sales

A barrier likely to impede the adoption of policies to reduce retail availability of tobacco is opposition from tobacco retailers, particularly convenience store owners. Tobacco is a low profit product, yet convenience store retailers argue that tobacco increases footfall in their stores, thereby increasing overall profit due to tobacco being sold in conjunction with other products. Yet it is not known whether this argument is valid, or simply tobacco industry marketing and misinformation to retailers.

Study aims
To examine the prevalence and characteristics of tobacco purchases at convenience stores in Dunedin, New Zealand, through post-purchase intercept surveys at 20 Dunedin convenience stores.

Progress / results
Fourteen per cent of transactions contained tobacco (n=95/679); of those, 64% comprised tobacco only. Only 5% of all transactions included both tobacco and non-tobacco products. The mean number of non-tobacco items purchased was 1.9 for transactions containing only non-tobacco products and 1.7 for transactions containing both tobacco and non-tobacco products. After excluding the cost of tobacco, people who purchased tobacco and non-tobacco products spent on average $5.11 on non-tobacco items, whereas people who purchased only non-tobacco items spent on average $6.85.

Dissemination
This study was published in Tobacco Control. This research was also presented at several forums; Smokefree 2025 Research Symposium, the Cancer Society Auckland Northland meeting, and the Cancer Society National Office National Hui.

Project team
Lindsay Robertson, Louise Marsh, Janet Hoek, Phil Gendall, Claire Cameron, Trudy Sullivan, Elizabeth Butcher (nee Peterson).

Funding
Cancer Society of New Zealand.

“Tobacco products constitute a small proportion of items purchased from Dunedin convenience stores and are typically not purchased with non-tobacco items.”

Dr Louise Marsh
1.3 Geospatial mapping of different tobacco retail reduction policies

Tobacco is currently available from approximately 8,000 retail outlets in NZ, with around four times as many tobacco outlets in the most socioeconomically deprived neighbourhoods, compared to the most affluent neighbourhoods. Fewer tobacco outlets could reduce smoking initiation among young people who are susceptible to smoking, and help quitters remain abstinent after a cessation attempt. Policy options for reducing tobacco availability include prohibiting tobacco sales from certain types of retailers, only allowing sales from certain types of retailers, stipulating a maximum number of outlets in a given geographical area, or a requiring minimum distance between tobacco retail outlets.

Study aims

This project uses geospatial analysis to examine how the distribution of tobacco outlets would change under different policy scenarios, e.g. allowing tobacco sales at half the existing liquor stores (and nowhere else), or at pharmacies only, or requiring a minimum distance between tobacco retailers.

Progress / results

The tobacco retailer database was geocoded and analysis is being undertaken.

Project team

Louise Marsh, Crile Doscher (Lincoln University), Claire Cameron, Lindsay Robertson, Frederieke Sanne Petrović-van der Deen.

Funding

Cancer Society of New Zealand.

1.4 Systematic review on retail access to tobacco and smoking

International research suggests that greater access to tobacco retail outlets increases the odds of smoking. People who live in neighbourhoods with higher numbers of tobacco outlets are more likely to smoke; students who attend schools surrounded by greater numbers of tobacco outlets are more likely to have ever-tried smoking, and smokers who live in close proximity to a tobacco outlet are less likely to remain abstinent from smoking after a quit attempt. This study will provide the first systematic review of the literature on retailer density, and is a collaboration with Lisa Henriksen, Trent Johnson and Nina Schleicher from Stanford University, and Pavla Vaneckova from Cancer Council New South Wales. This project will provide important evidence for policy-makers considering tobacco retail reduction strategies.

Progress / results

A draft journal article has been developed.

Project team

Louise Marsh, Lindsay Robertson, Pavla Vaneckova, Claire Cameron, Lisa Henriksen, Nina Schleicher, Trent Johnson (Stanford University).

Funding

Cancer Society of New Zealand.
1.5 Electronic nicotine delivery systems retailing

In 2019, the Government intends to implement legislation that will liberalise the sale and promotion of electronic nicotine delivery systems (also referred to as ENDS, e-cigarettes, or vaping devices). The proposed legislation will permit any type of outlet to sell ENDS, including dairies, convenience stores, supermarkets and service stations, and certain outlets will be able to promote ENDS through advertisements, discounts and free samples.

Study aims
This project assesses the retail availability and point-of-sale promotion of ENDS, before and after the proposed legislation, through systematic observations at 300 outlets in Otago and Wellington. Post-legislation data collection will be conducted approximately 6 months after implementation of new ENDS legislation. We will also explore tobacco retailers’ knowledge of ENDS, and their capacity and suitability for supporting ENDS users in smoking cessation attempts through semi-structured interviews.

Progress / results
Pre-legislation store assessments have been conducted and are currently being analysed. The retailer interviews have been conducted and analysed, and a draft paper has been completed.

Dissemination
The research was presented at the University of Otago Public Health Summer School, and at the Smokefree 2025 Research Symposium.

Project team
Lindsay Robertson, Louise Marsh, Janet Hoek, Phil Gendall, Mei-Ling Blank, Louise Thornley, Rose Richards, Claire Cameron, Jerram Bateman.

Funding
Preventive and Social Medicine Strategic Grant, Cancer Society of New Zealand, University of Otago Research Grant.
1.6 Dual use of electronic cigarette and smoked tobacco: A qualitative analyses

Electronic cigarettes arguably pose fewer health risks than smoking, yet many smokers use electronic cigarettes but do not stop smoking. Known as ‘dual use’, this practice is widespread and compromises health benefits electronic cigarettes may offer. To date, few studies have explored how dual use practices arise and manifest. We conducted in-depth, semi-structured interviews with 20 current electronic cigarette users from New Zealand who reported smoking tobacco at least once a month, and we used a thematic analysis approach to interpret the transcripts.

This study is part of the HRC-funded project, ‘Supporting Informed E-Cigarette Use’, led by Professor Janet Hoek.

Study aims
Our aim was to explore the development and patterns of dual use of electronic cigarettes and smoked tobacco. We explored participants’ smoking history, their recent and current smoking, trial, uptake and patterns of electronic cigarette use, and future smoking and vaping intentions.

Progress / results
We found that dual use reflects both social and physical cues. It assisted participants to navigate smoking restrictions and allowed them to manage divergent norms. Policies that discourage smoking, particularly excise tax increases on smoked tobacco and smoke-free space restrictions, appear important in prompting ENDS use.

Dissemination
This study was published in Tobacco Control, and presented at the Society for Research on Nicotine and Tobacco 24th Annual Meeting, and at the 14th Annual Conference of the International Society for the Prevention of Tobacco Induced Diseases.

Project team
Janet Hoek, Lindsay Roberson, Rose Richards, Mei-Ling Blank, Lucy Popova, Pamela Ling, Claire Cameron, Phil Gendall.

Funding
Health Research Council of New Zealand.
1.7 Information-seeking by electronic cigarette users: what do they look for and what do they find?

Despite recent increases in the awareness and uptake of electronic cigarettes, few studies have explored users’ or potential users’ information needs. Electronic cigarettes are a rapidly evolving technology, which could support smoking cessation, yet they can be complicated to use and vaping can attract controversy in the media. This study is part of the HRC-funded project, ‘Supporting Informed E-Cigarette Use’, led by Professor Janet Hoek.

Study aims
We interviewed 39 current electronic cigarette users (20 dual users and 19 former smokers) aged 18 and over. Our aim was to explore the type of information electronic cigarette users and potential users sought, the information sources they used, what they retrieved and the information gaps that persisted.

Progress / results
People seeking information on electronic cigarettes’ health effects are more likely to retrieve recommendations, product reviews and endorsements from online sources, and through exchanges with other vapers, than they are to find scientific data. Potential electronic cigarette users have difficulty locating scientific information about vaping’s health effects but can easily access conflicting and inaccurate data that may lead them to over- or under-estimate electronic cigarettes’ risks, and mistakenly view reduced smoking use as bringing similar benefits to quitting. If electronic cigarettes are to reduce smoking prevalence and bring population health benefits, greater attention needs to be paid to the information sources available to potential electronic cigarette users.

Dissemination
This study was published in BMJ Open.

Project team
Janet Hoek, Lindsay Roberson, Rose Richards, Mei-Ling Blank, Lucy Popova, Pamela Ling, Claire Cameron, Phil Gendall.

Funding
Health Research Council of New Zealand.

1.8 Does giving up alcohol binge drinking lead to quitting smoking (or vice-versa)?

There is a strong relationship between binge alcohol drinking and tobacco smoking among young people. In our longitudinal study of low-rate and non-daily smoking, we found that over half of all daily smokers were weekly binge drinking at age 21. Even among those young people who were non-daily or low-rate smokers, over half binged weekly. While cross-sectional studies have suggested that attempts to quit smoking are associated with reduced alcohol intake, there have been few longitudinal studies of the extent to which alcohol use acts as a barrier for younger people to become smokefree.

Study aims
This research investigates the predictive significance of young adult binge drinking on later quitting tobacco smoking, using longitudinal data from the Dunedin Multidisciplinary Health and Development study. Findings will have implications for smoking cessation where the consumption of alcohol is a complex part of the picture.

Progress / results
Data are being analysed and a first draft of the paper has been written.

Project team
Rob McGee, Sheila Williams, Bob Hancox, Louise Marsh.

Funding
Cancer Society of New Zealand.
Supportive care in cancer

Most New Zealanders will directly or indirectly be affected by cancer at some time in their lives. More than ever, research shows that appropriate supportive care makes a positive difference across the cancer continuum. Cancer survivors, those who live with cancer, have reported supportive care experiences with clinicians, supportive care staff, family, friends, and employers. Trying to better understand and improve these experiences underpins our team’s work. The supportive care team in 2018 focused on the experiences of employers and employees affected by cancer, worked with Māori colleagues and participants to better understand early experiences of prostate cancer, and examined public attitudes to euthanasia. Further work included ongoing research in the area of spirituality.

2.1 Returning to work after a cancer diagnosis

While many people are reported to not experience long-term issues on returning to work after receiving a cancer diagnosis, the literature indicates they are more likely to encounter issues such as income loss, changes in work situation and prospects, sickness absenteeism, and a delayed return to work. It is important that policy makers, researchers, health care providers and employers understand what facilitates the transition back to work for people who have received a cancer diagnosis, and correspondingly, the psychological, physical and social impediments to this return.

Study aims
The current evidence base examining the return to work after receiving a cancer diagnosis is limited within a New Zealand context. This qualitative pilot study aims to explore the experiences, needs, facilitators, barriers and impacts of cancer on people’s return to work after diagnosis and treatment. An employer perspective of the return to work and the factors they perceive facilitate or impede this return will also be sought.

Progress / results
The interviews have been completed and the research team are currently analysing the data.

Project team

Funding
Cancer Society of New Zealand.
2.2 Oranga Tu: Movember TrueNTH Māori Prostate Cancer project

Māori men with prostate cancer have inequitable comorbidity and mortality outcomes compared with non-Māori. In 2018, the Oranga Tu project focused on collecting stories from community service providers and Māori men who had experienced prostate cancer. Set in two centres, the project has developed into a remarkable process; connecting with networks in Otago and the Bay of Plenty DHB to understand the service provision environment.

Study aims
1. The project aims to improve the whānau ora (health and connectedness) of tāne (Māori men), their partners, whānau and carers after a diagnosis of prostate cancer.
2. More specifically, this research aims to understand and improve the service context for Māori men newly diagnosed with prostate cancer by identifying health, social and volunteer services that are available to tāne and their whānau in Bay of Plenty DHB and Dunedin (and nearby rural areas), and by investigating functional relationships between services, and their clients.

Progress / results
Data collection is completed for the service providers and interviews with Māori men with prostate cancer are under way.

Dissemination
In 2018, a project newsletter was widely disseminated to Māori providers and the prostate cancer research and clinical community. Furthermore a review of health service provider responses to indigenous peoples with cancer was published in European Journal of Cancer Care.

Project team

Funding
Movember New Zealand.
2.3 Citizens’ deliberation on the merits of changing the law to allow euthanasia and physician-assisted dying

The euthanasia debate has intensified in New Zealand, and the issue is currently receiving considerable political attention. At the end of 2017, David Seymour’s End of Life Choice bill was drawn from the Parliamentary Ballot. Public opinion polls indicate that a majority of New Zealanders support a law change, but little is known about how well members of the general public understand the complexity of the issue.

Study aims

1. To learn what a group of citizens decide, after having been given ample information and allowed the chance to deliberate, with regard to physician-assisted death (i.e. whether or not a doctor should be able to end a person’s life, or to assist a person in ending their own life, and under what conditions).

2. To understand those reasons that are important in shaping people’s views, and whether or not their views may change via a deeper understanding of the issues, as facilitated by debate and deliberation.

Progress / results

Public interest in Euthanasia and assisted dying (EAD) in New Zealand does not appear to be abating. It seems that a majority of the public are open to the possibility of legislative change. It is less clear what form(s) of EAD New Zealanders think should be available, or when and how it should be accessible, though some form of regulation is expected.

Dissemination

Two written submission went to the Justice Select Committee and we presented in person to the Select Committee. The findings have been presented twice: a Public Health and Bioethics seminar. A journal article is being prepared for publication.

Project team

Principal investigators are Richard Egan, Simon Walker, Charlotte Paul. Co-investigators are mentioned under Collaborators.

Funding

Otago Medical School and Division of Health Sciences Collaborative Research fund, and Cancer Society of New Zealand.
2.4 How New Zealanders talk about assisted dying online

Legislation to legalize euthanasia is currently being debated in New Zealand’s Parliament. Euthanasia is a polarizing and emotive issue with strong moral and ethical underpinnings; polls show that public opinion on the issue remains divided. This project aimed to use critical discourse analysis to examine the ethical and moral values basis for the strongly held opposing views on euthanasia in New Zealand. Critical discourse analysis is a method of analyzing texts which can expose underlying themes and implicit messages.

Study aims
The project aimed to investigate the explicit and implicit messages and values presented in public discussion of euthanasia in New Zealand, focusing on various forms of media (newspapers, radio, blogs, social media).

The data range was 08 June 2017 to 02 August 2017.

Progress / results
Data collection is complete and a paper has been submitted.

Project team
Isabelle Lomax-Sawyers, Chrystal Jaye, Jessica Young, Richard Egan.

Funding
Health Research Council Summer Scholarship / Dept of General Practice and Rural Health at University of Otago.
There is growing support for a ‘new public health’ approach, which takes a holistic view, encompassing four key dimensions of health: physical, mental, social and spiritual; as also expressed in the Māori model of health, Te Whare Tapa Wha. Nonetheless, public health engagement with the spiritual dimension remains largely theoretical and implicit. This study is an ongoing examination of spirituality in public health that asks, how can we create an environment in which spirituality can flourish? This is an upstream level question that affects the spirituality, spiritual needs and care of individuals downstream, including those affected by cancer. The PI is interviewing thought leaders around the world to help develop and map this new area of research. Study participants include experts in public health and spirituality research. This study hopes to provide a new public health lens to help with the process of integrating spirituality into policy, contracts and practice.

2.5 Spirituality in Public Health Study

Study aims
How do we improve, promote and protect spirituality for population health and well-being?

Objectives
1. Explore the relationship between spirituality and public health.
2. Develop the academic study of spirituality in public health as a nascent area of research.
3. Document and understand thought leaders’ views on creating an environment where spirituality can flourish in a public health context.

Progress / results
Interviewing was completed in 2018 and analysis is currently under way.

Project team
Richard Egan.

Funding
University of Otago.
As highlighted in a substantial opinion piece prepared for the Otago Daily Times early in 2018, investment in skin cancer primary prevention efforts in New Zealand is very modest. This is despite systematic review evidence that community based interventions can be effective in improving protective practices. It is particularly disappointing when considered in the world context where New Zealand and Australia have by far the highest rates of melanoma – a disease that is largely preventable by reducing exposure to ultraviolet radiation. With respect to public policies, it is against all evidence of harm and informed advocacy that commercial sunbed provision remains available in New Zealand and that sunbeds can be traded in an unregulated second-hand market. It is also an anomaly that there is no funding support from either the Ministries of Health or Education for the provision of shade in schools or the SunSmart Schools programme which the Cancer Society initiated nationally in 2005 and struggles to maintain, alone. In this context of public policy neglect, it is important that research to inform public health advocacy continues its strong tradition. We assisted the New Zealand Public Health Association in drafting their policy on UVR protection practices which was unanimously adopted and ratified at the Annual General Meeting in October 2018.

3.1 Sun protection in educational contexts

The New Zealand SunSmart Schools Accreditation Programme (SSAP), which follows WHO ‘best practice’ guidelines for addressing sun protective practices in primary schools, was launched nationally in 2005.

Study aims
As it was 12 years since its launch and 8 years since the previous evaluation, it was considered timely to reassess sun protection policies and practices in primary schools and see how well the SSAP is working for schools and Cancer Society staff.

Progress / results
In 2017 the SBRU team conducted a nationwide survey of primary school principals on their school’s sun protection policies and practices as well as their knowledge about the SunSmart programme. Our survey showed that with the exception of shade provision and the rescheduling of outdoor events, the SunSmart accredited schools performed statistically better than non-accredited schools for all of the minimum SSAP criteria.

Dissemination
A seminar was presented at the In-House Convention at the Preventive and Social Medicine Department, and two oral presentations were made to the international audience attending the NIWA UV Workshop: UV Radiation: Effects on Human Health and the Environment in Wellington, New Zealand. A research letter was published in the British Journal of Dermatology.

Project team
Bronwen McNoe, Tony Reeder, Ella Iosua.

Funding
Cancer Society of New Zealand, supplemented with conference funding through the Dunedin School of Medicine.
The strong scientific evidence of a causal association between sunbed use and the subsequent development of skin cancer, was reinforced by the 2012 IARC report conclusion that ultraviolet radiation emitted from tanning devices is a Group 1 human carcinogen. Given the possibility of legislative change in New Zealand that would take this risk into account, and in response to the Ministry of Health’s 2016 consultation document on reducing harm from commercial sunbeds, we undertook an audit of businesses providing sunbed services. During that process we became aware that businesses which were no longer offering sunbed services were disposing of unwanted sunbeds onto an unregulated second-hand market. Currently, there is no regulation in New Zealand as to who may purchase these, how they are used, the health benefit claims made by sellers, and the provision of information to potential buyers on the risks of sunbed use.

Study aims
To continue to monitor the sales of sunbeds in New Zealand on TradeMe© and to use this information to help inform advocacy to the Minister of Health in support of a total ban on the manufacture, sale and rental of sunbeds for commercial or private use in New Zealand.

Progress / results
Initially, we monitored TradeMe©, New Zealand’s largest second-hand goods auction site for 23 months and published our findings. Subsequently, we carried on this monitoring throughout 2018 in order to determine the extent to which ex-commercial sunbeds continued to be sold in the domestic market. Overall, during 2018, 342 sunbeds were offered for sale, 193 of these sold for an average cost of $185.

Dissemination
In August 2018, we produced a Fact Sheet about sunbeds and Bronwen McNoe was interviewed for a report which appeared as the lead article in the Dunedin Star community newspaper. Bronwen McNoe also presented the findings at the New Zealand Melanoma Summit in Auckland, New Zealand. Tony Reeder included the issue of sunbed regulation as part of his invited presentation to the incoming Minister of Health when the Minister visited the Department of Preventive and Social Medicine in November 2018.

Project team
Bronwen McNoe and Tony Reeder.

Funding
Cancer Society of New Zealand.
3.3 Testing a sun protection intervention at secondary school sports days

Secondary school students take part in many outdoor activities such as camps, sports days and swimming sports during which, unfortunately, some get sunburnt. There are potential opportunities for improving sun protection during these activities.

Study aims
To build on previous research that we have conducted observing sun protection practices at secondary school sports days, a Randomised Control Trial (RCT) design will be used to test the observed effect of displaying real time UV levels on a large scale monitor at the event venue.

Progress / results
Ethical approval for this PhD project has been obtained through the University of Otago Human Ethics Committee. A large, real time UV monitor display unit has been purchased from the Cancer Council West Australia and operationally tested in Dunedin.

Project team
Bronwen McNoe, Kate Morgaine, Ella Iosua, Tony Reeder.

Funding
PhD funding, Dunedin School of Medicine Equipment grant, Cancer Society of New Zealand.

Providing sunscreen as part of the study.
3.4 Using wearable cameras to assess sun protection and shade availability in New Zealand’s outdoor recreational spaces

Wearable cameras can provide opportunities to explore health issues while avoiding the potential bias of self-report or researcher intrusion, but their usefulness for studying sun protection behaviours and the built environment is unclear.

“Although the UVI was sufficiently high for sun protection to be used, only 4.3% wore sun protective hats and 10.7% used shade. The areas most used by children had little or no shade available.”

Ryan Gage

Study aims
To describe shade availability, clothing worn and shade used by children and adults in recreational spaces.

Progress / results
This study was part of a broader project that analysed images captured by cameras worn by 168 young children (11-13 years) for four consecutive days in Wellington. Sixteen sites were visited and 2,635 people observed in the images. Although the UVI was sufficiently high for sun protection to be used, only 4.3% wore sun protective hats and 10.7% used shade. The areas most used by children had little or no shade available.

Dissemination
A descriptive paper was published in the New Zealand Medical Journal. Ryan Gage also presented two posters at the New Zealand Melanoma Summit, and produced an Otago University media release “Kiwis failing to slip into shade and slap on a hat for sun protection” which resulted in considerable media attention.

Project team
Ryan Gage, Michelle Barr, James Stanley, Moira Smith, Tim Chambers, William Leung and Louise Signal (Wellington School of Medicine) with Tony Reeder (SBRU) and Christina Mackay (Victoria University School of Architecture.)

Funding
University of Otago and University of Auckland.
3.5 Using Google Earth to assess shade for sun protection in urban recreational spaces

Existing methods of auditing shade require on-site monitoring, whereas free Google Earth software permits the use of aerial images to estimate shade in urban open spaces at solar noon summer solstice. Although there is evidence that Google Street View is a feasible tool for assessing some neighbourhood characteristics, its accuracy and reliability for studying sun protection in the built environment is unclear.

Study aims
To assess the feasibility of using Google Earth to measure shade availability in a sample of outdoor recreational spaces in NZ.

Progress / results
Urban open spaces (specifically playgrounds, beaches and pools) in four NZ cities were identified and assessed during summer 2017. Field observations (n=86) were made in Wellington to assess accuracy. The method was acceptably accurate and reliable for assessing shade at playgrounds and beaches.

Dissemination
A paper was published in the Journal of Community Health.

Project team
Ryan Gage, Nick Wilson, Louise Signal, Michelle Barr, George Thomson (Wellington School of Medicine) with Tony Reeder (SBRU) and Christina Mackay (Victoria University School of Architecture).

Funding
Cancer Society of New Zealand and University of Otago.
3.6 Unintended sunburn in a NZ population

Previous research has shown that nearly 14% of sunburns are unintended. Those experiencing unintended sunburn are important to target with public health sunburn prevention messages, as this group may be most amenable to skin cancer reduction efforts. However, to date, very little research has examined this population.

Study aims
To use data from the 2016 Health Promotion Agency Sun Exposure Survey to identify statistical predictors of unintended sunburn while controlling for potentially confounding factors, including climatic variables.

Progress / results
Overall, 2,164 respondents were included in the analysis, of whom 89% reported an outdoor status of ≥ 15 minutes, 10am-4pm on the target weekend. Sunburn was experienced by 14% of whom most were classified as experiencing unintended sunburn. Of these, 58% wanted to avoid getting a suntan and 89% knew that the weather conditions were such that they could expect to get sunburned on the target day if they did not use adequate sun protection.

No socio-demographic characteristics were associated with unintended sunburn indicating that anyone outdoors during fine summer weekends is at risk for sunburn regardless of their biological or social characteristics. Finally, a number of outdoor behavioural variables were found to be associated with unintended sunburn, including: being outdoors for longer periods of time, or outdoors for longer than intended; not using shade; and not covering up sufficiently with clothing and a hat.

Dissemination
An oral presentation was given at the NIWA UV workshop: UV radiation and health, Wellington, New Zealand.

Project team
Geraldine McLeod, Tony Reeder, Rob McGee, Bhubaneswor Dhakal.

Funding
University of Otago and Genesis Oncology Professional Development Award to fund workshop attendance.
3.7 Unintended sunburn as an explanation for sunburn paradoxes

Previous research using survey data collected 2000-6 suggested that sunburn paradoxes exist in which sunburn is more likely among those who do not like to tan, have higher sun protection knowledge and use sunscreen. That analysis found that 14% of respondents were sunburned despite not attempting to tan during summer. It was theorized that unintended sunburn may be the driver of sunburn paradoxes.

Study aims
To examine sunburn and unintended sunburn with respect to known sunburn paradoxes using data from the 2016 Health Promotion Agency Sun Exposure Survey. Specifically, it was hypothesised that respondents who experienced sunburn or unintended sunburn on the target interview day would have: lower positive attitudes towards tanning, higher sun protection knowledge and used sunscreen.

Progress / results
The hypotheses were partially confirmed in that sunburn was found to be associated with more sun protection knowledge. However, contrary to the hypotheses: sunburn was associated with more positive attitudes towards tanning, and sunscreen was not found to be associated with increased odds of sunburn. No associations were found between unintended sunburn and the paradox variables under investigation. Therefore, we were unable to confirm that unintended sunburn is the result of influence from the sunburn paradox.

Dissemination
A poster was presented at the 4th International Conference on UV and Skin Cancer Prevention, Toronto, Canada.

Project team
Geraldine McLeod, Tony Reeder, Rob McGee, Bhubaneswor Dhakal.

Funding
University of Otago and Genesis Oncology Professional Development Award to fund conference attendance.

3.8 Traditional media coverage of sun protection issues during springtime in NZ

By helping to shape public narratives and social norms about cancer prevention, the content of traditional news media can, over time, have a significant impact on population sun safety behaviours.

Study aims
To describe news media reportage on skin cancer issues during spring (September to November inclusive) 2016.

Progress / results
Overall, skin cancer related reports represented 3.6% of all cancer stories published. These mainly related to primary prevention (72%), early detection (37%) and survivorship (27%). The main risk factors identified included sun exposure (49%) and tanning (25%). It is heartening to see that most stories included prevention information.

Dissemination
A paper was published in the Health Promotion Journal of Australia.

Project team
Elizabeth Butcher (née Peterson), Rosalina Richards, Bronwen McNoe, Tony Reeder.

Funding
Cancer Society of New Zealand and University of Otago.
4 Health related policy documents in National Sporting Organisations

Participation in sport and recreation is an important part of the New Zealand culture and many New Zealanders are members of sporting organisations. Participation in sport and recreational activities can involve exposure to potential health hazards. In addition, facilities may be provided for socialising during and after the activity. Many interventions targeting healthy behaviours are delivered from the ‘bottom-up’, mainly focusing on a specific setting or at an individual level. Potentially a more effective way of addressing this issue is to take a ‘top-down’ approach. National Sporting Organisations (NSO’s) are governing bodies that manage and coordinate associated sports clubs, such as by providing club policy. If NSO’s consider health outcomes when developing their policies this could potentially have an impact on health related behaviour among their membership, at least while participating in their sport or recreational activity.

4.1 Consideration of Healthy Food and Beverage and Alcohol Policy by New Zealand National Sporting Organisations

Noeleen Venter, a summer student in the SBRU, examined food and beverage and alcohol policies as part of this scholarship programme. The positive benefits of physical exercise experienced in sport, may be undermined by the supply and promotion of unhealthy food and beverages and poor alcohol regulations at sports clubs. This study aimed to compare NSO’s nutrition and alcohol policies against a best practice guideline which was developed from review of literature.

Study aims
To assess New Zealand National Sporting Organisation’s nutrition (food and non-alcoholic beverages), and alcohol policies and practices against a best practice framework.

Progress / results
Data collection is complete and data analysis underway.

Dissemination
A report has been submitted as part of the summer student requirements.

Project team
Noeleen Venter, Rachael McLean, Louise Marsh, Bronwen McNee.

Funding
Health Sciences Division and Department of Preventive and Social Medicine, University of Otago, Cancer Society of New Zealand.

“If the overarching governing bodies for each of the individual sports consider health outcomes when developing their policies, this can have a very real positive impact on the sporting participants, officials and spectators.”

Dr Rachael McLean
More than 90% of skin cancers are thought to be preventable by reducing excessive exposure to ultraviolet radiation (UVR). Evidence suggests that there is a strong association between an intermittent pattern of sun exposure typical of recreational and sporting activities and the subsequent development of melanoma and basal cell carcinoma. Many New Zealanders, particularly in the younger age groups, engage in outdoor sporting activities during the months when UVR levels can be “very high” or “extreme”, often without adequate sun protection. Outdoor recreational environments such as swimming pools and sports grounds are recognised as being very important for skin cancer control, as they are places where people spend long periods of time outdoors while engaged in sporting or recreational pursuits. If the overarching governing bodies for each of the individual sports consider health outcomes when developing their policies (in particular, for health and safety and uniform) this can have a very real impact on the UVR exposure of sporting participants, officials and spectators.

4.2 Consideration of SunSmart Policy: Documents by New Zealand National Sporting Organisations

Study aims
To assess New Zealand National Sporting Organisation's SunSmart policies against a best practice framework.

Progress / results
Data collection is complete and data analysis underway.

Project team
Bronwen McNoe, Tony Reeder, Kate Morgaine.

Funding
Department of Preventive and Social Medicine, University of Otago, Cancer Society of New Zealand.
4.3 Consideration of SmokeFree Policy: Documents by New Zealand National Sporting Organisations

Smokefree environments may reduce exposure of non-smokers to second-hand smoke; reduce exposure of young people to smoking; contribute to de-normalising smoking; assist those quitting by reducing exposure to other people smoking; potentially preventing relapse; reduce littering and environmental impacts; and empower non-smokers to speak up when people smoke in smokefree areas. Increasingly, local councils in New Zealand are voluntarily implementing Smokefree recreational and sports grounds in their regions. Recreation and sporting organisations also have a significant influence in their communities. Implementing a smokefree policy strengthens the positive impact NSOs have on the health of the community, and provides an important message about being smokefree to individuals who are part of their organisation.

Study aims
To assess New Zealand National Sporting Organisation’s Smokefree policies against a best practice framework.

Progress / results
Data collection is complete and data analysis underway.

Project team
Louise Marsh, Bronwen McNoe, Rachael McLean, Noeleen Venter.

Funding
Department of Preventive and Social Medicine, University of Otago, Cancer Society of New Zealand.
Contributions to teaching and student supervision

Mrs Bronwen McNoe
Lecture presented to ‘PUBH 202 Evaluation of the SunSmart Schools Programme’, University of Otago, 8 August 2018.

PhD students

Lis Latta
Preparation for Palliative Care: New Zealand medical and nursing graduates’ preparation, self-efficacy and attitudes towards caring for people who are dying.
Supervisors: Richard Egan, Rob Walker, Jean Ross, Ella Iosua.

Jessica Young
Exploring the views of people with life-limiting illness who would consider an assisted death.

Masters’ students

Linda Buxton
The ultra violet radiation (UVR) environment and sun protection at secondary school rowing regattas in Otago.
Supervisors: Tony Reeder, Louise Marsh.

Judy Clarke
A study of health capability in a group of female health care assistants working in the aged-care residential sector.
Supervisors: Richard Egan, Trudy Sullivan.

Sarah Wood
New Zealand health promotion planning and evaluation: a qualitative study.
Supervisors: Richard Egan, Rose Richards.

Bachelor students

Mary Cane Demecillo
Otago medical students’ perspectives on spirituality and its role in healthcare.

Summer students

Noeleen Venter
Consideration of Healthy Food and Beverage and Alcohol Policy Documents by New Zealand National Sporting Organisations.
Community contribution

Dr Richard Egan
Vice-Chair, Health Promotion Forum of New Zealand.
Past President, Public Health Association of New Zealand.
Board Member, Selwyn Spirituality and Aging.
Member, Global Network for Spirituality & Health.
Hospice New Zealand ‘Foundations of Spiritual Care’ professional develop programme Governance Group.
Advisor to Age Concern New Zealand “policy skills bank”.
Founding Trustee Ian and Elespie Prior Trust for Health and Well-being.
Trustee – The New Zealand Institute for Cancer Research Trust.
Member, Psycho-oncology New Zealand.
Member, Psycho-oncology Cooperative Research Group (Australia/New Zealand).
Honorary research consultant for Meaningful Ageing Australia.
Reviewed papers submitted to: Mental health, Religion and Culture.

Dr Louise Marsh
Member, Society for Research on Nicotine and Tobacco.
Member, New Zealand Public Health Association.
Member, ASPIRE 2025.
Member, Health promotion Forum.
Reviewed papers submitted to: Tobacco Control.

Professor Rob McGee
Member Board, Cancer Society New Zealand Otago & Southland Division.
Member Research Coordinating Group, New Zealand Youth Tobacco Monitor, Health Promotion Agency.
Member ASPIRE 2025.
Dr Rachael McLean
Fellow of the NZ College of Public Health Medicine (FNZCPHM).
Member, The Nutrition Society (UK).
Member, The Nutrition Society of New Zealand.

Mrs Bronwen McNoe
Member, Health promotion Forum.
Member, Public Health Association of New Zealand.
Member, Melnet.

Associate Professor Tony Reeder
Member, New Zealand Primary Prevention and Early Detection Research Advisory Group (HPA).
Member, New Zealand Skin Cancer Primary Prevention and Early Detection Steering Committee (HPA, CS, etc.).
Member, Melnet.

Dr Lindsay Robertson
Member, Society for Research on Nicotine and Tobacco.
Member, New Zealand Public Health Association.
Member, ASPIRE 2025.
Member, Health promotion Forum.
Review papers submitted to: Tobacco Control.
An extensive backlist of publications is produced separately and available from our website, where further information is also available about our staff and postgraduate students.
SBRU staff publications for 2018

Refereed papers


**Letters and brief reports in scientific journals**


**Conference contributions (published proceedings)**


**Conference presentations**

Egan, R. *Spirituality & wellbeing: ‘Let’s talk about spirituality’ and let the rest unfold . . .* Verbal presentation at the Psychosocial Oncology New Zealand (PONZ) 16th Annual Conference, Rotorua, New Zealand, 8-10 November 2018.

Egan, R. *Spirituality in cancer care: From policy to practice*. Keynote presentation at the Psychosocial Oncology New Zealand (PONZ) 16th Annual Conference, Rotorua, New Zealand, 8-10 November 2018.

Egan, R., Graham-DeMello, A. *Supportive Care in Cancer: Emerging Issues*. Verbal presentation at the Department of Preventive and Social Medicine In-House Convention, Dunedin, New Zealand, 13 February 2018.


McGee, R. *New Zealand Adolescents’ Discouragement of Smoking Among Their Peers*. Verbal presentation at the Department of Preventive and Social Medicine In-House Convention, Dunedin, New Zealand, 13 February 2018.


McNoe, B. *An Evaluation of the New Zealand SunSmart Schools Programme*. Verbal presentation at the Department of Preventive and Social Medicine In-House Convention, Dunedin, New Zealand, 13 February 2018.


Robertson, L., Hoek, J., Blank, M., Richards, R. *“It Didn’t Fill the Void”: Reasons for E-cigarette and Tobacco Dual Use*. Poster presentation at WCTOH, Cape Town, 7-9 March 2018.


Workshop presentations


Robertson, L. *ENDS users’ information needs; how well suited are tobacco retailers for providing ENDS information?* Presentation to University of Otago Wellington 22nd Public Health Summer School, 12 February 2018.


Public seminars and lectures

Professional publications


Scientific blogs


Submissions to government agencies

Fact sheets
McNoe, B. & Reeder, T. Fact sheet about sun beds, August 2018.

Media releases
Richards, R. Mind the gap – public and expert views on cancer risk. Otago research, Otago University media release, 23 January 2018.
Robertson, L. & Hoek, J. Switching to vaping not always straightforward: Otago research, Otago University media release, 8 February 2018.
Marsh, L. More commitment by local government needed to achieve Smokefree 2025, Otago research, Otago University media release, 29 March 2018.
Marsh, L. Potential for less smoking with new tobacco retailer restrictions, Otago research shows, Otago University media release, 6 September 2018.
Young, J. Most Kiwis support some form of euthanasia or assisted dying, Otago review reveals, Otago University media release, 1 November 2018.
Egan, R. Otago research highlights need for spirituality to be integrated into the health system, Otago University media release, 14 November 2018.

Media reports 2018
4/01/18 Melanoma survivor wants to help others, Otago Daily Times
8/02/18 Lindsay Robertson interviewed live for ‘Radio Live’ (on ‘Drive with Alison Mau’ 3.30pm)
8/02/18 Vaping not enough for some smokers, Otago Daily Times
8/02/18 Vaping not enough for some cigarette smokers, Otago University research finds, The New Zealand Herald
8/02/18 Switching to vaping not always easy, Medical Xpress
8/02/18 Switching to vaping not always easy, Scoop Health
8/02/18 Smokers can’t always easily adopt vaping, study finds
8/02/18 Janet Hoek interviewed for NewsHub TV
8/02/18 Mei-Ling Blank interviewed for NewsHub radio
8/02/18 Janet Hoek interviewed for Radio New Zealand (Charlie Dreaver, 10pm)
8/02/18 Research finds emotional attachment to cigarettes to be a barrier in the switch to vaping, New Zealand Doctor
8/02/18 Emotional attachment to cigarettes a barrier in switching, Scoop.co.nz
9/02/18 Lindsay Robertson interviewed live for ‘Radio Dunedin’ (with Owen Rooney, 10.30am)
9/02/18 NZ smokers concerned vaping ‘not the real deal’, radionz
9/02/18 Lindsay Robertson interviewed by NZ Herald for weekend feature (17th/ 18th Feb) on vaping
10/02/18 Lindsay Robertson interviewed (pre-record) for NewsTalk ZB’s Sunday morning show
10/02/18 New research shows switching to vaping not easy, TVNZ
10/02/18 Switching to vaping not easy - research, Newshub
10/02/18 Vaping not the answer for some, Otago Daily Times
10/02/18 Switching to vaping not easy: Research, MSN NZ
10/02/18 Switching to vaping not easy: research, NZ City
14/02/18 Vapers tend to return to cigarettes because they miss the real thing - research, Stuff.co.nz
15/02/18 A quarter of pharmacies would strongly consider selling tobacco if pharmacy was its only legal outlet, a new study has found, AJP.com.au
18/02/18 Up in smoke: How vaping might save smokers, New Zealand Herald
26/02/18 Long past time for effective Govt action on skin cancer levels in NZ, opinion by Tony Reeder in Otago Daily Times
10/03/18 Co-directors keen, Otago Daily Times
30/03/18 Councils need to back Smokefree NZ, study suggests, TVNZ
30/03/18 Councils need to back Smokefree NZ: study, NZ City
30/03/18 Not enough being done to make NZ smokefree - study, Newshub
31/03/18 More commitment needed by local government, Newsie
4/05/18 Gel manicures could pose a risk of skin cancer, msn.com
4/05/18 Gel manicures pose a risk of skin cancer, Newshub
4/05/18 Manicures may be malignant, The Timaru Herald
27/07/18 Most Christchurch dairy owners want to keep selling smokes, despite robberies, study suggests, Stuff.co.nz
27/07/18 It's not if they come, it's when', The Timarly Herald
28/07/18 Dairy owners putting lives at risk for small margins, The Press, editorial
9/08/18 Hot and cold over sunbeds, The Star Dunedin
6/09/18 Potential for less smoking with new tobacco retailer restrictions, research shows, Medical Xpress
7/09/18 Stopping new outlets selling tobacco ‘positive policy option’, Otago Daily Times
7/09/18 There is a call for new retailers by Otago University researchers to be banned from selling tobacco..., Newstalk
7/09/18 Otago University's Dr. Louise Marsh suggests banning new retailers from selling tobacco, Radio Live
7/09/18 It has been revealed the number of tobacco outlets could be cut by half by 2032 if the Government..., Newstalk
7/09/18 Researchers from Otago University say new retailers shouldn’t be allowed to sell tobacco as..., Newstalk
7/09/18 An Otago University study has found preventing new retailers from selling tobacco products., Radio Live
7/09/18 Otago University's Dr Louise Marsh has suggested banning new retailers from selling tobacco, Radio Live
26/10/18 New research findings: not enough Kiwis are sun-safe, Otago Daily Times
26/10/18 Kiwis are not so sun smart, Dominion Post
26/10/18 University of Otago researchers used cameras to observe 2500 adults and children while....,TVNZ1
26/10/18 A new study from Otago University found that only 10% of areas most popular with children have..., TV3
26/10/18 According to new research from the University of Otago, many New Zealanders are not being..., TVNZ 1
26/10/18 An Otago University study of 2000 people has found only 10% wear protective hats and only 10..., TV3
26/10/18 Kiwi's slip, slop, slap and wrap knowledge, slipping away, Newshub
26/10/18 Kiwis not so sun smart - In the News, Newstalk ZB atsciencemediacentre.co.nz
26/10/18 Alarming number of Kiwis failing to slip, slop and slap, study finds, healthcentral.nz
26/10/18 Kiwis’ sun smart knowledge slip, slop, slipping away, several media: Timaru Herald, Manawatu Standard, stuff.co.nz, Dominion Post
27/10/18 Kiwis failing to slip into shade and slap on a hat for sun protection, researchers find, Medical Xpress
27/10/18 Kiwis failing to slip, slop, slap and wrap, newsie.co.nz
29/10/18 A University of Otago study reveals the alarming proportion of Kiwis not protecting themse.., TV3
29/10/18 University of Otago researchers used cameras to observe 2500 adults and children while...TV1
1/11/18 Most Kiwis support some form of euthanasia: Otago study, Otago Daily Times
2/11/18 Kiwis failing when it comes to sun protection, Weekend Sun, Tauranga Bay of Plenty
<table>
<thead>
<tr>
<th>Date</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>3/11/18</td>
<td>20 years of research finds most New Zealanders in favour of euthanasia, NewsHub</td>
</tr>
<tr>
<td>4/11/18</td>
<td>Tanning-Oil users at risk of ‘nasty’ sunburn, Sunday Star Times</td>
</tr>
<tr>
<td>6/11/18</td>
<td>Alarming number of kiwis failing to slip, slop and slap, study finds, Gisborne Herald</td>
</tr>
<tr>
<td>10/11/18</td>
<td>The tobacco endgame. Could restricting tobacco sales to only pharmacies, combined with cessation advice in these settings, accelerate progress towards a tobacco-free future? AJP.com.au</td>
</tr>
<tr>
<td>14/11/18</td>
<td>Newstalk ZB (Auckland), 16:00 News, 14/11/18, Newsreader</td>
</tr>
<tr>
<td>14/11/18</td>
<td>Otago research highlights need for spirituality to be integrated into the health system, New Zealand Doctor Online</td>
</tr>
<tr>
<td>14/11/18</td>
<td>Otago research highlights need for spirituality to be integrated into the health system, NZCity website</td>
</tr>
<tr>
<td>16/11/18</td>
<td>University of Otago study claims ‘spiritual care’ important in cancer treatment, NZ Herald</td>
</tr>
<tr>
<td>29/11/18</td>
<td>Newstalk ZB (Auckland), Early Edition, 29/11/18, Kate Hawkesby, spiritual needs</td>
</tr>
<tr>
<td>29/11/18</td>
<td>Kate Hawkesby: Doctors should understand patients’ spiritual needs too, NZ Herald</td>
</tr>
<tr>
<td>13/12/18</td>
<td>Newstalk ZB (Wellington), Wellington Mornings, 13/12/18, Heather du Plessis-Allan. Interview with Bronwen McNoe, researcher, University of Otago, regarding the use of sunblock</td>
</tr>
</tbody>
</table>