SMOKING AND QUITTING IN SOCIAL NETWORKS AMONG INDIGENOUS AND NON-INDIGENOUS SMOKERS: FINDINGS FROM THE ITC NEW ZEALAND SURVEY

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New Zealand context

• Much higher smoking rates among Māori (indigenous peoples of NZ)
• NZ 2025 Smokefree Goal  
  o Māori unlikely to achieve goal
• Social networks may play important role in promoting or discouraging smoking
• Māori networks may differ from European:  
  o Importance of extended whānau (family), iwi (tribe), and maintaining connections  
  o May be means of promoting or discouraging tobacco use
A Māori social network

- Strong kinship ties and extended family
- Linked to local communities
- Often linked to iwi (tribe)
- Depth of links may promote or discourage smoking

Hāpore (community)

Hapū/Iwi

Immediate whānau

Whānau
Study aims

To describe and compare:

- Māori and non-Māori smokers’ social networks
- Smoking patterns in smokers’ social network networks
- Exposure to SHS, tobacco sharing and gifting
- Quitting and encouragement to quit in smokers’ social networks
The International Tobacco Control (ITC) Project

- International collaboration currently in 29 countries
- Monitors progress towards FCTC
- Robust cross-country comparable cohort study design
- Coordinated through University of Waterloo, Canada
ITC Project Research Organizations

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New Zealand ITC Project

- Cohort recruited from national health survey (NZHS)
- CATI survey, Wave 1 Sept 2016 – April 2017
  - Follow-up 2018
- 1082 participants, 825 smokers & 257 recent quitters
  - Māori: 296 smokers, 65 recent quitters
- Response – 41.5% of all contacted eligible subjects, 27.6% among all eligible subjects
- Current analysis focuses on current smokers
- Analysis accounts for over-sampling of some participant groups in the NZHS/ITC sampling stages
Māori more likely to have co-habiting partner or spouse who smokes
Māori participants had more extensive social networks, much greater proportion had multiple regular contact social/family groups which included one or more smokers and greater proportion whose closest friends mostly smoked.

* Social/family groups: Parents/caregivers, own children, siblings, grand-parents, other relatives, flat mates/boarders, other people living with, work mates.
Exposure to other people’s cigarette smoke* (%) in last 30 days

Māori more likely than non-Māori to be exposed to SHS daily

* Exposure = “at work, socializing, in public or at home”
Smoking with others and offering and being offered cigarettes very common, especially among Māori.
Māori more likely to have gifted &/or received tobacco in last 6 months.
Partners commonly planning to quit and encouraged participants to quit (more so among non-Māori)
More Māori participants reported family members trying to quit (data not shown) and to have successfully quit in last 12 months.

* Quitting defined by participant
Summary of key findings

• Māori smokers had more extensive social networks

• Exposure to SHS and smoking was common in smokers’ social networks, particularly among partners and close friends

• SHS exposure and smoking within social networks was commoner among Māori smokers

• Most smokers smoked with other smokers at least some of the time, and whilst doing so there was usually sharing of cigarettes.

• Gifting of cigarettes was reported by about half Māori and a third of non-Māori smokers.

• Around half of partners who smoked were planning to quit, though only a minority had quit in last year. Most partners wanted the participant to quit.

• Most participants reported no family members had quit in the last year; family member quitting was more commonly reported by Māori smokers.
Conclusions

• Smokers in the NZ ITC, particularly Māori smokers, are exposed to extensive smoking in their social networks.

• Quitting is less common in social networks, but was commoner among Māori smokers. Most partners wanted smokers to quit.

• Social networks may be a possible intervention target e.g.
  • interventions aiming to discourage sharing or gifting of cigarettes to reduce uptake and relapse
  • interventions aiming to encourage partners and other family members to motivate and support smokers to quit

• Such interventions may be particularly effective for Māori given the strengths and extent of their social networks and increased frequency of smoking and quitting within these networks.
Kia ora
Thank you

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