

Shared care – helping our community quit smoking



Why it's important. Smoking rates among Aboriginal people are approximately 3 times higher than non-indigenous Australians. It is important we all play our role in tackling smoking in our communities. Together, our efforts can lead towards better health for Aboriginal people in Victoria. This guide provides you with the process on how your role and Quit Victoria can support clients through their quitting journey.

What is shared care?

Shared care is the forming of a partnership to achieve a common goal – helping Aboriginal people quit smoking. This model shows how the work you do in the community, in addition to the behavioural support of Aboriginal Quitline, creates a culturally supportive environment and the best chance of successfully quitting long term.

Get prepared for shared care

Quit has a range of resources that will help you prepare to talk to smokers, provide brief advice and refer them to appropriate services (i.e. Aboriginal Quitline, AOD worker, chronic disease worker, etc.). Every conversation will be different, so try and rehearse important key messages like “The best thing you can do for your health is to quit smoking” and “I’m here to help you decide what next steps you’d like to take”.

Download Quit resources at quit.org.au/shared-care

Who can be involved in shared care?

- Aboriginal health workers
- Tackling Indigenous Smoking teams
- Koori maternity workers
- Nurses, GPs, dentists and pharmacists
- Allied health professionals
- Aboriginal liaison officers
- Receptionists
- Everyone who works in Aboriginal health

Where can you talk about smoking with clients?

- 715 health checks
- community events
- people in waiting rooms
- information sessions
- yarning groups
- transporting clients
- GP, nurse and health worker appointments
- dental clinics

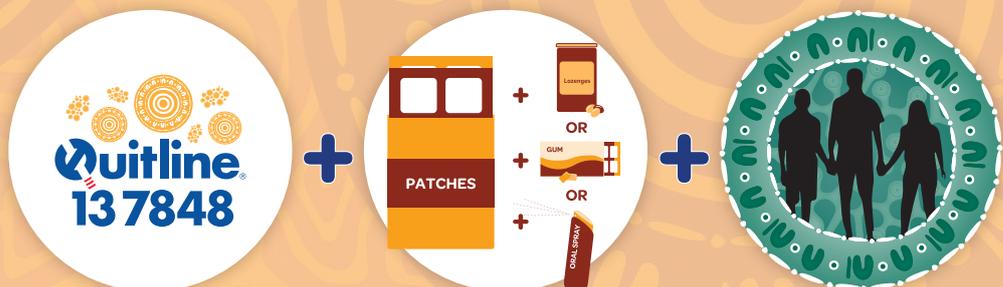
Put it into action

Great! You’re ready to have a yarn with your community members about becoming smokefree. The Ask, Advise, Help (AAH) model, outlined on the next page, shows how you can have a conversation in a non-judgemental and supportive way. The conversation about quitting can take anywhere from 30 seconds to 10 minutes.

It’s really important that your conversation is not their last, especially if they say they aren’t ready to quit. Let them know that they can talk to you about their smoking anytime and you can link them to the help they want. Remember, don’t let them go away empty handed. Give them something to take away such as the *Cost of Smoking postcard*.

Highlight the **importance of smokers using the Aboriginal Quitline for behaviour change** and complete a referral to Aboriginal Quitline together with your client – a passive approach to this isn’t effective (majority of people agree to receive a callback from Aboriginal Quitline when it’s highly recommended to them by a health professional).

The best chance for someone to become smokefree is to use: a combination of behavioural intervention like Quitline, stop smoking medications, and encouragement/support from family/friends/health professionals.



Shared care – put it into practice



IDENTIFY CLIENT (INTAKE)

Whether you're having a yarn with a community member, or you're in an appointment with a client, remember most smokers expect you to talk to them about their smoking. Use the AAH model to guide this conversation. It's recommended you have all the resources ready to give, especially the Aboriginal Quitline referral form.



AAH (PROVIDE BRIEF ADVICE)

- **ASK** all clients about smoking
 - **ADVISE** all smokers to quit and non-smokers to stay quit in a supportive and non-judgemental way
 - **HELP** by offering support, information on stop smoking medications including NRT and refer to Aboriginal Quitline
- "Do you smoke?"
 - "The best thing you can do for you and your family's health is to quit smoking"
 - "It's a great choice you've made to be smokefree"
 - "The best chance of success is to use coaching and stop smoking medications. I'm going to organise someone from Aboriginal Quitline to have a yarn with you, they've helped many people become smokefree"
 - "Can I organise an appointment for you with a GP to get free or low-cost NRT?"



REFER AND RECORD

- Gather smoker's information and consent to refer to Aboriginal Quitline
- Complete online or fax referral form
- Keep a copy of all people you refer for your own records



REVIEW

Aboriginal Quitline will confirm receipt of your referral and provide you with a summary of outcomes when the person has finished using our service. This information is useful for you to continue providing support for them during any follow up appointments you may have with them. Ongoing encouragement to be smokefree may be required and don't be afraid to re-refer to us, no fuss!