

# Te aukatinga kai paipa

## Smoking cessation for Māori

Key reviewer:

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**Ahakoā he iti te matakahi, ka pakaru i a ia te tōtara**

*Although the wedge is small, it overcomes the tōtara tree (meaning: A little effort applied properly can achieve good results)*

### Key concepts:

- Smoking cessation does not need to be difficult. People who smoke can be helped to stop
- The more times smoking cessation advice is offered and the more quit attempts that are made, the greater the likelihood of stopping for good
- Follow the “ABC for smoking cessation” and offer Māori the choice of providers such as Quitline or Aukati KaiPaipa
- DHB smokefree coordinators and public health services can assist or visit [www.smokefreecontacts.org.nz](http://www.smokefreecontacts.org.nz) for a list of services



The incidence of lung cancer in Māori is the highest in the world. The mortality rate for Māori from lung cancer is three times higher than for non-Māori, and the average age of death is lower (63 years compared to 70 years).

The 2006/07 New Zealand Health Survey shows that for people aged 15 to 64:<sup>1</sup>

- 19.9% of all New Zealanders are smokers
- 42.2% of Māori are smokers
- 26.9% of Pacific peoples are smokers

While Māori smoking rates are decreasing, they remain unacceptably high. Māori women are twice as likely to smoke. For Māori men the rate is 1.5 times higher. Smoking prevalence amongst Māori women of child bearing age ranges from 39% to 61%.<sup>2</sup> This has grave consequences not only for the smoker's health and wellbeing, but also for the health and wellbeing of their whānau. This is especially important for babies and children who, when exposed to smoke in their homes, are more likely to develop asthma, chest infections (e.g. bronchiolitis), ear infections and many other problems.

Helping Māori who smoke to stop is a high priority. Some health professionals may view this as difficult, but a more rapid decline in smoking prevalence is possible. Encouraging more Māori who smoke, to make more quit attempts, supported by effective smoking cessation, is key to achieving this.

The New Zealand Smoking Cessation Guidelines, structured around ABC, provide support for all health care workers who have contact with people who smoke.

### Māori smokers want to quit and try to quit

Smoking cessation interventions that work in the general population (cessation support plus medication) are equally as effective for Māori. For example Māori who call Quitline are just as likely to stop smoking as non-Māori callers. Most quit attempts by Māori, just as in the general population, end in relapse. The average smoker may make around 14 quit attempts before quitting successfully long term. The key is to encourage and support another quit attempt as soon as possible.

Some Māori may be more likely to undertake smoking cessation programmes if they are informed that culturally appropriate services are available, e.g. Aukati KaiPaipa and Quitline's Māori Advisers. Health professionals should make themselves familiar with the cessation support services for Māori, that are available both in their area and nationally, so that they can offer a choice and refer appropriately.

Like Māori, lowering the smoking rates within Pacific communities will significantly contribute to reducing Pacific health inequalities. There is also likely to be higher uptake of smoking cessation interventions amongst Pacific peoples, if they are presented in a culturally appropriate way.

# Māori smoking cessation providers

## Aukati KaiPaipa



Aukati KaiPaipa is a free nationwide programme that aims to reduce smoking prevalence amongst Māori and increase the number of positive changes in smoking behaviour, such as maintaining smokefree environments, particularly for tamariki (children). It is a kanohi ki te kanohi (face to face) service delivered to whānau as an intensive programme for between 8 – 12 weeks by providers around the country.

Aukati KaiPaipa is especially effective for Māori, producing 12 month abstinence rates close to 30%.<sup>3</sup> This is significantly better than the 3% chance of quitting long-term seen with unaided “cold turkey” quit attempts.

The programme offers whānau the opportunity to address smoking addiction through a range of services including NRT, motivational counselling and ongoing support. It includes:

- Assessment – Quit Coaches identify the client’s readiness to quit and develop a personalised programme.
- Reduction plan (two to four weeks) – to help identify coping skills to overcome smoking triggers and encourage cigarette reduction towards becoming smokefree.
- Intensive programme (eight weeks) – In this stage clients actively become smokefree. Nicotine Replacement Therapy (NRT) patches and gum are provided to make the smokefree transition easier, and with the support of a Quit Coach, at the eighth week clients should be able to maintain their smokefree lifestyles.
- Three, six, nine and 12 month follow-ups provide support, assisting with relapses and encouraging clients to keep up the good work.

Kanohi ki te kanohi counselling sessions help to support clients through the lifestyle changes required for a successful smokefree transition. Breaking the psychological behaviour that is associated with smoking is ongoing and Aukati KaiPaipa aims to provide the skills necessary to achieve this.

 A list of providers is available on the Aukati KaiPaipa website: [www.aukatikaipaipa.co.nz/contact.htm](http://www.aukatikaipaipa.co.nz/contact.htm)

### Aukati KaiPaipa provider profiles

#### Aukati KaiPaipa

Kokiri Marae Health and Social Services  
Lower Hutt

[www.kokiri-hauora.org.nz/services/aukati\\_kai\\_paipa.html](http://www.kokiri-hauora.org.nz/services/aukati_kai_paipa.html)

Quitting smoking has a domino effect in changing lifestyles. For whānau, Aukati KaiPaipa is more than a smoking cessation programme, it is a catalyst for many other life style changes.

Sharon Reid is a passionate and determined advocate for Aukati KaiPaipa. She has witnessed first hand the difference quitting can make to whānau. Some of the most inspiring and encouraging changes can be attributed to the people themselves; through support by highly trained staff and through sheer effort and will, many smokers have been able to make significant changes to their lifestyle.

“We have seen long term smokers entering the Aukati KaiPaipa programme, after smoking for 30 – 40 years and quitting. Many have succeeded in staying smokefree, some have relapsed but the key for us is having a no fail system. They can come back and access our services as many times as needed.” – Sharon Reid

Aukati KaiPaipa recognises that quitting is a long term process, and the Aukati KaiPaipa programme adapts to meet the needs of those smokers for whom quitting presents an extraordinary challenge.

Face to face meetings conducted in the homes of clients or workplaces have encouraged many people to access the service. Clients are visited every week for up to 12 weeks, support is provided with nicotine replacement therapy and after the initial 12 weeks, contact is maintained on a monthly basis for nine months.

Sharon attributes the success of the Aukati KaiPaipa programme to a holistic approach in conjunction with other health and social services. Referral between services is common, e.g. Tu Kotahi Māori Asthma Service. Aukati KaiPaipa also delivers specific smoking cessation services to young people and people with mental illness.

“What keeps staff motivated are the changes they see in people quitting; their confidence increases, they feel good about themselves and even though some may not succeed immediately, they make changes that remain over time. Quitting smoking will result in the biggest health gains for Māori and this outcome is the main driver for our Aukati KaiPaipa Programme.” – Sharon Reid

### **Te Haa Ora**

Te Oranganui Iwi Health Authority  
Whanganui  
[www.teoranganui.co.nz](http://www.teoranganui.co.nz)

“It’s about having a passion for the mahi (work). We are there to support clients who want to quit, without having to judge. Kanohi ki te kanohi (face to face), is best for our people.” – Mel Maniapoto

Mel Maniapoto is one of a team of three dedicated smoking cessation practitioners based within Te Oranganui Iwi Health Authority PHO. They run a number of very successful smoking cessation clinics in rural and urban settings and use the Aukati KaiPaipa approach to deliver a “for Māori, by Māori” cessation programme.

### **Te Hotu Manawa Māori**

Te Hotu Manawa Māori was one of three organisations which established Quitline and set up a Māori Tobacco Control advocacy organisation.



It is also responsible for training the national Māori cessation service, Aukati KaiPaipa. Te Hotu Manawa Māori can provide support and training for any medium to large scale innovation in cessation developments or programmes for Māori.

[www.tehotumanawa.org.nz](http://www.tehotumanawa.org.nz)

Recently at the request of a local employer, they delivered an eight week, workplace smoking cessation programme. The team worked with 32 clients on a weekly basis, motivating lifestyle changes, encouraging peer support and providing NRT. The workers were allowed 30 minutes of paid time each week to attend the cessation programme on site. Their whānau were also encouraged to attend. Although some attrition did occur (eight had left the programme at the end of eight weeks), 37% managed to quit on completion of the eight week programme. Follow up visits will be continued every three months.

Overall, this Aukati KaiPaipa team has achieved a quit rate of approximately 38%.

“Aukati KaiPaipa works because it is ideally suited to Māori. Our clients can choose to attend a rural clinic, come to our offices in town or have a practitioner visit them at home. This is one of the most popular ways that we work with clients – one on one or working with the whole whānau in the comfort of their home, is a powerful way to help people quit smoking.” – Mel Maniapoto

## Te Roopu Me Mutu – The Quit Group



Quitline 0800 778 778

[www.quit.org.nz](http://www.quit.org.nz)

Any health professional who believes that Māori who smoke are a “lost cause” may be surprised by statistics from The Quit Group.

In the past few years there has been a steep increase in the number of Māori callers to the Quitline – 10,000 in 2008, double the number in 2005.

Almost a quarter of new callers each month are Māori. This number is even higher (one in three callers) for the Txt2Quit service, through which smokers can receive support and advice through text messages.

The intention to quit is clearly strong, and growing. Dr Peter Martin, medical advisor to the Quit Group, says that there is no medical reason why Māori are more likely to smoke or should find it harder to quit. “People who grow up in a family where smoking is common are more likely to become smokers, and are more likely to socialise and live with other smokers. Hence the problem is a social one which transfers from one generation to the next. However a problem which has been produced by social factors can also be helped by social changes, and as more Māori become non-smokers - and buildings such as those on Marae become smoke free - the more we can expect to see young Māori as non-smokers.”

The Quit Group offers various services to which health professionals can refer. The Quitline is a support centre where smokers receive advice and help from trained staff. Advisors discuss the person’s addiction, and create a Quit Plan to help them through the entire process – including relapse.

Txt2Quit is proving attractive to smokers with an average age of 20 (compared to Quitline callers who are generally

in their 30s). After an initial registration, smokers receive a series of text messages up to and beyond their Quit Day. Running for 26 weeks, the service offers ongoing support and advice.

Dr Martin would like to see more referrals from health professionals. “Few callers to the Quitline have been referred by health workers, which is disappointing, but it may indicate that we have not been successful in informing health professionals of the services which we can offer! However it could also mean that many health workers have become Quitcard providers and are able to offer a cessation service themselves.”

### Quitcards for Subsidised Nicotine Replacement Therapy

- Quit cards are available from the Quitgroup: [www.quit.org.nz](http://www.quit.org.nz) or 0800 778 778
- Quit cards can be completed by a prescriber or a person who has completed smoking cessation training and registered as a quit card provider (see page 46).
- Quit cards enable a person to purchase one months supply of a NRT product from a community pharmacy for the cost of \$5
- A separate Quit card should be completed for each product being prescribed.



 See BPJ 18, 19 and 20 for more information on smoking cessation.

## Smoking cessation campaigns

Around one-third of New Zealanders believe that the dangers of smoking have been exaggerated.<sup>4</sup> Face the Facts is a new initiative to inform all New Zealanders about the facts surrounding tobacco use. The initial Face the Facts messages are:<sup>5</sup>

- 5,000 New Zealanders die annually from smoking.
- Nicotine replacement therapy (NRT) is safe and doubles chances of quitting.
- Children who have a parent who smokes are three times more likely to become smokers.
- Smoking robs your loved ones of 15 years of your life.
- All cigarettes are deadly (including those with various descriptors e.g., light and mild, rollies and tailor-made).

In an evaluation of the Me Mutu/New Zealand Quit Campaign, it was identified that the key motivator for smoking cessation for Māori was the concept of maintaining whānau. The campaign used the message “It's about whānau”. Stopping smoking gives a choice to be around for tamariki/mokopuna (children, grandchildren), to be around on the marae and to experience the continuation of their whakapapa (family history).<sup>6</sup>

## References

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2. Ministry of Health. Tobacco Trends 2006; Monitoring Tobacco Use in New Zealand. Wellington; Ministry of Health. 2006
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4. Premium Research. Pack Warnings ad campaign evaluation benchmark report. The Quit Group New Zealand: Wellington. 2008
5. Face the facts. Available from: [www.facethefacts.org.nz](http://www.facethefacts.org.nz) (Accessed May 2009).
6. Grigg M, Waa A, Kawenata Bradbrook S. Response to an indigenous smoking cessation media campaign - it's about whanau. *Aus NZ J Pub Health* 2008;32(6):559-64.