

Positive Choices Webinar_ Deve...e - youth voice & partnerships

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SPEAKERS

Elly Fitzgeraldson, Emily Stockings, Tariq Isaacs, Steph Kershaw

Elly Fitzgeraldson 00:00

Okay, good afternoon, and welcome to the Positive Choices webinar series. My name is Elly Fitzgeraldson and I work at the Matilda Centre for Research in Mental Health and Substance Use at the University of Sydney on the Positive Choices project. Welcome and thank you to our audience for joining today. We're all coming together from different parts of the country today. So I'd like to begin by acknowledging the traditional custodians of Country throughout Australia and their connection to land, water and community. I'm currently on the lands of the Awabakal people in Newcastle, and I pay my respects to Elders past and present. I further acknowledge the traditional owners of the land in which you are meeting us today, and pay respects to their elders past and present. And I'd also like to acknowledge any Aboriginal and Torres Strait Islander people joining us for the webinar today.

Elly Fitzgeraldson 01:02

So before we get into today's presentation, I'll go through a few housekeeping points. As participants, you're currently on listen only mode, which means that we will not be able to hear or see you. We are recording this session, and it will be made available through the Positive Choices website along with the slide handouts. And if you have any questions throughout, you can pop them into the Q and A, into the little Q and A portal thing just down the bottom, so that is separate to the chat, which is to the left of that, yeah, and we will try and endeavour to answer them, or the panel will. So if you're new to Positive Choices, I'll just give you a quick little introduction. Positive Choices is a website that provides access to trustworthy, up to date, evidence based alcohol and other drug information and educational resources suitable for parents school staff and students. Positive Choices is funded by the Australian Government Department of Health and Aged Care and was developed by the Matilda Centre for Research in Mental Health and Substance Use at the University of Sydney, in consultation with teachers, parents and students. So some examples of resources that we disseminate or host on this portal include fact sheets, videos, webinars and games, as well as classroom based drug prevention programs that are proven to reduce drug related harms. I encourage you to visit our website to have a look at some of these resources.

Elly Fitzgeraldson 02:45

But on to today's webinar, which will cover the process of developing vaping and smoking resources with Aboriginal young people. We're very excited to have Associate Professor Emily Stockings, Mr. Tariq Isaacs and Dr Steph Kershaw presenting for us today. Emily is an Associate Professor, Professor and NHMRC Fellow and program lead for smoking, vaping and mental health at the Matilda Centre. She has 14 years experience in smoking cessation interventions with a particular interest in vulnerable populations and the mental health and social outcomes of young people. Tariq is a Wailwan man from Coonamble and an Indigenous Engagement Assistant at the Matilda Centre, and he has placement in various roles as part of Indigenous based organisations for the past few years, helping community members. Steph is a Research Fellow at the Matilda Centre, and she leads an innovative program of research and translation to reduce the impact of substance use. Her research aims to improve health outcomes for individuals, families and communities. Okay, over to you, Emily.

Emily Stockings 04:06

Thank you so much, Elly, and thank you everybody for joining us this afternoon. I hope you are doing a little bit of multitasking, maybe having a little bit of lunch, and hopefully this will be really informative and insightful for you. Thank you, Elly, for the introduction. We're really excited to share these resources with you today. As Elly mentioned, I'm Associate Professor Emily Stockings at the Matilda Centre. This is one of the programs that we conducted at the Matilda Centre. Started a couple of years ago now, I think, so we're going to talk through the process of where we started, how we develop these resources, and sort of touch on how we might be able to use them. I popped in here a little quote that came up from our focus groups with young people, which really highlights the core of this project, which is engaging with young people, helping them to help themselves, and really being guided by the youth voices and the partnerships in community. We've done an intro to the research team, Steph and Tariq, when they pop on will also briefly introduce themselves.

Emily Stockings 05:18

I'm going to jump in firstly by looking at the trends in smoking and vaping and also the related harms. Steph and Tariq will then jump on and start talking about how the project was set up and the running of the project, including our Aboriginal reference group, the focus groups we conducted, and the evaluation and feedback process for developing the animations. I'll jump back in and talk about, a little bit about vaping update. So what else is happening in this field and how the resources can be used in a practical sense.

Emily Stockings 05:51

So you may be aware that the 2022-2023 National Drug Strategy Household Survey came out relatively recently. First of all, we know that vaping is increasing across all groups, all kind of subgroups in the population. So this is not something that is unique to people of Aboriginal and Torres Strait Islander status. We are also seeing increases among this group. So one in three, from the from the most recent survey, one in three Aboriginal and Torres Strait Islander people aged over 14 had ever tried to vape, and this is largely consistent with the rates among the general population, around 7% had used vapes regularly, and one in 20, so around 5%, had smoked, had both smoked and used vapes. And this is important because we know that there are additional harms for people who are dual users. When

looked across the board, and I think there are still some analyses that are occurring with this data set, rates of vaping were elevated among people of Aboriginal and Torres Strait Islander status, and this was around 1.5 times higher. I'd have to add, though, that there are very few data sources available focusing on young people specifically. So this is quite a difficult thing to nut out. Generation Vape does have some data on young Aboriginal people, and I think they are in the process of working through that data and disseminating it.

Emily Stockings 07:17

For smoking, the smoking rate among Aboriginal and Torres Strait Islander people for a long time in Australia, has been elevated, and this goes back to the roots of a lot of the discrimination, the lack of access to resources, the trauma that has been experienced among these groups. This is something that has been a long term trend. The good news is that that gap is narrowing ever so slightly. So from the most recent wave of the NDSHS, the smoking rate was 20% this is all ages, so 14 plus, and this was a significant decrease from 2010 where 35% were smoking, and this is importantly, mostly driven by young people not starting smoking. So this is showing that the new generation of young people are less likely to initiate smoking, which is great, we're seeing a bit of a shift there. However, the rate is still 2.6 times higher than the general population in Australia. So we can see this is the rate, proportion who smoked daily over time from 2001 to 2022. The general population, Australian population rate is now around 8% daily smokers, so that the 20% is relatively elevated, but we are seeing a decline over time in both groups. The good news, as I mentioned, is the greatest reductions in smoking are seen among young Indigenous people. So those who never smoked. This is from 2010 to 2022 increased from 62 to 85% so the majority of young people aged 15 to 17 reporting never smoking. And the current smokers in this same time period fell from 33% which, as you can see here on the graph, this is where it was. It was in 2010 and fell to 13% so we're seeing a huge reduction among young people not choosing to smoke. However, even this is going in the right direction, it is still elevated. The rates are still elevated compared to the general population, where smoking rates in this age group are more around 1% so good news, but still a way to go.

Emily Stockings 09:25

I wanted to touch briefly on the harms of vaping. The harms of smoking are relatively well known, so cancers, cardiovascular disease, increased risk of oral health, these are relatively well known. What is less known is the impacts of vaping. One important thing is the airways. We know that young Indigenous people are more prone to asthma and respiratory conditions, so this was something that really was concerning to me. So vaping, just by the process of vaping, it increases inflammation in the airwaves, and this can bring, lead to breathing difficulties. So the ingredients in vapes, there are many, but the main carrier fluid is propylene glycol. This is hydrophilic. It means that it sucks up water, leaving everything in your mouth and in your lungs quite dry. This in response, your body goes, oh, I need to increase my mucus secretions, to moisturise my respiratory tract so we see things like increased mucus, increased cough, chest tightness and reduced lung function. From this chronic inflammation can intensify asthma symptoms and trigger asthma attacks, which is very concerning among a population where asthma is already elevated. And when we look over time, we know that there is a two, two fold increase in chronic bronchitis in adolescence, including chronic cough phlegm and kind of constant irritation of the airways. So if you've seen this in in reality, this is, this is what's happening behind the scenes on the brain. So very briefly, nicotine is an incredibly addictive substance. The

adolescent brain is incredibly neuroplastic. The combination of these two things is a perfect storm. So the adolescent brain is very, very vulnerable to the effects of nicotine and early exposure can rewire the brain to be more, essentially, more addicted to nicotine, more susceptible to long term addiction, this can then lead to increased risk of other substance use because it's working on that reward pathway. So increased comorbid substance use, increased risk of anxiety, depression and mental disorders and in general, impaired coping, poor sleep and disrupted schooling. So it's not just the chemicals and the impact on the physical body, it's also the impact on the developing brain and young people's coping skills.

Emily Stockings 11:49

And finally, before I hand over to Steph, I just wanted to talk about why prevention is so important. So this is an age of onset curve for tobacco. This is from the World Mental Health Survey, some work that we did with the Lancet Psychiatry a few years back. What it's showing, you don't need to follow all the dots and the graphs, but basically, the median age of starting tobacco use falls between 16 to 19 years, regardless of the country and the culture that we're looking at. This is an incredibly consistent age of onset curve. So between these ages of 16 to 19 so in between here you can see that rates are going from less than 10% using close to 90% having ever used so what we need to be doing is intervening before onset occurs. So we call this primary prevention. So this is what we were aiming to do in this project. I'll hand over to you, Steph

Steph Kershaw 12:41

Great thanks, Emily. So it's my pleasure to introduce you to the project and how we went about it, and I'll be sharing this part of the presentation with Tariq. So it all started in 2022 when New South Wales Health reached out to the Matilda Centre to ask if we'd be happy to engage and work with Aboriginal young people to co design and develop two animations as well as two accompanying fact sheets, and both of them, one to be focused on vaping and one to be focused on smoking. So these resources were developed with and specifically for Aboriginal young people living in New South Wales. But I just want to highlight the messages are relevant for Aboriginal and Torres Strait Islander young people across Australia, and the real key success to this project was having Aboriginal young people as members of the research team.

Steph Kershaw 13:29

So to ensure that the researchers, resources were relevant and culturally appropriate, we used an iterative co design process, and this meant that we had an Aboriginal Engagement Assistant attached to the project, as well as many other Aboriginal young people's voices throughout the project. And how we were able to achieve some of this is through the Matilda Centre Youth Advisory Board, which is a dedicated group of nine young people aged between 16 to 24 and we regularly engage with them in our research projects. And so we were very lucky that two Aboriginal young people from that YAB joined the project start to finish. And we were also very lucky to be able to support an Aurora Foundation intern throughout the project, and so there was a lot of back and forth. We've tried to separate it into stages, but I can tell you now there was a lot of emails and discussions, and it was a very iterative process.

Steph Kershaw 14:36

So we did undertake two formal consultations. Firstly, we started with focus groups. We just wanted to hear, what do young people know about vaping and smoking? What do they want to know about vaping and smoking, and how do they think these resources should look and then, after we've gone and developed those resources, we conducted an online evaluation to make sure that we gathered a wide range of perspectives and input as well. Key to this project was also the partnership that we made with Garuwa, which is a New South Wales digital agency, and they are owned and led Aboriginal organisation, and they designed and developed all the characters and artwork. And this project was also supported by an Aboriginal Reference Group who helped connect us with a key organization, as well as guiding the overall project aims.

Steph Kershaw 15:31

So the image at the bottom of this slide shows the very rough flow of the project, phase one being the literature review that we undertook, and the focus groups, how that fit into phase two, developing the content, and then into phase three, which was the evaluation. But there was a lot of overlap between these phases. And as you can see from the top of the graphic, we were continuously working with Aboriginal young people and the reference group throughout and refining based on the needs of young people. I'm now going to hand over to Tariq, who undertook the focus groups. Over to you.

Tariq Isaacs 16:09

Thanks for that, Steph, so one of the first things that we did was we held two focus groups in early 2023 one was in person at an Aboriginal organisation, and the other was online. The young people who participated in the focus groups were mostly in high school, and their mean age was 18. We utilised a semi structured approach with broad questions like, "do you think smoking and vaping are the same or different", and "what do you think happens to your brain and body when you vape". This way, it let young people guide the conversation. Emily and I also made sure to start the focus groups by saying there were no right or wrong answers, and anything that they said was anonymous. This helped create a safe and open discussion.

Tariq Isaacs 16:58

We gathered a lot of information out of the focus groups around what young people's motivations were to vape, such as they liked the flavours and it helped some cope with stress, even their motivations to not vape like the high costs. Knowledge about the effects and consequences was something that kept coming up. Smoking was seen as much worse than vaping, with one of the participants even saying that it was basically like killing yourself. But there was limited knowledge about the health consequences for vaping. Some young people knew about the health, negative health consequences impacting breathing or heart problems, where others said they didn't really think there was any consequences. Young people also talked about how their own personal experiences, including having family that smoked or vaped, and how they saw smoking as more of a generational thing. They also talked about how smoking and vaping can impact relationships. They were much more likely to sit next to someone who smells of a bubble gum vape than cigarette smoke.

Tariq Isaacs 17:58

The other main theme was accessibility, particularly with vapes and how they are accessible, convenient and cleverly marketed to the young people. We also did a detailed literature review to see

what the latest evidence was. We then combined all the evidence as shown in the first column and the information from the young people in focus groups shown in the second and distilled this into several key messages. This table here is just an example from the prevalence section for vaping. There was a lot of other sections, including risk and protective factors, harms, recommendations for cessation and harm reduction. Once we drafted the key messages, we spent a lot of time refining them, particularly in collaboration with the Matilda Centre Youth Advisory Board and the reference group, identifying what the most critical messages were and should be a part of the animations, as opposed to which messages should go on the accompanying Fact Sheet.

Tariq Isaacs 19:02

During the focus groups, the youth thought that the use of vibrant colors would attract and keep a young audience by motivating them to be open to receive a message, we brought a few different options to the table, and the style you see in the slideshow was chosen as they felt a more lighthearted approach, with a more lighthearted approach, they would be more likely to stay with the video, if it was a more confronting style, they would just keep scrolling, as the young people like to say. And then the fun began, which was spending a lot of time iteratively workshopping the scripts and working with Garuwa, the digital agency, on the storyboards. This involved multiple rounds of review and meetings, again with Indigenous members of the Youth Advisory Board. This is also where it was invaluable, having young people involved through the research team and the YAB as they were happy to spend time thinking and chatting through how things should look and what things should be set what colours things should be, and how everything should feel overall, and now I'll hand it back to you. Steph.

Steph Kershaw 20:06

Great. Thanks, Tariq. And so once we had a rough draft of the animated videos, we then ran an online evaluation, and this was open to all Aboriginal young people based in New South Wales, and this was just to understand what they liked about the draft animations and what changes should be made. And it was really important to us that we wanted to collect a wide range of perceptions and make sure that the messages were relevant and engaging for young people. So we received 136 responses with the mean age around 17, and the majority of participants also reported living in metropolitan areas and having a current education level of around year 12. So they were slightly older than the target audience, because we were hoping to target more 14 to 17 year olds. And interestingly, around 70% of participants reported having vaped an e-cigarette, and some reported vaping a few times a week.

Steph Kershaw 21:11

So what did the young people think of the animations? Well, the good news is they, most of them said not to change a thing, which was also a relief, because we had spent a lot of time going back and forth, and it's always nerve wracking to get feedback on your work. And so for those that did suggest changes, they really wanted more information about health effects. So on the slide is an example of how we added what happens to your lungs into the animation, and we also made sure to put this detail into the fact sheets. So it did seem that among the young people that we spoke to, it really isn't clear what the health impacts of vaping are, and it's something that we need to be talking about more. They also wanted the messaging to be more direct, so we made some edits to the way things were said. And also the big change that we made was to improve the music, because apparently the original music was quite old fashioned, which I thought was funny, and also shows the real importance of engaging

young people in your target audience in resource development, because I personally quite liked it. They also just wanted to improve some of the animation transitions, but that was to be expected, as these were draft animations, but overall, received a lot of positive reactions to the animations, and I put some examples up here, including "I like the animation style and the characters in it", "it really delivers a message that makes you stop and think of the impact of vaping and smoking".

Steph Kershaw 22:46

And so after we finalised the animations, we then packaged everything up and we delivered it to the New South Wales Health and these resources are now freely available via the New South Wales Health website, and the Positive Choices team will put the link in the chat very shortly. So as you can see, there is the two animations, one on vaping and one on smoking, and there is also the accompanying more detailed fact sheets as well. And these resources, as I said, are freely available. They're downloadable and accessible. So you can use them in your work, and I'm going to now hand over to Emily, who's going to talk through some of the ways about how these resources can be used. Thanks, Em.

Emily Stockings 23:36

Thank you so much. Steph and Tariq, who shout out, this is his first webinar. Absolutely killed it. Look, there's nothing quite like working with young people to make you feel really old, but that's why we do it. The whole idea is that we're developing resources that are going to be used by young people so they need to be engaging. I think Steph and Tariq, you just did a fantastic job of, kind of demonstrating how you work with multiple different timelines, different stakeholders, balancing, you know, deadlines for New South Wales Health and then trying to engage focus groups with young people. It was really difficult task, but it was also very enjoyable. At one point, there are a lot of balls in the air to juggle simultaneously. And I think the end result really shines because of the fact that we did have this iterative process. It's harder to do, but the end result is so much better because you've managed to tweak it, adjust it, you know, I thought the music was great too, Steph, but apparently we're just oldies now. Anyway.

Emily Stockings 24:32

So what I'm going to talk about now is how these resources can be used in the real world. So the the fact sheets, which are freely available to access, can be provided as printed handouts in common areas waiting rooms, just to be physically available, visually available, they do look beautiful, so they they're a lovely thing to have in a waiting room or any other common area that young people pass through in terms. Of the videos, these could be so a poster could be created with a QR code to the videos for people who might be waiting or any area where young people might be sitting on their phones anyway, and likewise, look ideally if there is a screen available. And this is not something that's going to be true for all services or schools, for example, but the videos could be on rotation just to increase exposure for staff or for teachers or for parents.

Emily Stockings 25:30

Both of these resources are super handy just to have on hand when working with young people as a conversation starter, but also of a way of upskilling yourself and kind of getting on the same page to help with starting conversations and engaging with young people around vaping. So I wanted to, kind of

like hone in on an example of how you might start a conversation with a young person. Because this is something I get asked a lot, you know, where do you start? What do you say? And how can you use these resources alongside that. So the first thing I say to people who are trying to approach this topic is get confident with the facts, because I can tell you now that young people know a lot about vaping, they know a lot about where to get them what flavors are good, what flavors aren't good, how quickly nicotine affects your brain. They are cluey. So being cluey as well helps you get on that same page and just gives you that confidence to be able to have that conversation with someone. So these fact sheets are a really great way to just get, like, the top line main points that you need to be able to go in and go, Yeah, okay, I think I can, I think I can speak about this now.

Emily Stockings 26:36

The second is finding the moment. So the whole project has been so peer led, you know, we don't want to go in and step on young people's toes. The whole idea is that we enter their world and we meet them where we're at. So if you see someone vaping, or you hear about it in the news or social media, or if someone is caught vaping, or if they are struggling to quit or struggling with it, let them lead you into that conversation and you follow them there. So finding the right moment. We don't want this to become punishable offense. You know, this is not about punishing behavior. This is about improving health. So flipping it as an opportunity to improve health, then when you do have a conversation with young person using open ended questions, showing interest and letting them express in their own words what is important to them. You know, we need to understand that the world is different, and the pressures that they're facing are very different to the pressures that you know we might be facing in our own job. So kind of meeting them where they are.

Emily Stockings 27:42

Being curious is really important, so tell me about it. How does it make you feel? What do you enjoy about vaping? And then find an anchor or create an anchor for change or providing help. What do you wish was different? You know, can I help you when you feel this way? So you said you're feeling stressed about exams or you're struggling to sleep. You know what? What do you wish was different? Is there anything that I can do to make this better? Listening with patience can sometimes be very difficult, especially when you're working with teenagers, but let them convey what it means to them, even if it doesn't seem important to us, that's what's important to them. You know, it's their friendship group. It's the the micro social interactions that are occurring. It's the conversations via social media, that's what's important to them. Conveying expectations is a way of setting the tone for what you hope that person to be achieving without being too judgy about it. So the reason I don't want you to vape is because I'm so concerned about the risk for your brain and for your lungs and for your future well being. So that's our goal. That's where I really want to get you. So let's get there together, as opposed to you shouldn't vape because it's terrible, so it's an expectation of behavior.

Emily Stockings 29:02

Then as you get towards the end, you know, you've you've heard them, you've established the expectation. That's when it's kind of like a moment where you can go, Hey, I've seen this really cool thing. Have you seen this? Can we look at it together? Provide the resources, provide the fact sheet, or show the video, or give a link to the video to say I saw this. I thought it would really resonate with you. Tell me what you think. Then, for people who are vaping, so this is getting right to the to the pointy end.

So for people who are struggling to quit or are finding that vaping is becoming very entrenched in their daily behaviors, find the triggers for it. So sit down together, and this goes for smoking as well. These are the same types of behavioral strategies we've used with smokers. So what are the risky strategies? You see someone with a vape, they're handed a vape at a party, they might be having a drink, and that goes so closely with smoking, you know. What are the triggers? Then start practicing a response, literally saying to yourself in the mirror, No, thanks, I don't vape, you know it's not for me, or other ways to, we call this assertive refusal. Like, I know you guys are into it, but that's just not my thing. Practicing saying that, and if you need to also attach an action to that.

Emily Stockings 30:22

So you're basically struggling with what to do with your hands, and vaping and smoking can be very physical. You know that hand to mouth action is very strong, so having a drink, having a mint, can kind of fill that behavioral void and be useful for both smoking and vaping. And then just a general self reflection. Tell me about your day. When do you vape? When do you find it's really difficult? How can we pick out those moments and start trying to attack them head on? And can we fill them with something better? Can we fill them with a podcast? Can we interject exercise? So one of the videos goes into friends are going to go to the movies, so filling it with other pleasurable things, so you're not just taking away, you're also replacing with something that's healthier.

Emily Stockings 31:10

So I wanted to pivot now very quickly before we end to sort of a general update on what's happening in the vaping world. Most people online will be aware that there are changes in the rules. So I wanted to kind of go across that so everyone everyone's on the same page with what's happening. So basically, long story short, any vape that is not intended to help you quit smoking is banned in Australia. So this is what we call the new therapeutic model. Basically any vape that is available should only be designed for a current smoker to quit conventional cigarettes. Any other vape is prohibited to import, to supply and to manufacture, and there are very, very few and very specific exemptions to that. So one is clinical trials, and the other scientific research. So basically, when we talk about all vapes, is it intended for therapeutic use? No, it's banned. If it is intended for therapeutic use. So this is the population of people who may legitimately be wanting to quit smoking, and vapes are found to be relatively helpful for that they are required to be reusable vapes. So basically, the disposable vape market in Australia is ending, and the reusable vapes that are to be provided have to meet certain levels of compliance to the TGA, which is like a standard of quality. So certain flavors restricted to tobacco, menthol or mint, they have to be reusable, and they do have to have plain packaging.

Emily Stockings 32:54

Just going backwards, just to kind of where did we get here? So for the first of January this year, that's when the import ban on disposable vapes came in, and that was just a quick way of stopping the huge flow of vapes into the country. So regardless of nicotine content, there was an import ban on disposable vapes. This just made it easier for Border Force to identify these products and to seize them from the first of July. This is when the current the picture that I got here, this therapeutic process came into effect. So this is the ban on any non therapeutic vape. And for those vapes that are therapeutic, access can be obtained through a GP prescription, and then you can get that prescription filled at community pharmacy, and just to complicate things even further from the first of October 2024 so relatively shortly,

the GP prescription will be scrapped and access will be purely via community pharmacy. So it's a little bit of 'Watch this space' see what's happening, but this is kind of the long story short, vapes, unless they are therapeutic, are banned, and access will be via pharmacy, and this will be via participating pharmacies, and that's up to the pharmacy to opt into the scheme.

Emily Stockings 34:16

So that begs the question, can young people still access vapes? Is this the end of the vaping epidemic in Australia? Well, I wish that was the case. What we've seen so far is that access is still pretty easy, but prices are starting to go up, which is an indicator of the fact that these the ban on disposables that came in to effect the first of January is starting to take effect. So we're seeing less available through bricks and mortar or convenience stores. So your 7/11s your petrol stations, servos, etc. So this access will likely slow. We're probably going to see more of a shift onto online marketplaces. So face-, if you, if you go into Facebook marketplace and you type in fruit, you'll find a number of listings that appear to be very healthy fruit salad, but actually it is, these are ads for disposable vapes that can be accessed online and purchased. So we're probably going to see more of a shift online. The pharmacy supply. Look this. This is yet to be seen, but it may lead to on-selling to minors. The whole idea is that these pharmacy provided products are much less desirable, so the packaging isn't colorful, the flavours are not desirable flavors. So we don't think this is going to happen, but it still could. There is still an avenue that this could be, you know, someone aged 18 plus could go into a pharmacy, obtain a vape and then sell that on to a minor, the same with any other drug. And there is also a possibility, and we are starting to see this, that vapes will start to be provided via the dark net marketplace, the same marketplace that illicit drugs are typically provided. We did see some reports of illicit vapes being contaminated with other drugs. So this is just something also to be aware of and to be across that there's a possibility that we might see a shift towards dark net, as opposed to surface net and bricks and mortar stores.

Emily Stockings 36:14

And finally, just to end on the other research projects that are happening at the Matilda Centre, the OurFutures vaping program, which is a very large cluster randomised controlled trial of a vaping prevention program to be delivered in year seven and eight classrooms. This is designed to it taps into the same sort of behaviors that this these resources we've developed that we're talking today, tap into so increasing resistance skills, assertive refusal, building alternative coping strategies to prevent e cigarette and smoking uptake. So you can get more information about that program on the OurFutures Institute website, which I've linked there. But basically this trial is still underway. The 12 month assessments are currently happening, and it's pretty big. We've got 40 schools across three states participating in this project. So this is also watch this space. We hope to roll that out once the project is completed.

Emily Stockings 37:15

And I also wanted to just give a shout out to Associate Professor Lexine Stapinski who's running this fantastic project, Strong and Deadly Futures, which is a strengths based culturally inclusive alcohol and drug prevention program for high school students. I know Lexine is incorporating some vaping and smoking projects modules within this project. So if you and it is designed in partnership with an Indigenous creative agency and Aboriginal and non Aboriginal students and staff at four schools. The

trial is currently underway, and if you wanted to reach out to Lexine to get more to know more about that, I've popped Lexine's contact details in there, but you can also get in touch with any of us here at the Matilda Centre to learn more about that fantastic project.

Emily Stockings 38:04

So I just wanted to end with a massive thank you to all of the people who are part of this project. So the young people who formed our focus groups, the Aboriginal reference group, we had some incredible insights and advice here. So thank you to the reference group, the Matilda Centre research team, as Steph is well aware my strength is not admin. So thank you, Steph and Tariq for keeping this project running. You guys did such a fantastic job, the Matilda Centre Youth Advisory Board. So this is our wonderful group of young people who advise on all the research projects that we conduct and keep us real. We have many collaborators. Shout out to the team at Djurali, Barang, the New South Wales Ministry of Health, for funding this project. And finally, we would specifically like to acknowledge and thank Tariq, Jasmine and Anita who worked so hard on this project and did a lot of the stuff behind to get it over the line. That's it for the formal part of this presentation, you can contact me. You can also contact Steph and Tariq, sorry, guys that I didn't have time to put your names on this final slide. That was very rude of me, but we are happy to open it up to questions from the chat.

Steph Kershaw 39:42

Yes, I guess we'll hand back to you, Elly.

Elly Fitzgeraldson 39:45

Thank you, Emily, sorry trying to work out my lots of different screens I have opened at once. But thank you so much for that presentation, all three of you. Emily Tariq Steph, it was super informative. And I also laughed about the old fashioned music. You'll have to show me what it was so we can laugh together. But, um, and also, yeah, so interesting hearing about that co design process and that it was done so thoroughly from the very beginning through to the end, which is really exciting and cool. Um, so in terms of questions, sorry, we have a couple that have come through. Firstly, Kate, is asking, is there any capacity to have the posters written in language for some of our remote communities in SA, English isn't their first language? What a great question.

Steph Kershaw 40:54

Yeah, I'm happy to take that one and yes, absolutely. A great question. Kate, ideally, it would be amazing if we could translate the animations and the fact sheets into language. Unfortunately, we weren't able to, with the current project budget, and also, as the resources were focused for New South Wales young people, we would have prioritised languages within New South Wales. But you know, I know that this is something Tariq is very passionate about. Do you have anything else that you wanted to add to?

Tariq Isaacs 41:22

Yeah, you pretty much covered it. Steph, it would have been great. But obviously, you know, we are based in New South Wales, and that would have, obviously been the focus, but it would be great to get some more funding and potentially, never, say never.

Steph Kershaw 41:37

That's true, and I do know that that Positive Choices does have some drug and alcohol resources in language? I don't know the languages off the top of my head, but I know that there are some out there.

Elly Fitzgeraldson 41:51

Yes, always welcome to visit the website and have a look as well. So the next question is from Sarah, do young people use fact sheets, or are they more for parents/teachers to understand how to chat the young people about vaping?

Steph Kershaw 42:12

Maybe we can answer this one together, Em and you know, jump in at any time. I think we developed the fact sheets primarily for young people as an audience, because we were limited with how much information we could put in the actual animations. Tariq will tell you about the very many quotes that we went through on the focus groups and all those things. So we wanted to make sure that any other information that came out of those focus groups, young people still were able to access what the evidence base was, but yeah, I guess parents and teachers could also use that information. Emily, Tariq?

Emily Stockings 42:52

Yeah, no, that's right, yeah. So primarily they were designed for the young person, so that it's speaking to young people, but the content that's in there is largely what we would also include on parent specific fact sheets. There are parent specific fact sheets on the Positive Choices website for something that is a little bit more in depth, to kind of give you a bit of arsenal for when you're when you're chatting with young people. Hopefully that is helpful. Not sure if you wanted to add anything to that Tariq, but basically we didn't want to lose any of the information that we had to cut out of the animations, so that's been sort of absorbed into the fact sheets.

Elly Fitzgeraldson 43:35

Thank you. Um, this is an interesting one, do therapeutic, This is probably for you, Emily, do therapeutic vapes still have the same health concerns? Or are they less harmful?

Emily Stockings 43:49

Look, that is such a good question. So oh, how long is this for? Therapeutic vapes, are they do still have some of the health concerns. What is different is that the people who are using them are ideally smokers. So going from combustible cigarettes to a therapeutic vape, we know is going to be significantly less harmful because of the fact that cigarettes are basically like having a campfire in your lungs. So not only are you getting all of the the nicotine and other chemicals that are part of the actual cigarette, but all of the byproducts of combustion, such as carbon monoxide, are entering into your lungs. So taking that away and going to a therapeutic vape means that you automatically are getting a less harmful substance. So a therapeutic vape, compared to a vape off the street, is that they are manufactured using controlled processes, so you're less likely to get things like contaminants, leaching of the heavy metals into the liquid, we also have restrictions. For instance some flavorings are associated with significant health risks, caramel. So some of these additional harms that can be avoided are going to be avoided, but at the end of the day, the carrier liquid that is in a therapeutic vape

is going to be the same. It will be propylene glycol, it will be glycerin, and these effects will be the same as per disposable vape. So are they the same level of harm? Probably less harmful, but definitely less harmful than combustible cigarettes. I hope that answers the question. They, just by their nature, do have to carry some level of harm just because of the fact that you're inhaling it, and that's how the nicotine enters the system. Ideally, if someone is wanting to quit smoking, we would direct them first line to nicotine replacement therapies that are available just, you know, everywhere, pretty much, because the delivery of nicotine is transdermal, so it's going through the skin, as opposed to the lungs, that would be the preference. But if people are, if that's not helping them, and if they're going to go back to smoking, they're much better off using a therapeutic vape.

Elly Fitzgeraldson 46:18

Yeah, thank you. Thanks for all that context. It really reinforces how important context is with drug use.

Emily Stockings 46:27

That's it. Yes.

Elly Fitzgeraldson 46:31

Are you planning to publish your literature review?

Emily Stockings 46:36

Oh, good question. Steph Kershaw has put a calendar notification in our diaries to Yes, write this up. That is going to happen. It will be a publication of the whole process. So the the literature review will be part of that. So it won't be a standalone literature review. Anything you wanted to add on that? Steph, we're just going to sit down and do and do it right.

Steph Kershaw 47:03

Yeah, we've just got to sit down and do it. But yeah, it does. It does make me think about reflecting on the whole process as a from start to finish. We were obviously on a very tight deadline, because that was set by New South Wales Health. So probably wasn't as iterative a process as we would have liked it. We tried to do the best that we could. So you know, Tariq, I was kind of thinking, other than having more time to do things in depth and capture more perspectives, is there anything else that you reckon we would do differently if we were to do it again today?

Tariq Isaacs 47:35

Yeah, potentially making even more animations. I was really happy with, you know, the turnout with the time restraints that you mentioned a bit before, like, obviously it wasn't as iterative, because we didn't get to go back and forth as much as we'd like, especially with the youth. But yeah, I think timing was the most important aspect,

Steph Kershaw 48:02

Yeah, for sure. And we were very lucky that New South Wales Ministry did actually fund quite a bit of our budget for reimbursing services as well as the young people, because we wanted to make sure that was a priority, and recognising that they were bringing their, you know, expertise and knowledge and, you know, thanking them for their time, even though they criticised my music choices. But that's okay.

Emily Stockings 48:29

They're tough critics. Steph,

Steph Kershaw 48:35

I noticed that the ones asked a question about where the focus groups were. Tariq, would you be happy to take that one?

Tariq Isaacs 48:42

Yeah, so Emily and I actually struggled a little bit, because obviously we're running on a tight schedule, time wise, and it was a bit harder to sort of get a bunch of youth in the same space at the same time during work hours, because obviously they're going to be at school and other commitments. So we did have one in Central Coast, and then the other one we had over zoom, oh yeah,

Emily Stockings 49:13

yeah. The sorry, you go. Steph, you go. Probably the most difficult thing about this project, was the timing, because we had such tight deadlines, being able to do more in depth co design. I guess ideally we would have had more time. But you know, that's research, that's the reality of things. So we did do a few call outs to organised focus groups among our target age range. But as Tariq said, it was so hard because the young people are predominantly in school, but we were able to capture young people from a few different areas. It was predominantly metropolitan and regional, so it doesn't include rural or remote. But that is something that we are aware is an area that we need to explore more in depth. I know that Lexine Stapinski is doing some work in rural schools, so probably reaching out to her for more details around rural specific would be, would be a good idea

Elly Fitzgeraldson 50:22

On that around, focusing in on different groups and seeing if their experiences differ. I'm just wondering if you're surprised by the responses around motivations to vape, and if they're different from if they differed from other young people that you're aware of?

Steph Kershaw 50:42

I think that's a question for you. Emily Tariq and I have really only worked in the Aboriginal community space and heard a lot about from the young people, from their perceptions so but Emily, yeah.

Emily Stockings 50:54

I think what was striking was the fact that vaping was seen as so normalised that there wasn't such a stark difference between the Indigenous kids that we spoke to and other kids that we've spoken to, because it's become rather entrenched. But when we did start identifying differences was when we started talking about smoking and young people saying, Look, this is just a generational thing. You know, my mom, my dad, my aunties, my cousins, everyone smoke. You know, that is the norm. So that's where we really did identify, identify differences. But I think it was very, it was very uplifting to hear that the young people that we spoke to identified as smoking is something that that's what the old crew do. You know? That's not us anymore. There was sort of a shift, but vaping was to sort of kind of

same, same you know it, and it is so pervasive, and that is reflected in the national survey data that we have that it's high among most young people, regardless of their, of their background,

Steph Kershaw 52:05

Yes.

Elly Fitzgeraldson 52:06

Wow, that's interesting. Um, I'll just check if there's any new questions.

Emily Stockings 52:18

There's a question about disposing of vapes that I'm happy to answer, yeah, that one. So disposing of vapes is such a good question. Lithium batteries? Yes, shouldn't go in residential bins. There's kind of like a hierarchy of the best things to do. First of all, don't try to take them apart. That's what we tell young people. Don't try to take the battery out. You can end up burning yourself doing all sorts of crazy things. The best bet, like, I think the gold standard, is that in the area that you live in, check your local councils waste management, and they'll typically be collection places, similar to when you drop off batteries and E waste. So that's the, that's the best nst. The Second best is to put it into a standard residential bin, but keep it completely intact. That way, it means that it's less likely to leach and contaminate things. Don't put it in the recycling. I think a lot of people feel bad they're putting them in a standard residential bin. I think, Oh, I probably should go in the recycling. It can contaminate the recycling. So the best thing to do is to keep it completely intact. Hold on to it until you can go to a dedicated e waste vape drop off. And I know that for the most part, they are just going to go either on the ground or into a bin, but if you do see them, and if you are a good Samaritan, you can pick them up. I think also, when the rollout does come out, pharmacies will be a place where you can drop them off. They're pretty annoyed about this, but such is life. And I think also there are some participating schools and community health services that will also take them, so just do a bit of a bit of investigating.

Elly Fitzgeraldson 54:11

Thank you for that. Did you reimburse the young people who participated in this? Did you pay them for their time, and do you have any insights on getting funding for that?

Steph Kershaw 54:29

Tariq? Do you want to take that one?

Tariq Isaacs 54:31

Yeah, I can take the first part of the question. Then I'll throw it over to Emily, yeah, of course. We we reimburse them for their time. I mean, we couldn't have done it without them, so they definitely needed to get something out of it. But yeah, I think Emily can go into more detail about the funding, yeah.

Emily Stockings 54:52

So this particular project was funded through the New South Wales Ministry of Health. So this was a grant that was provided to us the way. That we did the reimbursements and Steph, I might need your help here was via, was it Prezzee vouchers that we distributed?

Steph Kershaw 55:09

So gift cards that couldn't be used for the purchase of alcohol or tobacco.

Emily Stockings 55:13

All right, yeah, yeah. So obtaining similar funding. I mean, gosh, that's the million dollar question, isn't it? We, I work a little bit with some groups in Western Sydney LHD, and a lot of it just comes down to advocacy. So speaking to your local council and going to governing bodies or organisations that may have an interest. So Lung Foundation is one. There are, Cancer Council is another that you know, if you are seeking small grants to to conduct this kind of work, basically just a lot of outreach is, is what's involved? I'm not sure if you wanted to add anything further to that Steph,

Steph Kershaw 56:00

I think it's also just important to highlight to any funders that co-design is best practice. Like, if you want good uptake and to have a real impact, you need to engage with the people who are going to be using whatever it is, whether it be animations, a fact sheet at the end of it, and so making sure that it's really clear from the start that in your budget, this is what we are going to allocate to, setting up a reference group to co design process and just, yeah, highlighting that importance of the co-design and the need for time and money to do it properly.

Emily Stockings 56:35

Absolutely

Elly Fitzgeraldson 56:37

And on that. I know we don't have much time, but I'm just curious, did you get any feedback from the young people about their experience with that co-design process?

Emily Stockings 56:50

When we were in the focus groups, Tariq, teens just have fun. I don't think we specifically asked about how was your experience with the focus group process, but just from the banter and the enjoyment, I think they got a lot out of it, and just being able to sit down and feel like they were being listened to, we also provided that anyone who participated, you know, we shared the resources with them, and I think that really adds to a feeling of empowerment. You know, we spoke to you. It was so useful. Thank you so much. This is what we produced because of you guys. So I think it is so rewarding for us, but also for them. I don't know if there was anything else, Tariq, you wanted to add to that?

Tariq Isaacs 57:35

Yeah, they were really comfortable with it, which was really good. So we could get honest sort of responses. And, you know, some people are a little bit too comfortable, which was good, and that created a really, yeah, sometimes even too honest conversation, which is exactly what we're kind of looking for.

Emily Stockings 57:52

Exactly, yeah.

Steph Kershaw 57:53

I think that also speaks to how good you are at your job, Tariq. And I think also we like they continue to engage to us. They continue to respond to our emails and respond to request. So we can't have scared them off too much.

Elly Fitzgeraldson 58:11

Yeah, I think it's really cool what you've done. And thank you so much to all of you sharing that process today and sharing with everyone how to access everything, and also, as we've mentioned earlier, people can go to the Positive Choices website to see the recorded presentation and the slides, which will also be available. And thank you so much to all of our attendees. If you have any additional questions, please reach out to us so you can contact us if you have any questions. And thank you again for attending.

Steph Kershaw 58:56

Thanks for having us Positive Choices