

More than a bad habit – a systems explanation of tobacco harms in the NT

Ruth Canty^{1,3}, Janet Hoek^{2,3}, Coral Gartner^{3,4}, Marita Hefler^{1,3}

¹Flinders University, College of Medicine and Public Health, Flinders Health and Medical Research Institute, Darwin, Northern Territory, Australia, ²University of Otago, Dunedin, New Zealand, ³Centre for Research Excellence in Achieving the Tobacco Endgame, University of Queensland, Brisbane, Australia, ⁴School of Public Health, University of Queensland, Brisbane, Australia

Presenter's email: ruth.canty@flinders.edu.au

Introduction

Smoking accounts for 18.3% of the mortality burden amongst Northern Territory (NT) adults aged over 30. This reflects substantially higher daily smoking prevalence in the NT than the national average (14% and 8% respectively among people aged 18 and over). The NT has the largest proportion (26%) of First Nations people of any Australian jurisdiction. First Nations people experience a disproportionate burden of harm from smoking, which is closely linked with colonisation and the commercialisation of tobacco.

Method

Using qualitative data collected from retailers selling tobacco and policy actors in the NT, we developed a conceptual framework to examine how tobacco harms are generated and sustained in the NT.

Key Findings

We propose three explanatory factors that mediate tobacco harms in the NT – structural violence, slow violence and spatial injustice. These mechanisms are sustained by contemporary neoliberal governance and economic systems around which societies are organised. Finally, systems justification theory provides a psychological explanation for why these structures endure even though most people understand and acknowledge that smoking is harmful, and availability of other harmful, addictive products is more closely regulated. Individual and collective agency in the context of smoking behaviour and tobacco policy respectively is constrained, sustaining the tobacco epidemic in the NT and reinforcing systemic inequities.

Implications on communities, practice, policy and/or First Nations communities

Although substantial progress has been made over the last two decades in Australia in reducing smoking and related harms, narratives of responsabilisation continue to normalise individual responsibility as a regulatory mechanism over systematic change. We have used this conceptual framework to examine smoking prevalence and related harms in the NT but suggest that it is relevant to other policy domains and contexts.

Disclosure of Interest Statement:

RC is supported by an Australian Government Research Training Program stipend and a National Health and Medical Research Council Ideas grant (Grant No. 2029002). CG receives funding from NHMRC grants (GNT1198301, GNT2019252) and is supported by an ARC Future Fellowship (FT220100186). MH receives funding from NHMRC grants (1198301, 2029002) and is supported by a Heart Foundation Australia Future Leader Fellowship (110860-2025). RC and MH work in partnership with remote community owned stores in the Northern Territory to develop strategies to reduce supply of tobacco in remote communities.