

Scaling Up Cessation Support: Iterative Design of a Statewide Smoking and Vaping Training Program for Health Professionals

Authors:

Hillary Rono¹, Hannah Brumm¹, Claudia Regan-Knights², Jillian Bleazby¹, Alyssa Abasolo¹, Madonna Kennedy², Chloe Willats¹, Nikki Sharry¹, Joanne Isbel¹

¹*Health Contact Centre, Queensland Health, Brisbane, Australia*

²*Prevention Strategy Branch, Queensland Health, Brisbane, Australia*

Presenter's email: hillary.rono@health.qld.gov.au

Background:

Tobacco is the second largest contributor to Australia's disease burden (7.6% in 2024). [1] Whilst daily smoking rates in Queensland have declined (8.9% in 2024), smoking remains disproportionately high in Aboriginal and Torres Strait Islander communities and in rural and remote regions. Vaping has also increased, creating challenges for cessation care. [2]

Although brief cessation interventions are cost-effective, clinicians frequently miss opportunities due to inadequate training, low confidence and unclear referral pathways. Quitline Queensland was funded by the Prevention Strategy Branch (PSB) to address these gaps by strengthening workforce capability and referrals into evidence-based cessation support through a statewide training program.

Intervention:

Between November 2024 and November 2025, three iterations of an online smoking and vaping cessation training program were delivered.

The program covered nicotine replacement therapy, brief interventions, and referral pathways. Content was tailored for priority populations, including people experiencing mental health concerns, young people, and Aboriginal and Torres Strait Islander peoples.

Implementation and Effectiveness:

Across the three iterations, 639 clinicians from Queensland Health and external organisations participated. At baseline, only 23–37% of participants reported routinely referring clients to quit services, and more than half reported low confidence in addressing vaping.

Following training, knowledge of vaping products increased from 8% to 82%, and 77% of participants reported confidence navigating referral pathways. Follow-up data indicated sustained changes in practice, with vaping screening increasing from 60% to 80% and vaping referrals increasing by 48%.

Conclusion:

Iterative delivery and evaluation supported refinement of a well-accepted training program reaching a diverse Queensland health workforce.

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

Online delivery supports workforce development across metropolitan, regional, and remote settings. This strengthens cessation care for First Nations communities and other priority

populations and provides a transferable model for integrating vaping into routine cessation care.

Disclosure of Interest Statement: The authors have no conflicts of interest to disclose.

References

1. Australian Institute of Health and Welfare. Australian burden of disease study 2024 [Internet]. Canberra: AIHW; 2024 [cited 2026 May 11]. Available from: [AIHW Australian Burden of Disease Study 2024](#)
2. Queensland Health. Smoking: report of the Chief Health Officer Queensland [Internet]. Brisbane: Queensland Health; 2025 [cited 2026 May 11]. Available from: [Queensland Chief Health Officer Smoking Report](#)