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Exploring anti-tobacco messages from an experiential arts activity with Aboriginal youth in an Australian high school setting

Abstract

High Aboriginal smoking prevalence exposes youth to passive smoking and encourages initiation. Using an educational arts-in-health project, we engaged youth in exploring the meaning of smoking for the Aboriginal community. An interactive classroom session educated N=20 Aboriginal high-school students about smoking and mass media literacy, followed by a poster-making session. The students could choose a threat-appeal, a positive benefit appeal or an advocacy message, targeted at youth, families or Elders. The visual and textual content of the posters underwent framework analysis to explore the range of messages and images. Students created innovative posters depicting issues facing Aboriginal people from smoking, including the potential loss of parents to ill-health. The majority of messages were fear-based (59%), and targeted family (63%). Over half of the students included Aboriginal arts styles or symbols. Aboriginal students exhibited insight into the effects of tobacco on their community.

Keywords: Aboriginal health; tobacco smoking; mass media; health promotion; health education; youth

Introduction

Closing the gap on Aboriginal smoking requires strategies to help smokers quit smoking and to reduce initiation by youth, if the goal of halving smoking prevalence is to be reached by 2018 (Australian Government, 2011).

Young people comprise over half of Aboriginal Australians. Smoking uptake occurs earlier in Aboriginal children than the general population (Australian Bureau of Statistics, 2007, Gould et al., 2015). Earlier smoking initiation is associated with higher nicotine dependence (KS Kendler et al., 2013). Prevalence of daily smoking is higher in Aboriginal adults at 41% compared to 13% in the general population (Australian Institute of Health and Welfare, 2013, Australian Bureau of Statistics, 2014), and also higher in Aboriginal youth (M Scollo, Winstanley, Mh, 2012). Prevalence of Aboriginal smoking is changing slowly: among 15–17 year olds, 77% in 2012–13 said they had never smoked, compared to 61% in 2002 (Australian Bureau of Statistics, 2013). However the gap in daily smoking rates in the non-Aboriginal and Aboriginal populations only reduced by two percentage points between 2001 and 2012–13 (Australian Bureau of Statistics, 2013), with little change in remote communities, and those in the 25–34 year age group (Australian Bureau of Statistics, 2013).

In the general population, targeting youth through media and multi-component community interventions prevents smoking uptake (Brinn Mp et al., 2010)(Carson Kv et al., 2011). A Cochrane review on interventions for Indigenous youth reported insufficient research to confirm that these approaches would work for this target population (Carson Kv et al., 2012). There is some international evidence that culturally targeted programs can assist Indigenous youth to quit smoking (GS Gould et al., 2013). Threat campaigns are still the most effective type of campaign to influence cigarette smoking, however this has had limited exploration in Aboriginal Australians (HS Stewart et al., 2011, GS Gould et al., 2014b).

This article reports on an innovative health promotion activity that used the arts to educate regional Aboriginal youth about the harms of tobacco smoking. The aim was to empower Aboriginal high-school students to make their own anti-tobacco posters. The purpose of the evaluation was to explore the messages in the students' posters according to choices given during the session.

NB. The term Aboriginal is used because the Indigenous population in NSW is mainly Aboriginal. We use Indigenous when referring to the wider Australian or the international context.

Methods

The project was part of a regional tobacco control program, overseen by a key stakeholder committee with Aboriginal representation, and a youth subcommittee, with representatives from health, social services and the Department of Education and Training. The activity reported here took place at a regional NSW high school in 2011. Twenty Aboriginal students from years 7 to 12 attended a two-hour interactive classroom session.

A PowerPoint presentation provided education about tobacco smoking in Aboriginal communities, explained mass media literacy, and was followed by a practical session of art and message-making. The Persuasive Health Message Framework (PHMF) (K Witte et al., 2001) was used as a guide. The PHMF recognises that for a message to be effective it should include the audience's cultural preferences, demographics, salient beliefs, message cues and sources, and perceptions of threat and efficacy (K Witte et al., 2001).

During the session students were shown examples of anti-tobacco posters, including the targeted 'Break the Chain' campaign (Australian Government, 2011). The students evaluated the posters for their message type. They could choose from three types of messages:

1. A threat-appeal designed to arouse fear, including physical or social harm.
2. A positive benefit appeal to portray the benefits of complying with the recommendations.
3. An advocacy message to benefit those unable to speak for themselves, e.g. children.

The messages could target youth, families or Elders. Students were asked to include an action component in their poster, for example recommending a behavioural change or referral to a support service, to enable the message recipient to feel it is within their power to change.

A General Practitioner tobacco treatment specialist trained in arts therapy (GG) ran the session, accompanied by a project officer, a local Aboriginal artist, an Aboriginal education

officer and the Aboriginal students' advisor (MS). The adults assisted students in creating posters and answered queries. During the workshops students could voice their concerns to the adults and debrief on the issues raised.

In the first session the students drafted their artwork and messages. The school provided follow-up sessions to finish the posters. A poster exhibition was held at a community event, which included a competition for the best posters. Thus all messages we interpreted were first displayed in a public forum.

The posters were photographed during the public exhibition. The authors (GG and MS) independently assessed and charted the poster content into predetermined frameworks (NK Gale et al., 2013) and reached consensus by discussion. The aim was to categorise the messages in terms of the task given, rather than psychological interpretation. Posters were assessed for focus and format. The focus or target audience for the poster (youth, family, Elders or other) was cross-tabulated with the message format (threat, positive benefit, advocacy or other). 'Other' was selected when the focus or target was unclear. Thus a grid was formed of 12 possible options (e.g. threat-youth; threat-family; threat-Elders; threat-other and so on). Messages and images were further categorised as a loss frame ('what you lose if you smoke') or gain frame ('what you gain if you do not smoke') by extracting and organising into the categories of health effects, relationships and resources. MG (an Aboriginal academic) described and interpreted the Aboriginal content and symbology in the posters. The school was asked to give feedback on the workshops and submitted the students' written remarks.

Ethical considerations: This project was run as an educational activity, and not considered a research project. No personal information was collected from the students. The artworks were analysed for how closely they aligned with the fulfilment of the project aims only. All posters were exhibited to the public in a community exhibition with written permission of the children. Therefore Ethics approval was not required as the posters were available in the public domain.

Results

Twenty Aboriginal students created 23 posters, containing 32 message styles. The variety of colourful and innovative posters with original messages demonstrated the students' understanding of the issues facing Aboriginal people from tobacco smoking. Most of the posters included three ingredients: a message plus an image and a call to action (such as call the Quitline).

Out of the 32 anti-tobacco messages analysed for style, the majority of messages were fear-based (59%: N=19) and targeted at family (63%: N=20), with 'family fear-based' being the largest grouping (Figure 1). Aboriginal cultural symbols or art styles were used in 52% (n=12) of the works.

<Figure 1 here>

Figure 1. Spread of message foci and types of campaign in posters by Aboriginal youth in regional NSW

Aboriginal symbols and styles were used in the following manner: a) colours of the Aboriginal flag (red, black and yellow); b) Aboriginal flag motif; c) Aboriginal dot painting styles; d) Aboriginal 'x-ray' art (showing skeletal structures); e) traditional Aboriginal symbols of circles; f) symbols from the Dreaming. Colours were used to draw the attention to Aboriginal community to the message, so they would know the message would be meant for them, and to convey meanings within the messages. Some of these were subtle, e.g. a beaded headband and bracelet on a mother who is smoking, or dramatic – splashes of red and black as a warning covering the background of a poster about disease and death.

Table 1 shows the extraction and categorisation of messages and images according to a loss or gain frame across the categories of health effects, relationships and resources. The loss components were mostly negative health effects (e.g. cancer) or loss of life, and one illustrated a house burning down. Many posters also depicted the risks posed by smoking to family with loss of parents to ill health or distancing of parents, for example by having to leave to smoke. Family-based messages were sometimes coupled with advocacy for children. Messages could be quite direct 'your smoking affects us...don't do it'.

<Table 1 here>

Several artworks and messages showed the longer-term issues for Aboriginal people. These included: the inter-generational impacts of smoking and the need to ‘save the family tree’ (Figure 2). Figure 3 exemplifies fear-based family-orientated messages. One message humorously illustrated the threat of smoking with a group of endangered Australian animals. Positively framed messages were less frequent, but included helping the family stay healthy and strong.

<Figure 2 here>

<Figure 3 here>

Figure 2. Artwork depicting the choice between smoking and not smoking and implications for the family tree and survival of Aboriginal communities, reproduced with permission from the artist

Figure 3. Artwork depicting the serious risk of smoking to the mother and isolation from rest of the family, reproduced with permission from the artist

School feedback showed the positive response of the students.

‘It was fantastic because you learned stuff and had fun at the same time.’

‘I learned that if you smoke you could die and it affects the kids too.’

‘It was a good workshop and I would do it again.’

Discussion

This school-based two-hour interactive workshop on making salient tobacco control messages resulted in a variety of innovative posters and culturally targeted anti-tobacco messages.

Students demonstrated an understanding of the issues facing Aboriginal people through smoking. The messages were mostly threat and family based, and also included advocacy for children. Over half of the posters included Aboriginal art styles or symbols.

Resnicow considers that surface and deep structures are important when developing culturally sensitive messages for targeted substance use prevention. (K Resnicow et al., 2000) Surface structure includes the use of peoples, places, colours and images that the community relate to. These govern the 'fit' of the message to the community. Deep structure incorporates the cultural, social, historical, environmental, and psychological forces that influence the target health behaviour, and govern the salience of the message. Deep structure includes the values held by the Aboriginal community such as cohesion, community wellbeing, and the centrality of family and kinship. Taken as a whole, these youth posters incorporated elements of surface and deep structure. Students integrated their Aboriginal heritage in a bid to not only express their thoughts, but also to attract those from community to listen to the message.

Health education is part of the field of health promotion, which includes participation and empowerment (Who, 1986). Although this workshop was not aimed to be a cultural experience, aspects of pedagogy recommended for Aboriginal learning were used, such as hands on learning, use of metaphor, symbols and images, community-based real life experiences, story sharing, and non linearity(2013).

Engagement is vital in education. The students' construction of artwork with their own messages allowed them to express their own knowledge about how smoking affects their families and community. Many may have already witnessed some of these effects. The students reinforced their learning from the educational session by putting the knowledge into a tangible format and this allowed the process to be personalised.

Arts-based approaches engage our senses in a different way to text, and can be effectively used to disseminate knowledge (JA Parsons and KM Boydell, 2012), can result in a deeper experience of learning and promote problem solving, and give voice to those seldom heard

(JA Parsons and KM Boydell, 2012). The public exhibition gave the students recognition for the quality of their works, pride in their achievements and ownership of the messages.

These artworks and messages have potential to be utilised in a comprehensive tobacco control program and disseminated to the wider community, with appropriate permissions from Elders (Trudgen R, 2003), and observing cultural considerations such as recognition of diversity of Indigenous populations (Gould Gs et al., 2014). This aspect, although a project aspiration, was not realised due to the short time frame of the funding cycle. It is of interest that the youth focused on threat messages, as this aspect of campaigns for Indigenous populations is disputed (GS Gould et al., 2014a).

Having more formal discussions and debriefing with the students after the sessions could improve the project. Research is warranted to see if the approach could impact on youth smoking initiation rates.

Conclusion

This educational project using visual arts engaged Aboriginal students in hands-on activities making anti-tobacco messages and posters. They demonstrated eagerness to learn about tobacco smoking, and revealed an understanding about the effects of tobacco on their community. The process provided opportunities for youth to voice their concerns about inter-generational losses from smoking. The model has the potential to be widely used throughout schools and youth organisations.

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Table 1. Extraction of messages from youth artwork into gain and loss frames across categories of health effects, relationships and resources

Gain Frame		
Health Effects	Relationships	Resources
Take the first steps to quit smoking. Image of someone climbing steps made out of a cigarette. Aboriginal circles and dots.	Do you want to see your child grow up? Image: woman sitting next to a cot. (a)	Stop now and in 5 years you will be able to buy 1. Image of hot rod car. (d)
Non-smokers live longer. Break the chain. (e)	Help your family stay alive. No Smoke helps. (c)	No smoking. This is a public area. But littering is not a good look!!! Image: a park and two people, one is smoking, and pushing a baby in a pram, and about to throw away a cigarette butt. Aboriginal dot art in background, on border, and on a 'no smoking' sign.
Break the chain. 'I'm quit.' Image of person throwing cigarettes in bin (j)	Save your family tree. Arrow with dot art pointing in healthy direction. 'Don't smoke' and 'no smoking symbol' on Aboriginal flag. (e) (See Figure 2).	
	Keep your family health and strong. Aboriginal traditional images indicating meeting places for yarnning..	
	Do it for the people you love, give it up. (i)	
	Be in your family tree. Image of a green tree. (j)	
Loss Frame		
Health Effects	Relationships	Resources
Smoking kills 15000 Australians every year. Will you be one of those statistics? (a)	Smoking kills the family tree. Image of healthy and unhealthy family trees, and choice of two paths – smoke vs. don't smoke.	Don't fall asleep. Image: of person, bed and house burning.
Image: woman smoking with brain as an ashtray. Aboriginal dot art in circles spiralling upwards.	Two snakes clashing in the sky – one from each family tree, may indicate threat/conflict. (e)	Smoking. Image of the word smoking in flames.
That's what smoking will do to you. Image: coffin.	DO YOU WANT TO BE <u>HERE</u> FOR YOUR KIDS? Image: playground and swings. Mother is at a distance smoking – she wears	This is what you're smoking away. Image of hot rod car on fire. (d)
		You're making yourself broke. Its not affective! (sic) (i)

<p>Cough Cough! Me Mum's KILLING ME TOO.</p> <p>Dumb koala, smoking is suicide, when she dies I'm GOANNA EAT HER. No smokes for me TASSIE DEVILS ARE ALREADY ENDANGERED. Image: bush scene with koala, goanna, Tasmanian Devil and echidna, represented with Aboriginal dot art and an attempt at 'x-ray' art. (b)</p>	<p>headband and bracelet of Aboriginal colours. One child saying 'Daddy, where is Mummy?' another saying 'Mummy, Daddy, push me!! And Daddy says 'I'm coming'. Another child on a round-about says 'Mum, Dad, I got only me.' (See Figure 3).</p>	<p>There goes your money all the way up in smoke. (j)</p>
<p>You smoke you choke. Image of two birds – one blowing out smoke the other say's 'that's what you get' (c)</p>	<p>Will you be here to watch you kids grow? Image of hand with green spots on it. (g)</p>	
<p>You smokes you chokes. Image of cigarette carton.</p>	<p>Smoking kills – time away from your family. (h)</p>	
<p>Every smoke is killing YOU!!! SMOKING <u>causes</u> LUNG CANCER! (f)</p>	<p>You kids will be in fear when your not here. (i)</p>	
<p>Smoking makes your hair smell. Smoking blinds you. Smoking gives you throat cancer. Smoking makes your clothes smell. Image: profile of a woman head and shoulders, Aboriginal dot art of circles with radiating lines and empty centres. Darkened Aboriginal colours smudged into background.</p>	<p>Ur smoking effects (sic) us. Don't do it! Image: lettering made of cigarettes burning. Aboriginal dot art as border.</p>	
<p>Cough, Cough. Stop smoking. Image two squares – 'healthy' smiley face and 'unhealthy' with green face (written on them) Also pencil drawing of body with organs visible. (g)</p>	<p>Smoking kills. Your kids will have fear if your not here!!! You will grow a distance between your kids. Image: playground, Dad pushing kids on swings, Mum is to the side smoking with a T-shirt on that says 'Smoking Kills'.</p>	
<p>Don't let this be you. Image of an older person blind in one eye. Aboriginal flag. No smoking sign. Power fist. (h)</p>	<p>IF YOU SMOKE YOU WON'T SEE YOUR CHILDREN OR family AGAIN. (j)</p>	
<p>Smoking is it really that good? <u>Really its suicide.</u> Your just not doing damage for you, your also doing for the people</p>		

around you that you Love, so come on
give it up.

Parts in smokes.

- Rat poison
- Bleach found in toilet cleaner
- Nail polish remover
- Paint stripper
- Tar that you find on a road
- Car gases

And a lot more yuck things....

Do you want cancer? Stop the chain.

Image: no smoking sign. Profile of
someone smoking. (i)

Do you want to die quicker or live
longer? (j)

Smoke and stroke or quit and
live...you decide!

TO SMOKE IS A JOKE. Image of a
woman in hospital bed on life support.
Image of cigarette at the side burning
down with stages marked: A Cough -
Short of Breath - Can't Eat - Can't talk
to my family - No memory - I can't see
them – Last stages. Aboriginal flag
colours used in whole picture with
dramatic slashes of colours as a
warning.

Note: lower case letters (a)-(j) indicate which messages were linked to others in a youth artwork. Underline and upper case letter reproduced as in original messages.

Figure 1. Spread of message foci and types of campaign in posters by Aboriginal youth in regional NSW

Non-Smokers
Live longer

Smoking Kills
the family
tree

Break
the
chain

Mum
dad

Kid Kid Kid Kid Kid Kid
Kid Kid Kid Kid Kid Kid
Kid Kid Kid Kid Kid Kid

Mum dad Kid Kid Kid Kid

Don't Smoke

Smoke

Don't
Smoke

Save your family
tree

Call the Quit Line
131 848 or see your local GP

EVERY SMOKE IS KILLING
YOU!!

Quitline
13QUIT

DO YOU WANT TO
BE HERE FOR YOUR KIDS??

SMOKING causes LUNG CANCER!