



Te Reo Mārama
Kaupapa Tupeka Kore – Tobacco Free



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Recent actions by Māori politicians and health advocates for a tobacco-free Aotearoa/New Zealand, A brief review (Occasional Paper 2009/1)

Heather Gifford, Whakauae Research Services, Whanganui

Shane Kawenata Bradbrook, Te Reo Mārama, Wellington

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Abstract

Aims: To review recent key advocacy approaches and political party policy developments for indigenous tobacco control in Aotearoa/New Zealand.

Methods: The approaches were selected on the following criteria: (i) were developed from organisations or entities that are Māori governed or Māori controlled since January 2000; (ii) were developed from solely a Māori perspective; and (iii) approaches were intended to operate at a national level. Searches were made in the published and grey literature, and direct experience and observation was also used.

Results: The two main developments identified were: (i) Ideas on controls on access or supply of tobacco, and (ii) Māori-driven tobacco denormalisation campaigns. Regarding the former, a complete ban on tobacco sales in Aotearoa/New Zealand has been proposed by key Māori figures, along with bans on smoking at sites that are culturally significant for Māori. This has been accompanied by the growth in the use of the term “tupeka kore” (tobacco-free). Media and advocacy actions have included the “Māori Mix”, *Māori Murder* and *Endangered Species* campaigns, targeting the deeds and role of the tobacco industry.

Conclusions: The role of indigenous leadership at a tribal, political and national advocacy level is critical to shifting the policy environment for indigenous tobacco control. Additional research is required to determine the effectiveness of the approaches.

Background

Māori are the indigenous population of Aotearoa/New Zealand. Before colonisation Māori, like other indigenous populations, recognised the importance of healthy communities and also recognised the importance of a community-wide approach to ensure that this goal was met. It is this traditional shared belief in communal safety and collective responsibility that some Māori tobacco control advocates and researchers wish to restore and harness, as a basis for contemporary public health and policy interventions, and to reduce the high prevalence of tobacco smoking by Māori.

Prior to European/Pākehā contact there was no smoking of tobacco or any other substances by Māori.¹ Tobacco was introduced to Aotearoa/New Zealand by early Pākehā explorers and traders, and was used as a currency and article of trade. Its use quickly increased among Māori.¹ By 1981, tobacco consumption per Māori adult was higher than the national consumption rates in any other Western industrialised country. Fifty-six percent of the adult Māori population were smokers, compared to 32% for the whole Aotearoa/New Zealand population.^{2,3} Since 1981, the rate of decline in smoking prevalence for the non-Māori New Zealand population has been faster than for Māori.³ Both relative and absolute socio-economic deprivation appear to contribute to the higher Māori smoking rates.⁴ In turn, ethnic inequalities in mortality due to smoking have increased since 1981.⁵

While data from the most recent New Zealand Health Survey⁶ suggest that efforts to reduce smoking rates for Māori may be having some impact, historically the forces reducing the prevalence of smoking in the Aotearoa/New Zealand population as a whole have not been as effective for Māori as for others. Using the AC Nielsen survey data for the Ministry of Health, the prevalence of smoking by Māori remained at around 50% during 1990-2005.³ In the 2006 New Zealand census, 42% of Māori over 15 reported being smokers, compared to 21% for the whole population.⁷ In the 2006/2007 New Zealand Health Survey, smoking rates were highest among Māori at 42% compared to 20% for the whole population.⁶ In addition, significantly more Māori reported others smoking inside the home and car, and significantly higher percentages of Māori youth reported mothers, fathers, siblings or girlfriends and boyfriends as being smokers, compared to non-Māori.⁸

Up to 1983, the Government had made no significant attempts to ensure that Māori had access to tobacco related information and intervention programmes.¹ Funding for Māori specific tobacco control initiatives in the period to 1998 was modest.⁹ During the 1990s, Māori were developing a range of initiatives such as: Aukati Kai Paipa, a Māori specific cessation programme,¹⁰ establishment of a national Māori tobacco advocacy network in 1998, and development of health promotion programmes offered by Māori providers that targeted tobacco smoking.¹¹

Since 2000, a range of Māori initiatives have continued to be developed and supported by central government funding. These have included initiatives that are a component of wider mainstream programmes and those that are developed with Māori governance that work solely to improve Māori outcomes using Māori-specific approaches. However, a combination of frustration at the failure of government to consistently demonstrate responsiveness and leadership with respect to Māori health¹² and frustration over the slow reductions in smoking prevalence for Māori, has resulted in a number of specific indigenous interventions developed or supported by a central Māori tobacco control advocacy platform. This has been assisted by increased political representation and intervention by Māori in central government, and continued awareness by Māori (and others) of the physical, economic, cultural and spiritual impact of tobacco.

These Māori initiatives have included a National Māori Tobacco Control Strategy released in 2003,¹³ involvement in international advocacy (resulting in inclusion of two indigenous clauses in the Framework Convention on Tobacco Control), and the hosting of an international WHO indigenous peoples forum on tobacco use in 2006. More recently, there has been the development of other new approaches. This paper investigates these recent major developments.

Methods

The approaches to investigate were selected on the following criteria: (i) were developed from organisations or entities that are Māori governed or Māori controlled since January 2000; (ii) were developed from solely a Māori perspective; and (iii) approaches were intended to operate at a national level.

To identify relevant Aotearoa/New Zealand data, we undertook searches for articles relating to tobacco control interventions, using the search terms “Māori” “indigenous” and “smoking or tobacco” for the period January 2000 to December 2007. The data bases Medline, Goggle Scholar, CINAHL, Factiva, Google, National Bibliographic Database for New Zealand and Academic Search Elite were searched. The Factiva database was searched for the New Zealand region (with this database covering print media articles within Aotearoa/New Zealand).

The following websites were also examined for reports and policy statements: Te Reo Mārama, Te Puni Kokiri, Te Hotu Manawa Māori, the Health Sponsorship Council, ASH, Smokefree Coalition, tribal web sites, and the website of a relevant political party ie, the Māori Party.

Gaps in the literature were discussed by the authors and additional material was accessed directly using indigenous tobacco control networks. In the period 2006-2008, one of the authors (SKB) travelled extensively throughout indigenous communities in Aotearoa/New Zealand and was able to observe the changes in language and was part of the discussion on changing concepts. The other author (HG) also reflected on her own experience in working with local Māori communities in progressing tobacco control initiatives.

Results

The following policy domains met our specified criteria and were indicative of indigenous tobacco control approaches by politicians and advocates in Aotearoa/New Zealand: (i) Proposals on controls on access or supply of tobacco, and (ii) Māori-driven tobacco denormalisation campaigns.

1) Moving the frontier for controls on access or supply of tobacco

Recently, some Māori political leaders and national Māori tobacco control advocates have called for a complete ban on tobacco supply within Aotearoa/New Zealand.^{14 15} This movement has grown out of a general desire by Māori to take charge of their own development,^{16 17} and beliefs that Māori needed to take greater control of the forces damaging them, including the effects of tobacco availability and marketing.

The idea of a ban is part of a plan for a tobacco-free Aotearoa/New Zealand within ten years, a concept now shared by some of the wider tobacco control community. Māori have gathered support from a range of mainstream tobacco control advocates within Aotearoa/New Zealand for this approach.¹⁸

Māori political support has assisted this movement, with the drawing up of a private member’s bill by Member of Parliament Hone Harawira of the Māori Party. The bill intends to make it illegal to produce or sell tobacco in Aotearoa/New Zealand.¹⁹ This call for a ban appears to have influenced the policy environment at a range of levels. It seems to have helped create a change in the language used in social marketing messages and language used by many Māori tobacco control workers, from “auahi kore” (smokefree), to “tupeka kore” (tobacco-free) This message is driven largely by

a word-of-mouth approach, as there has been no formal marketing campaign on this issue.

The term “auahi kore” (smokefree) was a brand developed firstly by Te Hotu Manawa Māori (an independent Māori tobacco control agency) then adopted by the Health Sponsorship Council (a government agency).²⁰ The Auahi Kore brand has been used in a wide range of circumstances and campaigns focusing on Māori and mainstream settings from local to national levels. Examples include the promotion at local sport events and the branding on the national Whare Auahi Kore / Smokefree homes campaign. More recently there has been discussion amongst indigenous tobacco control advocates that the term smokefree can be understood as just removing smoke from environments. The term “tupeka kore”, similarly created by Māori advocates and tobacco control workers, relates more directly to the concept of a tobacco-free Aotearoa/ New Zealand and in particular a tobacco-free indigenous population. In both cases ownership or control of the language used in health promotion is a key principle in best practice Māori health development.²¹ The degree to which this language shift, and associated concept shift, has occurred is difficult to ascertain with any rigour, however both authors have noted changes in language in a number of settings (eg, indigenous tobacco control meetings, training events and indigenous tobacco control conferences).

Māori leadership has also been challenged by indigenous tobacco control advocates to impose cultural lore to prohibit both the smoking and carrying of tobacco at culturally significant sites and occasions.²² Such sites and occasions include marae (local meeting and cultural place) grounds, urupa (burial grounds), pa sites (sites of previously defended villages), parekura (former battle grounds), tribal events (kapa haka – cultural performance) and culturally significant hiko (march, pilgrimage or journey). Māori leaders and members of tribal groups are in a position to make significant policy decisions regarding smokefree environments as many cultural sites and activities are controlled by Māori.

Such bans could be imposed by local marae committees or by whānau (extended family), hapu (sub-tribes) or iwi (tribal) rūnanga or other governance structures. Rūnanga are the overarching governance group for iwi, comprising whānau and hapū members (formally elected by tribal members) and for most of the larger iwi, a range of legal entities operate under the governance of the rūnanga. These can include, but are not limited to economic development units, health and social services providers, cultural development units, and education entities. Rūnanga are currently being utilised by Te Reo Mārama (a Māori tobacco control advocacy group) and other tobacco control leaders to generate and implement Māori tobacco control policies on behalf of iwi (including working with the large iwi Ngāti Kahungunu, and the tribal groupings within Te Tai Tokerau-Far North).

The bans build on a largely self-generated movement. Marae committees, with assistance from a national Māori health promotion group Te Hotu Manawa Māori, have been developing smokefree policies for either their buildings or their whole grounds for over 15 years.^{23 24} This movement can be resisted when it is perceived or proposed as being imposed from a national level.²⁴⁻²⁶

Support for an intensive push towards being “tupeka kore” (tobacco-free) has not been without contention. For example, there has been strong internal debate among Māori health workers and researchers about the introduction of smokeless tobacco products as an alternative aid for quitting. The key tensions have been between those who advocate the need to keep all available options open for reducing harm from tobacco and for further research on products such as “snus” (a form of oral snuff), while others feeling very strongly that this goes against the overall goal or kaupapa of a tupeka kore-tobacco-free Aotearoa/New Zealand. The latter view is the one that appears to predominate amongst leadership agencies in tobacco control for Māori (eg, Te Reo Mārama).

2) Using media and advocacy to denormalise tobacco for Māori

Aotearoa/New Zealand routinely invests in tobacco control mass media campaigns, albeit at a low intensity.²⁷ While more funding and greater saturation of the media may be required, there may also be a greater need for culturally designed campaigns; that is, campaigns designed by and for Māori. These appear to have favourable impacts for Māori.^{28 29 30} This section describes efforts by Māori to use a range of media sources, both paid and unpaid, to provoke further progress by Māori on tobacco smoking.

Since 2005 there have been a number of media and advocacy campaigns designed by Māori for the national Māori tobacco control advocacy group, Te Reo Mārama. These media campaigns have been aimed at: (i) changing the broad social norms around using tobacco, much of which has focused on removing any association between Māori cultural identity and tobacco; and (ii) highlighting the role the tobacco industry plays in smoking among Māori. Internationally, there is some evidence that the anti-tobacco industry approach protects against smoking and is associated with intentions to quit among young adults.³¹⁻³⁴

Māori tobacco control advocates and politicians have used a variety of media and advocacy avenues to highlight tobacco industry actions, generating free media coverage. The activity has included direct action against the tobacco industry over the “*Maori Mix*” campaign, and the “*Maori Murder and Endangered Species*” campaigns have targeted the role of the tobacco industry in sustaining smoking. These campaigns are detailed below.

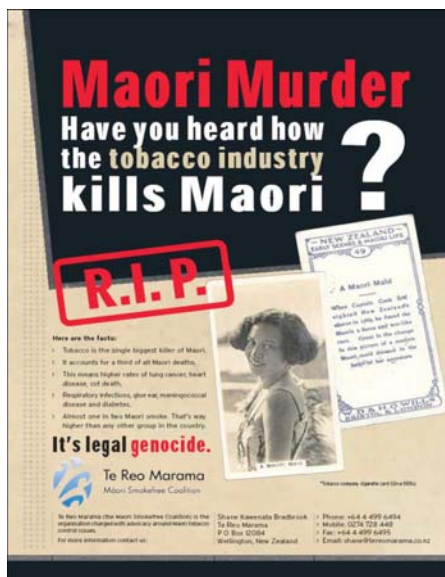
In 2006 the advocacy group Te Reo Mārama won a rare public apology from a global giant in the tobacco industry. The head of the tobacco company Philip Morris, Louis Camilleri, issued the apology to Māori during a shareholders meeting in New Jersey (USA), for using Māori images on packs of Israeli *Maori Mix* cigarettes. The apology was also televised nationally in Aotearoa/New Zealand where a spokesperson stated: “We sincerely regret any discomfort that was caused to Māori people by our mistake and we won’t be repeating it” (Television One News April 27th 2006). Subsequently, Te Reo Mārama was nominated for an international business ethics award for confronting the Philip Morris International (Altria) over the use of *Maori Mix*.³⁵ (See Figure 1)

Figure 1. *Maori Mix* cigarettes before they were removed from the market in response to protests by Te Reo Mārama in Aotearoa/New Zealand



The first of the recent tobacco industry denormalisation media campaigns in Aotearoa/New Zealand, involved a “Maori Murder” poster. This was developed in 2006 to deliberately shift the focus from smokers and onto the tobacco industry (see Figure 2).

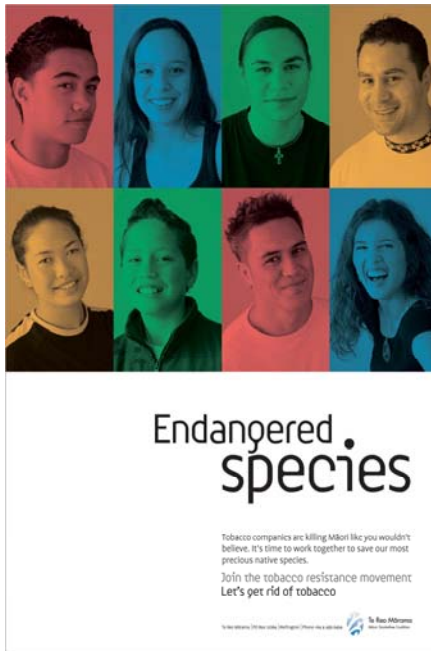
Figure 2: *Maori Murder* campaign poster³⁶



The campaign was controlled directly from Te Reo Mārama, for a relatively small cost (thirty thousand \$NZ dollars), funded from other non-government organisations. A subsequent denormalisation campaign *Endangered Species* (see Figure 3) using

posters and media advertisements has been funded through the Health Sponsorship Council, a government-funded social marketing agency.

Figure 3: First *Endangered Species* campaign poster³⁶



There has been strong support for the denormalisation campaigns from both mainstream and Māori media, in both providing airtime and editorial coverage. Radio Wātea (an urban Māori radio station), individual iwi radio stations, Mana Magazine, and national radio talkback stations have all offered coverage on the campaigns.^{37 38}

A more recent example has been the implementation of a school-based tobacco industry denormalisation campaign targeted specifically at Māori – the Tika/Pono Programme. This programme, implemented and supported by Te Reo Mārama, is being funded directly by Hawkes Bay District Health Board, as there was reluctance from central government officials to fund this intervention. Of particular note is the wording or framing of the campaigns. This has included the use of phrases and words such as “Maori Murder”, “Endangered Species” (when referring to Māori youth and the role of tobacco), “resist”, and “genocide” in posters and websites. Statements by Māori politicians have included:

“We are in a war. The opposition already has thousands of troops and billions of dollars to fight us with.”¹⁴

The framing illustrates the strength of feeling that indigenous tobacco control advocates and politicians feel towards not only the tobacco industry, but the general use of tobacco within Māori society. It also shows the deliberate use of words associated with national and international criminal law, with environmental campaigns, and from liberation rhetoric.

There has been considerable caution about how the messages were framed, to avoid further the victim blaming of smokers. Indigenous researchers and Māori politicians and policy-makers within Aotearoa/New Zealand have been strong in their support of a broader determinants approach in explaining high levels of tobacco use by Māori, rather than using an individual choice ideology.^{11 39} They have focused on the role of colonisation in the continued high rates of Māori smoking, the role of the tobacco industry in encouraging smoking, and access to services as key policy approaches to reduce uptake and prevalence. This approach is supported by other writers, who warn of the further victim blaming of smokers who are part of an already alienated group within the population.⁴⁰

Discussion

There are two major limitations in the analysis of this developmental policy work: (i) very little peer reviewed literature was available to inform our analysis, and (ii) with the exception of government funded Māori cessation programmes, very little information is available on the effectiveness or reach of the initiatives.

Much of the work being carried out by Māori tobacco control advocates is organic and innovative in nature, based on a sense of what works for indigenous communities (and evidence from elsewhere) and often implemented with little funding. From the material examined it appears that key Māori health development principles have been utilised in the approaches examined. These include having interventions developed and delivered by Māori for Māori, and focusing on strengthened Māori identity. In addition Māori leadership, both at a political, tribal and national advocacy level, seems to play a crucial role in potentially changing both the policy environment and attitudes both nationally and internationally. We have been unable to describe accurately the reach of approaches examined or the impact of the initiatives but from direct observation the approaches described have been well received by Māori communities and have generated significant interest. Combined with further evaluation research, these principles could potentially be strengthened and extended to wider areas of tobacco control work in Aotearoa/New Zealand.

There is a substantial amount of work to do if we are to further reduce ethnic disparities in tobacco uptake and consumption within Aotearoa/New Zealand. This work includes legislation that limits access to tobacco products, and further work with local Māori communities to influence tribal policy on tobacco access and use. National legislation could move the availability of tobacco from every corner store, to a greatly reduced number of strictly licensed retailers. Iwi could advocate a tikanga (cultural) based position that would call on retailers to remove this harmful product within their tribal boundaries.

Other moves could include bringing the control of the tobacco taxes paid by Māori into Māori hands, so that the revenue is used for ending tobacco use (eg, this could fund the expansion of culturally appropriate smoking cessation services such as Aukati Kai Paipa programmes). It could also fund an expansion of “by Māori for

Māori” mass media campaigns eg, the “Its About Whanau” campaign and provide opportunities for more innovative campaigns such as “Endangered Species” to be more widely available in mainstream media, including the two Māori television channels. Smoking cessation products that have been shown to work for Māori (eg, bupropion⁴¹) could also be subsidised and better promoted.

This paper is a preliminary examination of recent actions by Māori leaders and advocates to progress tobacco control for Māori. Other research is needed to explore the perspectives of other Māori, and to evaluate the various approaches used by all levels of Māori communities.

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Competing interests: Both of the authors have worked in non-governmental agencies working to improve tobacco control for Māori.

Correspondence: Dr Heather Gifford, Email: heather.whakauae@xtra.co.nz
Director Whakauae Research Services, PO Box 102, Whanganui, New Zealand. Ph 06 3476772. Currently (early 2009) the corresponding author is on sabbatical in Canada. Contact details in Canada: Dr Heather Gifford, Research Consultant, Elbow River Healing Lodge, 1310 14th Avenue SW, Calgary T3C3S3, Canada, Phone 403 244 2865, cell 403 797 2865

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