Cultural Factors Affecting Smoking Intentions in Sri Lankan Immigrant Adolescents: An Exploratory Study

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ABSTRACT
This paper reports a small exploratory investigation into smoking intentions amongst Sri Lankan immigrant adolescents living in Perth, Western Australia. Four focus group discussions were conducted to explore how cultural values are expressed in this group’s beliefs and attitudes towards smoking and non-smoking and how these values may influence their smoking-related behaviour. Females and males attached similar negative values to smoking per se. However, generally, males saw peers’ smoking as a way to be cool and popular while females saw peers’ smoking as a way to solve stress and other personal problems. Males had strong positive associations with their favourite actors in available pre-2005 Indian films who smoke on screen and play tricks with cigarettes. They reported playing out these tricks using pencils, or cigarettes when available, to impress peers. Females expressed strong negative attributes towards peers who smoked but males said they were happy to associate with mainstream Australian, English-speaking peers who smoked. For some males, the combined effect of being exposed to movie smoking and wanting to be friends with mainstream Australian peers could put them at greater risk of succumbing to peer pressure to smoke.

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Introduction

There are two reasons for conducting multicultural research: 1) we are ethically bound to address health issues within all sectors of the community, regardless of race, ethnicity, gender, etc., and 2) there may be much to be learned from studying the cultural protection ethnicity appears to afford young people in some groups. For example, in Sri Lanka tobacco uptake is almost unknown in women and young people. Only older men (30 years +) are at risk of becoming smokers (and then, they would only smoke out of sight of elders); this is despite there being virtually no legal restrictions on advertising, selling or smoking in public places, as well as no public money spent on tobacco control education programs. A greater understanding of the dynamic transmission of cultural factors through qualitative research with Sri Lankan immigrants in WA could reveal how cultural values protect immigrant adolescents against smoking uptake.

Two aspects of cultural influence were explored in this study: the effect of media, specifically ‘movie smoking’ and the effect of peer influence. Media has been identified as an important social factor that influences cognitive beliefs and expectancies of adolescents. Specifically, media’s possible influences on smoking intentions have fuelled concerns over smoking scenes in movies (termed ‘movie smoking’ in the literature). Research on the impact of peer
smoking on adolescent smoking behaviour has identified that some adolescents start smoking because they perceived peer smokers as popular and or are unable to resist peer pressure.

Methods

Four focus groups (2 male and 2 female) with 31 Sri Lankan immigrant adolescents (17 males; 14 females), aged 14 to 21 years, were conducted in Perth, Western Australia. Sri Lankan ethnicity was chosen for this pilot study as the lead researcher is Sri Lankan himself, has access to the community, is sensitive to the culture and is able to speak both Tamil and Singhalese as well as English. The participants were recruited through community organisations.

Findings

Adolescent Smoking Behaviour

Of the 31 participants, 24 (78%) said they had never tried a cigarette, six (19%) said they had tried a cigarette, and one (3%) said he had smoked in the past 30 days. None of the female participants said that they had ever tried a cigarette.

Smoking Uptake and Future Intentions

In general, female participants indicated that they hated smoking and smokers while male participants stated that they did not like smoking, but did not mind other people smoking and were happy to have ‘friends’ who smoke. When prompted to talk more about ‘friends’, they indicated they were referring to mainstream or white, English-speaking Australians. They expressed reservations about openly being with a Sri Lankan adolescent smoker.

Five of the seven (all males) who had tried smoking stated that they first tried between the ages of 15-17; the other two tried after this age. The reasons for trying smoking reported by our participants included: curiosity, lighting up cigarettes for their peers, and pretending to be famous movie stars who do tricks with cigarettes in movies. They believed that experimenting with smoking would not addict them to regular smoking in the future.

Two female participants said they might smoke in the future; two thirds of the males said they might smoke in the future. The discussions revealed exposure to smoking in movies and desire to associate with peer smokers were the primary reasons male adolescents gave for taking up smoking or intending to smoke.

Media Exposure and Adolescent Smoking

Participants reported that they frequently watched Indian movies with their families and they discussed their perceptions of smoking scenes and star smoking in the Indian movies they had seen. They said that these movies were commonly available in the community (e.g., Sri Lankan and Indian grocery shops, Temples) and that it was a family activity to sit and watch them together. Participants commented that older movies they had seen (released prior to 1990) had fewer smoking scenes and depicted smoking as having undesirable social and health consequences; in contrast, in later Indian movies they had seen, there were more frequent positive depictions of smoking. [Our study was done in 2005 so the movies the participants had watched would have been made before the 2005 Indian government ban on smoking in Indian movies and its requirement that existing movies be tagged with a warning
scroll at the bottom such as ‘smoking is injurious to health’ (Thompson, 2005). A recent check indicates that older movies that are available in WA have not yet been modified to meet this recommendation but that new movies have indeed removed all smoking scenes.

Sensitivity to portrayal of smokers in movies varied by gender. Male participants discussed smoking scenes in a number of recent Indian movies portraying their favourite Indian movie stars (e.g., Rajanikanth, Vijay, Vikram) as fun loving, brave, risk taking, intelligent, tough and stylish. Some male participants said that they played tricks like ‘Rajanikanth’ who was nick-named ‘Super Star’, popular for his fighting scenes and for his tricks with cigarettes. Both males and females said that they loved to watch ‘Vijay’ movies and called him ‘Young Commander (Illya Thalabathi)’. Some male participants said that they had tried his tricks among their peer groups. One male participant who stated that he might try smoking in the future said:

I am so stimulated to try what Vijay do, though I am not inclined to smoke....... I tried his tricks [with cigarettes] with pens when I was alone or with other friends, and all laughed.

Female participants expressed a positive attitude toward their favourite (male) stars who smoked on-screen, mentioning actors such as Vijay, Vickram and Ajith who often smoke and do tricks with cigarettes in their movies. However, female participants did not have a positive attitude towards smoking and smokers in real life. The absence of smoking by positive role model female actors in movies, the girls' preference for movies characterised as romantic/drama (with a low level of smoking) and the portrayal of female smokers in movies as ‘bad women’ all reinforced a negative attitude towards smoking, possibly helping to protect female adolescents from smoking uptake.

Generally, male adolescents perceived star smoking as contributing to a positive image, especially in terms of the tricks the stars performed. Tricks included taking a cigarette from a shirt collar or sleeve, lighting a cigarette by scratching the match stick on shirt or trousers, tossing the cigarette up and catching it in the mouth. They spoke of these tricks as if they were realistic rather than carefully choreographed. This view reinforced their perception of mainstream Australian peers’ smoking as appearing more fun, cool, and popular. They said that they played out such tricks among their smoking and non-smoking peers, and that this enhanced their popularity. For the tricks they used pencils, if they were non-smokers, but cigarettes if someone in the group smoked or if they had access to cigarettes. Sri Lankan parents may not be aware of any inherent danger watching Indian films with their children.

**Peer Pressure and Adolescent Smoking**

Both male and female participants said that they are often under pressure from their peers to take up smoking. Some female participants said they avoid peers who smoke due to cultural norms and community pressure. However, some male participants expressed a desire to associate with their friends, irrespective of whether or not they smoked, and reported experiencing difficulty in refusing to join in smoking.

Some male participants felt uncomfortable with allowing friends to smoke alone and said that they wanted to be sociable. One participant said

being with peer smoker without smoking put me into pressure of how he would think about our relationship...... always felt that I am not welcomed.

This put them in an awkward position, where they did not want to isolate themselves from peers who smoke and neither did they wish to be ignored or teased for not smoking.

**Smoking Beliefs and Attitudes**

Responses to the short questionnaire indicated that both males and females held similar beliefs about smoking for items such as: smoking is socially not acceptable, parents won’t
approve, brings shame on the whole family, people around me disapprove of my smoking, smoking affects image, smoking hurts health and performance. There was general agreement that parental disapproval and social unacceptability were the most important factors in their decision not to smoke. Females were more concerned than males about socio-cultural norms where smoking will bring shame on their families and will not be accepted by their parents, friends and by their society in general. They felt that they should not bring disrespect to their parents by smoking. The female participants strongly felt that associating with other female smokers would also bring shame to them and their family, and that they would be considered ‘bad girls’ by the community. Female participants indicated that being a smoker or being with a smoker could affect their marriage prospects and their social standing. Female adolescents believed that these cultural values play a major role in their life and were much more important to them than the health consequences of smoking.

Male participants, although similarly concerned about bringing shame on their family and the expectations of people around them, were then most concerned about their image, particularly in relation to their present or future girlfriends. They believed that the smell of cigarette smoke is unpleasant and would be avoided by male and female friends. Generally, male participants believed that smoking would keep peers from the Sri Lankan community away, but could help them develop better associations with peers with an English-speaking background. Particularly, some older male adolescents exhibited more positive attitudes towards smokers, were willing to socialise with smokers, and/or be affiliated with groups in which smoking is a normative behaviour. Males said that they were more likely to smoke to “fit in”. One of the male participants said:

*being with peer smoker show me as 'big kid' than being with non-smokers.*

Another male participant said:

*though I do not smoke, I always enjoyed lighting up cigarettes for my friends... this builds bond and close association.*

**Discussion**

The findings show that the participants in our small sample of Sri Lankan immigrant adolescents attached similar negative values to smoking, arising from their perceived social norms and cultural contexts. These values appeared to protect them against smoking uptake. However, differences were found among male and female adolescents' perceptions about the reasons their peers smoked. Female participants saw peers' smoking as a way to solve stress and other personal problems. On the other hand, male participants saw peers’ smoking as a way to be cool and popular.

Males were more willing to associate with mainstream Australian friends who smoked and expressed positive attitudes towards smokers. Researchers suggest several possible approaches to address the influence of peer pressure to smoking. These include exercising parental control over the selection of friends or the choice of the groups of which they are members (Evans et al. 1992; Engels et al. 1999); placing anti-smoking advertisements in schools to negate or neutralise pro-smoking influences of cigarette advertisements and peer pressure (Pechmann and Shih 1999); changing positive perceptions of non-smoking adolescents about their peers who do smoke (Pechmann and Ratneshwar 1994); and improving their self-esteem and their ability “to say no” to smokers who put pressure on them to smoke (Landrine et al. 1994).

A major factor that emerged was the effect of viewing Indian films on this audience. Previous work by the World Health Organization (2003) investigated the response of Indian 16-18 year olds to smoking in Indian films, finding that young people wished to emulate the strength, masculinity and attraction depicted. Although the focus groups were conducted with both males and females, almost all the verbatims used in the executive summary appeared to
have been spoken by males, although this is not made clear. Verbatims such as: ‘films do influence us .. we try to act like them … try to win a girl using methods we have seen heroes use’ and ‘My friends say I resemble Sanjay Dutt. So I joined a gym to get his type of body (physique). Copy his hairstyle and mannerisms too. Who knows, one day I may get a good break.’ Few verbatims were likely to have been spoken by a female, possibly: “we copy everything .. their dress, hairstyle – stalks in hair, sandals, accessories, jewellery” and definitely ‘even girls like us can start doing ‘dadagiri’ (behave like roadside hoodlums). We get influenced by movies, get ideas from there’ (WHO 2003).

The present study was with Sri Lankan immigrant adolescents, rather than Indians in their home country but we found the effect of movie smoking to be quite different for females and males. Indian films reinforced negative attitudes towards smoking in females. In contrast, for males, portrayal of their favourite male actors in Indian films as fun-loving, brave, risk-taking, intelligent, tough, stylish smokers had a powerful influence. This study suggests that seeing movie stars smoking, playing out tricks with pens or cigarettes among peers and being exposed to peers who smoke might play an important role in encouraging male Sri Lankan immigrant adolescents to start smoking.

Researchers have suggested several possible approaches to curbing adolescent exposure to smoking in movies. These include persuading the movie industry to voluntarily reduce depiction of smoking and cigarette brands (Dalton et al. 2003) as has now been done in India (Thompson 2005); incorporating smoking occurrences into the movie rating system to make parents aware of the risks a movie with smoking poses to the adolescent (Sargent et al. 2005; Sargent 2005); and showing an antismoking advertisement before movies with smoking to modify the effect of pro-smoking movie depictions on smoking attitudes and behaviour (Pechmann and Shih 1999).

In conclusion, numerous studies have investigated the influences of movie smoking or peer influence on adolescents’ smoking behaviour, and a few have considered the differences among ethnic/social groups. Although small, to our knowledge, our study is unique in finding an important combined effect of movie smoking and peer influence in a context of ethnicity. With more extensive further research, understanding such issues sensitive to cultural differences and social behaviours in a given population could be useful information when designed targeted social marketing strategies for behaviour change.

References


