

University of Wollongong

Research Online

Faculty of Health and Behavioural Sciences -
Papers (Archive)

Faculty of Science, Medicine and Health

2008

Evaluating the impact of the narrow cast marketing of 'Snake Condoms' to indigenous youth

Parri Gregory

University of Wollongong, uow_gregoryp@uow.edu.au

Lyn J. Phillipson

University of Wollongong, lphillip@uow.edu.au

Lance Barrie

University of Wollongong, lanceb@uow.edu.au

Sandra C. Jones

University of Wollongong, sandraj@uow.edu.au

Anna Validas

Convenience Advertising Australia

Follow this and additional works at: <https://ro.uow.edu.au/hbspapers>



Part of the [Arts and Humanities Commons](#), [Life Sciences Commons](#), [Medicine and Health Sciences Commons](#), and the [Social and Behavioral Sciences Commons](#)

Recommended Citation

Gregory, Parri; Phillipson, Lyn J.; Barrie, Lance; Jones, Sandra C.; and Validas, Anna: Evaluating the impact of the narrow cast marketing of 'Snake Condoms' to indigenous youth 2008, 1-6.
<https://ro.uow.edu.au/hbspapers/2154>

Research Online is the open access institutional repository for the University of Wollongong. For further information contact the UOW Library: research-pubs@uow.edu.au

Evaluating the impact of the narrow cast marketing of 'Snake Condoms' to indigenous youth

Abstract

Originating in the Aboriginal community of Mildura, Victoria, the Snake Condom was first launched through collaboration between Marie Stopes Australia, the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) and the Mildura Aboriginal Health Service. This paper presents results of a recent evaluation of the narrowcast component of this campaign. Overall, this evaluation reveals positive results regarding the effectiveness of the narrowcast component of the initiative and highlights the value of the inclusion of narrowcast promotion as part of a well developed social marketing campaign to address sensitive topics targeted at sub-groups of particular interest within the population.

Keywords

Evaluating, impact, narrow, cast, marketing, Snake, Condoms, indigenous, youth

Disciplines

Arts and Humanities | Life Sciences | Medicine and Health Sciences | Social and Behavioral Sciences

Publication Details

Gregory, P., Phillipson, L., Barrie, J., Jones, S. C. & Validas, A. (2008). Evaluating the impact of the narrow cast marketing of 'Snake Condoms' to indigenous youth. In D. Spanjaard, S. Denize & N. Sharma (Eds.), *Proceedings of the Australian and New Zealand Marketing Academy Conference* (pp. 1-6). Sydney, Australia: Australian and New Zealand Marketing Academy.

Evaluating the impact of the narrow cast marketing of ‘Snake Condoms’ to Indigenous Youth

**Parri Gregory, Lyn Phillipson, Lance Barrie and Sandra C. Jones, Centre for Health Initiatives, University of Wollongong.
Anna Validas, Convenience Advertising Australia**

Abstract

Originating in the Aboriginal community of Mildura, Victoria, the ‘Snake Condom’ was first launched through collaboration between Marie Stopes Australia, the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) and the Mildura Aboriginal Health Service. This paper presents results of a recent evaluation of the narrowcast component of this campaign. Overall, this evaluation reveals positive results regarding the effectiveness of the narrowcast component of the initiative and highlights the value of the inclusion of narrowcast promotion as part of a well developed social marketing campaign to address sensitive topics targeted at sub-groups of particular interest within the population.

Introduction

Sexual Health and Condom Use

In the indigenous population of Australia, sexually transmitted diseases are disproportionately higher than in the non-indigenous population. For example, Blair et al (2005) found that an Indigenous person is around 19 times more likely to suffer a sexual health infection than a non-Indigenous person. Wright et al (2005) similarly found high rates of Chlamydia, gonorrhoea and syphilis among the indigenous population of WA compared to the non-indigenous population, and also found that whilst rates of notification of non-indigenous Australians for HIV decreased from 1985-2000, rates for the indigenous population of WA continued to increase. Although male homosexual contact is the predominant source of exposure for both Indigenous (46.7%) and non-Indigenous (75.0%) people with HIV infection, exposure by heterosexual contact (36.7% v 15.3%; $P < 0.001$) is reported more frequently among Indigenous people (Guthrie et al 2000).

Epidemiological studies have shown that condom use is one factor that can protect against a wide range of STDs, including syphilis, gonorrhoea, chlamydia, herpes, and hepatitis B (Hill et al., 1996). However, condom use amongst indigenous Australians is reportedly low (Kildea and Bowdon, 2000). Reasons for low use are complex, with low awareness of sexual health risk, social disruption and dislocation (Bowden, 2005) and the initiation of sexual activity in some communities at a young age (Blair et al, 2005) all contributing factors. Apart from these complex social factors, attitudinal issues are also influential with factors such as “just not thinking about it”, shame, access and lack of confidence reportedly affecting contraceptive use among young indigenous women (Larkins et al, 2007); and cultural factors influencing reluctance to use condoms amongst indigenous men who associate condom use with ‘white fellas’ or uninitiated men (Willis, 2003).

Sexual Health Social Marketing Campaigns

In an attempt to promote condom use and reduce STIs, particularly amongst indigenous youth, a joint initiative of Marie Stopes Australia, the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) and the Mildura Aboriginal Health Service developed and implemented the 'Snake Condom' social marketing campaign. This social marketing initiative was informed by formative research with the indigenous target market (16-30 years). The 4 Ps of the marketing mix were then tailored to improve access to condoms, to help address a range of social and cultural barriers to condom use in Indigenous communities, as well as developing a new condom brand which was appealing to Indigenous people (see Molloy, Greet and Knight, 2004).

According to Marie Stopes (2007), the campaign uses the 'snake' brand as a humorous yet powerful metaphor for the male genitalia – the use of the snake metaphor reduces the sense of shame associated with discussing sexuality and sexual health, allowing greater information sharing. In addition, it provides a familiar close-to-nature allegory that facilitates safe-sex messages – the dangers of sexually-transmitted diseases and the need to use a condom to protect one's self resonates with the understanding of the dangers of snakes and the need to take precautions when snake-handling.

Aside from the use of the snake symbol, the campaign strengthens its identity branding by ensuring that everything – from the packaging, posters, caps, visors, t-shirts, key ring condom holders, and even the condoms themselves – is made in the colours of the aboriginal flag; red is strawberry, yellow is vanilla and black is chocolate). This enhances community pride and a sense of ownership. A launch of the condom into a community is done through a 'Snakefest' that involves Aboriginal artists and brings the community together. The initiative also illustrates a community framework to support the implementation of this marketing concept (Marie Stopes, 2007). In addition to using traditional retail outlets (supermarkets, chemists, convenience stores, service stations, and local health services), the condoms are also made available at late night eateries, burger vans, pubs and cafes. Most importantly, the initiative also trains and supports a network of peer educators/peer sellers (condom distributors), known as 'snake charmers'. These peer educators allow the condoms to be discreetly available at parties and places where young people gather. This network thus increases the community's access to condoms and sexual health information, where and when they are most needed. The community also decided that in order to ensure that the condoms are well regarded, they would not be distributed for free or at a price that would be labelled as 'too cheap'. Instead, the condoms are subsidised and sold at an affordable \$2 per packet of 3. The 'snake charmers' make a profit from selling the condoms, while the rest of the proceeds are used to ensure project sustainability. This approach also provides an opportunity for young people in the community to earn money and build their self-esteem by promoting sexual health (Marie Stopes, 2007)

As part of the overall promotion of campaign messages, Convenience Advertising (CONADS) was employed to manage a strategic promotional campaign advocating Snake Condoms and safe sex to Indigenous youth. As an alternative to the use of mass media with a broad audience (e.g. television, radio, newspapers, and magazines), the use of targeted media and channels (narrowcasting) provides opportunities to meet the demands of specific target groups (Flora, Maibach and Maccoby, 1989). Convenience Advertising (2008) has adapted the use of narrowcast, for the purpose of disseminating strategically planned public health

communications programs via the placement of A4 messages and ‘take-away’ message cards in public bathrooms in venues such as pubs, bars, hotels, airports, sporting stadiums, sports clubs, shopping centres and medical centres. This allows for highly targeted communications programs to be segmented by way of gender skew, demographics, area, lifestyle and locus of risk and/or engagement. For the Snake campaign, a total of 260 messages designed to increase awareness of the Snake Condom brand and the need to practice safe sex, through catchy slogans, were placed in Indigenous-specific and Indigenous-relevant venues such as sports clubs, schools, community health centres, hostels, youth refuges, needle and syringe exchange facilities, licensed venues and shopping centres. These messages were placed in the towns of Mildura, Bairnsdale, Echuca, Shepparton and Melbourne (CONADS, 2008). This paper reports on an independent evaluation of the narrowcast campaign involving intercept interviews with the target audience conducted after the 6-month campaign period by the University of Wollongong.

Method

To evaluate the narrowcast component of this campaign, quantitative evaluation of the campaign was undertaken by intercepting patrons immediately after using the facilities displaying campaign advertisements. An intercept questionnaire was developed to determine recall and recognition of the Snake Condom marketing posters; recall and understanding of the main and secondary messages; and perceptions of the relevance, appropriateness, and target market of the posters. Participants were also asked about behaviours such as buying and/or using Snake Condoms, visiting an Aboriginal Health Service, and talking about the poster. Interviewers were recruited and trained to conduct the surveys within the proximity of the venues selected for the campaign.

Results

A total of 108 intercept interviews were conducted with the target audience. There was a message recall rate of 89.8% (97/108). All of these 97 respondents met the study criteria of being aged between 16 and 29 years and self-identifying as Aboriginal or Torres Strait Islander. Slightly more than half of these respondents were male (n=52; 54.7%).

Main message and perceived target group of the campaign

The most common response in terms of the posters’ main message was ‘practice safe sex’ (n=63; 64.9%), closely followed by ‘use a condom’ (n=57; 58.8%) and ‘snakes are dangerous in the bush’ (n=27; 27.8%). Other responses included repetition of the wording of the campaign messages, such as ‘cover it’s head and it won’t bite you’ (19.6%), ‘trouser snakes are the deadliest’ (18.6%), and ‘look out for one eyed snakes’ (17.5%).

The vast majority of respondents (n=89; 91.8%) stated that the message in the poster was relevant to them, with males and females being equally likely to state this (z-test $p>0.05$). When asked why they felt the message was relevant, 27 of the 64 valid responses (42.2%) related to prevention and safety concerns regarding STIs, HIV, teen pregnancy and general sickness, and 26 respondents (40.6%) cited general awareness, health education, or health promotion regarding safe sex.

When asked who they thought the target group for this campaign was, the most common response was that the campaign was intended for ‘everyone’ (n=43; 44.3%), closely followed by young people (n=37; 38.1%), with eight additional respondents (8.2%) specifically indicating that *indigenous* youth were the target group.

Actions resulting from exposure to campaign

Of the 93 respondents who answered this question, 59.1% (n=55) stated that they had discussed the information in the posters with someone that they knew. However, of the 38 respondents who said that they had not discussed the information with someone they knew, 28 said that they *would* discuss the information. Therefore, all but 10 respondents indicated that they *had* or *would* discuss this information with someone they knew. Of those who said they wouldn’t, six said that this was because they already knew about it, two that they were too embarrassed to bring it up, and two didn’t think to bring it up.

Table 1: Since seeing the poster:

	Have you:		Do you intend to:	
	Yes (%)	No (%)	Yes (%)	No (%)
Bought/buy a snake condom	22 (34.9)	41 (65.1)	43 (74.1)	15 (25.9)
Used/use a snake condom	40 (52.6)	36 (47.4)	54 (84.4)	10 (15.6)
Been in/go to an Aboriginal Health Service	50 (64.1)	28 (35.8)	38 (73.1)	14 (26.9)
Talked/talk about the information in this poster	52 (62.7)	31 (37.3)	49 (83.1)	10 (16.9)

Respondents were most likely to report going to an Aboriginal Health Service after seeing the Snake poster (n=50; 64.1%); this was closely followed by discussing the information that was in the poster (n=52; 62.7%) and using a snake condom (n=40; 52.6%). Just over one third (n=20; 34.9%) reported buying a snake condom since seeing the poster.

While males were more likely to have bought snake condoms (41.9% versus 29.0% for females), used snake condoms (63.4% versus 41.2%), been to an Aboriginal Health Service (70.0% versus 58.3%), and talked about the information in the poster (63.6% versus 62.2%), none of these differences were significant (z-test $p > 0.05$).

In regards to respondents’ *intention to act* after seeing the snake poster, the majority of respondents reported that they would use a snake condom in the future (n=54; 84.4%), discuss the information seen on the poster (n=49; 83.1%), buy a snake condom (n=43; 74.1%), and go to an Aboriginal Health Service (n=38; 73.1%).

Discussion

Despite the fact that recall of specific campaign slogans was less than 50%, it is encouraging to note that neither of the two most commonly perceived main messages of the poster (i.e. “practice safe sex” and “use condoms”, cited by more than 50% of respondents) were actual slogans – and more importantly, the key communication objectives – of the Snake Condom Marketing Initiative, meaning that Indigenous youth in this study have taken out of the poster

the important messages relating to practising safe sex, even if they cannot recall the specific text of the poster.

When asked who the message was targeted at, only eight respondents correctly stated Indigenous youth. However, 91.8% of respondents believed that the messages were targeted at themselves. This is another encouraging sign for the effectiveness of the campaign – it should not matter who the target group perceives the campaign to be directed towards, as long as they recognise that it is relevant to them. It is also worth noting that the respondents were Indigenous youth, thus many of those who responded ‘young people’ (38%) may well have realised, but not articulated, the actual target group.

Respondents seemed very open to discussing this information with other people, given that all but 10 respondents either indicated that they *had* discussed the information with other people, or that they *would* discuss the information with other people.

Interestingly, more respondents reported using snake condoms (approximately half) than buying them (one-third) – perhaps implying that they had been given them, or that their partner had bought them. Also, approximately two-thirds of participants reported that they had been to an Aboriginal Health Service since seeing the posters, which was particularly encouraging. Approximately three-quarters of the sample indicated that in the future they would buy and use Snake Condoms, and they would visit an Aboriginal Health Service.

Results from this evaluation show that the vast majority of respondents believed that the information was relevant to them, stated that they would buy and use (snake) condoms, talk about this information and visit an Aboriginal Health Service. Results in relation to reported condom purchase and usage, although encouraging, should be interpreted with caution. It is probable, given the expected low condom usage rates by Aboriginal persons that these rates have been influenced by the respondents desire to provide socially desirable answers. It is also probable that any favourable results should be considered in the context of the total social marketing efforts of the Snake Condom campaign in the regions evaluated, rather than just attributed to the impact of the narrowcast components of the campaign. Despite this caution, the success of this campaign in relation to recall, and perceived relevance, indicates that this campaign may provide a useful framework for addressing a sensitive topic, especially those that are targeted at sub-groups of particular interest within the population. Hopefully health services can utilise and be inspired by initiatives such as ‘Snake Condoms’ to combat chlamydia and enhance sexual health, particularly in the Aboriginal community.

References

Blair, E., Zubrick, S., and Cox, A., 2005. The Western Australian Aboriginal Child Health Survey: findings to date on adolescents. *Medical Journal of Australia*, 183 (8), 433-435.

Convenience Advertising (CONADS), 2008. Victorian Indigenous Sexual Health Awareness Campaign. Promoting Snake Condoms to Indigenous Youth in Victoria. Available from www.conads.com.au, accessed on 4 September, 2008.

Crosby, R.A., Di Clemente, R.J., Wingwood, G.M., Salazar, L.F., Harrington, K., Davies, S.L. 2003. Identification of strategies for promoting condom use: a prospective analysis of high-risk African-American female teens. *Preventative Science*, 4, 263–70.

De Visser, RO, Smith, MA, Rissel, CE, Richters, J, Grulich, AE. 2003. Safer sex and condom use among a representative sample of adults. *Australian and New Zealand Journal of Public Health*, 27(2), 223-279.

Flora, J.A., Maibach, E.W. and Maccoby, N. 1989. The Role of Media across four levels of health promotion intervention. *Annual Review of Public Health*, 10, 181-201.

Hill, D.M., Larque, S.J., Lyszkowski, A.D., Porter, M., Potter W.D., Solanki, S.L., White, N.D. and Williams, T.H. 1996. Condoms: An overview. *Materials World*, 4(5), 255-58.

Kildea S. and Bowden F.J. 2000. Reproductive health, infertility and sexually transmitted infections in Indigenous women in a remote community in the Northern Territory. *Australian and New Zealand Journal of Public Health*; 24, 382-386.

Larkins, S.L., Page, R.P., Panaretto, K.S., Scott, R., Mitchell, M.R., Alberts, V., Veitch, C. and McGinty, S. 2007. Attitudes and behaviours of young Indigenous people in Townsville concerning relationships, sex and contraception: the 'U Mob Yarn Up' project. *Medical Journal of Australia*, 186 (10), 513-518

Marie Stopes International Australia, 2007. Condom Social Marketing Initiative. Don't Let Your Community Get Bitten. Ask For A Snake. Available at <http://www.mariestopes.org.au/country-aust-proj2.html>, accessed on July, 10, 2008.

Molloy, R., Greet, B. And Knight, K.(2004). Don't Let Your Community Get Bitten. Ask for a Snake, *Aboriginal and Islander Health Worker Journal*, 28 (6), 14-16.

Stark, AM, Hope, A. 2007. Aboriginal women's stories of sexually transmitted infection transmission and condom use in remote central Australia, *Sexual Health*, 4, 237-242.

Wilkins, A, Mak, D. 2005. 2005 Chlamydia Campaign Evaluation Report. Available at http://www.public.health.wa.gov.au/3/610/3/chlamydia_campa.pm, accessed on July 2, 2008.

Willis, J. 2003. Condoms are for whitefellas: barriers to Pitjantjatjara men's use of safe sex technologies. *Culture, health and sexuality*, 5(3), 203-217.

Wright, M.R., Giele, C.M., Dance, P.R. and Thompson, S.C. 2005. Fulfilling prophecy? Sexually transmitted infections and HIV in Indigenous people in Western Australia. *Medical Journal of Australia*, 183, 124-128.