

# Australia's National Tobacco

## Campaign:

### Discourse and Change over Two Decades

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the requirements for the degree of*

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## **Declaration**

I certify that this thesis does not incorporate without acknowledgement any material previously submitted for a degree or diploma in any university; and that to the best of my knowledge and belief it does not contain any material previously published or written by another person where due reference is not made in the text.

Aurélie Marie Beatrice Mallet

## Abstract

Australia's National Tobacco Campaign (NTC) is one of Australia's longest running public health campaigns and has been successful at reducing smoking rates in Australia since its inception in 1997 (Australian Institute of Health and Welfare, 2020). While there has been a large amount of research investigating the NTC's impact on reducing smoking rates (e.g. Boyle et al., 2010; Department of Health and Ageing, 2004; Young, 2016), there has been little research into the NTC's campaign materials themselves and how they work to effect change. This thesis explores the development of these materials and the overall NTC from 1997-2019. It investigates how these campaign materials draw on various semiotic resources including language, image, film and sound to help stop Australians smoking. Throughout, the goal of this research is to understand the NTC in a way that can aid in the design of future public health interventions. To do so, this thesis employs the methodological approach of Positive Discourse Analysis which advocates for the analysis of successful interventions so as to inform future interventions (Bartlett, 2017; Martin, 2004b). This thesis also employs Systemic Functional Linguistics as its analytical approach to provide detailed text analyses of the NTC materials including TV ads, radio ads and posters. The analytical tools deployed in this thesis explore meanings across all three metafunctions.

A key challenge for this research is to be able to link the multimodal patterns of individual campaign materials to the overall 22-year change and development of the NTC. In order to do this, this thesis proposes a set of 'rhetorical strategies' that offer a means of seeing patterns that recur throughout the campaign. These rhetorical strategies are 'zoomable' analytical tools in the sense that they can move between individual campaign materials, across whole

campaigns, and all the way up to the NTC's large-scale development over time, while at the same time, linking individual campaigns within the NTC to each other. Perhaps most importantly, these rhetorical strategies have also been developed to be applicable to both analysis and design.

The first set of strategies concerns whether the materials frame their message in terms of negative consequences of smoking, or positive outcomes of quitting. The second set of strategies characterise whether technical information is being given about the health effects of smoking or quitting, or whether individual and personalised stories and experiences are being foregrounded. The final set of strategies concern whether the messaging surrounds actual impacts that have already occurred for the smoker, or possible future paths – whether positive or negative – that they may travel on when smoking or quitting. Together these strategies build a complex yet consistent set of meanings that progressively build knowledge and values around smoking such that it is now uncommon in Australia for a person not to know that smoking kills.



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## Using this thesis and analytical/notational conventions

This thesis contains links to various materials throughout, and therefore an e-copy is required to view these materials.

### Notational conventions in SFL

- Function labels have first letter capitalised e.g. Agent, Theme
- Class labels have no capitalisation e.g. verb, noun
- Systems are written in small caps e.g. APPRAISAL, NUCLEAR RELATIONS

### Appraisal

- Realisations of **affect** are highlighted pink
- Realisations of **judgement** are highlighted blue
- Realisations of **appreciation** are highlighted yellow
- **Negative** polarity is highlighted red
- **Positive** polarity is highlighted green
- Realisations of the system of **graduation** are bolded
- Realisations of the system of engagement are underlined
- Upscaling graduation is represented by ↑
- Downscaling graduation is represented by ↓

### Nuclear relations

- **Agents** are bolded red
- **Mediums** are bolded blue
- **Circumstances of Behalf** are bolded purple

Other conventions are explained as required.

## Contents

|   |            |
|---|------------|
| <b>CHAPTER 1 – INTRODUCTION</b> .....                                     | <b>1</b>   |
| 1.1. Aims, objectives and rationales.....                                 | 5          |
| 1.2. Organisation of thesis.....  | 7          |
| <b>CHAPTER 2 – LITERATURE REVIEW</b> .....                                | <b>11</b>  |
| 2.1. Background and context of Australia’s National Tobacco Campaign..... | 12         |
| 2.2. Impacts of the NTC.....  | 42         |
| 2.2.1. Every Cigarette is Doing You Damage.....                           | 44         |
| 2.2.2. Graphic health warnings.....                                       | 48         |
| 2.2.3. Vulnerable and disadvantaged groups.....                           | 50         |
| 2.3. Chapter summary.....   | 57         |
| <b>CHAPTER 3 – FOUNDATIONS</b> .....                                      | <b>58</b>  |
| 3.1. Systemic Functional Linguistics.....                                 | 59         |
| 3.1.1. Health research in SFL.....  | 66         |
| 3.1.2. Analytical tools across strata and metafunctions.....              | 69         |
| 3.2. Multimodal Discourse Analysis.....                                   | 92         |
| 3.3. Positive Discourse Analysis.....                                     | 101        |
| 3.4. Rhetorical strategies.....   | 103        |
| 3.5. Data.....  | 119        |
| 3.6. Chapter summary.....   | 120        |
| <b>CHAPTER 4 – NEGATIVITY/POSITIVITY</b> .....                            | <b>122</b> |
| 4.1. Negativity.....  | 123        |

|   |            |
|---|------------|
| 4.1.1. How is negativity construed ideationally? .....          | 124        |
| 4.1.2. How is negativity construed interpersonally?.....        | 128        |
| 4.1.3. How is negativity construed textually?.....              | 142        |
| 4.2. Positivity.....  | 150        |
| 4.2.1. How is positivity construed ideationally?.....           | 151        |
| 4.2.2. How is positivity construed interpersonally? .....       | 157        |
| 4.2.3. How is positivity construed textually? .....             | 168        |
| 4.3. Chapter summary.....                                       | 169        |
| <b>CHAPTER 5 – TECHNICALISING/PERSONALISING.....</b>            | <b>170</b> |
| 5.1. Technicalising.....  | 171        |
| 5.1.1. How is technicalising construed ideationally?.....       | 174        |
| 5.1.2. How is technicalising construed interpersonally? .....   | 187        |
| 5.1.3. How is technicalising construed textually?.....          | 197        |
| 5.2. Personalising.....   | 200        |
| 5.2.1. How is personalising construed ideationally?.....        | 202        |
| 5.2.2. How is personalising construed interpersonally?.....     | 207        |
| 5.2.3. How is personalising construed textually?.....           | 216        |
| 5.3. Chapter summary.....                                       | 221        |
| <b>CHAPTER 6 – ACTUAL/POSSIBLE BEHAVIOUR.....</b>               | <b>223</b> |
| 6.1. Actual behaviour.....                                      | 224        |
| 6.1.1. How is actual behaviour construed ideationally?.....     | 225        |
| 6.1.2. How is actual behaviour construed interpersonally? ..... | 239        |
| 6.1.3. How is actual behaviour construed textually?.....        | 243        |

|   |            |
|---|------------|
| 6.2. Possible behaviour.....                                      | 244        |
| 6.2.1. How is possible behaviour construed ideationally?.....     | 248        |
| 6.2.2. How is possible behaviour construed interpersonally? ..... | 255        |
| 6.2.3. How is possible behaviour construed textually?.....        | 258        |
| 6.3. Interplay between actual and possible behaviour.....         | 266        |
| 6.4. Chapter summary.....   | 270        |
| <b>CHAPTER 7 – THE NTC OVER 22 YEARS.....</b>                     | <b>272</b> |
| 7.1. Progression of strategies over 22 years.....                 | 273        |
| 7.1.1. Development of negativity and positivity.....              | 274        |
| 7.1.2. Development of technicalising and personalising.....       | 280        |
| 7.1.3. Development of actual and possible behaviour.....          | 286        |
| 7.1.4. Summary of overall development.....                        | 288        |
| 7.2. Regular combinations.....                                    | 293        |
| 7.2.1. Negativity + technicalising.....                           | 293        |
| 7.2.2. Positivity + personalising.....                            | 301        |
| 7.3. Additional combinations.....                                 | 308        |
| 7.3.1. Negativity + personalising.....                            | 308        |
| 7.3.2. Positivity + technicalising.....                           | 314        |
| 7.4. Chapter summary.....   | 322        |
| <b>CHAPTER 8 – BUILDING VALUES IN THE NTC.....</b>                | <b>323</b> |
| 8.1. Couplings, bonds, bond networks.....                         | 324        |
| 8.2. Formation of couplings and bonds in the NTC.....             | 330        |
| 8.2.1. ‘smoking bad’ central bond.....                            | 331        |

|   |            |
|---|------------|
| 8.2.2. ‘disease bad’ supporting bond.....   | 335        |
| 8.2.3. ‘impact on non-smoker bad’ supporting bond.....                                  | 342        |
| 8.3. Bond clusters.....   | 350        |
| 8.3.1. ‘smoking harms smoker’ cluster.....  | 352        |
| 8.3.2. ‘smoking harms non-smoker’ cluster.....  | 354        |
| 8.4. Negative values around smoking.....  | 356        |
| 8.5. Positive values towards quitting.....  | 360        |
| 8.6. Opposing bond clusters in establishing anti-smoking and pro-quit-ting values ..... | 368        |
| 8.7. Chapter summary.....   | 371        |
| <b>CHAPTER 9 – CONCLUSIONS.....</b>   | <b>374</b> |
| 9.1. Summary of findings and contributions.....   | 375        |
| 9.1.1. Contributions to PDA research.....   | 375        |
| 9.1.2. Contributions to SFL.....  | 378        |
| 9.2. Implications for public health campaigns.....                                      | 379        |
| 9.2.1. Negativity + technicalising.....   | 385        |
| 9.2.2. Positivity + personalising.....  | 392        |
| 9.2.3. Negativity + personalising.....  | 400        |
| 9.2.4. Positivity + technicalising.....   | 403        |
| 9.3. Where to next? .....   | 406        |
| <b>References.....</b>  | <b>408</b> |
| <b>Appendix A – Data.....</b>   | <b>441</b> |

## List of Images

|  |    |
|--|----|
| Image 1.1. Example of early warning label.....                                 | 2  |
| Image 1.2. <i>Gums and Teeth</i> 2012 cigarette pack.....                      | 5  |
| Image 2.1. <i>Something close to every smoker's heart</i> print ad.....        | 19 |
| Image 2.2. <i>National Tobacco Youth Campaign – parent</i> print ad.....       | 22 |
| Image 2.3. <i>National Tobacco Youth Campaign – youth</i> print ad.....        | 23 |
| Image 2.4. <i>Break the Chain</i> print ad.....                                | 25 |
| Image 2.5. <i>Quit for You, Quit for Two</i> print ad – <i>Rebecca</i> .....   | 27 |
| Image 2.6. <i>Cough</i> print ad.....  | 29 |
| Image 2.7. <i>Health Benefits</i> poster – <i>woman</i> .....                  | 31 |
| Image 2.8. <i>Health Benefits</i> poster – <i>man</i> .....                    | 32 |
| Image 2.9. Chemical warnings on cigarette packs.....                           | 35 |
| Image 2.10. <i>Symptoms</i> print ad.....                                      | 37 |
| Image 2.11. <i>Breathless</i> print ad.....                                    | 38 |
| Image 2.12. <i>Don't Make Smokes your Story</i> print ad – <i>guitar</i> ..... | 40 |
| Image 2.13. <i>Don't Make Smokes your Story</i> print ad – <i>Bikes</i> .....  | 41 |
| Image 3.1. <i>Health Benefits</i> poster – <i>woman</i> .....                  | 75 |
| Image 3.2. <i>Peripheral Vascular Disease</i> 2012 cigarette pack.....         | 77 |
| Image 3.3. <i>Don't Make Smokes your Story</i> poster – <i>guitar</i> .....    | 94 |
| Image 3.4. Still shot of <i>Eye</i> TV ad.....                                 | 98 |



|  |     |
|--|-----|
| Image 3.5. <i>Quit for You, Quit for Two</i> print ad – <i>Hayley</i> .....  | 109 |
| Image 3.6. Still shot of <i>Eye</i> TV ad.....                               | 114 |
| Image 4.1. <i>Heart Disease 2012</i> cigarette pack.....                     | 138 |
| Image 4.2. <i>Quit for You, Quit for Two</i> print ad – <i>Rebecca</i> ..... | 165 |
| Image 4.3. <i>Quit for You, Quit for Two</i> print ad – <i>Hayley</i> .....  | 166 |
| Image 5.1. <i>Heart Disease 2012</i> cigarette pack.....                     | 172 |
| Image 5.2. <i>Health Benefits</i> poster – <i>woman</i> .....                | 173 |
| Image 5.3. <i>Peripheral Vascular Disease 2012</i> cigarette pack.....       | 175 |
| Image 5.4. <i>Health Benefits</i> poster – <i>woman</i> .....                | 178 |
| Image 5.5. <i>Health Benefits</i> poster – <i>man</i> .....                  | 193 |
| Image 5.6. <i>Gums and Teeth 2012</i> cigarette pack.....                    | 198 |
| Image 5.7. <i>Don't Make Smokes your Story</i> print ad – <i>Bikes</i> ..... | 201 |
| Image 6.1. <i>Stroke 2012</i> cigarette pack.....                            | 227 |
| Image 6.2. <i>Health Benefits</i> campaign poster – <i>woman</i> .....       | 246 |
| Image 6.3. <i>Health Benefits</i> campaign poster – <i>man</i> .....         | 247 |
| Image 6.4. <i>Emphysema 2012</i> cigarette pack.....                         | 249 |
| Image 6.5. <i>Health Benefits</i> campaign poster – <i>woman</i> .....       | 263 |
| Image 6.6. <i>Health Benefits</i> campaign poster – <i>man</i> .....         | 264 |
| Image 6.7. <i>Emphysema 2012</i> cigarette pack.....                         | 265 |
| Image 7.1. <i>Oral Cancer</i> cigarette pack Canada.....                     | 297 |

|  |     |
|--|-----|
| Image 7.2. <i>Mouth Cancer 2012</i> cigarette pack.....                    | 299 |
| Image 7.3. U.S FDA <i>Every Try Counts</i> campaign.....                   | 305 |
| Image 7.4. <i>Smoking Kills 2012</i> cigarette pack.....                   | 310 |
| Image 7.5. Still shot of <i>Cough</i> TV ad.....                           | 312 |
| Image 7.6. Still of <i>Worried</i> NHS TV ad.....                          | 313 |
| Image 7.7. <i>Health Benefits</i> campaign poster – <i>woman</i> .....     | 316 |
| Image 7.8. UK poster of benefits of quitting.....                          | 318 |
| Image 7.9. <i>Heart Disease 2012</i> cigarette pack.....                   | 319 |
| Image 7.10. France plain packaging.....                                    | 321 |
| Image 8.1. <i>Unborn Babies 2012</i> cigarette pack.....                   | 343 |
| Image 8.2. <i>Health Benefits</i> campaign poster – <i>woman</i> .....     | 362 |
| Image 9.1. Poster adapted from <i>Rethink Sugary Drink</i> initiative..... | 387 |
| Image 9.2. Normal liver vs fatty liver.....                                | 390 |
| Image 9.3. Still shot from <i>Artery</i> TV ad.....                        | 391 |
| Image 9.4. Example of positivity + personalising testimonial.....          | 396 |
| Image 9.5. Example of negativity + personalising material.....             | 401 |

## List of Figures

|   |     |
|---|-----|
| Figure 3.1. SFL strata of language (Martin & Rose’s (2007) model).....                        | 61  |
| Figure 3.2. Strata of language and social context.....  | 63  |
| Figure 3.3. Metafunctions in SFL.....   | 64  |
| Figure 3.4. Metafunctions and strata of language.....   | 65  |
| Figure 3.5. System network of ENTITY TYPES (Hao, 2020).....                                   | 73  |
| Figure 3.6. Compositional taxonomy of <i>Health Benefits</i> poster – <i>woman</i> .....      | 76  |
| Figure 3.7. Classification taxonomy of the diseases of smoking.....                           | 76  |
| Figure 3.8. System network of inscribing and invoking attitude (Martin & White, 2005).....    | 80  |
| Figure 3.9. System network of engagement (Martin & White, 2005).....                          | 83  |
| Figure 3.10. System network of graduation (Martin & White, 2005).....                         | 85  |
| Figure 3.11. System network of sound (van Leeuwen, 1999).....                                 | 100 |
| Figure 3.12. Micro, macro, and large-scale analysis.....                                      | 104 |
| Figure 3.13. Compositional taxonomy of the body repairing itself after quitting.....          | 111 |
| Figure 3.14. Classification taxonomy in personalising campaign.....                           | 115 |
| Figure 5.1. Composition taxonomy of <i>Peripheral Vascular Disease 2012</i> cigarette pack... | 177 |
| Figure 5.2. Compositional taxonomy of <i>Health Benefits</i> poster – <i>woman</i> .....      | 179 |
| Figure 5.3. Classification taxonomy in <i>Family</i> TV ad.....                               | 204 |
| Figure 5.4. Composition taxonomy of <i>Peripheral Vascular Disease 2012</i> cigarette pack... | 204 |

|   |     |
|---|-----|
| Figure 8.1. N. Knight's (2010a) representation of the formation of couplings and bonds...                       | 328 |
| Figure 8.2. N. Knight's (2010b) cline of affiliation realisation.....   | 329 |
| Figure 8.3. Formation of couplings and bonds in the NTC (adopted from N. Knight<br>(2010a)).....                | 331 |
| Figure 8.4. Formation of coupling and ' <i>smoking bad</i> ' central bond.....                                  | 334 |
| Figure 8.5. Example of classification of diseases and damage caused by smoking.....                             | 336 |
| Figure 8.6. Compositional taxonomy of periodontitis.....  | 336 |
| Figure 8.7. General to more specific bonds.....   | 339 |
| Figure 8.8. Classificatory relationship between types of negative impacts smoking causes to<br>non-smokers..... | 342 |
| Figure 8.9. General and specific couplings of ' <i>impact on non-smoker bad</i> ' bonds.....                    | 345 |
| Figure 8.10. ' <i>impact on non-smoker bad</i> ' supporting bonds.....  | 348 |
| Figure 8.11. Example of bond cluster.....   | 351 |
| Figure 8.12. Bonds in <i>Brain</i> TV ad.....   | 352 |
| Figure 8.13. ' <i>smoking harms smoker</i> ' bond cluster.....  | 353 |
| Figure 8.14. More delicate ' <i>smoking harms smoker</i> ' cluster.....   | 354 |
| Figure 8.15. ' <i>impact on non-smoker bad</i> ' bonds in Unborn Babies 2012 cigarette pack.....                | 355 |
| Figure 8.16. ' <i>smoking harms non-smoker</i> ' bond cluster.....  | 355 |
| Figure 8.17. N. Knight's (2010b) cline of affiliation realisation.....  | 357 |
| Figure 8.18. Process of building negative values around smoking over 22 years.....                              | 359 |

|  |     |
|--|-----|
| Figure 8.19. Formation of <i>'quitting good'</i> central bond.....   | 361 |
| Figure 8.20. Formation of <i>'quitting heals body good'</i> bonds in <i>Health Benefits</i> poster.....                | 363 |
| Figure 8.21. <i>'quitting heals body good'</i> bonds in <i>Health Benefits</i> poster.....                             | 363 |
| Figure 8.22. Formation of <i>'mum &amp; aunties happy good'</i> bond.....  | 364 |
| Figure 8.23. Formation of <i>'impact on non-smoker good'</i> bonds.....  | 365 |
| Figure 8.24. <i>'quitting benefits smoker'</i> bond cluster.....   | 366 |
| Figure 8.25. <i>'quitting benefits non-smoker'</i> bond cluster.....   | 367 |
| Figure 8.26. Process of building positive values around quitting over 22 years.....                                    | 368 |
| Figure 8.27. Values in the NTC over 22 years.....  | 373 |
| Figure 9.1. Classificatory taxonomy of types of sugars, drawn from Food Standards Australia<br>New Zealand (2019)..... | 386 |
| Figure 9.2. Classification taxonomy of negative effects of excessive free sugar<br>consumption.....                    | 388 |
| Figure 9.3. Classification taxonomy of family benefiting from healthy eating.....                                      | 395 |
| Figure 9.4. Classification taxonomy of <i>'green'</i> drinks, adapted from Victorian Government<br>(2020).....         | 404 |

## List of Tables

|   |     |
|---|-----|
| Table 2.1. Timeline of Federal campaigns.....   | 16  |
| Table 2.2. Example of <i>Health Warnings 2006</i> cigarette packs.....  | 20  |
| Table 2.3. <i>Health Warnings 2012</i> cigarette packs.....   | 34  |
| Table 3.1. SFL Frameworks.....  | 69  |
| Table 3.2. Example of ‘happening’ clause.....   | 71  |
| Table 3.3. Example of ‘doing’ clause.....   | 71  |
| Table 3.4. Examples of Range, Circumstance and Beneficiary.....   | 71  |
| Table 3.5. Implication relations of <i>Peripheral Vascular Disease 2012</i> cigarette pack.....               | 78  |
| Table 3.6. Example of judgement and appreciation analysis.....  | 81  |
| Table 3.7. Example of affect analysis.....  | 81  |
| Table 3.8. Example of graduation analysis.....  | 86  |
| Table 3.9. Example of naming in <i>Break the Chain</i> campaign and <i>Emphysema 2012</i> cigarette pack..... | 88  |
| Table 3.10. Example of Theme/New analysis of <i>Lungs</i> radio ad.....                                       | 91  |
| Table 3.11. Example of agency in negative campaigns.....  | 106 |
| Table 3.12. Negative attitude in images.....  | 107 |
| Table 3.13. Example of agency in positive campaigns.....  | 108 |
| Table 3.14. Implication relations of <i>Peripheral Vascular Disease 2012</i> cigarette pack.....              | 112 |
| Table 3.15. Theme/Rheme analysis of <i>Gums and Teeth 2012</i> cigarette pack.....                            | 112 |

|  |     |
|--|-----|
| Table 3.16. Thing entities in images of technicalising campaigns.....                                      | 113 |
| Table 3.17. Theme/Rheme analysis in personalising campaign.....  | 115 |
| Table 3.18. Human participants in images in personalising campaigns.....                                   | 116 |
| Table 3.19. Examples of language features construing actual behaviour.....                                 | 117 |
| Table 3.20. Examples of language features construing possible behaviour.....                               | 118 |
| Table 3.21. Example of Theme/Rheme analysis construing possible behaviour.....                             | 119 |
| Table 4.1. NUCLEAR RELATIONS analysis of <i>Lungs</i> radio ad.....  | 125 |
| Table 4.2. NUCLEAR RELATIONS analysis of <i>Tumour</i> radio ad.....                                       | 125 |
| Table 4.3. Shots of damage caused by smoking.....  | 127 |
| Table 4.4. Inscribed negative appreciation of actions in <i>Brain</i> TV ad.....                           | 131 |
| Table 4.5. Inscribed negative appreciation by linking smoking with diseases in <i>Brain</i> TV<br>ad.....  | 132 |
| Table 4.6. Inscribed negative appreciation by linking smoking with diseases in <i>Tumour</i> TV<br>ad..... | 132 |
| Table 4.7. Agent + Medium relations of <i>Brain</i> TV ad.....   | 133 |
| Table 4.8. Full attitude analysis of <i>Brain</i> TV ad.....   | 134 |
| Table 4.9. Attitude analysis of <i>Breathless</i> TV ad.....   | 136 |
| Table 4.10. Graduation analysis of <i>Artery</i> TV ad.....  | 137 |
| Table 4.11. Theme/New analysis of <i>Lungs</i> radio ad.....   | 146 |

|   |     |
|---|-----|
| Table 4.12. Extreme close-ups of damaged organs in <i>Every Cigarette is Doing You Damage</i> campaign..... | 148 |
| Table 4.13. NUCLEAR RELATIONS analysis of <i>Quit for You, Quit for Two</i> TV ad.....                      | 153 |
| Table 4.14. Activity series of <i>Quit for You, Quit for Two</i> TV ad.....                                 | 157 |
| Table 4.15. Inscribed attitude in <i>Quit for You, Quit for Two</i> TV ad.....                              | 159 |
| Table 4.16. Agent + Medium + Circumstance: Behalf relations in <i>Quit for You, Quit for Two</i> TV ad..... | 160 |
| Table 4.17. Full attitude analysis of <i>Quit for You, Quit for Two</i> TV ad.....                          | 162 |
| Table 4.18. Affect in <i>Family</i> TV ad.....  | 163 |
| Table 5.1. NUCLEAR RELATIONS of <i>Peripheral Vascular Disease 2012</i> cigarette pack.....                 | 176 |
| Table 5.2. Implication relations of <i>Peripheral Vascular Disease 2012</i> cigarette pack.....             | 180 |
| Table 5.3. Activity sequences in <i>Health Benefits</i> radio ad.....                                       | 182 |
| Table 5.4. Example of cigarette packs 2012.....   | 184 |
| Table 5.5. Naming in <i>Family</i> TV ad.....   | 189 |
| Table 5.6. First-person pronouns in <i>Family</i> TV ad.....  | 189 |
| Table 5.7. Naming in <i>Health Warnings 2012</i> cigarette packs.....                                       | 190 |
| Table 5.8. Generic <i>you</i> in health message on cigarette packs.....                                     | 192 |
| Table 5.9. Monoglossia in <i>Emphysema 2012</i> cigarette pack.....   | 194 |
| Table 5.10. Heteroglossia in <i>Gums and Teeth 2012</i> cigarette pack.....                                 | 195 |
| Table 5.11. Contrast of technicalising vs personalising image.....  | 196 |



|   |     |
|---|-----|
| Table 5.12. Theme/Rheme analysis of <i>Gums and Teeth 2012</i> cigarette pack.....    | 198 |
| Table 5.13. Theme/Rheme analysis of <i>Emphysema 2012</i> cigarette pack.....         | 199 |
| Table 5.14. Posters from the <i>Stop before the Suffering Starts</i> campaign.....    | 202 |
| Table 5.15. People entities in <i>Family TV</i> ad.....                               | 203 |
| Table 5.16. Activity sequence in <i>Family TV</i> ad.....                             | 205 |
| Table 5.17. Contrast between technicalising and personalising images.....             | 206 |
| Table 5.18. Naming in <i>Family TV</i> ad.....  | 208 |
| Table 5.19. Naming in <i>Break the Chain TV</i> ad.....                               | 209 |
| Table 5.20. Heteroglossia in <i>Break the Chain TV</i> ad.....                        | 210 |
| Table 5.21. Emoters in <i>Family TV</i> ad.....                                       | 211 |
| Table 5.22. <i>Eye TV</i> ad transcript.....  | 212 |
| Table 5.23. ‘Demand’ shots of <i>Family TV</i> ad.....                                | 213 |
| Table 5.24. Technicalisation and personalisation of emphysema.....                    | 215 |
| Table 5.25. Human participants in <i>Don’t Make Smokes your Story</i> posters.....    | 217 |
| Table 5.26. Prominence of body parts on cigarette packs.....                          | 218 |
| Table 5.27. Theme/Rheme analysis of <i>Don’t Make Smokes your Story</i> radio ad..... | 220 |
| Table 6.1. Ideational realisation of actual and possible behaviour.....               | 226 |
| Table 6.2. Realisation of past tense in <i>Stroke 2012</i> cigarette pack.....        | 228 |
| Table 6.3. Realisation of present-in-present tense in <i>Artery</i> radio ad.....     | 229 |
| Table 6.4. Simple present in all process types.....                                   | 230 |

|   |     |
|---|-----|
| Table 6.5. Simple present construing actual and possible behaviour.....             | 232 |
| Table 6.6. Imperfective aspect in <i>Artery</i> radio ad.....                       | 234 |
| Table 6.7. Circumstance of Location in <i>Artery</i> radio ad.....                  | 235 |
| Table 6.8. Circumstance of Extent in <i>Family</i> TV ad.....                       | 236 |
| Table 6.9. Actual behaviour in <i>Artery</i> radio ad.....                          | 237 |
| Table 6.10. Shots of actual damage from <i>Artery</i> TV ad.....                    | 238 |
| Table 6.11. Major emotions of affect - realis (Martin & White, 2005).....           | 241 |
| Table 6.12. Irrealis affect (Martin & White, 2005).....                             | 242 |
| Table 6.13. Realis affect in <i>Symptoms</i> radio ad.....                          | 243 |
| Table 6.14. Simple present in <i>Emphysema 2012</i> cigarette pack.....             | 249 |
| Table 6.15. Future tense in <i>Health Benefits</i> poster.....                      | 250 |
| Table 6.16. Perfective aspect in <i>Health Benefits</i> radio ad.....               | 252 |
| Table 6.17. Circumstances in <i>Health Benefits</i> poster.....                     | 253 |
| Table 6.18. Circumstances and verbal groups in <i>Health Benefits</i> poster.....   | 254 |
| Table 6.19. Imperatives in NTC materials.....                                       | 255 |
| Table 6.20. Imperatives in <i>Imagine</i> radio ad.....                             | 257 |
| Table 6.21. Irrealis affect in <i>Don't Make Smokes your Story</i> campaign.....    | 258 |
| Table 6.22. Theme/Rheme analysis of language in <i>Health Benefits</i> poster.....  | 260 |
| Table 6.23. Theme/Rheme analysis of <i>Health Benefits</i> radio ad.....            | 261 |
| Table 6.24. Shift between actual and possible behaviour in <i>Family</i> TV ad..... | 268 |

|   |     |
|---|-----|
| Table 7.1. Negativity/positivity progression and development.....                         | 276 |
| Table 7.2. Technicalising/personalising progression and development.....                  | 281 |
| Table 7.3. Positivity/negativity and technicalising/personalising progressions.....       | 291 |
| Table 7.4. Example of Agent and Medium in <i>Tumour</i> TV ad.....                        | 294 |
| Table 7.5. Example of Agent and Medium, UK anti-smoking TV ad.....                        | 295 |
| Table 7.6. Simple present tense in TV ads.....  | 295 |
| Table 7.7. Activity series of <i>Peripheral Vascular Disease 2012</i> cigarette pack..... | 296 |
| Table 7.8. Activity series of <i>Oral Cancer</i> cigarette pack Canada.....               | 298 |
| Table 7.9. Australian and Canadian Cigarette packs.....                                   | 300 |
| Table 7.10. Naming in positivity + personalising campaigns.....                           | 302 |
| Table 7.11. People entities in positivity + personalising campaigns.....                  | 303 |
| Table 7.12. Possible behaviour combining with positivity + personalising.....             | 304 |
| Table 7.13. Actual and possible behaviour in <i>Try Every Counts</i> Poster.....          | 306 |
| Table 7.14. Images in positivity + personalising campaigns.....                           | 307 |
| Table 7.15. Affect analysis of <i>Smoking Kills 2012</i> cigarette pack.....              | 310 |
| Table 7.16. Affect analysis of <i>Worried</i> ad from NHS.....                            | 311 |
| Table 7.17. Circumstances of <i>Location Health Benefits woman</i> poster.....            | 317 |
| Table 7.18. Implication sequence of <i>Heart Disease 2012</i> cigarette pack.....         | 320 |
| Table 7.19. Activity series in France cigarette pack (author's own translation).....      | 321 |
| Table 8.1. Examples of evaluative couplings in language.....                              | 325 |

|  |     |
|--|-----|
| Table 8.2. Image/verbiage couplings.....   | 326 |
| Table 8.3. Agent + Medium relations analysis of <i>Brain TV</i> ad.....  | 332 |
| Table 8.4. Affording attitude of <i>cigarette</i> and <i>smoking</i> .....   | 333 |
| Table 8.5. Activity series of <i>Peripheral Vascular Disease 2012</i> cigarette pack.....  | 337 |
| Table 8.6. Attitude analysis of disease and damage of <i>Brain TV</i> ad.....  | 338 |
| Table 8.7. Ideational concurrence in <i>Brain TV</i> ad.....   | 340 |
| Table 8.8. Formation of couplings and bonds in image/verbiage relations in <i>Brain TV</i> ad.....                               | 341 |
| Table 8.9. Inscribed attitude analysis of <i>Unborn Babies 2012</i> cigarette pack.....  | 344 |
| Table 8.10. Graduation analysis of <i>Unborn Babies 2012</i> cigarette pack.....   | 346 |
| Table 8.11. Invoked attitude analysis of <i>Unborn Babies 2012</i> cigarette pack.....   | 347 |
| Table 8.12. Image/verbiage coupling of ‘ <i>impact on non-smoker bad</i> ’ couplings.....  | 349 |
| Table 8.13. Opposing bond clusters in NTC.....   | 369 |
| Table 9.1. Activity series of how excessive sugar consumption leads to disease, drawn from Harvard Health Publishing (2017)..... | 389 |
| Table 9.2. Young person with rotten teeth.....   | 391 |
| Table 9.3. Examples of parents modelling healthy food choices for children.....  | 393 |
| Table 9.4. Naming in positivity + personalising testimonial.....   | 397 |
| Table 9.5. Affect in positivity + personalising testimonial.....   | 398 |
| Table 9.6. Example of actual and possible behaviour in positivity + personalising testimonial.....                               | 399 |

Table 9.7. Parallel of voiceover and shots.....402

Table 9.8. Implication sequence of benefits of reducing free sugar intake.....405

# CHAPTER 1

## INTRODUCTION

Smoking kills. This is a statement that most would accept as fact in many countries across the world today. But a number of decades ago, knowledge that smoking kills was not as widespread. This thesis explores how health authorities have shifted knowledge about smoking across multiple decades focusing in particular on a long running and highly successful health campaign in Australia known as the ‘National Tobacco Campaign’. This campaign has been a core component of Australia’s tough stance on tobacco control over the past 20 years and has contributed to making smoking a stigmatised behaviour. However, the beginning of Australia’s tobacco control program was relatively late in comparison to a number of comparable countries.

Australia’s tobacco control can be said to have begun in 1973 when a faint warning label regarding the health hazards of smoking was introduced on cigarette boxes (Image 1.1), almost a decade after the warning labels were required in the US (Scollo, Bayly, & Wakefield, 2015). In 1976, cigarette advertising was banned on TV<sup>1</sup> and radio, a decade after it was banned on TV in the UK, US and New Zealand (Scollo et al., 2015). Prior to these bans, tobacco companies used a range of tactics to retain their consumer base such as

---

<sup>1</sup> Cigarette advertising bans in cinemas were not as widespread as the bans on TV and radio since they fell under state/territory jurisdiction, and not federal jurisdiction (Freeman, Haslam, Scollo & Tumini, 2012). In 1990, tobacco advertisements were banned in sports and the arts in Victoria, Western Australia and South Australia (Freeman et al., 2012).

building an association with cigarettes and the outdoors; creating the false belief of reduced harm by smoking “light” or “mild” cigarettes; creating the perception that smoking is part of being social; and using attractive young people to endorse cigarettes (Lynch & Bonnie, 1994). They also used celebrities like Paul Hogan to promote “quality” cigarettes such as in the Winfield ads in [Video 1.1](#) and [Video 1.2](#). A compilation of Australian cigarette ads from the 60s and 70s depicting some of these tactics can be viewed in [Video 1.3](#)<sup>2</sup>.



*Image 1.1. Example of early warning label*

Today, Australia has one of the world’s most comprehensive tobacco control programs. Tobacco advertising is banned comprehensively; there are increasingly fewer places where smoking is allowed; taxes on tobacco range between 61% and 69% of recommended retail price (as of 2017) and are increasing every year (Department of Health, 2018d); and

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<sup>2</sup> Video links are provided throughout this thesis. An electronic copy is required to access them.

Australians are constantly being exposed to anti-smoking advertising. These tobacco control measures have led to a significant decrease in smoking rates: in 2019 only 11% of people aged 14 and over were daily smokers, compared to 24% in 1991 (Australian Institute of Health and Welfare, 2020c); and 63% of people aged 14 and over had never smoked in 2019 compared to only 49% in 1991 (Australian Institute of Health and Welfare, 2020c). This decline in smoking rates is attributed in large part to Australia's National Tobacco Campaign (NTC), a nation-wide, mass media campaign launched in 1997 to tackle smoking rates in Australia (Hill & Carroll, 2003).

The NTC is one of the Health Department's longest running public health campaigns, and is on-going (Department of Health, 2020a). As part of the NTC, campaigns have been developed by the Federal and State governments and NGOs to discourage smoking and encourage quitting. Indeed, research has suggested that the NTC was among the first in the world to show that anti-smoking campaigns could reduce smoking rates (Wakefield, Freeman, & Donovan, 2003). In this sense, the NTC can be seen as an on-going public health success since it has achieved its objective of reducing smoking rates in Australia.

However, while the steady decline of smoking has been a public health success, a number of other public health concerns in Australia are worsening, with one in particular a major cause for concern. Australia is currently facing an obesity epidemic with 67% of Australian adults and almost  $\frac{1}{4}$  of children aged 5-17 years being overweight or obese in 2017-2018 (Department of Health, 2019). Projections suggest that by 2025, around 83% of Australian men, 75% of Australian women, and one third of 5-19 year-olds will be overweight or obese (VicHealth, 2014). There are a range of lifestyle factors that are contributing to the obesity



epidemic, one of which being the over consumption of free<sup>3</sup> sugars (Luger et al., 2018; Sugar by Half, 2019a). On average Australians consume 14-16 teaspoons of added sugar a day (Sugar by Half, 2019a) compared to the WHO daily recommended average of no more than 12 teaspoons, with a strong push to reduce to 6 teaspoons of free sugars daily (World Health Organisation, 2015). This has led to growing calls for a major national health campaign aimed at lowering the consumption of sugar (Cancer Council, 2019).

Considering the success of the NTC, these calls highlight that such a campaign should parallel the NTC. Researchers and health advocates have called for foods and drinks high in sugar to be less appealing, with many calling for graphic labelling such as those on cigarette packs (Image 1.2) to be placed on sweetened beverages (Scott & Clark, 2018). There is also a call for the government to air a national campaign raising awareness of the link between sugar and various diseases including type 2 diabetes (McCauley, 2020) and various cancers (Cancer Council, 2019). Such a mass media campaign would also have to be part of a broader approach to sugar control, as is the majority view among public health and public health policy scholars (Vitrai, 2018). It could also include taxing soft drinks such as in countries like Mexico, Thailand, Portugal and UK (Obesity Evidence Hub, 2020). But the question for this thesis, then is: what does such a large campaign look like?

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<sup>3</sup> Free sugars include sugars added to foods and drinks and those found in fruit juices and honey and should not be consumed in large quantities. This is discussed further in Chapter 9.

Front of pack



Back of pack

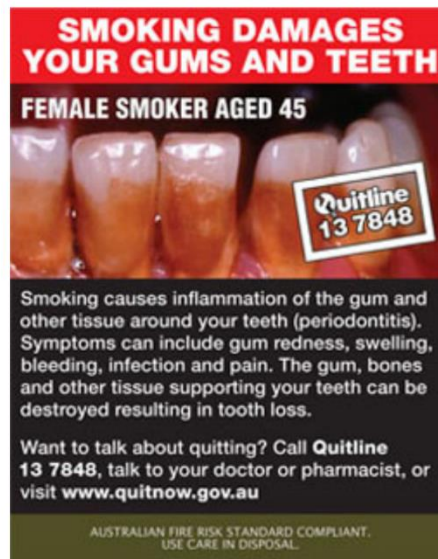


Image 1.2. Gums and Teeth 2012 cigarette pack

To understand how a large campaign like the NTC has achieved its goals of reducing smoking rates in Australia, there is a need to view the campaign in its entirety. This means analysing the NTC at a micro level of individual campaigns and campaign materials, and all the way up to a macro level over 22 years. There is also a need to understand the various functions of the different campaigns/materials and the meanings they put forward. All of this means there is a need to grapple with, in detail, a wide range of ways of meaning – spoken and written language, image, TV ads, sound etc. That is, we need a way of grasping at these campaigns *semiotically*.

### 1.1. Aims, objectives and rationales

The goal of this thesis is to explore how the Federal campaigns of the NTC have been effective at reducing smoking rates in Australia from a semiotic perspective so that the findings can aid in the design of future interventions. The Federal campaigns are analysed

rather than the state-based campaigns as they have the most reach in terms of target audience. This emphasis on both analysis and design is the core premise of what is known as Positive Discourse Analysis (PDA). PDA advocates for discourse and interventions that bring about social change (Bartlett, 2012; Martin, 2004b). It advocates for the analysis of positive texts and interventions to be used as models to inform future interventions (Bartlett, 2017; Martin, 2004b). By taking a PDA orientation, this thesis not only seeks to understand how the Federal campaigns of NTC have promoted the quit message over 22 years, but to do so in a generalisable way that can inform the design of interventions in other areas of public health.

To achieve this, this thesis will answer the following research questions:

1. How is language used to discourage smoking and encourage quitting?
2. How are other semiotic resources such as image, film and sound used to discourage smoking and encourage quitting?
3. What strategies are used to promote the message that smoking is bad and quitting is good?
4. How has the NTC developed and progressed over 22 years?

This thesis contributes to the growing research in PDA that privileges positive discourses “to make the world a better place” (Martin, 2002, p. 187). It also answers the call to move beyond text analysis and towards design (Bartlett, 2017), since text analysis alone will not bring about change (Martin, 2004b). In recent times, there has been an increasing number of studies in fields such as ecolinguistics (C. Knight, 2010; Stibbe, 2005, 2014, 2017), political discourse (Nartey, 2020; Nartey & Ernanda, 2020; Su, 2016) and media discourse (Abasi & Akbari, 2013; Bednarek & Caple, 2010; Macgilchrist, 2007) that have taken a PDA approach to discourse analysis, however, there are fewer studies that have employed PDA to design

interventions to tackle issues in society. There is thus a need to illustrate how PDA can move beyond analysing positive discourses, and into designing interventions to create change.

## **1.2. Organisation of thesis**

This thesis is organised into nine chapters. Following this introductory chapter, Chapter 2 situates the current study within NTC research and the health promotion literature. The chapter first presents the background and context of the NTC within Australia's wider tobacco control program and introduces the Federal campaigns launched since 1997. This is followed by a literature review on the effectiveness and impact of the NTC on smoking rates in Australia, before arguing for the need to understand how language and other semiotic resources work internally within and across campaigns over the lifetime of the NTC if we are to inform the design of future health campaigns.

Chapter 3 presents the theoretical and methodological foundations of the study. It introduces Systemic Functional Linguistics as the theory upon which this thesis is founded, and outlines the analytical tools used to analyse NTC materials. Chapter 3 also reviews SFL health research and shows that while much research has been done in analysing patient-clinician interactions (Moore, 2019), more is needed in the health promotion area. The chapter then explores Positive Discourse Analysis as the methodological approach taken for this study and introduces some of the challenges PDA has faced in linking detailed texts analysis to broader socio-historical and political contexts (Bartlett, 2017). Finally, this chapter presents the data

for the study, and introduces three sets of rhetorical strategies<sup>4</sup> developed to address PDA's challenge of linking fine-grained analyses to broader contexts. These three sets of rhetorical strategies are: negativity/positivity, technicalising/personalising, and actual/possible behaviour. These are used to move between individual texts and larger change and development over time and are used to analyse a variety of semiotic resources including language, static and moving images, and sound.

Chapters 4-6 each focus on a particular rhetorical strategy and how this is developed across all semiotic resources in the campaigns of the NTC. Chapter 4 explores how negativity and positivity are constructed across campaigns. Negativity describes campaigns that tend to centre on the negative impacts of smoking, while positivity describes campaigns that tend to focus on the benefits of quitting. This chapter shows how each strategy is construed metafunctionally across language, image, film and sound resources, and argues that these strategies form a key part of the construction of anti-smoking and pro-quitting values that are vital to the long-term development of the NTC.

Chapter 5 presents how technicalising and personalising strategies are built through the NTC. Technicalising describes campaigns that tend to build technical knowledge of the body in relation to smoking or quitting. On the other hand, personalising strategies describes campaigns that tend to focus on how smoking/quitting affects the daily lives of people. While this set of strategies is independent of negativity/positivity, this chapter will show that they do interact with each other to influence how they organise their meanings. It is shown that while technicalising tends to portray smoking/quitting from an ideational perspective –

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<sup>4</sup> These three main semiotic variables are called "rhetorical strategies" to highlight the design focus of this thesis. The term "rhetorical strategies" is used throughout this thesis to refer to these three semiotic variables, to distinguish between the term "strategies" used elsewhere to refer to the purpose of text/campaign designers etc.

building ‘content knowledge’ about smoking and quitting– personalising campaigns tend to highlight how campaigns build interpersonal relationships with the audience.

Chapter 6 explores how actual and possible behaviour are presented. Campaigns that focus more on actual behaviour construe smoking or quitting as happening in the here-and-now, or as having already happened, and highlight their current and ‘actualised’ effects. Campaigns focusing more on possible behaviour, on the other hand, construe smoking or quitting as a behaviour that has not yet occurred or has the possibility of occurring, and so present possible futures – whether good or bad – in a way that makes clear the paths that smokers may go on. This chapter shows that unlike the previous two strategies that tend to be consistent across entire campaigns, there tends to be regular shifts between actual and possible behaviour within individual campaigns. This interaction enables campaigns to show how decisions in the ‘here and now’ can affect the future in ways that may be positive or negative.

Chapter 7 consolidates the results from the three previous chapters to explore how the NTC has developed and progressed over 22 years. In doing so, it broadens the discussion to how the NTC fits within the larger health promotion literature. First, the chapter demonstrates that the NTC has always had a consistent negative and technicalising campaign running, but in the later years has overlaid more positive and personalising campaigns. This chapter argues that this has enabled the NTC to continually update the knowledge of the devastating impact of smoking on smokers’ health, while over time bringing in positive alternatives to guide people on the path to quitting. The chapter also demonstrates that this pattern has been paralleled in other tobacco campaigns, both at the State level in Australia and across the world.

To understand how a seemingly diverse set of campaigns and materials can in some sense put forward the same message over 22 years, Chapter 8 theorises how negative values are built

over time in the NTC so that Australians overwhelmingly come to oppose smoking. This chapter draws on the SFL model of affiliation (N. Knight, 2010a) to explain how meanings are brought together in campaigns to build negative feelings towards smoking that progressively stabilise into definite clusters of anti-smoking (and pro-quitting) values. It argues that these values are what the campaign is aiming toward – so that the overall message against smoking and for quitting is understood, even if any of the specifics of any ill effect are not remembered.

Following a summary of the results of this thesis, the final chapter steps through how these results can be oriented toward practical use in the field of health promotion. It does so by turning these results toward building an outline of possible campaigns/materials targeting excessive sugar consumption. In this way, it illustrates how an analytical approach that focuses on positive and successful discourses can be used to model, design and eventually intervene in other areas to promote good health.

Next, in Chapter 2, we overview the background and context of the NTC and present the literature review to situate this study within NTC research and the broader area of health promotion. Chapter 2 also elaborates on the need to explore the NTC from a semiotic perspective in order to understand how the NTC materials work to effect change.

# CHAPTER 2

## LITERATURE REVIEW

Since it first aired in 1997, the NTC has received considerable research interest from the field of tobacco control and to some extent, the broader field of health promotion. It is evident from research (e.g. Durkin, Biener, & Wakefield, 2009; Siahpush, Wakefield, Spittal, & Durkin, 2007; Wakefield et al., 2008; Wakefield, Freeman, et al., 2003) that the NTC has achieved its goal of reducing smoking rates<sup>5</sup> in Australia with statistics showing that adult daily smoking rates falling from 23.8% in 1995 (Australian Bureau of Statistics, 2018) to 11% in 2019 (Australian Institute of Health and Welfare, 2020c). This suggests that the NTC is an ideal case study for understanding how successful health promotion campaigns work – what can be viewed as a space for Positive Discourse Analysis with potential for informing future public health campaigns.

Studies investigating the NTC have tended to focus on its success ‘externally’, in terms of the motivations for campaigns, and the effects and impacts of campaigns on smoking rates (e.g. Boyle et al., 2010; Department of Health and Ageing, 2004; Young, 2016). What has not been explored is how the campaigns work themselves – internally – in a way to effect

---

<sup>5</sup> While smoking rates have declined in Australia, there is an estimated 21,000 smoking-related deaths in Australia each year (Australian Institute of Health and Welfare, 2019). Smoking rates also remain high in certain communities, such as in Indigenous communities. This is discussed in more detail throughout this chapter.



change. While much research alludes to the ways in which the NTC materials are organised to discourage smoking and encourage quitting, there has yet to be a systematic and functional account of the role various semiotic resources play in achieving the NTC's objectives.

This chapter provides the rationale and justification for the NTC as a case of Positive Discourse Analysis by reviewing the literature on the NTC and by bringing together public health communication research. Section 2.1 provides background and context to the NTC in relation to Australia's overall tobacco control. And Section 2.2 reviews the key literature on the NTC and links it to the broader health promotion and public health campaign literature.

## **2.1. Background and context of Australia's National Tobacco Campaign**

The NTC is part of Australia's broader tobacco control framework which includes policies on taxation of tobacco products, smoke-free environment laws, the restriction of the promotion of tobacco and tobacco products, mass media campaigns, consumer information and smoking cessation products and advice (Scollo et al., 2015). Some of these policies fall under Federal government jurisdiction, others are under State and Territory government jurisdictions, and some fall under both (Purcell, Scollo, & Tumini, 2020). The NTC itself is a mass media campaign undertaken by both State and Federal governments and is one of the main components of Australia's tobacco control (Scollo et al., 2015). In addition to discouraging smoking and promoting quitting, the NTC also informs and educates the public of changes in legislation such as the plain tobacco packaging laws which were fully implemented in 2012 (Department of Health, 2018c).

From the 1980s to the early 1990s, smoking prevalence in Australia was on a decline, however, in the mid-1990s this decline began to stall (Hill & Carroll, 2003). Hill, White and

Scollo (1998) explain this stall could have been due to a reduction in the expenditure of antismoking activity, “whether it be in the form of policy or programs” (p. 213) such as anti-smoking campaigns. In response, the Federal government invested in tobacco control to develop a collaborative national anti-smoking campaign to target smokers between 18 and 40 years of age (Hill & Carroll, 2003). The campaign focused on smoking cessation instead of smoking prevention since research had previously shown that campaigns aimed at teenagers had a greater risk of backfiring and that there was already a significant proportion of adults who smoked that could be targeted for quitting (Hill, Chapman, & Donovan, 1998).

Australia’s National Tobacco Campaign was launched in 1997 to respond to this stall in smoking rates and is Australia’s most intense and longest running anti-tobacco campaign, running to this day.

As mentioned previously, the NTC has been successful in decreasing smoking with adult daily smoking rates falling from 23.8% in 1995 (Australian Bureau of Statistics, 2018) to 11% in 2019 (Australian Institute of Health and Welfare, 2020c). This decrease in smoking rates has been observed in both men and women (Australian Bureau of Statistics, 2018).

Furthermore, the percentage of people 14 years and over who have never smoked has increased from 49% in 1991 to 63% in 2019, the highest levels in 25 years (Australian Institute of Health and Welfare, 2020a). The age of first smoke increased from 14.3 years in 2000 to 16.6 years in 2019 (Australian Institute of Health and Welfare, 2020a) indicating that the NTC has also had a positive impact on young people. And overall, in 2019, young people aged 18 to 24 years were the most likely to have never smoked than any other groups (Australian Institute of Health and Welfare, 2020a).

One of the most important aspects of the NTC is the collaboration between Federal, State and Territory governments and non-government organisations (NGOs) (Wakefield, Freeman, et

al., 2003). While initially it was the Federal government that developed anti-smoking campaigns, many states have since developed their own campaigns working either independently or with NGOs (Hill & Carroll, 2003). The NTC campaign strategy was informed by 40 years of psychological research and by over a decade's worth of largely unpublished market research reports undertaken by various Australian tobacco control "Quit" campaigns (Hill et al., 1998). The first campaign launched as part of the NTC, aired in 1997, was called the *Every Cigarette is Doing You Damage* campaign. A compilation of the TV ads can be viewed in [Video 2.1](#).

The *Every Cigarette is Doing You Damage* aimed to put quitting on today's agenda and to show the damage caused by smoking in new insightful ways (Hill et al., 1998a). It initially featured seven TV ads depicting the various ways smoking damaged the body (Wakefield, Freeman, et al., 2003) and was launched in three phases (Department of Health and Ageing, 2004). The first phase ran between June and December 1997 and featured the *Artery*, *Lung* and *Tumour* TV ads (Hill & Carroll, 2003). In 1998, the second phase was launched with two new TV ads, *Brain* and *Call for Help* (Department of Health and Aged Care, 2000). The third phase ran between December 1998 and November 2000, with two additional TV ads aired: *Tar* and *Eye* (Department of Health and Ageing, 2004). The advertisements depicted graphic images of the negative health effects of smoking to evoke a strong visceral response every time someone smoked (White, Tan, Wakefield, & Hill, 2003). Initially, advertisements were released on TV to reach maximum audiences (target audience 18-40 years), then print advertisements were also posted outdoors, on the sides of buses and trams, and distributed to General Practitioners (Hill & Carroll, 2003). Nine advertisements were also developed specifically for radio which either reinforced the TV ad messages or provided supportive

messages about quitting (Hill & Carroll, 2003). These materials can be viewed in Appendix A.

In conjunction with intensive TV broadcasting, the NTC also increased funding for a range of support services, especially a telephone service called Quitline that assisted smokers attempting to quit smoking (Hurley & Matthews, 2008). The Quitline number was provided at the end of each advertisement for those that were already thinking about quitting but needed more support (Miller, Wakefield, & Roberts, 2003). As part of the NTC, campaigns were also developed for people of non-English speaking backgrounds as informed by research which showed higher smoking prevalence in certain ethnic groups (Hill & Carroll, 2003). The strategies developed included advertisements on community radio programs, initiatives within workplaces and working with General Practitioners and bilingual health and community members (Hill & Carroll, 2003).

Since the launch of the first NTC campaign in 1997, various other campaigns have been launched, both at the Federal and State and Territory levels. This study will focus on the national campaigns as they are the most comprehensive in terms of breadth across all states and territories. In the following sections, we provide an overview of each Federal campaign launched since 1997, their aims, target audience and materials created as part of the campaign. The materials can be viewed and accessed in Appendix A. Table 2.1 presents all the Federal campaigns from 1997 until the time of analysis (2019). The campaigns run along the horizontal axis, with their time period on the vertical axis. As illustrated in Table 2.1, campaigns often run simultaneously. Furthermore, campaigns can still be running in individual states even after they have stopped running nationally. For example, in NSW, posters from the *Health Benefits* and *Break the Chain* campaigns that nominally finished in 2012 and 2017 respectively, can still be found in GP practices (personal observations).

| Year | Campaigns  |  |  |  |  |  |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 1997 | <b>Every<br/>Cigarette<br/>is Doing<br/>You<br/>Damage</b> |  |  |  |  |  |  |  |  |  |  |  |  |
| 1998 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1999 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2000 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2001 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2002 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2003 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2004 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2005 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2006 |  |  |  |  |  |  |  |  |  |  |  |  | <b>National<br/>Tobacco<br/>Youth<br/>Campaign</b> |
| 2007 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2008 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2009 |  |  |  |  |  |  |  |  |  |  |  |  |  |

|      |  |                      |  |                |       |                 |                 |                      |                            |                                  |                              |
|------|--|----------------------|--|----------------|-------|-----------------|-----------------|----------------------|----------------------------|----------------------------------|------------------------------|
| 2010 |  | Health Warnings 2012 |  | 4000 Chemicals |       |                 |                 |                      |                            |                                  |                              |
| 2011 |  |                      |  |                | Cough | Health Benefits | Break the Chain |                      |                            |                                  |                              |
| 2012 |  |                      |  |                |       |                 |                 | Health Warnings 2012 | Quit for You, Quit for Two |                                  |                              |
| 2013 |  |                      |  |                |       |                 |                 |                      |                            | Stop before the Suffering Starts |                              |
| 2014 |  |                      |  |                |       |                 |                 |                      |                            |                                  | Don't Make Smokes your Story |
| 2015 |  |                      |  |                |       |                 |                 |                      |                            |                                  |                              |
| 2016 |  |                      |  |                |       |                 |                 |                      |                            |                                  |                              |
| 2017 |  |                      |  |                |       |                 |                 |                      |                            |                                  |                              |
| 2018 |  |                      |  |                |       |                 |                 |                      |                            |                                  |                              |
| 2019 |  |                      |  |                |       |                 |                 |                      |                            |                                  |                              |

Table 2.1. Timeline of Federal campaigns<sup>6</sup>

<sup>6</sup> A clearer version of the table can be viewed in [Document 2.1](#).

*Every Cigarette is Doing You Damage (1997 – 2005)*

The campaign targeted smokers aged 18 to 40 years and focused on the immediate damage smoking causes to the body through the depiction of graphic images (Department of Health, 2010). The campaign focused on the consequences of smoking that were certain to happen even if they were less dire than cancers, so that every time someone smoked, they would think about the damage that the cigarette was causing them in that moment (Hill & Carroll, 2003). As mentioned above, TV, radio and print ads were launched as part of the campaign. An example of a print ad is illustrated in Image 2.1, and the links to the videos and radio ads can be viewed in Appendix A.

AORTA - Smoker Age 32

## Something close to every smoker's heart

There's no fat in cigarettes, so how can smoking cause fatty gunk in your arteries? Very easily - according to the latest US research - and at a surprisingly young age. Within seconds of lighting up, thousands of chemicals enter your bloodstream. Some of them damage the lining of your arteries, making your artery walls sticky and causing them to collect tiny fat particles floating in your bloodstream.

You start damaging your artery walls the day you start smoking. At thirty, a smoker can have three times the fatty deposits in their aorta (the main artery from the heart) as a non-smoker of the same age.

The more you smoke, the faster the deposits build up. If they rupture, they can form clots which may lead to strokes and heart attacks. If they don't rupture, they can build up and gradually narrow the artery, causing conditions such as angina.

Eight out of ten smokers want to quit. If you're one of them, don't put it off any longer. Next time you're tempted to light up, think about what smoking may be doing to your body.

We know quitting is hard; you may have tried before and failed, but it's important you try again. Identifying your personal reasons to quit is vital, so is planning how to resist the inevitable cravings.

The people at Quitline have helped thousands of Australians to give up and may be able to help you. Even if you're only thinking about quitting, call Quitline today on 131 848.



**Every cigarette is doing you damage** **Quit 131 848**  
THE NATIONAL TOBACCO CAMPAIGN  
 A federal, state and territory health initiative

Image 2.1. Something close to every smoker's heart print ad



*Health Warnings 2006 (2006 – 2012)*

Health warning labels have been included on tobacco product packaging since 1973 (Scollo et al., 2015). In 2006, pictorial graphic health warnings were also required on tobacco products (Miller, Hill, Quester, & Hiller, 2009). The graphic health warnings were divided into two sets (A and B) comprising 7 graphic health warnings each and rotated every 12 months (Department of Health, 2018b). Table 2.2 illustrates examples of the graphic images required on tobacco product packaging from the *Health Warnings 2006* campaign.

| <b><i>Stroke cigarette pack</i></b>  | <b><i>Mouth and throat cancer cigarette pack</i></b>   |
|--|--|
|  <p>The image shows a health warning for a cigarette pack. At the top, a red banner contains the text "SMOKING DOUBLES YOUR RISK OF STROKE" in white, with "Health Authority Warning" in smaller text below it. The main image is a photograph of a human brain with a visible stroke. A white box with a black border in the top left corner says "Quitline 131 848". Below the image, the text reads "MINOR STROKE" in bold, followed by a paragraph: "Smoking narrows the arteries to your brain, causing them to become blocked. This causes a stroke that can result in permanent paralysis, inability to speak, disability or death." Below that, it says "You CAN quit smoking. Call Quitline 131 848, talk to your doctor or pharmacist, or visit www.quitnow.info.au". At the bottom, a blue gradient bar contains the number "25".</p> |  <p>The image shows a health warning for a cigarette pack. At the top, a red banner contains the text "SMOKING CAUSES MOUTH AND THROAT CANCER" in white, with "Health Authority Warning" in smaller text below it. The main image is a photograph of a person's mouth showing a cancerous lesion. A white box with a black border in the top right corner says "Quitline 131 848". Below the image, the text reads "MOUTH CANCER" in bold, followed by a paragraph: "Smoking is the major cause of cancers affecting the mouth and throat. These cancers can result in extensive surgery, problems in eating and swallowing, speech problems and permanent disfigurement." Below that, it says "You CAN quit smoking. Call Quitline 131 848, talk to your doctor or pharmacist, or visit www.quitnow.info.au". At the bottom, a blue gradient bar contains the number "25".</p> |

*Table 2.2. Example of Health Warnings 2006 cigarette packs*

To inform the public of the new packaging regulations, a national TV ad was broadcast featuring a woman suffering from mouth and throat cancer (Carroll, Cotter, Purcell, & Bayly, 2020), illustrated in [Video 2.2](#). The strong and confronting images on the packaging aimed to increase knowledge of the health effects related to smoking, to encourage quitting and to discourage relapse or smoking uptake (Department of Health, 2018b). The *Health Warnings*

2006 campaign was also targeted at young people to decrease smoking rates among the youth through the graphic images (Carroll et al., 2020).

*National Tobacco Youth Campaign (2006 – 2007)*

This campaign targeted both young people aged 12 to 24 years and their smoker parents (Carroll et al., 2020), and aimed to encourage young people “to reject smoking” (Department of Health and Ageing, 2007). The campaign featured young Indigenous and non-Indigenous Australians and included a TV ad, radio and print ads depicting the toxic chemicals in cigarettes and the negative consequences of these toxic chemicals (Carroll et al., 2020).

Image 2.2 presents an example of a print ad aimed at parents and Image 2.3 presents an example of a print ad aimed at young people.



# KIDS ARE FAST LEARNERS

No parent wants their child to become addicted to cigarettes. Cigarette smoke contains over 4,000 chemicals. It's a toxic, poisonous mix of substances. So it's no surprise smoking causes death and disease. When a parent quits, there's less chance their child will grow up to be a smoker and more chance they'll have a full and healthy life.



Australian Government

**NOW IS THE TIME TO QUIT.**  
[australia.gov.au/quitnow](http://australia.gov.au/quitnow)



**Every cigarette is doing you damage**

Image 2.2. National Tobacco Youth Campaign – parent *print ad*



**YOUR SMOKING  
HURTS YOUR  
FRIENDS  
TOO.**

**DITCH  
THE  
DURRIES**  
BEFORE IT'S TOO LATE

Every time you smoke a cigarette, it's not just you who is inhaling toxic chemicals, your friends are as well.  
More than 50 per cent of Aboriginal and Torres Strait Islander people are smokers.  
This is having a serious impact on the health of the community.  
For your health and the health of your mates, it's time to ditch the durries.

**Call 131 848 today, or go to [australia.gov.au/quitnow](http://australia.gov.au/quitnow)**

Australian Government

Every cigarette is doing you damage

Image 2.3. National Tobacco Youth Campaign – youth print ad

### *4000 Chemicals (2010)*

This campaign was a continuation of the *National Tobacco Youth Campaign*, and featured the same advertising materials. It targeted young Australians to consider the 4000 chemicals they inhale when they smoke cigarettes and the long-term damage these chemicals cause (Australian National Preventive Health Agency, 2011). It featured a TV, radio and print ads both in English and other languages (Australian National Preventive Health Agency, 2011).

### *More Targeted Approach (2011 – 2017)*

The *More Targeted Approach* campaign complemented the on-going mainstream campaigns by tailoring information about smoking to at-risk groups (Greenhalgh, Scollo, & Pearce, 2020). Some of these groups included “pregnant women and their partners, culturally and linguistically diverse groups, Aboriginal and Torres Strait Islander people, people living in socio-economically disadvantaged areas, people with mental illness and prisoners” (Department of Health, 2010). Two main Federal campaigns were launched as part of the *More Targeted Approach*: the *Break the Chain* and the *Quit for You, Quit for Two* campaigns. The *Break the Chain* campaign was the first national anti-smoking campaign specifically targeting Indigenous Australians. It featured an Indigenous woman describing how smoking has negatively impacted the health of those close to her (Carroll et al., 2020). The *Break the Chain* print ad is illustrated in Image 2.4.

# QUIT SMOKING AND BREAK THE CHAIN

*"If I can do it,  
I reckon we all can"*



**Remember, you don't need to quit on your own, there is help available:**

- Talk to your local health centre to get Nicotine Replacement Therapy (NRT includes nicotine gum, patches, inhaler and lozenges). Patches available free to Aboriginal and Torres Strait Islanders.
- Call the Quitline to get advice from someone who is there to help you quit.
- Visit [www.australia.gov.au/quitnow](http://www.australia.gov.au/quitnow)

**Quitline.**  
**13 7848**

Authorised by the Australian Government, Capital Hill, Canberra  
Printed by Paragon Printers Australasia, 15 Wiluna Street, Fyshwick, ACT, 2600

  
**Australian Government**

*Image 2.4. Break the Chain print ad*

The *Quit for You, Quit for Two* campaign was aimed at pregnant women, women thinking about getting pregnant and their partners. The campaign highlighted the importance of quitting to give their babies a healthy start to life (Department of Health, 2018c). Owing to its original success, the *Quit for You, Quit for Two* campaign was relaunched in 2017 and is on-going at the time of writing (2019). Both campaigns featured TV, radio and print ads, with an app also being launched to support pregnant women on their quit journey. Image 2.5 presents a poster from the campaign.



# Quit for you. Quit for two.

When a baby's on the way, it's twice as important to get the support you need to quit smoking. Phone **Quitline** and ask about **Quit for you Quit for two**.

.....  
**They can help you beat the cravings, with tips like these:**

- **Delay:** Delay for a few minutes – the urge will pass
  - **Deep breathe:** Breathe slowly and deeply
  - **Do something else:** Ring a friend or practise your prenatal exercises
  - **Drink water:** Take 'time out' and sip slowly
- .....

When you choose to quit, you lower the risk of:

- miscarriage
- premature labour
- ectopic pregnancy
- SIDS

And you'll save money.

.....

**Download the free app**



Go to the App Store or  
Android Market now to download  
**Quit for you Quit for two** for free.

.....



Australian Government

**Quitline.**  
**137848**

[australia.gov.au/quitnow](http://australia.gov.au/quitnow)



Image 2.5. Quit for You, Quit for Two print ad – Rebecca

As part of the *More Targeted Approach*, materials were also produced for smokers suffering from mental illness and included brochures on how to support friends and family members quitting smoking (Department of Health, 2018c). The campaign also targeted prison entrants,



who have one of the highest smoking rates in Australia (Department of Health, 2018c).

Resources developed included a DVD and smoking resource kit. The Department of Health (2018) has reported that in recent years, smoking is no longer allowed in state and territory prisons.

### *Cough (2011)*

The *Cough* campaign ran in conjunction with the *More Targeted Approach* campaigns. It was aimed at daily smokers and recent quitters ages 18-50 years and conveyed the consequences of smoking such as lung cancer (Department of Health, 2010). The campaign also urged smokers to think about their families who would be left behind if they died. It featured a TV ad and outdoor print ads. The print ad is illustrated in Image 2.6.

Advertisement

# \$16 A PACK ISN'T ALL SMOKERS COUGH UP

Coughing up blood  
can be a sign  
of lung cancer



**Quitline. 13 7848**  
australia.gov.au/quitnow



Australian Government

Authorised by the Australian Government, Capital Hill, Canberra  
Printed by Chromaphia, Unit 1, Gateway @ Park, 67 Cook Street, Port Melbourne, VIC, 3207

Image 2.6. Cough print ad

### *Health Benefits (2011)*

This campaign also ran in conjunction with the *More Targeted Approach* campaign. It was aimed at daily smokers and recent quitters ages 18-50 years and promoted the message that every cigarette not smoked is doing you some good. The campaign featured radio ads and prints ads which were also translated in Arabic, Chinese, Korean and Vietnamese to target these specific audiences (Department of Health, 2010). These posters can still be seen today in GP practices and hospitals (personal observation). Images 2.7 and 2.8 illustrate two examples of the print ads.

Advertisement

# STOP SMOKING START REPAIRING

## In 1 week

your sense of taste  
and smell improves

## In 1 month

skin appearance is  
likely to improve

## In 3 months

your lung function  
begins to improve

## In 5 days

most nicotine is  
out of your body

## In 8 hours

excess carbon  
monoxide is out  
of your blood

## In 12 months

your risk of heart  
disease has halved

## In 1 year

a pack-a-day  
smoker will save  
over \$4,000

## Today

quit before  
getting pregnant  
and your risk of  
having a pre-term  
baby is reduced  
to that of a  
non-smoker

**EVERY CIGARETTE YOU DON'T SMOKE  
IS DOING YOU GOOD**

**Quitline.13 7848**  
australia.gov.au/quitnow



Australian Government

Authorised by the Australian Government, Capital Hill, Canberra  
Printed by Omnisgraphics, Unit 1, Gateway @ Port, 87 Cook Street, Port Melbourne, VIC, 3207

Image 2.7. Health Benefits poster – woman



# STOP SMOKING START REPAIRING

**In 1 week**  
your sense of taste  
and smell improves

**In 3 months**  
your lung function  
has increased 30%

**In 8 hours**  
excess carbon  
monoxide is out  
of your body

**In 1 year**  
a pack-a-day  
smoker will  
save over  
\$4,000

**In 12 weeks**  
your lungs regain the  
ability to clean themselves

**In 12 months**  
your risk of heart  
disease has halved

**In 5 days**  
most nicotine  
is out of your  
body

EVERY CIGARETTE YOU DON'T SMOKE  
IS DOING YOU GOOD

**Quitline. 13 7848**  
[australia.gov.au/quitnow](http://australia.gov.au/quitnow)



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Printed by LOUD Pty Ltd Level 6, 41 McLaren Street, North Sydney NSW, 2060

Image 2.8. Health Benefits poster – man

### *Health Warnings 2012 (2012 – on-going)*

In 2012, Australia became the first country to fully implement laws regulating plain packaging of tobacco products set out by the World Health Organisation Framework Convention on Tobacco Control (WHO FCTC) (World Health Organisation, 2013). Article 11 explains that measures for the packaging and labelling of tobacco products must ensure that “tobacco product packaging and labelling do not promote a tobacco product” and that the packaging of tobacco products must include warning labels that describe the harmful effects of tobacco (World Health Organisation, 2003). Some of the key goals of plain packaging laws according to the convention include:

- to reduce the attractiveness of tobacco products
- to eliminate tobacco products as a form of advertising
- to eliminate any ambiguities that some cigarettes are less harmful than others, such as using the terms “light”, “low-tar”, “mild”
- to increase the noticeability of health warnings (World Health Organisation, 2016).

These plain packaging laws were implemented in Australia alongside the pre-existing laws requiring graphic health warnings on tobacco products, implemented in 2006. The new plain packaging laws of 2012 now required that health warnings cover 75% of the front and 90% of the back of cigarette packs (Department of Health, 2016). The graphic images and health warnings were also updated from the 2006 versions (Department of Health, 2016). Table 2.3 presents examples of the current cigarette packs in Australia.



|                 |  |   |
|-----------------|--|---|
| Cigarette packs | <i>Unborn Babies</i>   | <i>Gums and Teeth</i>   |
| Image           | <p style="text-align: center;">Back of pack</p>  | <p style="text-align: center;">Back of pack</p>  |

Table 2.3. Health Warnings 2012 cigarette packs

New regulations also required 13 messages on the negative health effects of chemicals in tobacco to appear on the side of cigarette packs (Department of Health, 2016), illustrated in Image 2.9.



## **WARNING**

The toxic chemicals in tobacco smoke damage your blood vessels, damage your body's cells and attack your immune system.

## **WARNING**

Tobacco smoke contains a toxic mix of chemicals that cause disease and early death in children and non-smoking adults exposed to the smoke.

## **WARNING**

The toxic chemicals in tobacco smoke can go everywhere that your blood flows, causing harm all over your body.

## **WARNING**

BDE (1,3 Butadiene) is found in large amounts in tobacco smoke. BDE causes leukaemia and other cancers.

## **WARNING**

10 drags per smoke x 20 smokes per day x 365 days per year = 73,000 toxic drags per year.

## **WARNING**

Inhaling tobacco smoke releases hydrogen cyanide into your body, a chemical that is very toxic to humans. It can damage parts of your body including your heart and lungs.

## **WARNING**

Inhaling tobacco smoke releases benzopyrenes into your body. Benzopyrenes damage how your body protects itself from getting cancer.

## **WARNING**

Inhaling tobacco smoke releases benzene into your body. Benzene causes leukaemia, increases the risk of other cancers and is believed to be dangerous at any level of exposure.

## **WARNING**

The toxic chemicals from tobacco smoke can be found in your breath, urine and blood when you smoke.

## **WARNING**

The chemicals in tobacco smoke build up to high levels in your body over time. This increases your risk of death and disease the longer and more you smoke.

## **WARNING**

Tobacco smoke contains hydrogen cyanide. Inhaling hydrogen cyanide damages the cleaning system of your lungs, allowing toxic substances to build up in the lungs.

## **WARNING**

Inhaling even small amounts of the toxic chemicals in tobacco smoke can trigger sudden blood clots, heart attacks and strokes.

## **WARNING**

There are no known health benefits in smoking products that taste lighter, milder or less harsh. The smoke still contains a toxic mix of chemicals that cause death and disease.

*Image 2.9. Chemical warnings on cigarette packs*



The purpose of the plain packaging laws in Australia are in line with the WHO FCTC and aim to discourage smoking by:

- “reducing the appeal of tobacco products
- making health warnings more effective
- removing misleading information on packaging” (Department of Health, 2020b)

In the long run however, the main purpose of the plain packaging legislation is to make cigarette packaging less attractive so that those who have never smoked would not be attracted to try smoking, and so that children would grow up associating smoking with all its negative health effects (Chapman, 2015; Daube & Chapman, 2014). Statistics showing that fewer and fewer young people are taking up smoking (Australian Institute of Health and Welfare, 2020c) suggests this is working.

*Stop before the Suffering Starts (2014 – 2016)*

This campaign targeted smokers and their families, raised awareness of the harms of smoking and provided motivation for quitting (Department of Health, 2018c). The campaigns featured two smokers and their families; a smoker who had quit smoking (Image 2.10) and another suffering from emphysema (Image 2.11). The campaign highlighted the negative impact smoking has on families. It featured TV ads, radio ads and print ads.

# THERE'S ONE TYPE OF SUFFERING A SMOKER CAN BE PROUD OF. QUITTING.

It seems like a cold at first. You get headaches. Can't concentrate. Can't sleep. You'll feel anxious and uncertain, and worry that you're missing out. Most of all you'll feel like a cigarette. Then, over time, it gets better.

You're experiencing your body at its best and its worst. On the one hand, it's doing a great job of repairing itself. On the other, it's addicted and begging you to give in. Mentally, this can be a big challenge. But see it through and you could be saving yourself from the real suffering.

Nobody said that quitting is easy. But if the benefits of a smoke-free life aren't enough to keep you motivated, consider the alternative.

**Stop before the real  
suffering starts.**



Quit Now:  
My QuitBuddy

**Quitline. 13 7848**  
[australia.gov.au/quitnow](http://australia.gov.au/quitnow)



Image 2.10. Symptoms print ad

# SMOKING TAKES LIVES. THEN IT KILLS.

Smoking kills. Everybody knows that.

But what you really should consider is **HOW** smoking kills. Long before it takes your life, smoking can take your happiness, dignity and freedom. For many smokers, death is just the end of a terrible journey.

There are many ways for a smoker to go. Few are quick and none are painless, but it's your lungs that take the worst beating. Once they go, so does everything you take for granted. Driving. Getting dressed. Breathing.

Of course your loved ones go through it with you. Your smoking will go on hurting them long after you're gone.

You may think that you have to die somehow, and it may as well be smoking. That's one way to look at it. But remember – if you smoke, death could be the least of your worries. Call Quitline today or visit us online, and stop before the suffering starts.

**Stop** before the  
suffering starts.

 **Quitline 13 7848**  
[australia.gov.au/quitnow](http://australia.gov.au/quitnow)

  
Australian Government



Image 2.11. Breathless print ad

*Don't Make Smokes your Story (2015 – on-going)*

In a similar manner to the *Break the Chain* campaign, the *Don't Make Smokes your Story* campaign also targeted Indigenous Australians by focusing on values within Indigenous communities, such as the health and wellbeing of families (Department of Health, 2010). The campaign features an Indigenous man named Ted reflecting on his past experiences smoking and his quit journey (Department of Health, 2018c). The campaign materials centre on Ted spending time with his family, to highlight the benefits quitting has on smokers and their loved ones. The campaign has an extensive range of materials including TV, radio and print ads, as well as short videos of other Indigenous Australians reflecting on their smoking and quit journeys, an app and various social media resources. Images 2.12 and 2.13 illustrate examples of two print ads.



Advertisement



**"I QUIT FOR MY FAMILY"  
- TED**

**DON'T  
MAKE  
SMOKES  
YOUR  
STORY**

Your story is what you make it. Quit smoking today for a better future for you and your family. For help, visit your local health service, download the My QuitBuddy App, call the Quitline or visit the Quitnow website.



**Quitline.  
13 7848**



[australia.gov.au/quitnow](http://australia.gov.au/quitnow)

Authorised by the Australian Government, Capital Hill, Canberra.

Image 2.12. Don't Make Smokes your Story print ad – guitar



Advertisement



**"I QUIT FOR MY FAMILY"**  
- TED

**DON'T  
MAKE  
SMOKES  
YOUR  
STORY**

Your story is what you make it. Quit smoking today for a better future for you and your family. For help, visit your local health service, download the My QuitBuddy App, call the Quitline or visit the Quitnow website.



**Quitline.**  
**13 7848**



[australia.gov.au/quitnow](http://australia.gov.au/quitnow)

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Image 2.13. Don't Make Smokes your Story print ad – Bikes

## 2.2. Impacts of the NTC

Since the inception of the NTC in 1997, there has been a plethora of research on its effectiveness in reducing smoking rates (Department of Health, 2018c). A campaign's success is oftentimes determined by how it is perceived by the audience and how this then leads smokers to quit smoking, decrease how much they smoke or at the very least, think about quitting (e.g. Donovan, Boulter, Borland, Jalleh, & Carter, 2003; Durkin et al., 2009; White et al., 2003). Campaign effectiveness is also often measured by viewers' self-reporting (e.g. Donovan et al., 2003; Dunlop, Dobbins, Young, Perez, & Currow, 2014; Wakefield, Freeman, et al., 2003), numbers of calls made to Quitline after seeing a TV ad (e.g. Carroll & Rock, 2003; Durkin, Wakefield, & Spittal, 2011; Siahpush et al., 2007), and comparing smoking statistics before and after a campaign is launched (e.g. Germain, Durkin, Scollo, & Wakefield, 2012; White et al., 2003). The research on the NTC overwhelmingly concludes that the NTC has been successful in driving down smoking rates in Australia (Wakefield, Freeman, et al., 2003). However, there is still a high disparity between certain groups and the general population.

While the daily smoking rates among Indigenous Australians has declined from 35% in 2010 to 25% in 2019, smoking rates among Indigenous Australians remain higher than the general population (Australian Institute of Health and Welfare, 2020c). According to the Australian Institute of Health and Welfare (2020c), as of 2019, 25% of Indigenous Australians reported being daily smokers, compared to 11% of the general population. This is nearly the same as the daily smoking rate of the general population in 1991, which stood at 24%. This disparity is even more visible when comparing Indigenous mothers and non-Indigenous mothers.

According to the latest data comparing Indigenous and non-Indigenous mothers who smoked during pregnancy, in 2014, 44% of Indigenous mothers smoked in the first 20 weeks of

pregnancy compared to 12% of non-Indigenous mothers (Australian Institute of Health and Welfare, 2016). Another area where a disproportion in smoking rates still exists is between SES areas. In 2019, 5% of people living in the highest SES areas reported being daily smokers, compared to an astounding 18% of those living in the lowest SES areas (Australian Institute of Health and Welfare, 2020c). Section 2.2.3 will explore some the reasons for this disparity between these groups and the general population.

As mentioned in the introduction to this chapter, research investigating the NTC has been mainly focused on explaining the NTC's success externally in terms of its effects and impacts on smoking rates. However, little research has sought to explore how the linguistic and semiotic resources in the campaign themselves work to effect change. Furthermore, while the *Every Cigarette is Doing You Damage* and *Health Warnings* campaigns have been heavily documented and studied, other later Federal campaigns have not received as much attention. Moreover, there has been little focus on studies that have tracked the development and progression of the NTC over time. Instead, research has tended to focus on one campaign at a time. There is thus a need to understand how campaigns work and develop in relation to each other, and not how they work in isolation since all campaigns work in the context of other campaigns.

In this section we justify the rationale for this study by reviewing what has been done to study the NTC externally, and also argue for the need to understand how these campaigns work internally. In Chapter 3, it will be shown that a study in linguistics and semiotic research provides tools to do just that. This section begins with reviewing studies on how the *Every Cigarette is Doing You Damage* and *Health Warnings* campaigns have been successful at reducing smoking rates, in Sections 2.2.1 and 2.2.2 respectively. This is followed in Section 2.2.3 by a review of literature on the effectiveness of NTC campaigns on more



vulnerable and disadvantaged groups such as those living in lower Socio-Economic Status areas, Indigenous populations and pregnant women. Evaluating how more disadvantaged groups have responded to specific campaigns has been an important factor in ensuring smoking rates decline across all sub-groups of the population. The literature on the NTC will be explored and discussed in relation to the broader context of health promotion.

### *2.2.1. Every Cigarette is Doing You Damage*

From the moment the *Every Cigarette is Doing You Damage* TV ads aired in 1997, researchers started monitoring and studying their effects on the population. The third evaluation report in 2004 showed a significant decline in smoking rates after the launch of the NTC in 1997 (Department of Health and Ageing, 2004). Smoking prevalence among adults dropped from 23.5% in 1997 to 20.4% in 2000, with daily average cigarette also falling from 15.4 cigarette per day in 1997 to 14.2 cigarettes in the year 2000 (Department of Health and Ageing, 2004). Its use of graphic imagery was acknowledged as making the health messages memorable, relevant and believable to smokers and non-smokers alike (Wakefield, Freeman, et al., 2003). Indeed, the campaign was so successful that it gained an international reputation and variations of it ran in the US, New Zealand, Singapore and Canada (Chapman, 1999). It is important to understand this campaign's effectiveness at reducing smoking rates since in many ways the *Every Cigarette is Doing You Damage* campaign has informed all subsequent NTC campaigns both at the Federal and State levels.

The *Every Cigarette is Doing You Damage* campaign heavily employed fear appeals to urge smokers to quit smoking. Fear appeals, or scare tactics, refer to discourses that use fear and anxiety to elicit behaviour change (Brookes & Harvey, 2015; Fairchild, Bayer, & Colgrove,

2015). The justification for this is that negative emotional messages readily capture the audience's attention who are then persuaded to change their unhealthy behaviour to avoid harm to their health (Kennedy, Spafford, Parkinson, & Fong, 2011; Tannenbaum et al., 2015). However, the research on the efficacy and morality of fear-based messages and campaigns has been mixed.

In the case of smoking, fear-based campaigns have been commonplace since the '70s both in the US (Fairchild et al., 2018) and in Australia (Carroll et al., 2020) and have been generally accepted as appropriate due to the severe health impacts of smoking. However, fear appeals in other health areas, such as those associated with HIV/AIDS campaigns, have been criticised for stigmatising sufferers (Bayer & Fairchild, 2016; Fairchild et al., 2018). It has been reported that such fear-appeals can lead to a feeling of hopelessness which in turn may have the opposite effect to what is intended (Hastings, Stead, & Webb, 2004). In their literature review of the efficacy of fear-based public health campaigns, Bayer and Fairchild (2016) conclude that while fear-based campaigns have empirical justification in terms of achieving positive health outcomes, they must be accompanied by resources that provide alternative strategies about how to reduce risk of negative health effects. For example, in the NTC, research suggested it is not enough to simply scare people into stopping smoking, resources must be given to help them actually do it – such as adding the Quitline number to all campaign materials (Carroll & Rock, 2003).

The main message of the *Every Cigarette is Doing You Damage* campaign centred on the certain and immediate damage that smoking causes with each inhale of cigarette smoke (Hill et al., 1998). The graphic imagery of the *Every Cigarette is Doing You Damage* TV ads have been evaluated by smokers as being convincing, believable and memorable (Department of Health and Ageing, 2004; Wakefield, Freeman, et al., 2003). This memorability of the TV

ads is argued to have made smokers more likely to quit smoking, and this remained a stable trend over time (Wakefield, Freeman, et al., 2003). Cued recall of the TV ads was shown to increase from week one of each phase of the campaign to the fourth week of each phase as audiences became more exposed to them (Donovan et al., 2003). In particular, the *Artery* TV ad showing gunk being squeezed out of an aorta was shown to have the highest recognition rate (Donovan et al., 2003), shown in [Video 2.3](#).

Studies on the NTC more broadly speaking have shown that advertisements that focus on the negative health consequences of smoking to evoke fear can increase quitting behaviours (Durkin, Bayly, Brennan, Biener, & Wakefield, 2018; Durkin et al., 2009; Farrelly et al., 2012; Leas, Myers, Strong, Hofstetter, & Al-Delaimy, 2015). In other state-based campaigns, the use of graphic imagery to elicit feelings of fear, disgust or sadness has been shown to be a superior method of urging smokers to quit than those that do not elicit strong emotional reactions (Wakefield et al., 2013). Wakefield et al. (2013) go so far as to assert that anti-smoking ads with graphic imagery may even have universal understanding and engagement. The methods through which fear campaigns in the NTC are built are discussed in detail in Chapter 4.

The *Every Cigarette is Doing You Damage* campaign not only increased the likelihood of smokers reporting quitting smoking, it also increased knowledge of the diseases caused by smoking. This is because in addition to evoking fear, the NTC also builds technical knowledge of diseases and illnesses (explored in Chapter 5). A notable study by Kennedy et al. (2011) found there was a link between knowledge that smoking causes blindness and the Australian ad campaigns. While comparing the awareness of smoking causing blindness in Australia, Canada, US and UK, 47.2% of Australia respondents said they were aware of smoking-caused blindness compared to 13% of Canadians, 9.5% of Americans, and 9.7% of

those from the UK, each of which had not had widespread materials specifically targeting this issue by this time. These results reinforce that being proactive in educating the community will likely increase people's awareness of the risks of smoking, which may lead to quitting. Research has additionally demonstrated that telephone Quitlines are an essential aspect of a comprehensive tobacco control program through studies in countries such as England, Scotland, Australia, the Netherlands, and parts of the US (Carroll & Rock, 2003; Miller et al., 2003), and that there is a relationship between mass media anti-smoking campaigns and phone calls to Quitline (Carroll & Rock, 2003; Miller et al., 2003). In particular, graphic TV ads with higher negative emotions tend to have a stronger association with calls made to Quitline (Carroll & Rock, 2003; Durkin et al., 2011; Siahpush et al., 2007) and these call rates are stable across socioeconomic status (Siahpush et al., 2007).

As mentioned previously, at the NTC's inception, the goal was to reduce smoking rates among adults aged 18 to 40 years rather than focus on preventing teenagers from smoking (Hill & Carroll, 2003). Thus, out of the Federal campaigns, the short-running *National Tobacco Youth Campaign* was the only campaign specifically designed to target teenagers, while the *Health Warnings 2006* also aimed at making cigarette packs less attractive to teenagers (Department of Health, 2018c). However, evidence strongly suggests that adult anti-smoking ads have nonetheless had an impact on adolescent smoking rates (Department of Health and Ageing, 2004; Germain et al., 2012; White et al., 2003).

Between 1996 and 1997 when NTC materials were first aired, there was a decline in smoking initiation among young Victorians (Germain et al., 2012). The slogan *every cigarette is doing you damage* was reported as memorable with teenagers stating smoking was less 'cool' because of the campaign (White et al., 2003). Furthermore, 18% of teenage smokers said they had tried quitting due to the campaign and 27% said they had reduced the number of

cigarettes they smoked (White et al., 2003). Similarly in a study investigating the impact of fear appeals in TV ads in Australia, the US and the UK in teenagers at risk of regular smoking, it was found that ads that evoke a negative visceral reaction stood out among participants (Wakefield, Durrant, et al., 2003). This trend of declining smoking rates continued with the introduction of graphic health warnings in 2006.

### **2.2.2. Graphic health warnings**

In a similar manner to the *Every Cigarette is Doing You Damage* campaign, the *Health Warnings* campaigns of 2006 and 2012 also employed graphic imagery to encourage quitting by evoking fear of disease and death. In 2006, these graphic health warnings became mandatory on tobacco product packaging along with the Quitline number for those needing support quitting (Department of Health and Ageing, 2009). In 2012, legislation was passed, and plain tobacco packaging was fully implemented (Department of Health, 2018c). In addition to the graphic images and messages, tobacco products are also required to display yellow warning labels alerting smokers to the thousands of toxic chemicals in tobacco smoke. Following the introduction of the graphic health warnings, Dunlop et al. (2014) were among the first to examine the effects of graphic health warnings across the population. They showed that smokers had negative perceptions about their packs which was not attributed to anti-smoking ads nor the rise in tobacco prices. Smokers also reported that the graphic health warnings helped them quit smoking and increased health knowledge and risk of smoking. This increase in health knowledge was observed in a survey of 23 health conditions causally associated with smoking that showed that respondents were more aware of the health conditions that appear on tobacco product packaging than those that do not (Brennan,

Dunstone, & Wakefield, 2018). For example, 91.2% of respondents were aware that smoking caused lung cancer and 89.4% for throat cancer, which both appear on cigarette packs. This was compared to 40.2% of respondents being aware that smoking caused diabetes and 27.1% for rheumatoid arthritis, which are not on cigarette packs. This study highlights the importance and effectiveness of placing health warning messages on tobacco products.

According to an evaluation report on graphic health warnings on tobacco product packaging, half of smokers or recent quitters reported that these graphic health warnings made them think about quitting (Department of Health, 2018a). The majority of recent quitters also indicated that the health warnings contributed to their concerns about smoking (Department of Health, 2018a). Findings have also demonstrated that cigarette packs with pictorial warnings are a more effective deterrent to new smokers and increased smoking cessation than text-only warnings (Hammond, 2011). When comparing the newly introduced graphic warnings in Australia in 2006 and the UK's text-only warnings, the new graphic warnings in Australia increased the likelihood of forgoing cigarettes (Borland et al., 2009).

Following Australia's lead on plain packaging laws, other countries followed suit. After the UK implemented picture-based health warnings, smokers reported that the warnings made them more likely to think about quitting and forgo cigarettes (Hammond et al., 2007). In Canada, graphic warnings on cigarette packs have also been shown to increase quitting, intention to quit, quit attempts, and decrease smoking (Hammond, Fong, McDonald, Cameron, & Brown, 2003). While the US has not implemented plain tobacco packaging, a randomised controlled trial in two US states found that pictorial warnings on cigarette packs increased quit attempts from 34% to 40% (Noar et al., 2016). The results also extended to various subgroups including those of low education, low SES, racial minority groups and sexual minorities (Noar et al., 2016). The positive effects of graphic health warnings on

smoking also extends to adolescents who report a reduction in appeal of cigarette packs due to pictorial health warnings (Vardavas, Connolly, Karamanolis, & Kafatos, 2009; White, Williams, & Wakefield, 2015).

These fear-based campaigns have been running since the introduction of the NTC in 1997, and as has been shown in this section, have contributed to a decline in smoking rates in Australia. However, the NTC has also launched campaigns that are more positive in nature and campaigns that target specific groups of people. In the next section we review the effectiveness of campaigns on more vulnerable and disadvantaged groups.

### **2.2.3. Vulnerable and disadvantaged groups**

While the NTC has been effective in decreasing smoking rates in the general population, there are sub-groups of the population where smoking rates either still remain disproportionately high, or where smoking rates have barely declined, as illustrated earlier. A key area of NTC research has investigated how its various campaigns have impacted vulnerable or disadvantaged groups. The main groups investigated tend to be people of low SES or living in low SES areas, Indigenous groups and pregnant women – groups which often converge (Gould et al., 2014). Some studies suggest that campaigns have similar effects on these groups as the general population, while other studies argue that certain campaigns, such as those that rely heavily on fear appeals, can have the opposite effect on these vulnerable groups (Thomas et al., 2014). This section will step through research into the effectiveness of the NTC on these groups.

### *Low socioeconomic status*

There have been a number of studies that have investigated whether the NTC has had a positive effect on smoking rates for low SES populations or people living in lower SES areas. This is important as research from around the world has shown that people living in lower SES areas tend to have higher smoking rates than those living in higher SES areas (Drope et al., 2018; Passey & Bonevski, 2014). In Australia, this is also the case with smoking rates still higher in people with lower income levels (Greenhalgh et al., 2020), despite, overall, smoking rates having declined across all SES groups (Australian Institute of Health and Welfare, 2020c). Research investigating the impact of the NTC in relation to SES status has tended to focus on specific states rather than Australia-wide, with Victoria leading the way. Therefore, it is important to note that the following studies on SES may not reflect the situation across the whole of Australia.

Research from Victoria has found that fear-based TV ads increased quit attempts in both low and high SES areas (Durkin et al., 2018; Durkin et al., 2011). In addition, TV ads that elicit multiple negative emotions of fear, guilt and/or sadness showed a higher increase in quit attempts of smokers living in lower SES areas than higher SES areas (Durkin et al., 2018). Highly emotional narrative ads containing graphic imagery and personal stories of the negative health consequences of smoking, have also been found to increase calls from those living in low SES areas (Durkin et al., 2011).

Between 2001 and 2004 in the midst of the *Every Cigarette is Doing You Damage* campaign, Siahpush et al. (2007) found that TV ads featuring health risks of smoking did not show any variation across SES status in terms of calls to Quitline. That is, as TV advertising increased, there was an increase of calls to Quitline across *all* SES groups. The authors also suggest that mass media campaigns in conjunction with other tobacco control policies such as smoking



environment laws can lower smoking prevalence among disadvantaged groups (Siahpush et al., 2007). Research has also demonstrated a decrease in smoking rates across all adolescent SES groups coinciding with the introduction of the NTC in the late 90s (Germain et al., 2012; White, Hayman, & Hill, 2008).

These results strongly suggest that the negative campaigns that have dominated the NTC have had a positive effect on quitting rates for people living in higher and lower SES areas. However, there is still a disparity in smoking rates in terms of socioeconomic status. Two of the main perceived barriers to smoking cessation among smokers of lower SES are the use of cigarettes for stress management and a lack of smoking cessation support, barriers that were also identified for Indigenous groups (Twyman, Bonevski, Paul, & Bryant, 2014). Smokers of lower SES have also reported that smoking in groups as a social activity was more acceptable while those of higher SES reported a sense of alienation when having to leave their group to smoke (Paul et al., 2010). Nonetheless, taken together, research suggests that fear-based anti-smoking campaigns have been an effective way of reaching many Australians of various SES, and that the negative campaigns do tend to be effective in increasing quit attempts of smokers living in lower SES areas.

### *Indigenous Australians*

Smoking rates remain disproportionately high for Indigenous Australians compared to non-Indigenous Australians. As noted earlier, as of 2019, 25% of Indigenous Australians reported being daily smokers, compared to 11% of the general population (Australian Institute of Health and Welfare, 2020c). Although Indigenous smoking rates have declined, this decline has also been less than that observed for non-Indigenous Australians. The disproportionate decline in smoking rates is also observed in other Indigenous and First Nations peoples living in Western countries (Gould, McEwen, Watters, Clough, & van der Zwan, 2013).

There is inconsistent evidence as to whether fear-based messages are effective at motivating quitting in the Indigenous population (Gould et al., 2014). There is evidence that suggests Aboriginal and Torres Strait Islanders may avoid threat-based messages as they may not be seen as legitimate or may be seen as too frightening (Gould, Munn, Avuri, et al., 2013; Gould, Munn, Watters, McEwen, & Clough, 2013). On the other hand, there is evidence to suggest that Indigenous Australians respond in a similar manner to graphic TV ads as non-Indigenous Australians in impacting smoking behaviour (Boyle et al., 2010). Research has also shown that Indigenous Australians responded positively to graphic health warnings, with Indigenous smokers more likely to forgo cigarettes after than before plain packaging laws (Nicholson et al., 2015). Although, research suggests that Indigenous people who are of lower SES tend to need more exposure to graphic anti-smoking ads (Gould et al., 2014). Anti-smoking ads aimed at and featuring Indigenous smokers has been found to be more effective than ads aimed at the general population. A systematic review of Indigenous and First Nations peoples in Western countries showed that Indigenous peoples prefer culturally targeted mass media messages and messages depicting Indigenous faces (Gould, McEwen, et al., 2013; Stewart et al., 2011). These results are echoed in Australia where anti-smoking advertising targeted specifically at Indigenous Australians has been associated with higher motivation to quit smoking (Nicholson et al., 2015). Indigenous Australians also rated ads featuring Indigenous smokers as being more effective and personalised than non-Indigenous Australians (Stewart et al., 2011).

In 2011, the *Break the Chain* campaign was introduced as the first NTC campaign specifically targeting Indigenous Australians. An evaluation of the campaign concluded that the tagline *Break the Chain* was seen by Indigenous Australians as appropriate, relevant, and as the key message of the TV ad (Quitnow, 2013). The campaign also elicited higher levels of

self-identification in comparison to the *Cough* campaign running at the same time which was aimed at the general population (Quitnow, 2013). The *Break the Chain* campaign was additionally effective in reducing the amount of cigarette smoked and stimulating discussions of smoking and health with family and friends (Quitnow, 2013). The campaign was viewed as successful, and in 2016, a second campaign targeting Indigenous Australians was launched (Young, 2016).

Positive anti-smoking ads focusing on the benefits of quitting have also tended to receive higher ratings from Indigenous Australians (Stewart et al., 2011). Positive ads and campaigns can be seen as the opposite of fear-appeals. Positive ads and campaigns motivate behaviour change by promoting discourses of hope that focus on self-efficacy and health benefits of a particular behaviour (Brookes & Harvey, 2015; Nabi & Myrick, 2019). As we will see in Chapters 4 and 5, the *Break the Chain* and *Don't Make Smokes your Story* campaigns are both positive style campaigns that encourage Aboriginal and Torres Strait Islander people to quit smoking for their families' health and wellbeing. Both campaigns were positively received by Indigenous Australians and both helped to drive quitting behaviour (ORC International, 2018; Quitnow, 2013).

For the most part, research on the effectiveness of the NTC on the Indigenous population suggests that ads that specifically target Indigenous Australians and feature Indigenous Australians espoused more engagement as the audience can relate to the people in the ads. Furthermore, Gould et al. (2014) argue that media campaigns appear to be most effective when implemented alongside other programs such as free access to nicotine replacement therapy, and social support.

### *Pregnant women*

Smoking rates among pregnant women have been falling in Australia, with recent data showing that only 9.2% of pregnant women smoked in the first 20 weeks of pregnancy in 2018 compared to 12.9% in 2011 (Australian Institute of Health and Welfare, 2020b). Anti-smoking advertising targeting pregnant women has been associated with a decline in smoking rates in the target group, although this decline was less pronounced from women of lower SES (Havard et al., 2018). The introduction of graphic health warnings has also been associated with a decline in smoking during pregnancy (Havard et al., 2018). Furthermore, it has been suggested that Federal mass media campaigns in Australia targeting the general population have also resulted in the decline of smoking rates among pregnant women (Mohsin, Bauman, & Forero, 2011). The same has been found in the US, where a nation-wide mass media campaign was associated with an increased in smoking cessation among pregnant women (England et al., 2017). These nation-wide mass media campaigns are reported to work since they reach a large number of smokers (England et al., 2017).

There is, however, an unequal decline in smoking rates of Indigenous women and those of the general population. As mentioned earlier, in 2014, 44% of Indigenous mothers smoked in the first 20 weeks of pregnancy compared to 12% of non-Indigenous mothers (Australian Institute of Health and Welfare, 2016). These statistics are further echoed by Passmore, McGuire, Correll, and Bentley (2015) who found that among pregnant women who gave birth between 2001 and 2011, the highest rates of smoking was among Aboriginal women at 53.4% and teenagers at 38.9%, while the lowest rates were among women in private hospitals at 2.2% and those of higher SES at 3.7% (Passmore et al., 2015).

In their meta-analysis, Gould, Munn, Watters, et al. (2013) found that health campaign messages on the detrimental health effects of smoking on the mother and the baby have less

impact on Aboriginal women than non-Aboriginal women. They also suggested that hard-hitting messages led to avoidance behaviour from pregnant women such as leaving the room. To remedy this, in 2012, the *Quit for You, Quit for Two* campaign was launched with a more positive and gentle approach to anti-smoking campaigning by encouraging pregnant women to quit to provide a healthy start to their babies (Department of Health, 2018c). This campaign also featured Indigenous pregnant women in the TV ads and posters. An evaluation of the campaign showed that 48% of the Indigenous audience exposed to the ads had taken action towards quitting or reducing smoking, including pregnant women, recent quitters and the broader Indigenous audience (Quitnow, 2016).

The effectiveness and success of the NTC has been well documented over the past two decades, and especially in the early stages of the NTC. This literature review has shown that fear-based messages have tended to be effective in driving down smoking rates across the population, but that more positive and personalised messages can be more effective for certain groups. Research also assert that graphic TV ads and graphic health warnings are effective at motivating smokers to quit for their health.

The evidence presented in this section suggests that the NTC has had a highly positive effect on smoking rates. For this reason, it offers a site for a case study into how a successful long-term public health campaign works, so as to inform future health campaigns. However, despite the evidence of its effectiveness, there has been little research, other than the general characterisations such as ‘fear appeals’, that look at how materials actually worked to put forward the anti-smoking message. Thus, this study will explore this in detail, using linguistic/semiotic tools.

### 2.3. Chapter summary

This chapter has contextualised the current study in relation to Australia's mass media approach to tackling smoking and the broader health promotion literature. It has also established that the NTC is an ideal case study of PDA since it has been a positive intervention that has improved the health of Australians by reducing smoking rates. The reduction in smoking rates not only benefits smokers, but non-smokers alike who can become seriously ill and/or die from second-hand smoking.

Furthermore, this chapter has highlighted some gaps in the NTC literature. While studies have shown that the NTC has been successful in terms of its effects and impacts in the community, research has not tended to investigate how linguistic and semiotic resources work within campaigns to effect change. Research has also tended to study individual campaigns in isolation without necessarily explaining their impacts in relation to other campaigns or how the campaigns have evolved and developed over time to effect change. There is thus a need to understand how these campaigns work internally, and a study in linguistics and semiotic research provides tools to do just that. These tools are introduced and explained in Chapter 3, along with the need for a set of rhetorical strategies to analyse multiseiosis within individual materials and campaigns, and across campaigns over the lifetime of the NTC.

# CHAPTER 3

## FOUNDATIONS

Australia's National Tobacco campaign involves a range of materials including television ads, radio ads, posters and tobacco packaging. These materials together use a wide range of semiotic resources to discourage smoking and promote quitting, including spoken and written language, images (both static and moving) and sounds. Each of these semiotic resources creates meanings independently, but also combines and interacts with one others to create a meaningful whole. In order to understand the internal workings of these campaigns, therefore, there is a need for analytical tools that can account for both this wide range of semiotic resources, and the rich variation in meaning that they organise.

Systemic Functional Linguistics (hereafter SFL) offers a rich toolset in this regard. It is a theory that can be used to analyse and interpret highly multimodal texts and their individual semiotic resources, as well as the wide range of meanings at play in the NTC materials (O'Halloran, Tan, & Wignell, 2019). Since its initial application to language, SFL has been adapted and extended to the study of multimodality in the form of Multimodal Discourse Analysis, which as O'Halloran et al. (2019) explain, "account for the ways in which linguistic and non-linguistic resources combine and interact in the communication of meaning". To this end, descriptions of language (Halliday & Matthiessen, 2014) and a range of other semiotic systems have been developed using SFL, including images (Kress & van Leeuwen, 2006; O'Toole, 2011), music (van Leeuwen, 1999) and film (Bateman & Schmidt, 2012).

Furthermore, as demonstrated in Chapter 2, the NTC presents a case for Positive Discourse Analysis since it has been successful in reducing smoking rates in Australia. This aligns with the goals of PDA which is a methodological approach that privileges the analysis of texts and interventions that engender positive change (Martin, 2004b). Another key component of PDA is to use what has been learnt from analysis to inform the design of future interventions (Bartlett, 2017; Martin, 2004b). To use the learnings of the NTC to inform the potential design of future public health campaign, this chapter introduces a set of rhetorical strategies to link longer patterns of change and development to individual campaigns of the NTC.

Section 3.1 overviews SFL and its founding principles, SFL research in the health domain and the analytical tools used in this study. Section 3.2 provides an overview of Multimodal Discourse Analysis as it relates to this study. Section 3.3 introduces Positive Discourse Analysis as the methodological approach taken for this study, and its interaction with SFL. Section 3.4 presents a set of rhetorical strategies developed to analyse the NTC in its entirety; and Section 3.5 presents the data collected and analysed for this study.

### **3.1. Systemic Functional Linguistics**

Systemic Functional Linguistics is a social semiotic theory that accounts for the use of language in social context (Halliday, 1978). Founded by M.A.K. Halliday in the 1960s, SFL sees language as an inherently social behaviour which must be understood in relation to its social environment (Halliday & Hasan, 1985). In his first edition of *An Introduction to Functional Grammar*, Halliday (1985) describes functional grammar as a ‘natural’ grammar “in the sense that everything in it can be explained, ultimately, by references to how language is used” (p. xiii), highlighting the importance of studying function/use. The function of



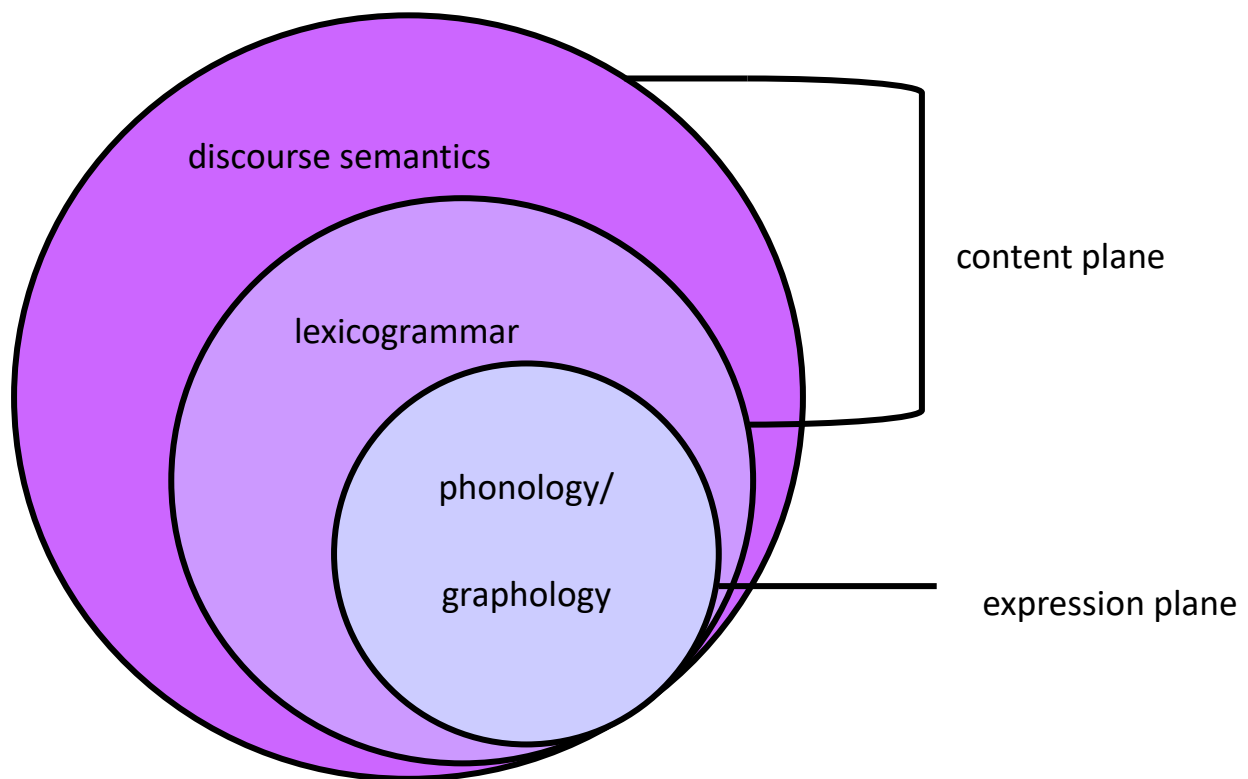
language is seen “as a fundamental property of language itself” (Halliday & Hasan, 1985, p. 17). Language is also described as a network of “interlocking options”, where we start from the most general features of language, moving to more and more specific features (Halliday & Hasan, 1985). In the SFL model, language has a number of dimensions – here we only focus on two that are most relevant to the study called **stratification** and **metafunction**.

In SFL theory, language is seen as a complex semiotic system having different levels, or **strata** (Halliday & Matthiessen, 2014; Martin, 1992; Martin & Rose, 2007). These strata are organised into two planes: the content plane and the expression plane (Halliday & Matthiessen, 2014). This thesis adopts the version proposed by Martin and Rose (2007), where the content plane is stratified into **discourse semantics** and **lexicogrammar**, illustrated in Figure 3.1<sup>7</sup>. The strata of discourse semantics describes meanings across a whole text (Martin 1992), while lexicogrammar describes meanings within clauses (Halliday & Matthiessen, 2014). The expression plane of language refers to the two modes of expressing meaning: through sound (phonology) or through writing (graphology) (Halliday & Matthiessen, 2014). Phonology and graphology are the most concrete organisation of language, while lexicogrammar is more abstract and discourse semantics is more abstract still (Martin & White, 2005). Halliday and Matthiessen (2014) explain the process of linking one level of strata with another as *realisation* such that the level of discourse semantics is realised by patterns of lexicogrammar, and lexicogrammar is realised by patterns of phonology/graphology, illustrated in Figure 3.1. The stratification model of language allows

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<sup>7</sup> Martin and Rose’s (2007) model is adopted since the analytical frameworks employed in this thesis are derived from this model.

for the analysis of language at different levels depending on the research goals. In this study, we will use resources from all three strata as they become relevant.



*Figure 3.1. SFL strata of language (Martin & Rose's (2007) model)*

These three levels of language are in turn linked to social context, since it is social context that determines the linguistic choices within the three strata (Halliday & Hasan, 1985). This is illustrated in Figure 3.2. Martin (1999) proposes that context is divided into two additional strata above language that he calls **register** and **genre**, which are “interpreted as higher levels of meaning” (Martin & Doran, 2015, p. 2). While this study will not use genre, it is nevertheless important to understand the relationship between the broader social context and language.

Genre is the highest stratum and enacts the social practices of a culture (Martin & Rose, 2007). When analysing texts, genre describes a text's social purpose, such that within any

given culture there exists a multitude of genres. Genre is in turn manifested within specific social situations, which we call register. Within a particular register, there are three interacting variables: field, tenor and mode. These three variables “serve to interpret the social context of the text” (Halliday & Hasan, 1985, p. 12). According to Martin and Rose (2008), field is concerned with “the social action that is taking place” (p. 11), tenor is concerned with the “relationships between interactants” (p. 11) and mode refers to “what part language is playing” (p. 11) in a text. In this way, register has “significant and predictable impacts on language use” (Eggins, 2004, p. 9), in that field, tenor and mode, determine text (Halliday, 2007b). Martin (1999) summarises genre and register as: “genre states the meaning potential that is immanent in a culture; register allows for what could be done” (p. 32). From Figure 3.2, we can say that genre is realised by register, and register is realised by patterns of discourse semantics (Martin & Rose, 2007).

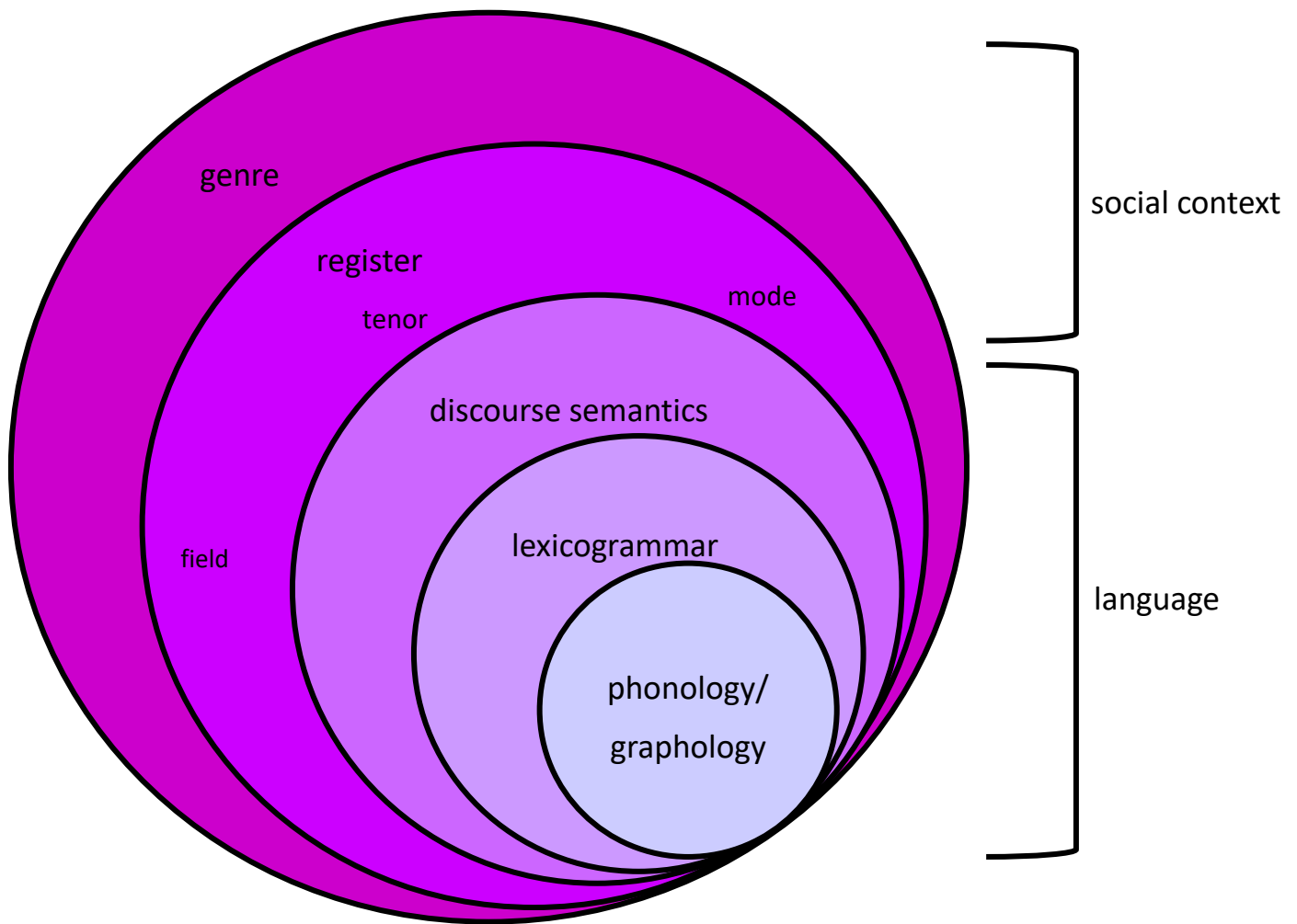
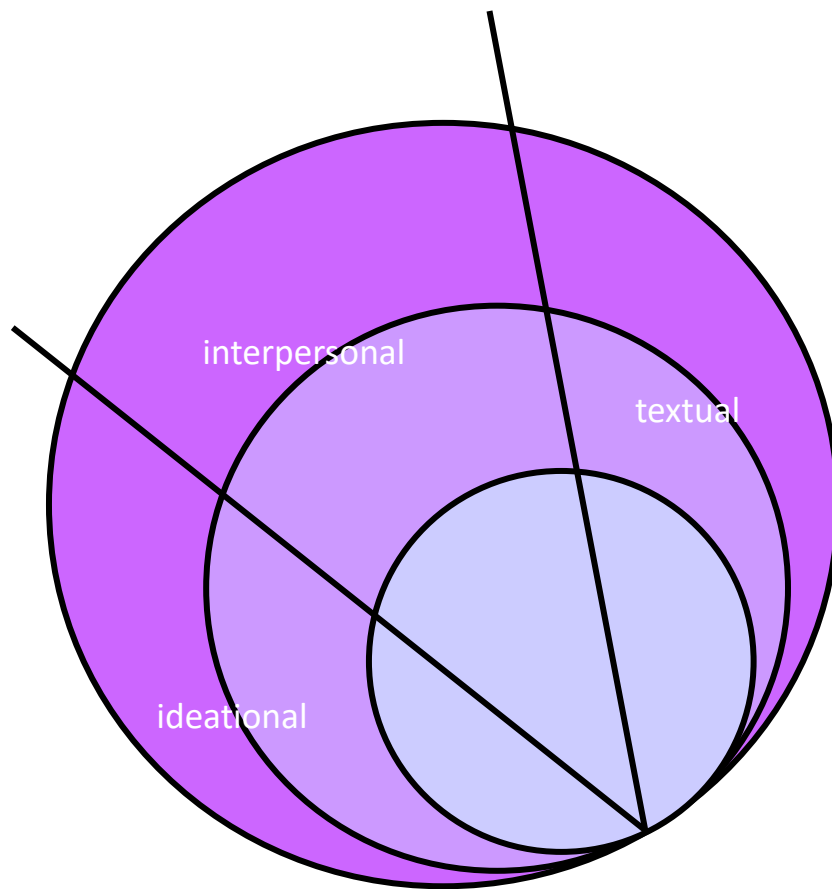


Figure 3.2. Strata of language and social context

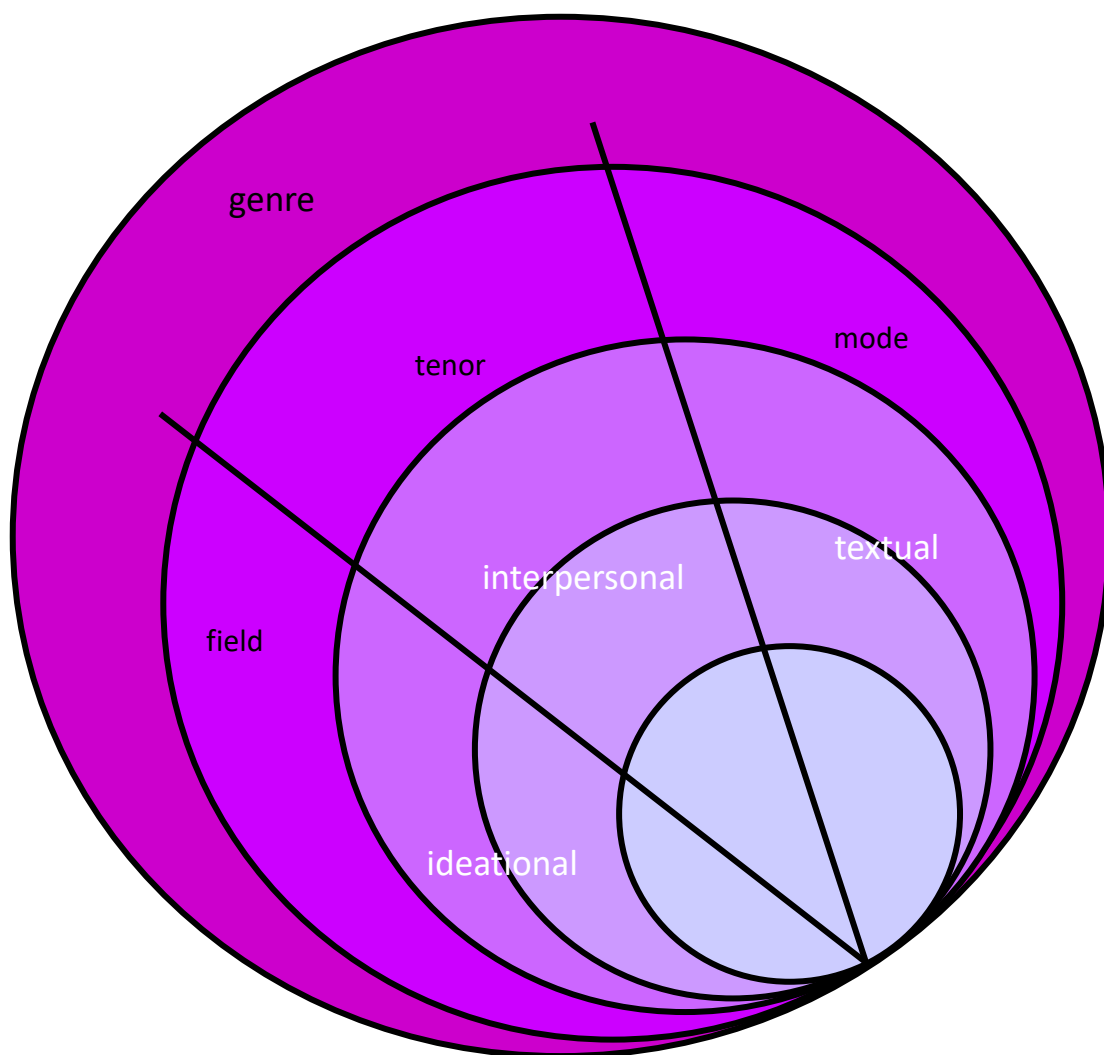
SFL interprets language as expressing three main kinds of meanings simultaneously. These three kinds of meaning are called **metafunctions** and include the **ideational**, **interpersonal** and **textual** metafunctions (Halliday, 2007a), illustrated in Figure 3.3. Metafunctions cut across strata such that all three types of meaning are expressed through a range of resources at different levels, illustrated in Figure 3.3. The ideational metafunction construes experience; the interpersonal metafunction is concerned with negotiating social relationships; and the textual metafunction organises information flow (Martin & White, 2005). In text analysis, the metafunctional account of language allows us to describe and explain how these three

meanings are realised in language and determine the semiotic work being done by each strand and what that means for the overall text.



*Figure 3.3. Metafunctions in SFL*

The three metafunctions in turn correlate with the three register variables. Field correlates with the ideational metafunction, tenor with the interpersonal and mode with the textual (Halliday, 2007a). This means “there is a tendency....for the field of social action to be encoded linguistically in the form of ideational meanings, the role relationships in the form of interpersonal meanings, and the symbolic mode in the form of textual meaning” (Halliday, 2007a). This is illustrated in Figure 3.4.



*Figure 3.4. Metafunctions and strata of language*

Being a comprehensive theory of how language operates in social context, SFL has been described as an ‘applied linguistics’ which is “a unifying concept to bring together theoretical and applied linguistics” (Mahboob & N. Knight, 2010, p. 5). Halliday (2013b) explains that an applicable theory is one “that learns from the experience of being applied” (p. 45) so that theory learns from practice and practice learns from theory. In this way, an applicable linguistics can be used to address real world problems, whether they be practical in nature, theoretical in nature, or both (Halliday, 2013b, p. 128). Moreover, Halliday (2013a) explains that an applicable linguistics is not restricted to linguists, but can be used by people

who are concerned with language in some way or another. The ‘applicability’ of SFL aligns with the main goal of the study, that is, to use the learnings from the NTC to tackle other health issues in the community. In the following section, we review how SFL has been applied to health studies as a way to situate the theoretical foundations of this study.

### **3.1.1. Health research in SFL**

Since the 1970s, a considerable amount of research has applied SFL theory to the area of health. As Moore (2019) argues in her review of SFL informed studies on the role of language in healthcare, patient-clinician interaction has tended to be the primary focus of SFL healthcare research. This has largely been oriented toward describing the linguistic resources available to both clinicians and patients in interactions as a way to improve these interactions in some way (e.g. Eggins & Slade, 2016; Karimi, Moore, & Lukin, 2018; Moore, 2016; Thompson, 1999). Research has additionally focused on developing frameworks with the potential to be applied in the healthcare setting (e.g. Fine, 2006; Mahboob, 2017; Pounds, 2010). In contrast, comparatively little SFL research has explored health promotion, with this study providing the first SFL-informed analysis of a long-running public health campaign.

The SFL model of language has been applied in the context of patient-clinician interactions in a number of settings including mental health discourse. Rochester and Martin (1979) investigated the discourse of people with schizophrenia, focusing on how they organised information in talk. In his book, Fine (2006) uses SFL theory to analyse and describe the language of people with psychiatric disorders, highlighting what they can do with language, instead of what they cannot do. Using the interpersonal discourse semantic system of SPEECH FUNCTION, Ferguson (1992), also takes a proficiency approach to studying the interpersonal

meanings realised by aphasic patients, showing that patients with aphasia can express and respond to speech functions appropriately. This is echoed by Dreyfus (2013) who uses SFL to develop a model to describe how a non-verbal teenage boy is able to communicate and interact with others, in order to bond (explored in Chapter 8). SFL makes it possible to focus on proficiency instead of deficit since language is viewed as a huge system network of choices.

Patient-clinician interactions have also been studied in hospital settings. Eggins and Slade (2016) explored the effectiveness of bedside nursing handovers by analysing the ways in which nurses interact with patients, and whether they construe patients as active or passive agents. In a study investigating language features that led to successful communication and communication breakdowns in an emergency department, Slade et al. (2008) identified a number of issues in clinician practices. This included using technical terminologies that patients did not understand and dominating interactions during initial consultations leaving little room for patients to ask questions. Research using SFL has also been conducted in palliative care. Using the DEMAND INFORMATION network, Moore (2016) analysed how doctors' framing of questions might facilitate or hinder end-of-life talks. Such end-of-life talks have also been investigated by Karimi et al. (2018) who applied field, tenor and mode to analyse oncology consultations of patients suffering from terminal cancer and showed that one of the roles of the oncologist is to facilitate the patient's agency in being involved in treatment/non-treatment decisions.

The research cited so far have tended to explore how SFL can be applied to face-to-face interactions. Other SFL health research has additionally explored its use in non-face-to-face interactions, though the research is not as wide-spread as patient-clinician interactions. In analysing Consumer Medicine Information (CMI) – written information about medicines –



Aslani et al. (2010) found that in comparison to the UK CMIs, CMIs in Australia had lower measures for coherence making them more confusing for patients. Taking a more constructive approach, working with his students, Mahboob (2017) conducted a register analysis of nursing receiving/admission notes written by professionals to understand their linguistic features in order to develop a workbook for nursing students. Other constructive approaches include Pounds (2010) who used the APPRAISAL framework to design a model for the understanding of empathy in the health and medical context. Pounds (2010) explains that such a model could then be applied to real-life settings such as in both the screening and training of medical students.

As mentioned in the introduction, SFL has been extended to the study of multimodality in the form of Multimodal Discourse Analysis (MDA). Some studies have taken an MDA approach to exploring health promotion, although this kind of research seems to be in its infancy.

Brookes and Harvey (2015) examined how a diabetes campaign in the UK uses fear appeals in both text and images to emphasise the dangerous consequences of not taking responsibility for their diabetes. Brookes and Harvey (2016) also conducted a multimodal critical discourse analysis of a UK National Health Service (NHS) website after its continued privatisation.

They found that patients are regularly given agency through words such as “stakeholder” and “service user”, to show that they are active in using health care services. These are also represented in the images by positioning patients at eye-level with doctors in close personal proximity to signal equal status.

This literature review has shown that SFL is well established in health research, especially in exploring patient-clinician interactions. However, there is little SFL research in the health promotion discourse, with this study being the first to provide a systematic and functional

account of a long-running public health campaign. In the next section, we explore some of the main SFL analytical tools used to analyse the NTC materials.

### 3.1.2. Analytical tools across strata and metafunctions

This study draws on a range of analytical tools across metafunctions for its analysis. Each tool will be explained in more detail as they become relevant through Chapters 4 to 6, however in this section, we introduce the main linguistic analytical tools drawn upon. As this study is oriented toward the organisation of meaning across whole texts such as TV ads, posters, radio ads, it focuses largely on discourse semantic resources. However, when necessary it also draws on resources from phonology (Halliday & Greaves, 2008), lexicogrammar (Halliday & Matthiessen, 2014) and register (Doran & Martin, 2021). Table 3.1 presents the main analytical frameworks according to metafunctions and strata, with FIELD (Doran & Martin, 2021) functioning as a register variable.

| <b>Framework</b>  | <b>Metafunction</b> | <b>Stratum</b>      |
|---|---------------------|---------------------|
| <ul style="list-style-type: none"> <li>- NUCLEAR RELATIONS (Martin &amp; Rose, 2007)</li> <li>- ENTITY TYPES (Hao, 2020)</li> </ul> | Ideational          | Discourse semantics |
| <ul style="list-style-type: none"> <li>- APPRAISAL (Martin &amp; White, 2005)</li> </ul>  | Interpersonal       | Discourse semantics |

|                                     |                          |                     |
|-------------------------------------|--------------------------|---------------------|
| - INVOLVEMENT<br>(Poynton, 1990)    |                          |                     |
| - PERIODICITY (Martin & Rose, 2007) | Textual                  | Discourse semantics |
| <b>Framework</b>                    | <b>Register variable</b> |                     |
| - FIELD (Doran & Martin, 2021)      | Field                    |                     |

*Table 3.1. SFL Frameworks*

### *Nuclear Relations*

The NUCLEAR RELATIONS framework is part of the ideational metafunction, working at the level of discourse semantics. It is concerned with construing human experience, and in particular it is concerned with how participants (people and things) are involved in processes (Martin & Rose, 2007). NUCLEAR RELATIONS allows us to map out how participants are centrally or distantly associated with processes (Martin & Rose, 2007), and allows us to account for agency in language. In their NUCLEAR RELATIONS framework, Martin and Rose (2007) employ Halliday’s (1994) discussion on “the semantic patterns within the clause” (Martin & Rose, 2007, p. 91). These semantic patterns are realised lexicogrammatically through the ergative structures proposed by Halliday and Matthiessen (2014), discussed in the following paragraph.

All participants in NUCLEAR RELATIONS are associated with the process in some way, making the **Process** the only obligatory part of the clause with the **Medium** being the core participant. The Medium is the participant that actualises the process, and without which

there would be no process (Halliday & Matthiessen, 2014). In this way, the Medium “always participates directly in the process” (Halliday & Matthiessen, 2014, p. 341). In ‘happening’ clauses, whereby the process is said to be ‘self-caused’, the NUCLEAR RELATIONS structure is **Medium + Process** (Halliday & Matthiessen, 2014, p. 338). An example of a happening clause from the *Every Cigarette is Doing You Damage* Campaign is illustrated in Table 3.2 where the Medium is bolded blue.

| <b>Medium</b> | <b>Process</b> |
|---------------|----------------|
| <b>I</b>      | quit           |

Table 3.2. Example of ‘happening’ clause

However, in ‘doing’ clauses, the Process is caused by an external participant called the **Agent**, and the NUCLEAR RELATIONS structure is realised by **Agent + Process + Medium** (Halliday & Matthiessen, 2014, p. 338). An example of a doing clause from the *Every Cigarette is Doing You Damage* Campaign is illustrated in Table 3.3 where the Agent is bolded red, and the Medium is bolded blue.

| <b>Agent</b>         | <b>Process</b> | <b>Medium</b>                        |
|----------------------|----------------|--------------------------------------|
| <b>tobacco smoke</b> | damages        | <b>your body’s natural defences.</b> |

Table 3.3. Example of ‘doing’ clause

“Thus, the Medium is the nodal participant throughout the system. It is not the doer, nor the causer, but the one that is critically involved, in some way or other according to the particular nature of the process” (Halliday & Matthiessen 2014, p. 343), while the “Agent instigates the process, which affects the Medium in some way” (Martin & Rose, 2007, p. 91), in which case the Medium is the ‘done-to’.

In addition to the Medium and Agent, other participants involved in the Process include the **Beneficiary** and various types of **Range**, and **Circumstance**. “The Beneficiary is the one to whom or for whom the process is said to take place” (Halliday & Matthiessen, 2014, p. 345) while “the Range is the element that specifies the range or domain of the process” (Halliday & Matthiessen, 2014, p. 346). **Circumstances** give us additional information about the clause such as when/where something is taking place. These three additional participants are illustrated in Table 3.4.

| Medium | Agent | Process | Medium     | Circumstance       | Range    | Beneficiary         |
|--------|-------|---------|------------|--------------------|----------|---------------------|
| you    |       | ‘re     |            |                    | pregnant |                     |
|        | you   | get     | the toxins | out of your system |          |                     |
|        | I     | build   | a new life |                    |          | for me and the kids |

*Table 3.4. Examples of Range, Circumstance and Beneficiary*

In this study, NUCLEAR RELATIONS analyses serve to establish that smoking is bad since it is often the Agent causing damage and disease to the body, the Medium. This is discussed in detail in Chapter 4.

### *Entity types*

ENTITY TYPES are an ideational discourse semantic resource for realising how things, people, places and activities are named (Hao, 2020). Hao (2020) identifies six entity types: source, thing, activity, semiotic, place and time, shown in Figure 3.5. Entities can be studied from a

lexicogrammatical perspective, a discourse semantic perspective, all the way up to the level of field in building taxonomies<sup>8</sup> (see *field* below).

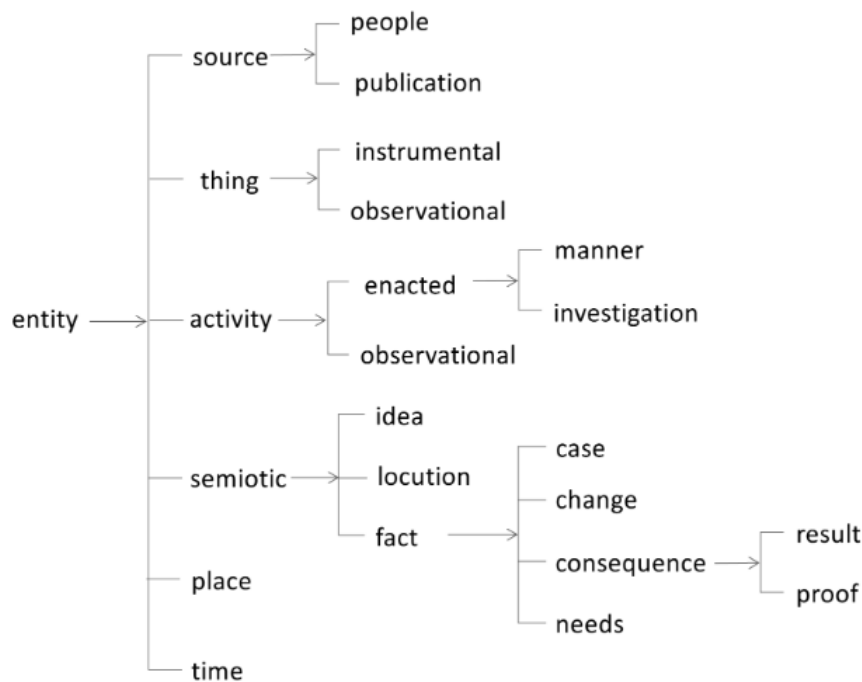


Figure 3.5. System network of ENTITY TYPES (Hao, 2020)

The entity types in Figure 3.5 came out of Hao’s (2020) work on high school biology textbooks but are applicable to this study. Of particular relevance are thing, people and activity entities where activity entities refer to “activities of doing” (Hao, 2020, p. 61). These three entity types allow us to differentiate between campaigns that focus more on people in relation to smoking/quitting, and campaigns that centre more on body parts and diseases. Examples of people entities in this study include *family, mum, aunties, kids*. Thing entities mostly involve body parts and organs such as *feet, legs, lungs, heart, blood vessels*, and

---

<sup>8</sup> When studying entities from a lexicogrammatical perspective, “we can explore how entities may be realised through different Participants and Circumstances” (Hao, 2020, p. 57). When studying entities from a discourse semantics perspective, we can explore how entities are related to other entities within a stretch of discourse (Hao, 2020). And when studying entities from the perspective of field, we can explore how different entities construe different fields of study, and construe different kinds of knowledge (Hao, 2020).

activity entities include processes such as *smoking* and diseases such as *peripheral vascular disease*. The entity types analysed in this thesis will move between a lexicogrammatical perspective and all the way to field.

### *Field*

As mentioned previously, field is a register variable which construes what is going on in a text and what participants are doing (Halliday & Hasan, 1985). Put in common-sense terms, field is often considered the ‘content’ of language (Doran & Martin, 2021). Field can construe phenomena *statically* or *dynamically*. From a static perspective, we are concerned with the items in a text and how they can be organised in composition or classification taxonomies (Doran & Martin, 2021). Composition taxonomies are realised by part-whole relations, while classification taxonomies are realised by type-sub-types relations (Doran & Martin, 2021). In the National Tobacco Campaign, compositional taxonomies allow for the presentation of both the various body parts that smoking damages and the areas of the body that quitting repairs. Figure 3.6 provides an example of a compositional taxonomy of the areas of the body that quitting repairs from the poster in Image 3.1.

# STOP SMOKING START REPAIRING

**In 1 week**  
your sense of taste  
and smell improves

**In 1 month**  
skin appearance is  
likely to improve

**In 3 months**  
your lung function  
begins to improve

**In 5 days**  
most nicotine is  
out of your body

**In 12 hours**  
excess carbon  
monoxide is out  
of your blood

**In 12 months**  
your risk of heart  
disease has halved

**In 1 year**  
a pack-a-day  
smoker will  
save over  
\$13,500

**Today**  
quit before  
getting pregnant  
and your risk  
of having a  
pre-term baby  
is reduced  
to that of a  
non-smoker

**EVERY CIGARETTE YOU DON'T SMOKE  
IS DOING YOU GOOD**

**Quit**  
FOR THE  
**Quit**  
FOR THE

**Quitline.13 7848**  
health.gov.au/quitnow

**Quit Now:**  
My QuitBuddy

**Australian Government**

Image 3.1. Health Benefits poster – woman



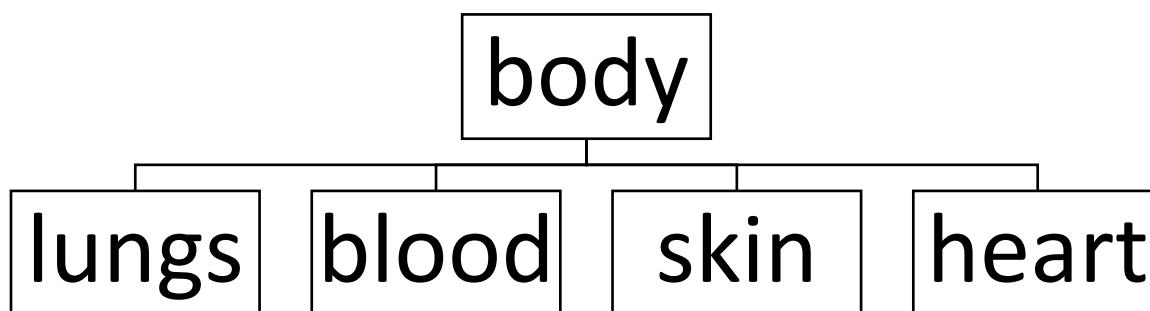


Figure 3.6. Compositional taxonomy of Health Benefits poster – woman

On the other hand, classification taxonomies build large taxonomies of the kinds of damage and diseases smoking causes. This is exemplified in Figure 3.7 from the *Health Warnings 2012* campaign, which depicts the types of diseases that smoking causes. Classification taxonomies can also classify the people who are negatively impacted by smoking and positively impacted by quitting.

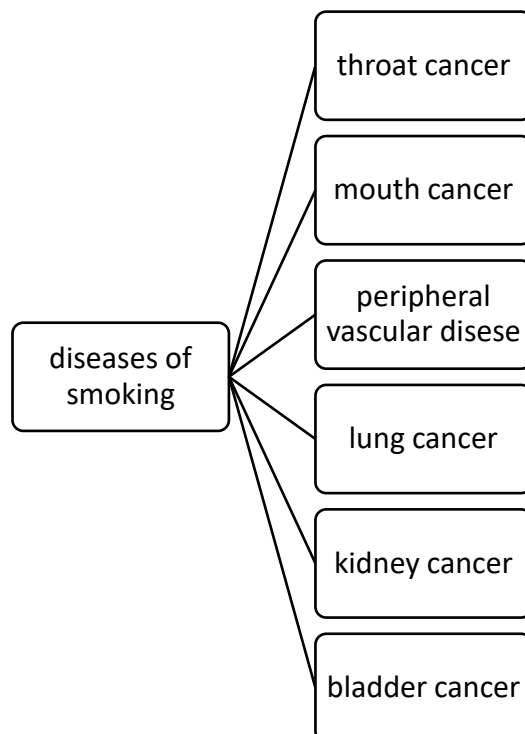


Figure 3.7. Classification taxonomy of the diseases of smoking

Field can also construe phenomena dynamically in the form of activities (Doran & Martin, 2021). Activity refers to “some sort of change that is oriented to some global everyday, professional or institutional purpose” (Doran & Martin, 2021, p. 108). Activities can be related in texts by implication whereby “one activity necessarily entails another” (Doran & Martin, 2021, p. 110). Or they can be related by expectancy sequences where “one activity does not necessarily entail the other” (Doran & Martin, 2021, p. 113). In this data, we mainly encounter implication sequences related to the worsening damage smoking causes, where the caret (^) symbol is used to represent the implication relation. In instances where there are no implication relations between activities; the two separate activities are placed on separate lines, without a ^ in between. An example is how smoking leads to a series of worsening damage that eventually leads to amputation. This is illustrated in Table 3.5 from the *Peripheral Vascular Disease* cigarette pack in Image 3.2. In Table 3.5, *smoking* is an activity at the level of field which is followed by a second activity of *narrows and blocks blood vessels* despite them being in the same clause lexicographically.

Front of pack

Back of pack



Image 3.2. Peripheral Vascular Disease 2012 cigarette pack

|   |
|---|
| <b><i>Peripheral Vascular Disease 2012 cigarette pack</i></b>                   |
| Smoking   |
| ^   |
| narrows and blocks blood vessels  |
| ^   |
| reducing blood and oxygen supply to your extremities (feet, legs, hands, arms). |
| ^ resulting in  |
| pain, open sores that don't heal and gangrene.                                  |
| ^ leads to  |
| amputations.  |

*Table 3.5. Implication relations between activities of Peripheral Vascular Disease 2012 cigarette pack*

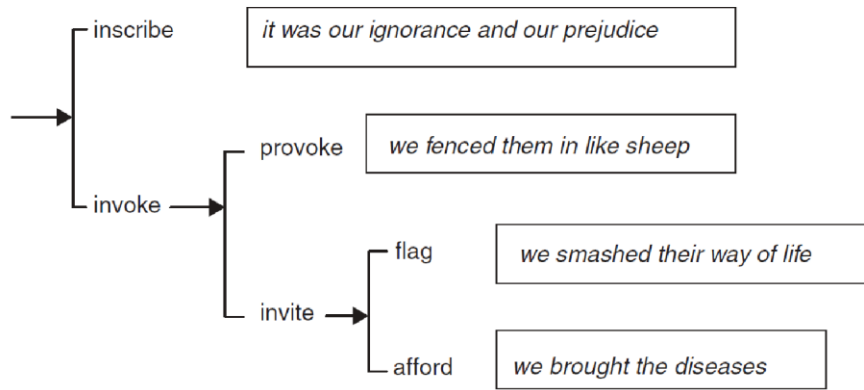
### *Appraisal*

APPRAISAL is part of the interpersonal metafunction and is concerned with the enactment of social relationships in texts (Martin & Rose, 2007; Martin & White, 2005). More specifically, the APPRAISAL framework is concerned with how speakers and writers negotiate social relationships by telling people how they feel about people and things (attitude), how committed they are about their feelings (engagement) and how strongly/not strongly they feel about people and things (graduation) (Martin & Rose, 2007; Martin & White, 2005). These

make up the three interacting domains of APPRAISAL: **attitude**, **engagement** and **graduation** (Martin, 2004a). Using the APPRAISAL framework, we determine how smoking and quitting are evaluated in texts, and how the audience is invited to align or not align with them.

### Attitude

Within the domain of attitude, there are three ways of mapping feelings in discourse: affect, judgement and appreciation. **Affect** is concerned with construing emotional reactions (Martin, 2004a), **judgement** is concerned with evaluating behaviour and **appreciation** is concerned with evaluating text/process and phenomena (Martin, 2002). Attitude can be positive or negative such as *happy* and *damage* respectively, and they can be inscribed or invoked (Martin, 2000; Martin & Rose, 2007). Inscribed attitudes are explicit evaluation such as *damage in every cigarette is doing you damage* and are differentiated from *invoked* attitudes which are implicit evaluations (Martin & White, 2005). Within the sub-category of invoked attitude, there are three options: provoke, flag and afford as illustrated in Figure 3.8. An attitudinal response can be provoked through a lexical metaphor (Martin & White, 2005). Somewhat less provocative is using non-core vocabulary to flag an evaluation, and by intensifying or graduating resources of graduation (Martin & White, 2005) such as *smashed* in Figure 3.8. Affording attitude is the least explicit in their evaluation. They “involve language that is not inherently evaluative, but gains its evaluation only in certain fields, situations or communities” (Doran, 2020, p. 152)



*Figure 3.8. System network of inscribing and invoking attitude (Martin & White, 2005)*

Table 3.6 provides a brief example of an attitude analysis (judgement and appreciation). The appraiser is who is doing the evaluation, and the target is who/what is being evaluated. And Table 3.7 provides an example of an affect analysis where the emoter is who is ‘feeling’, and the trigger is who/what is triggering the feeling.

| Text sample   | Appraiser | Appraising item | Target                     | Type                   | Invocation | Polarity |
|---|-----------|-----------------|----------------------------|------------------------|------------|----------|
| I work with some good people                                | narrator  | good            | people he works with       | judgement <sup>9</sup> |            | positive |
| every cigarette is doing you damage                         | narrator  | damage          | you <sup>10</sup>          | appreciation           |            | negative |
| smoking during pregnancy reduces blood flow in the placenta | narrator  | reduces         | blood flow in the placenta | appreciation           | flag       | negative |

Table 3.6. Example of judgement and appreciation analysis

| Text sample   | Emoter              | Appraising item | Trigger              | Type   | Invocation | Polarity |
|---|---------------------|-----------------|----------------------|--------|------------|----------|
| my mum and the aunties are pretty happy that I quit | mum and the aunties | happy           | that he quit smoking | affect |            | positive |
| I won't be around for my kids                       | narrator            | won't be around | kids                 | affect | afford     | negative |

Table 3.7. Example of affect analysis

---

<sup>9</sup> affect highlighted pink; judgement highlighted blue; appreciation highlighted yellow  
 positive polarity highlighted green; negative polarity highlighted red

<sup>10</sup> You is the direct target being damaged by cigarette.

In Chapter 4, we will step through how attitudes can be invoked through non-explicit lexis and through graduating items.

### Engagement

The sub-system of engagement is used to introduce a range of voices in a text (Martin & White, 2005) as well as indicating the speaker's/writer's degree of commitment to the appraised item (Martin, 2000). It determines what positions the voices take in relation to the attitudes in texts. A text can be either **monoglossic** or **heteroglossic**. In monoglossic texts, the author is the only voice acknowledged in the text (Martin & White, 2005). Monoglossia is often construed in texts through bare assertions (underlined) such as the ones found as headings on cigarette packs e.g.:

- Smoking causes emphysema
- Smoking kills
- Smoking harms unborn babies

In each of the underlined instances, what is said is construed as fact with no other alternatives or viewpoints. On the other hand, a heteroglossic text allows for other voices or viewpoints, whether it be to open space for (dialogic expansion) or shut down (dialogic contraction) the alternatives (Martin & White, 2005). The sub-system of engagement thus allows for the analysis of the attitudes and positioning of all voices in the text and the interplay between these voices. The monoglossic examples above can be rewritten to allow in other voices, e.g.:

- Doctors believe that smoking causes emphysema
- Some say that smoking kills
- Experts claim that smoking harms unborn babies

These same monoglossic examples can be rewritten to allow for other possibilities e.g.:

- Smoking can cause emphysema
- Smoking probably kills
- Smoking obviously harms unborn babies

These heteroglossic resources are presented in Figure 3.9 in the engagement system network.

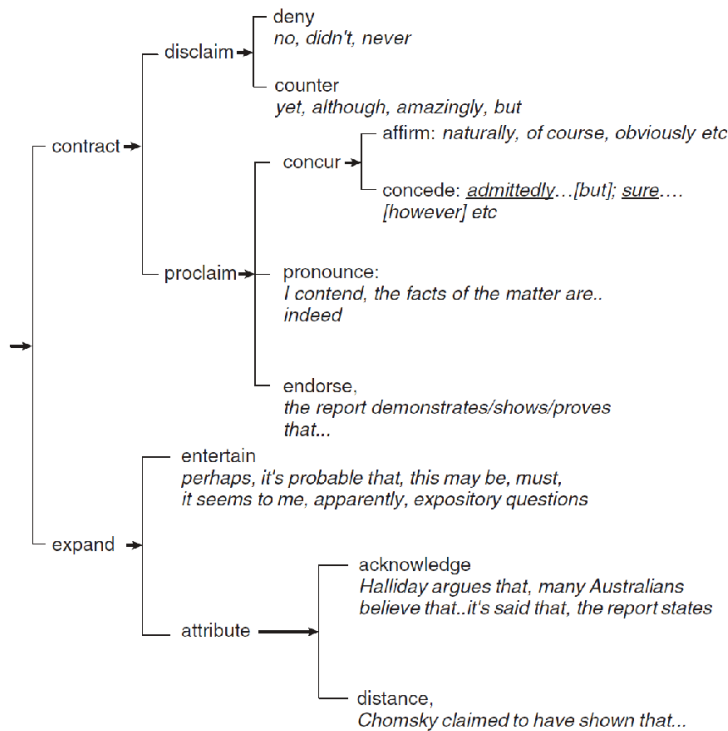


Figure 3.9. System network of engagement (Martin & White, 2005)

### Graduation

The third sub-system of APPRAISAL is the resource of graduation. It informs the reader or listener of how strongly or not strongly the writer or speaker aligns with the evaluation being put forward which can be done through resources such as intensifiers and modality (Martin & White, 2005; Martin & Rose, 2007). Within the system of graduation there are two kinds of resources for amplification: force and focus (Martin & Rose, 2007). Force is used to turn the volume up or down such as *every* in *every cigarette is doing you damage*, while focus is concerned with making something inherently non-gradable gradable by either softening or



sharpening it (Martin & Rose, 2007) such as *real* in *the **real** emphysema sets in*. Figure 3.10 illustrates the system network of graduation. Force can be further sub-divided in intensification and quantification, where the graduating item can be isolating or infusing. Isolating is realised by a single lexical item to convey a sense of scaling up or down such as *minor* in *this is the result of a **minor** stroke*. On the other hand, infusing has “no separate lexical form conveying the sense of up-scaling or down-scaling. Rather the scaling is conveyed as but one aspect of the meaning of a single term” (Martin & White, 2005, p. 143), such as *reduces* in *smoking during pregnancy **reduces** blood flow in the placenta*.

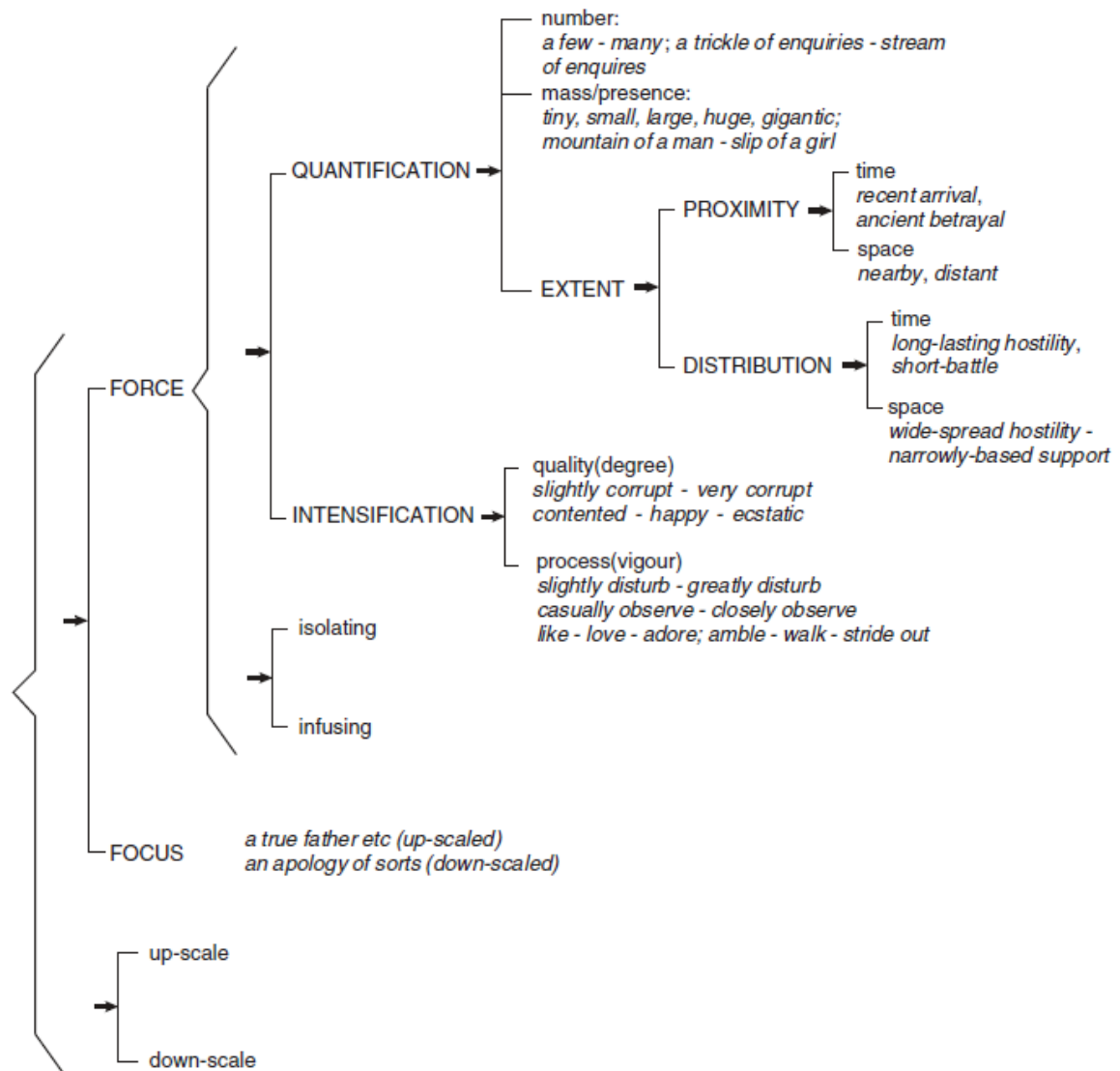


Figure 3.10. System network of graduation (Martin & White, 2005)

Table 3.8 presents a few examples of a graduation analysis, where the format is similar to an attitude analysis.

| <b>Text sample</b>  | <b>Appraiser</b> | <b>Graduating item</b> | <b>Target</b>              | <b>Type of graduation</b> | <b>Sub-type</b> | <b>Infusion</b> |
|---|------------------|------------------------|----------------------------|---------------------------|-----------------|-----------------|
| I work with some good people                                | narrator         | some                   | good people                | force, lower              | quantification  | isolated        |
| smoking during pregnancy reduces blood flow in the placenta | narrator         | reduces                | blood flow in the placenta | force, raise              | intensification | infused         |
| the real emphysema sets in                                  | narrator         | real                   | emphysema                  | focus, sharpen            |                 | isolated        |

*Table 3.8. Example of graduation analysis*

In Chapter 4, we explore the role graduation plays in building an intensifying prosody of the damage and diseases smoking causes.

### *Involvement*

The system of INVOLVEMENT is an interpersonal resource functioning at the level of discourse semantics and is concerned with non-gradable resources for negotiating solidarity (Martin & White, 2005). This includes naming, technicality, abstraction, anti-language and swearing (Martin & White, 2005). In this study, we are concerned with how naming negotiates solidarity between text and reader/listener. The INVOLVEMENT framework builds on the works of Poynton (1990) on terms address in Australian English and Eggins and Slade (1997) on casual conversation.

Poynton (1990) explains that naming can occur in the form of vocatives and non-vocatives. Vocatives involve using someone's name as a form of address and can include first names and nicknames. Non-vocatives include "items other than names used as vocatives" (p. 206). Such items include pronouns (I, you); kin terms (mum, sister); solidarity nominals (mate, pal); and groups/collection terms (family, clan) (p. 212). These terms can also be used to refer to those "not present or not involved in the talk" (Eggins & Slade, 1997, p. 148). In our analyses, the system of INVOLVEMENT means we can differentiate between campaigns that involve the audience in building solidarity and those that use little to no involvement resources – what we will call in Section 3.4 personalising and technicalising strategies. An example of a text that uses a large amount of naming to build solidarity is compared to one that does not in Table 3.9. The naming resources are highlighted blue. In the *Emphysema* cigarette pack, the one instance of the second-person pronoun *you* is not a naming resource. Instead, it is generic *you* which is used to make generalisations about people and things (Berry, 2009; Orvell, Kross, & Gelman, 2017), and is equivalent to *one* (Huddleston & Pullum, 2005). This is discussed further in Chapter 5.

| <i>Break the Chain campaign</i>   | <i>Emphysema 2012 cigarette pack</i>   |
|---|--|
| <p>“<b>I</b> watched <b>pop</b> die; lung cancer, from smoking. <b>Mum</b> had a heart attack from her smoking. My <b>sis</b> and <b>uncle Barry</b> have trouble breathing. <b>Rosie</b> next door had a stroke, and doctors say it was from smokes. <b>I</b> was smoking, for years too, but <b>I</b> quit. Cause <b>I</b> don’t want our <b>kids</b> growing up thinking disease and dying like that is normal. If <b>I</b> can do it, <b>I</b> reckon <b>we</b> all can”.</p> | <p>Smoking causes most cases of emphysema. Emphysema is the slow and <b>permanent</b> destruction of the airsacs in your lungs. Over time it becomes harder and harder to breathe. You slowly start to die from lack of air.</p> |

Table 3.9. Example of naming in Break the Chain campaign and Emphysema 2012 cigarette pack

### Periodicity

PERIODICITY is a discourse semantic system part of the textual metafunction and is concerned with how information is organised in texts (Martin & Rose, 2007). We can analyse information flow within clauses (lexicogrammar), and between paragraphs and whole texts (discourse semantics). In each case, we are concerned with what is placed in first position, either in the clause or the paragraph. This is what is most salient and is often referred to as the ‘point of departure’ for the rest of the clause/paragraph (Halliday & Matthiessen, 2014). Through the system of PERIODICITY it is possible to identify the new information the writer/speaker wants us to take in (Martin & Rose, 2007). This thesis draws mostly on Martin and Rose’s (2007) model of PERIODICITY for the analyses, but also draws on Halliday and Matthiessen (2014) for interpretation.

To analyse how information is organised within a paragraph, we look at how the HyperTheme/HyperNew relates to the rest of a stretch of text (Martin & Rose, 2007). A HyperTheme of a paragraph can be thought of in more commonly used terms as the topic sentence; it predicts what is to follow in the paragraph (Martin & Rose, 2007). According to Martin and Rose (2007), in many registers, the HyperThemes “tend to involve evaluation, so that the following text justifies the appraisal” (p. 194). Toward the end of a stretch of text, HyperNews often occur which distils the new information that has accumulated throughout the paragraph after the HyperTheme; as stated by Martin and Rose (2007) “HyperNews tell us where we’ve been” (p. 195). Example 3.1 illustrates a HyperTheme/HyperNew analysis from the *Every Cigarette is Doing You Damage* campaign *Lungs* radio ad. The HyperTheme predicts what the rest of the radio ad is going to be about, and in this case, it is about the damage that every cigarette causes. The HyperNew then consolidates what the radio ad was about i.e. cigarettes causing damage. The HyperTheme/HyperNew analysis in Example 3.1 highlights the damage that smoking causes.

[HyperTheme]

Every cigarette is doing you damage.

Lungs are like sponges with millions of tiny airsacs for transferring oxygen.

Every breath of tobacco smoke attacks the delicate membranes which separate them;  
turning the tiny sacs into larger, tar-rimmed holes.

No wonder smokers feel short of breath;  
their lungs are rotting.

[HyperNew]

Every cigarette is doing you damage.

*Example 3.1. HyperTheme/HyperNew analysis of Lungs radio ad*

PERIODICITY is also realised through THEME and INFORMATION choices within clauses. Here we are concerned in particular with the Theme and New of the clause. The Theme of the clause in English is what is in first position and is often described as ‘the point of departure’ for the rest of the clause (Halliday & Matthiessen, 2014). The Theme of a clause has thematic prominence by virtue of being the part of the message the speaker or writer has chosen to highlight (Halliday & Matthiessen, 2014). The rest of the clause is called the Rheme which is often where the New element is positioned. The New element provides information previously not known or unpredicted and is typically at the end of the clause (Halliday & Matthiessen, 2014, p. 116). In this sense, the Theme sustains continuity as the text unfolds and the New elaborates on the new information being provided (Martin & Rose, 2007, p. 192). Taking the *Lungs* radio ad from Example 3.1, Table 3.10 presents a Theme/Rheme analysis where the New element is bolded. The point of departure for each clause is often

words synonymous to smoking such as *every cigarette, every breath of tobacco smoke* and the New element is the various kinds of damage that smoking causes to the body realised by negative attitude.

| <b>Theme</b>                    | <b>Rheme</b>  |
|---------------------------------|---|
| every cigarette                 | is doing you <b>damage</b>  |
| lungs                           | are like <b>sponges with millions of tiny airsacs for transferring oxygen</b> |
| every breath of tobacco smoke   | attacks <b>the delicate membranes which separate them</b>                     |
| [every breath of tobacco smoke] | turning the tiny sacs into <b>larger, tar-rimmed holes</b>                    |
| no wonder smokers               | feel <b>short of breath</b>   |
| their lungs                     | are <b>rotting</b>  |
| every cigarette                 | is doing you <b>damage</b>  |

*Table 3.10. Example of Theme/New analysis of Lungs radio ad*

PERIODICITY analyses explore how ideational and interpersonal resources are packaged in texts in terms of what is highlighted and what is presented as novel information.

Complementing the New analysis in some cases are phonology analyses that show where the tonic prominence falls. Tonic prominence refers to “moments of prominence marked by either relatively rapid pitch changes or extended pitch intervals” (Halliday & Matthiessen, 2014, p. 24). In many instances the tonic prominence falls on the New element, further supporting the New analysis. This is explored in greater detail in Chapter 4.



The linguistic analytical tools introduced in this section are used throughout Chapters 4-7 to uncover the various meanings conveyed in the NTC to discourage smoking and promote quitting. Working together with language are other semiotic resources in the NTC that put forward the message that smoking is bad and quitting is good. This is explored in the next section.

### **3.2. Multimodal Discourse Analysis**

So far, we have explained the analytical approach taken by this study to analyse the various linguistic resources in the NTC materials. However, language is only one of the semiotic resources employed in the NTC, albeit arguably the most significant. As noted above, the materials in the campaign also draw on image, film, sound and colour in conjunction with language to produce multifaceted resources aimed at discouraging smoking.

To analyse these semiotic resources, we draw on Multimodal Discourse Analysis (hereafter MDA), informed by social semiotics and SFL. Multimodal Discourse Analysis refers to the analysis of texts that use multiple semiotic resources such as language, visual images, space, architecture etc. (O'Halloran, 2004). MDA has been developed to account for a range of semiotic resources other than language including but not limited to images (Kress & van Leeuwen, 2006), colour (Kress & van Leeuwen, 2002; Painter, Martin, & Unsworth, 2012), music (van Leeuwen, 1999), film (Bateman & Schmidt, 2012), sculpture (O'Toole, 2011) and space. This study takes the perspective argued by O'Halloran (2004) whereby language is not studied as an isolated phenomenon, but rather it is analysed and interpreted in conjunction with other semiotic resources which construe meanings simultaneously. In our analyses, semiotic resources are analysed both independently and together to draw parallels between

similar patterns observed across semiotic resources. In this section, a brief overview of the theories drawn upon for the analysis of static and moving images, colour, and sound resources is provided. As with the analytical tools for language, more detailed explanations of the frameworks used are provided as they become relevant through the thesis.

### *Images*

In their seminal book on images, Kress and van Leeuwen (2006) provide a metafunctional description of ‘visual grammar’ that encompasses images, magazine layout, scientific diagrams and more. In the same way that language can enact three types of meanings, Kress and van Leeuwen (2006) argue that so too can images and other semiotic modes. Re-interpreting the metafunctions from language, they propose the terms the representational, interactional and organisational meanings, to correspond to the ideational, interpersonal and textual metafunctions respectively (Kress & van Leeuwen, 2006). When exploring representational meanings we take into account the participants in the image and the activities they might be involved in; when focusing on interactional meanings, we are concerned with the relationships enacted by the participants – both the represented participants in the image, and the interactive participants i.e., the viewer (Kress & van Leeuwen, 2006); and the compositional element of visual grammar accounts for how the representational and interactional elements relate to each other and integrate into a meaningful whole (Kress & van Leeuwen, 2006).

Using Image 3.3 as an example, we briefly step through an illustrative image analysis. In the upcoming chapters, we will explain the resources in more detail, here we simply step through how an image analysis can be conducted from a metafunctional perspective.



Image 3.3. Don't Make Smokes your Story poster – guitar

Representationally, there are four participants in the poster realised by people entities, the father Ted, his wife and his children. Ted is an active participant and is playing the guitar while his older son is speaking to him, with his wife and younger son watching on. This process of interaction between participants is visually realised by vectors (Kress & van

Leeuwen, 2006). In this case, the vector that represents the participants as involved in a process of interaction is the eye gaze between the older son who is speaking, and the other three participants who are watching him. This vector realises a visual “I am listening to you speak”.

From an interactional perspective, the participants are highly involved with each other through their close proximity. This involvement is also present between the viewers and represented participants whose bodies are oriented towards the viewers. The system of INVOLVEMENT in images is the same as the system of INVOLVEMENT in language, in bringing the audience into the represented participants’ world to establish a relationship with the viewers (Kress & van Leeuwen, 2006). Furthermore, in a similar manner to language, interactional meanings can be construed through affect. In this case, the four participants express positive affect through their smiles, which suggests they are happy.

From a compositional perspective, the human participants have prominence since they take up most of the poster. Within the four represented participants, Ted has the most salience in Kress and van Leeuwen’s (2006) terms due to his centre placement and light falling on his face. This indicates he is meant to be the main focus of attention, and that his actions and emotions are what is to be primarily engaged with. Taken together with the language, the viewers can infer that the reason the family is happy is because Ted has quit smoking and he now has more time to spend with his family.

This metafunctional view of images will complement that for language, and will enable parallels to be drawn with how the campaign materials organise their message in both language and image, drawing on Martin’s (2001, 2008) work on image and language relations, and Economou’s (2009) work on affect in images.

## *Colour*

Enhancing the analysis of images, Kress and van Leeuwen (2002) and Painter et al. (2012) provide a semiotic account of colour, and similarly argue that colour can create meanings across all three metafunctions. Ideationally, colour can denote participants and classify them such that specific colours refer to specific things (Kress & van Leeuwen, 2002).

Interpersonally, colours can evoke emotion and enact relationships between the viewer and characters in the text (Painter et al., 2012). And textually, colour can create unity and cohesion (Kress & van Leeuwen, 2002). In this corpus, colour tends to be used interpersonally to elicit emotion, but is also at times used to create cohesion across texts.

Kress and van Leeuwen (2002) identify a number of scales to analyse colour. In this study, four scales are particularly relevant: saturation, value, hue and differentiation. Saturation refers to colour that is intensely saturated to colour that is soft and pale (Kress & van Leeuwen, 2002, p. 356). Painter et al. (2012) suggest that colours with full saturation often create excitement while colours that are less saturated tend to create gentler, more subdued feeling. The scale of value refers to “the grey scale, the scale from maximally light (white) to maximally dark (black)” (Kress & van Leeuwen, 2002, p. 355). The effect of the value scale is that colours that are lighter can often have a calming effect while darker colours tend to have a more gloomy effect (Painter et al., 2012). Hue is the scale from blue to red, interpreted as the range from cold to warm (Kress & van Leeuwen, 2002). Blues are associated with “cold, calm, distance, and backgrounding” (Kress & van Leeuwen, 2002, p. 357) while reds are associated with “warmth, energy, salience and foregrounding” (Kress & van Leeuwen, 2002, p. 357). Lastly, the differentiation scale runs from the use of one colour to the use of varied colours (Kress & van Leeuwen, 2002, p. 356). A lack of colour

differentiation can show restraint while high colour differentiation can construe exuberance and familiarity (Kress & van Leeuwen, 2002, p. 357).

In Image 3.3, colour is primarily used to evoke positive emotions. The poster has a high colour differentiation with highly saturated and bright colours creating a positive and warm atmosphere. The colours are also more light than dark so that we are able to see the participants' happy facial expressions clearly. The pink colour in their cheeks and lips also add to the warmth of the poster. Taken together with the image analysis above, the entire poster is radiating with positivity and inviting the viewer to build solidarity with the represented participants. As we will see in subsequent chapters, this solidarity building and positivity is important in encouraging smokers to think about how the lives of their family will improve when they quit smoking.

### *Film*

Moving images also construe the world (ideational), enact interpersonal relationships (interpersonal) and organise the film as a whole (textual) (Bateman & Schmidt, 2012). In our analyses of TV ads, we will draw on the works of Iedema (2011), Bateman and Schmidt (2012), Bateman (2013) and Bateman, Hiippala, and Wildfeuer (2017) when explaining the meaning making resources of the TV ads. In these frameworks, the shot is taken as the basic perceptual unit of analysis (Bateman et al., 2017; Bateman & Schmidt, 2012) where a shot is an uncut camera action (Iedema, 2011) shown here in [Video 3.1](#). The next unit of analysis relevant for the analyses of the TV ads, is the scene. A scene is made up of a series of shots unfolding in the same space and time (Iedema, 2011) illustrated in [Video 3.2](#) from the *Artery* TV ad. In this clip, these series of shots are set in the same space and time i.e. the kitchen.

In these analyses, we draw on descriptions of static images to analyse what is happening through facial expressions, colour and lighting (Kress & van Leeuwen, 2002, 2006; Painter et al., 2012). In addition, we focus on the use of camera distance, as it plays a key role in how many of the shots are presented. Distance refers to how much of the figure or human participant we can see in the frame (Bateman & Schmidt, 2011). These shot types range from extreme close-ups where the eyes are visible to extreme long shots where the setting the person is in is clearly visible (Bateman & Schmidt, 2011).

Image 3.4 illustrates a still shot of a blood vessel bursting in the eye, from the *Eye* TV ad. This is an extreme close-up and directs our attention to the bursting blood vessel.



*Image 3.4. Still shot of Eye TV ad*

### *Sound*

In addition to language, static and moving images, sound also enacts meanings in the TV and radio ads. In his seminal book on speech, music and sound, van Leeuwen (1999) argues that while sound can and does enact ideational, interactional and textual meanings, it is not “so clearly structured along metafunctional lines as language and visual communication” (p. 190). Sound is distinguished according to what is known as the ‘perspective hierarchy’.

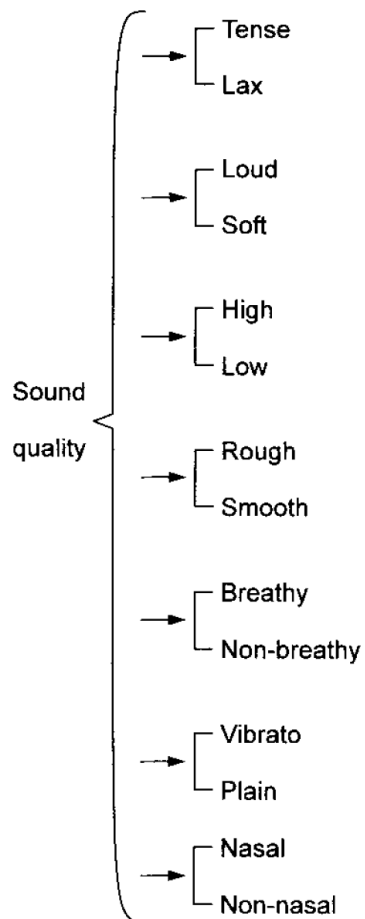
Perspective hierarchies refer to what sound element is placed in the foreground such as dialogue in a movie, and what is in the background, such background music in a movie (van Leeuwen, 1999, p. 14). Sounds can be divided into: Figure, Ground and Field, where:

- Figure refers to the focus of interest or the 'signal' sound, the sound we need to pay attention to; it is the most important (van Leeuwen, 1999, p. 23)
- Ground refers to the sounds in the setting or context, they are more discrete than Field sounds (van Leeuwen, 1999)
- Field refers to background sounds which are heard but not listened to (van Leeuwen, 1999, p. 16).

In the *Don't Make Smokes your Story* radio ad in [Audio 3.1](#), for example, the voiceover, Ted, is part of the Figure sounds as he recounts his smoking and quitting journey. Coming in and out of the Ground sounds, are his children laughing. And the music in the background is part of the Field sounds.

When analysing sounds, the voice quality of the speaker is at times relevant. While there are numerous parameters for describing voice quality, the two relevant are the scale running from rough to smooth, and the scale running from vibrato to plain. van Leeuwen (1999) describes a rough voice as hoarse and harsh while a smooth voice sounds clean, smooth and well-oiled. The dimension of vibrato/plain refers to sounds that are relatively flat and unwavering, to sounds that vibrate, waver or rumble. Taking the *Artery* radio ad as an example in [Audio 3.2](#), the voiceover has a rough and vibrating sounding voice which works with negative appreciation in language to build negativity. As we will see in the following chapters, sound often plays a complementary and supporting role to language and images, and thus is analysed only when relevant. Figure 3.11 presents the system network of sound quality.





*Figure 3.11. System network of sound (van Leeuwen, 1999)*

This section has introduced the MDA tools used in Chapters 4-7 to explore the multimodal meanings conveyed in the NTC across all three metafunctions. Taken together with language, we will see in Chapters 4-7 that the NTC enacts a wide variety of meanings to discourage smoking and promote quitting, through three sets of rhetorical strategies introduced in Section 3.4. First, Section 3.3 presents the methodological approach taken to analyse the NTC.

### 3.3. Positive Discourse Analysis

As introduced in Chapter 1, this study employs Positive Discourse Analysis as a broad methodological approach to deconstruct and analyse the NTC so as to inform the design of future public health campaigns. PDA was first coined by Martin (2002) as “a style of analysis that engages with processes of change that we sense make the world a better place” (p. 187). Martin (2004b) further describes PDA as a complementary approach to Critical Discourse Analysis (CDA). While CDA aims to expose hegemonic discourses (van Dijk, 1996), PDA takes a step beyond analysis as critique, to analysis as informing design – or, in Martin’s (2004) terms, “constructive activity” (p. 6). Moreover, Martin (2004b) argues that to effect change, we need to privilege the analysis of positive discourses, discourses of how people get together to achieve social change in ways that enable them to be used as models to inform design and intervention. This is echoed by Macgilchrist (2007) who states we should analyse discourses we support in addition to “discourse we wish to criticise” (p. 74).

Since Martin’s (2002) first call to action, there have been a growing number of studies that have taken a PDA approach to research. In the field of eco-linguistics, for example, there is a move to privilege discourses that promote sustainability, respect for the environment, and practices that benefit both humans and our environment (C. Knight, 2010; Stibbe, 2005, 2014, 2017). In the political sphere, discourse analyses are starting to prioritise speeches that engender hope and empowerment (Nartey, 2020; Nartey & Ernanda, 2020; Su, 2016).

Similarly, media discourse research is focusing on media reporting with a positive orientation instead of just those reporting on negative events (Abasi & Akbari, 2013; Bednarek & Caple, 2010; Macgilchrist, 2007).

The above studies demonstrate how PDA can be used in discourse analysis, but PDA can also be used to analyse whole interventions. Bartlett (2012) documented how the Makushi

Amerindian of Guyana were able to make their voices heard and have autonomy in discussions with the local government and various NGOs in relation to bio-sustainability in the region. Significantly for this thesis, Bartlett (2012) argued that to understand the discourse practices of the Makushi and how they were able to retain their identity and autonomy during these proceedings, it was important to understand the socio-cultural and political contexts. Another example of prioritising interventions that can lead to social change is in the context of teacher training. Rogers and Wetzel (2013) use a PDA orientation to analyse the discourse of a preservice teacher on culturally relevant teaching. They analysed both the training as a whole and conducted text analyses of the training sessions to understand how the preservice teacher negotiated agency for herself “as an agent of social change” (Rogers & Wetzel, 2013, p. 78). In recent times, Mahboob (2020a, 2020b) has used PDA in the classroom to guide students to develop interventions to address issues in their communities. In this work, students were taught to deconstruct and analyse examples of projects that were successful and worked jointly with relevant stakeholders to design materials for intervention. Students received regular feedback from their teachers and worked with their respective local communities to implement their materials. These three examples reflect the approach taken for this study in analysing the NTC as a whole intervention through discourse analyses of campaign materials.

While these studies privilege positive discourses, they raise challenges for PDA research. Firstly, while PDA studies tend to provide detailed text analyses, they often struggle to link these analyses to text’s broader historical, socio-political contexts (Bartlett, 2012). Bartlett (2012; 2017) has critiqued Martin’s work for not contextualising texts/discourse. Bartlett (2017) further argues that successful design relies on three levels of analysis: the conditions under which existing discourse is possible; the current social context within which the

existing discourse is situated including “the ways of speaking of the various speakers” (p. 141); and a consideration of the zone of proximal development on the basis of these. He also calls for a need to analyse texts from a socio-semiotic perspective and not purely from a linguistic perspective (Bartlett, 2017) as many of the aforementioned studies have done. Furthermore, there is the need to design interventions based on these analyses, in order to create positive change (Martin, 2004b).

For the NTC, this means that each campaign material needs to be seen in relation to all other campaign materials and the wider NTC. However, the analytical tools that are currently available cannot necessarily reach between the ‘micro’ analysis of text and the macro-analysis of the whole campaign. Therefore, what is needed are tools that can ‘zoom’ between analyses of the whole NTC and individual texts (and everything in between) – and importantly these tools must be able to be linked with the linguistic and multimodal tools mentioned above. Moreover, these tools need to transcend individual texts and contexts, so they can be applied more broadly to other texts and contexts to inform future interventions.

In the next section, we explore a set of rhetorical strategies developed for the purposes of both analysis and design. We step through how these strategies can be used to analyse individual texts in the NTC and analyse the large-scale development and change of the NTC over time. In the final chapter, we will show how such strategies can also be used to design materials aimed at excessive sugar consumption.

### **3.4. Rhetorical strategies**

As presented in Sections 3.2 and 3.3, various SFL and MDA frameworks are used to analyse individual texts in the NTC. As mentioned above, while these allow for fine-grained text

analyses, these frameworks alone do not allow for the analysis of large-scale change and development over 22 years. What is needed are analytical tools that can be used for both broad overviews and more fine-grained text analyses (Figure 3.12), and everything in between.



*Figure 3.12. Micro, macro, and large-scale analysis*

Therefore, a set of three contrasting rhetorical strategies were developed to move between macro scale analyses, micro scale analyses, and everything in between. These rhetorical strategies arose inductively through the linguistic and multimodal analysis of materials as patterns that recurred across the campaigns and campaign materials, while also resonating with insights from the literature review. These three sets of strategies have been designed to both link with the specific linguistic and multimodal analytical tools outlined through this chapter, as well as aid the interpretation of these analyses in terms of the development of the NTC and its effects. As such, Chapters 4-6 are each organised around a distinct set of strategies – Chapter 4 explores the strategies of negativity and positivity; Chapter 5 explores

the strategies of technicalising and personalising; and Chapter 6 explores the strategies of actual and possible behaviour, before exploring how these strategies come together across the NTC in Chapter 7.

In this section, we present a brief overview of each of these three sets of strategies, and how the SFL and MDA tools are applied to explore what semiotic resources (language, static and moving images, and sound) construe these strategies in campaigns and campaign materials.

### *Negativity/positivity*

The first set of strategies developed are negativity/positivity. Broadly speaking, negativity describes materials and campaigns that generally focus on the negative consequences of smoking. This includes the diseases smoking causes, and the pain these diseases inflict on families who watch the smoker suffer and die. Contrastingly, positivity describes materials and campaigns that generally centre on the positive effects of quitting. This includes the positive effects of quitting on the body, and the positive effects on the overall wellbeing of the smoker and their families. The semiotic resources that construe negativity and positivity tend to be consistent within a campaign, such that campaigns can be relatively clearly classified as either negative or positive.

### Negativity

In language, negativity tends to be construed through negative APPRAISAL resources, and especially negative appreciation and negative affect. Negative appreciation is regularly used to evaluate the damage and diseases caused by smoking such as *lung cancer*, *heart disease* and *kidney cancer*. On the other hand, negative affect tends to construe the smoker's suffering and pain from smoking related-illnesses, and the families' distress of watching the smoker suffer, through items such as *pain*, *suffering*, *distress*. Negativity is also construed by

giving *smoking* and its synonyms such as *cigarette*, *tobacco smoke*, *cigarette smoke* agency in being able to cause damage to the smoker’s body. Table 3.11 illustrates how this is the case through a NUCLEAR RELATIONS analysis.

| Agent         | Process | Medium                        |
|---------------|---------|-------------------------------|
| tobacco smoke | damages | your body’s natural defences. |

Table 3.11. Example of agency in negative campaigns

Overall, language organises negative campaigns to highlight the negative impacts smoking has on smokers and their families, with these negative APPRAISAL resources regularly placed in higher order Themes. This is illustrated in Example 3.2 where the HyperTheme and HyperNew both construe negative appreciation, highlighted yellow.

[HyperTheme]

Every cigarette is doing you damage.

Lungs are like sponges with millions of tiny airsacs for transferring oxygen.

Every breath of tobacco smoke attacks the delicate membranes which separate them; turning the tiny sacs into larger, tar-rimmed holes.

No wonder smokers feel short of breath;

their lungs are rotting.

[HyperNew]

Every cigarette is doing you damage.

Example 3.2. HyperTheme/HyperNew analysis of Lungs radio ad

Negativity is construed in images in a similar way to language. Images of gruesome body parts, and images portraying sad people are regularly used to depict the negative effects of smoking, illustrated in Table 3.12. These correspond to negative appreciation and negative affect, respectively (Economou, 2009). In the image on the right, the dark colour palette also serves to construe negativity, and adds to the sadness on the woman’s face. Negativity is organised in the images in Table 3.12 through the prominence given to the diseased foot and sad woman.

|  |   |
|--|---|
| <p><i>Peripheral Vascular Disease 2012</i><br/>cigarette pack</p>  | <p>Still shot from <i>Stop before the Suffering Starts</i> campaign</p>             |
| <p>Front of pack</p>  <p>Back of pack</p>  |  |

Table 3.12. Negative attitude in images

Sound resources play a supporting role in the NTC as these strategies are not always enacted through sound alone, but through the interaction with the other semiotic resources. Sound construes negativity in TV and radio ads primarily through the voice quality of the voiceover. This is illustrated in the *Artery* radio ad in [Audio 3.2](#), where the voiceover’s voice is rough and grainy.

### Positivity

While negativity in language is construed through negative attitude, positivity is conversely construed through positive attitude. Positive appreciation is used to evaluate quitting as



*important* and that it will *improve* the health of smokers. Families of smokers also express their happiness (affect) towards the smoker quitting smoking, such as *mum and the aunts are happy that I quit*. Positivity is additionally construed by giving smokers agency, positioning them as Agents of positive change. This is illustrated in Table 3.13.

| <b>Agent</b> | <b>Process</b> | <b>Medium</b>     | <b>Circumstance</b> |
|--------------|----------------|-------------------|---------------------|
| <b>you</b>   | choose to quit | <b>smoking</b>    |                     |
| <b>you</b>   | choose to get  | <b>the toxins</b> | out for your system |

*Table 3.13. Example of agency in positive campaigns*

Similarly to how language construes positivity, images also construe positivity by evoking positive attitude. This is generally realised through positive affect and eye gaze. For example, in Image 3.5, the pregnant woman is smiling, suggesting she is happy, and her eye gaze is directed towards her belly, indicating the baby is the trigger for her happiness. This happiness is also reinforced by the light and warm colours to create a positive atmosphere.



Image 3.5. Quit for You, Quit for Two print ad – Hayley

In sound resources, positivity can be construed through sounds that evoke positive feelings such as children's laughter in the *Don't Make Smokes your Story* radio ad in [Audio 3.1](#).

Positivity can also be construed by certain features of voice quality such as a soothing and high voice illustrated in the *Quit for You, Quit for Two* TV ad [Audio 3.3](#).

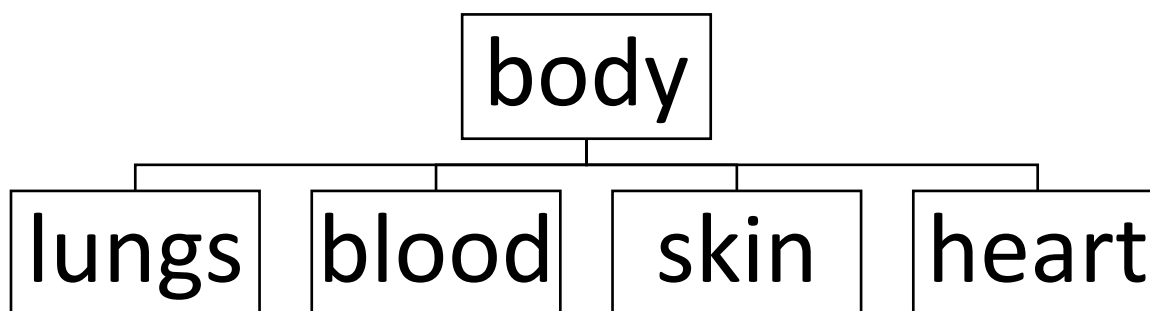
### *Technicalising/personalising*

The second set of strategies are termed technicalising and personalising. Broadly speaking, technicalising describes materials and campaigns that tend to focus on how smoking/quitting affects the body in a relatively technical way. In terms of smoking, it depicts the damage

smoking causes to the body, and in terms of quitting, it highlights the body's ability to repair itself after quitting smoking. Technicalising campaigns tend to be aimed at the general public and utilise more technical terminology to educate the public of the dangers of smoking and the health benefits of quitting. On the other hand, the strategy of personalising describes campaigns that orient smoking/quitting to a specific target audience. These campaigns tend to feature a member of the target audience in a way that literally puts a face to smoking or quitting. Campaigns that personalise smoking or quitting also place an emphasis on the social impacts of smoking/quitting and regularly feature children. In a similar manner to negativity/positivity, technicalising and personalising are also consistent within campaigns, such that campaigns can generally be classified as technicalising or personalising. While being independent of negativity and positivity, they do however, interact with negativity and positivity to create different meanings.

### Technicalising

Technicalising is enacted in language by focusing on body parts realised by thing entities which then serve to build large taxonomies of the body. Figure 3.13 presents a compositional taxonomy of the body parts that are repaired after quitting smoking. In addition, technicalising is enacted through activity entities such as *smoking* and the various diseases and damage smoking causes such as *blocked blood vessels*.



*Figure 3.13. Compositional taxonomy of the body repairing itself after quitting*

Technicalising is further construed in campaigns by setting up sequences either of smoking leading to worsening damage and disease, or of quitting leading to positive benefits to the body. An implication sequence of the worsening damage of smoking is illustrated in Table 3.14. Technicalising campaigns additionally have a tendency to be monoglossic by establishing facts about smoking or quitting, for example, *smoking narrows and blocks blood vessels*.

|   |
|---|
| <b><i>Peripheral Vascular Disease 2012 cigarette pack</i></b>                   |
| smoking   |
| ^   |
| narrows and blocks blood vessels  |
| ^   |
| reducing blood and oxygen supply to your extremities (feet, legs, hands, arms). |
| ^ resulting in  |
| pain, open sores that don't heal and gangrene.                                  |
| ^ leads to  |
| amputations.  |

*Table 3.14. Implication relations of Peripheral Vascular Disease 2012 cigarette pack*

In this way, technicalising is organised in language by highlighting what happens to the body in relation to smoking or quitting. This is highlighted in the Theme/Rheme analysis in Table 3.15, where *smoking* is given thematic status. As we will see in Chapter 5, in many ways, technicalising is often characterised by a lack of explicit attitudinal meanings.

|              |                             |
|--------------|-----------------------------|
| smoking      | damages your gums and teeth |
| <b>Theme</b> | <b>Rheme</b>                |

*Table 3.15. Theme/Rheme analysis of Gums and Teeth 2012 cigarette pack*

Thing entities in images are also a prominent feature of technicalising campaigns. Examples include the diseased and damaged body parts on cigarette packs illustrated in Table 3.16. The

thing entities in the images of technicalising campaigns can build compositional taxonomies of the body parts that are damaged by smoking. However, campaigns that technicalise quitting tend not to construe thing entities in images; rather they are only construed in language, as will be shown in Chapter 5.

| <i>Emphysema 2012 cigarette pack</i>  | <i>Gums and Teeth 2012 cigarette pack</i>  |
|---|--|
| <p>Front of pack</p>  <p>Back of pack</p>  <p>Brand Variant</p> <p>25</p> | <p>Front of pack</p>  <p>Back of pack</p>  <p>Brand Variant</p> <p>25</p> |

Table 3.16. Thing entities in images of technicalising campaigns

In the Federal campaigns, there are no TV ads that technicalise quitting, but there are multiple that technicalise smoking. In moving images, TV ads tend to be organised around the various organs or limbs that are damaged by smoking, with extreme close-ups regularly used to fix the audience's attention on the damage or disease, illustrated in Image 3.6. In TV ads and radio ads alike, technicalising can further be construed through diegetic sound, such as the sound of someone coughing or wheezing because of a smoking-related illness or disease.



*Image 3.6. Still shot of Eye TV ad*

### Personalising

While technicalising is construed in language through thing and activity entities, personalising campaigns tend to be construed by people entities. These people entities are often named in language through a number of naming resources including first names (*Rosie, Mick*), pronouns (*I, we*) and kin terms (*pop, mum*). They can also build classification taxonomies of people who are negatively impacted by smoking or positively impacted by quitting. Figure 3.14 presents a classification taxonomy of the people in Ted's life who have been impacted by both his smoking and his quitting.

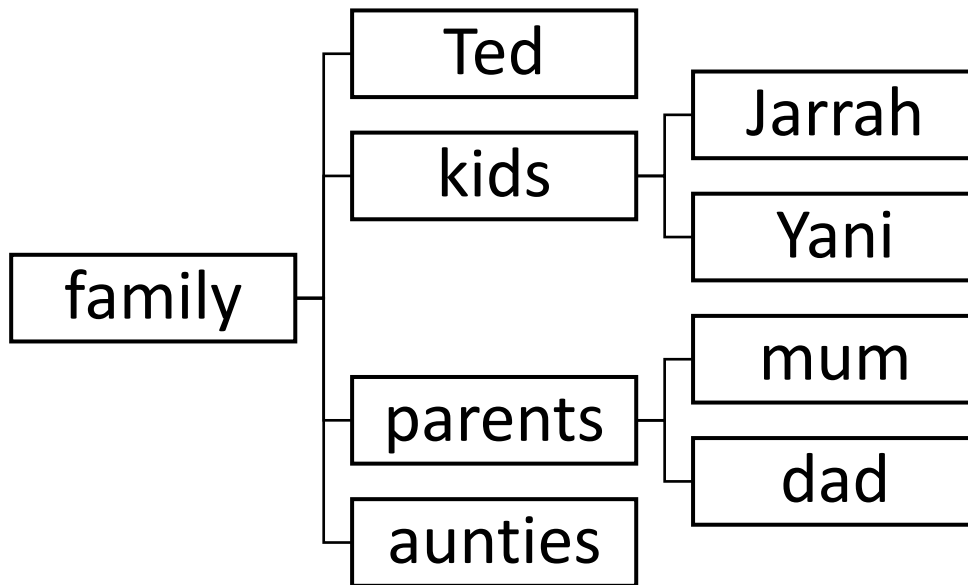


Figure 3.14. Classification taxonomy in personalising campaign

Personalising campaigns tend to allow in the voices of various people to tell their experience of smoking/quitting. For example, *Rosie next door had a stroke, and doctors say it was from smokes*. The language in personalising campaigns is also organised around people, with people entities regularly placed in thematic position highlighting how smoking/quitting affects people. This is illustrated in Table 3.17.

|              |                                 |
|--------------|---------------------------------|
| I'           | 've had my battles with smokes. |
| My lungs     | got pretty bad,                 |
| I            | could hardly breathe            |
| <b>Theme</b> | <b>Rheme</b>                    |

Table 3.17. Theme/Rheme analysis in personalising campaign

These language features that construe personalising parallel those in images. In images, personalising tends to be characterised by an abundance of human participants, as opposed to their body part. This is illustrated in Table 3.18 from still shots of personalising campaigns.



The image on the left portrays the terror smoking-related illnesses can cause smokers, and the image on the right depicts how quitting can make families happy.

| <i>Stop before the Suffering Starts</i>   | <i>Don't Make Smokes your Story</i>  |
|---|--|
|  |  |

*Table 3.18. Human participants in images in personalising campaigns*

Personalising can also be construed through sound resources. This includes the voiceover having a relatively high and highly modulated pitched voice in [Audio 3.1](#). It further includes the voiceover being a smoker/ex-smoker instead of an external voiceover.

*Actual/Possible behaviour*

The last set of strategies developed to analyse the NTC is termed actual/possible behaviour. Actual behaviour describes campaigns and materials that tend to construe smoking/quitting and their consequences as currently happening or previously happened – that is, in terms of the actuality of behaviour. Possible behaviour on the other hand describes materials that tend to construe smoking/quitting and their consequences in terms of possibilities, habitualities, or future behaviours. While the previous two sets of strategies tend to be consistent within campaigns, actual and possible behaviour tend to often shift within materials, often to create contrast between an actual and a possible behaviour. Furthermore, the semiotic resources that construe actual and possible behaviour need to be understood in relation to how they work

together. There tend not to be specific semiotic features that construe actual and possible behaviour, instead it is how various semiotic resources interact that construe smoking or quitting as an actual or a possible behaviour. Furthermore, unlike the previous sets of strategies, actual and possible behaviour cannot be construed in images alone, instead we interpret an image as actual or possible based on the linguistic features.

### Actual behaviour

Actual behaviour is construed in campaigns through a series of interacting linguistic features including tense, aspect, Circumstances and realis affect. Past tense and present-in-present tense tend to generally construe actual behaviour, since the past tense points to a behaviour that has happened, and the present-in-present tense ties a behaviour to a particular instant in time. Actual behaviour also tends to be construed through the imperfective aspect in non-finite verbal groups which refer to a process as actual and present (Halliday & Matthiessen, 2014). This is discussed in detail in Chapter 6. Examples are illustrated in Table 3.19, where the past tense and present-in-present tense are highlighted pink.

|                                 |  |
|---------------------------------|--|
| <b>Past tense</b>               | Cynthia, a smoker for 25 yrs, <b>had</b> a stroke aged 39. |
| <b>Present-in-present tense</b> | Every cigarette <b>is doing</b> you damage.                |
| <b>Imperfective aspect</b>      | Within seconds of <b>lighting up</b>                       |

*Table 3.19. Examples of language features construing actual behaviour*

In certain clause types, simple present tense can also construe a behaviour as actually happening at a specific point in time, such as *I **feel** short of breath*, denoting that the shortness of breath is actually happening. This is explained in detail in Chapter 6. Other resources that indicate actual behaviour often include Circumstances of Location such as ***Within seconds** of lighting up, chemicals from tobacco smoke are damaging your artery walls*

– *making them sticky*, and realis affect, which relates to feelings of un/happiness, in/security and dis/satisfaction with an existing state, such as *I feel sad all the time*.

### Possible behaviour

Possible behaviour is also construed by interacting language features such as tense, aspect, imperative mood, Circumstances and irrealis affect. The future tense and imperative mood construe a process as non-actualised, but with the possibility of occurring at some point in time, highlighted red in Table 3.20.

|                        |  |
|------------------------|--|
| <b>Future tense</b>    | In 1 year a pack-a-day smoker <b>will save</b> over \$8300 |
| <b>Imperative mood</b> | <b>quit</b> before getting pregnant                        |

*Table 3.20. Examples of language features construing possible behaviour*

The simple present tense can also construe possible behaviour in material and behavioural clauses such as in *smoking **causes** most cases of emphysema*. In this case, the simple present tense indicates a habitual action that continues into the future. In addition, Circumstance of Location readily construe a behaviour and/or its consequences as yet to occur such as in ***I week** your sense of smell improves*. Furthermore, irrealis affect can construe a future state, realised by desiderative mental processes (Martin, 2017). An example includes *I **want** to be there for my wife and kids* when Ted explains why he quit smoking. Linguistic features realising possible behaviour are regularly given thematic status, illustrated in Table 3.21. We will discuss the distinction between Marked and Unmarked Theme in Chapters 5 and 6.

|                          |                       |                          |
|--------------------------|-----------------------|--------------------------|
| The day you stop smoking | your body             | starts to repair itself. |
| In five days,            | most nicotine         | has left your body.      |
| <b>Marked Theme</b>      | <b>Unmarked Theme</b> | <b>Rheme</b>             |

*Table 3.21. Example of Theme/Rheme analysis construing possible behaviour*

These sets of rhetorical strategies are actualised in materials and across campaigns through a range of linguistic, imagic and sound resources. While being independent of each other, they regularly interact to influence each other such that the particular combinations for any material will affect the language and broader semiotic choices made.

These rhetorical strategies and their combinations will be explored in Chapters 4 to 6. Using the SFL and MDA frameworks, the campaigns and materials will be deconstructed to understand how these rhetorical strategies work to build the messaging of the NTC and to identify the semiotic features that organise each strategy. Throughout, we take a metafunctional approach to explore how each strategy is construed ideationally, interpersonally, and textually in language and image, and to some extent in sound. In Chapter 7, we bring together the strategies to track the large-scale development and changes of the NTC across its lifetime. We also explore how these strategies combine in specific patterns to discourage smoking and encourage quitting. Before presenting the analyses and results, we outline the data collected for this study.

### **3.5. Data**

As stated previously, this study analyses the Federal campaigns of the NTC rather than State-based campaigns. This is because the Federal campaigns have the most breadth in terms of

being able to reach a large number of Australians. The materials for on-going campaigns were collected from the Australian Government Health website, and materials from previous campaigns were collected from Australia's National Library Archives which archives over 8 billion websites (Trove, 2021). The websites are saved as snapshots in the way they appeared at a specific point in time (Trove, 2021). This made it possible to "go back in time" and access materials from past campaigns that are no longer available on the current health website. The majority of campaigns featured TV, radio and print advertisements, most of which were retrieved from the National Library Archives. Appendix A provides a full list and links of all materials analysed for the study.

### **3.6. Chapter summary**

This chapter has presented the theoretical and methodological foundations of this study. SFL is the main theoretical framework used to analyse the NTC materials since it has been developed to study language in social context and has been applied to a range of health research. PDA has in turn been chosen as the broad methodological approach to deconstruct and analyse the NTC so that it can inform the design of future public health campaigns. This chapter has also introduced three sets of rhetorical strategies to link detailed text analyses to broader large-scale development and progress across 22 years.

The data collected for this study will be analysed in the following four chapters by employing the strategies introduced in Section 3.4. These strategies have been developed to move between more nuanced text analyses and broader overviews of the NTC. Chapters 4 to 6 will explore the strategies and how they are actualised in campaigns through various language, image (static and moving) and sound resources. Chapter 4 will present the analysis of

negativity/positivity, Chapter 5 will present the analysis for technicalising/personalising, and Chapter 6 will present the analysis for actual/possible behaviour. This is followed by Chapter 7 which uses these same strategies to explore the development of the NTC from 1997 to 2019. Chapter 7 will also show that these strategies tend to combine in patterns to approach smoking and quitting from different perspectives. Finally, in Chapter 8, we will argue that smoking rates declining in Australia can be interpreted in terms of Australians bonding with the negative values established around smoking over 22 years.

# CHAPTER 4

## NEGATIVITY/POSITIVITY

Chapter 3 presented the theoretical foundations and methodology of the study including three sets of rhetorical strategies developed to analyse the NTC: negativity/positivity, technicalising/personalising and actual/possible behaviour. As discussed in Chapter 3, these rhetorical strategies were developed as a way to address a challenge PDA faces with linking detailed text analyses to broader contexts. These strategies can be used to analyse the NTC from a micro level within individual materials, a macro level across campaigns, through to a large-scale level over 22 years. In this chapter, and Chapters 5 and 6, we present the analyses of each set of strategies in individual materials and across campaigns. Each set of strategies is independent and generalises across multiple semiotic resources including language, static and moving images, and sound. Their actualisation in a given text may be different depending on the situation and other interacting strategies.

In this chapter we present the results of negativity and positivity. As outlined in Chapter 3, broadly speaking, negativity describes campaigns that tend to focus on the negative effects of smoking while positivity describes campaigns that tend to centre on the positive effects of quitting. Negative campaigns rally negative attitudes around smoking to encourage smokers to quit smoking or to prevent non-smokers from taking up smoking. This is achieved through negative evaluations and through setting up smoking as an Agent which causes damage and disease. On the other hand, positive campaigns rally positive attitudes towards quitting to

encourage smokers to quit smoking for their health, and not take up smoking again. In this case, it is positive evaluations towards quitting and “quitters” that establish positive attitudes towards quitting.

In this chapter we explore how the strategies of negativity and positivity are actualised metafunctionally in campaign materials across language, static and moving images, and sound by using the SFL-derived frameworks introduced in Chapter 3. In particular, it will be shown that negativity and positivity are most strongly enacted interpersonally to create either negative attitudes and feelings towards smoking, or positive attitudes and feelings towards quitting. Section 4.1 steps through the strategy of negativity and Section 4.2 steps through positivity. Both draw on materials from different campaigns.

#### 4.1. Negativity

Negativity describes campaigns that generally focus on the negative consequences of smoking, by portraying the diseases and illnesses it causes, and the toll these illnesses and diseases can have on people’s lives and livelihoods. In this section we step through the materials of the campaign *Every Cigarette is Doing You Damage* to illustrate how negativity is actualised metafunctionally across language, image (static and moving) and sound. Examples from other negative campaigns are also brought forward to show that these semiotic realisations are consistent across campaigns.

The *Every Cigarette is Doing You Damage* campaign was the first campaign of the NTC launched in 1997. It targeted smokers aged between 18 and 40 years of age and featured TV ads illustrated in the compilation in [Video 4.1](#), radio ads and print ads. The campaign aimed to evoke visceral reactions towards the gruesome images of the damage caused by



smoking (Department of Health and Ageing, 2004). Taking a metafunctional approach to analyse the semiotic resources that construe negativity in the campaign materials, we will see that negativity is organised through each metafunction, however, in many ways, the ideational and textual metafunctions both serve the interpersonal metafunction.

#### 4.1.1. How is negativity construed ideationally?

From an ideational perspective, negativity is construed in the voiceover of the TV and radio ads by explaining how smoking causes damage and disease to the body. This damage is then depicted representationally in the visuals of the TV ads, and in various background sounds.

##### *Language*

In the TV and radio ads, negativity is actualised through the relationships between elements in the clause, namely, the relationship between who/what is Agent and who/what is Medium. We explore this through the analytical framework of NUCLEAR RELATIONS. As explained in Chapter 3, NUCLEAR RELATIONS is part of the ideational metafunction and is concerned with the relationship between elements in the clause centrally involved with the process (Martin & Rose, 2007). NUCLEAR RELATIONS are based on the essential experiential pattern of people and things participating in processes (Martin & Rose, 2007); this model has recently been expanded by (Hao, 2015, 2018). For the NUCLEAR RELATIONS analysis, we draw on the works of Martin and Rose (2007) and Halliday and Matthiessen (2014).

In the *Every Cigarette is Doing You Damage* campaign we are mainly concerned with ‘doing’ clauses; that is, clauses that indicate who is doing what to whom, realised by Agent + Process + Medium. More specifically, we are concerned with ‘doing’ clauses with *smoking*, *cigarette*, *tobacco smoke* etc. as Agents. In the campaign, *smoking*, *cigarette* and *tobacco*

*smoke* are regularly the Agents in the clause causing damage to the Mediums, who tend to be *you*, referring to smokers, or various diseases caused by smoking. This is exemplified by the *Lungs* ([Audio 4.1](#)) and *Tumour* ([Audio 4.2](#)) radio ads. The NUCLEAR RELATIONS analyses of the two radio ads are presented in Tables 4.1 and 4.2 respectively where the first column shows the Agents bolded in red, followed by the Process in the second column, and the Mediums bolded in blue in the third column. The Agents, ***every cigarette***, ***every breath of tobacco smoke*** and ***chemicals in tobacco smoke*** are causing damage to the Mediums, ***you***, ***the delicate membranes which separate them***, ***tiny airsacs (in the lungs)***, ***your body's natural defences***, ***us*** and ***P53 (a gene that protects us from lung cancer)***. These Agent + Medium relations contribute to construing negativity ideationally by informing audiences of the range of damage smoking causes to smokers and their bodies.

| Agent                                  | Process  | Medium  | Range   | Circumstance                 |
|--|----------|---|---------|------------------------------|
| <b>Every cigarette</b>                 | is doing | <b>you</b>  | damage. |                              |
| <b>Every breath of tobacco smoke</b>   | attacks  | <b>the delicate membranes which separate them</b> |         |                              |
| <b>(every breath of tobacco smoke)</b> | turning  | <b>the tiny sacs</b>                              |         | into larger tar-rimmed holes |
| <b>Every cigarette</b>                 | is doing | <b>you</b>  | damage. |                              |

Table 4.1. NUCLEAR RELATIONS analysis of *Lungs* radio ad

| Agent                  | Process  | Medium                               | Range   |
|------------------------|----------|--------------------------------------|---------|
| <b>Every cigarette</b> | is doing | <b>you</b>                           | damage. |
| <b>tobacco smoke</b>   | damages  | <b>your body's natural defences.</b> |         |

|                                   |          |  |         |
|-----------------------------------|----------|--|---------|
| <b>Chemicals in tobacco smoke</b> | attack   | <b>P53</b> [gene that protects us from lung cancer]. |         |
| <b>Every cigarette</b>            | is doing | <b>you</b>   | damage. |

Table 4.2. NUCLEAR RELATIONS analysis of Tumour radio ad

In Tables 4.1 and 4.2 and in the other TV and radio ads of the *Every Cigarette is Doing You Damage* campaign, *smoking* itself is seldom an Agent. The campaign materials rarely say that smoking causes this disease or that damage, though this comes later in the *Health Warnings* campaign launched in 2006. Instead, in the *Every Cigarette is Doing You Damage* campaign, it is made explicit that it is *tobacco*, *cigarettes* and *chemicals in tobacco* that cause damage and disease as opposed to smoking other products. Eventually, these words become synonymous with smoking such that they are automatically associated smoking. As we will see, however, these ideational meanings are all geared towards creating interpersonal meanings, namely invoking negative attitudes. As Lemke (2005) argues “ideational choices of lexis... inevitably contribute to the attitudinal stance of a text to its audience” (p. 92). We will show how this is achieved in Section 4.1.2.

### *Image*


The main components of the *Every Cigarette is Doing You Damage* campaign were the hard-hitting TV ads launched in various stages from 1997 to 2005. Parallel to the Agent + Medium relations from the linguistic analysis, images within TV ads in turn construe visually the damage that smoking causes to various areas of the body. To analyse the TV ads, we draw on the works of Iedema (2011), Bateman and Schmidt (2012), (Bateman, 2013) and Bateman et al. (2017). As presented in Chapter 3, the frameworks used to analyse static and moving

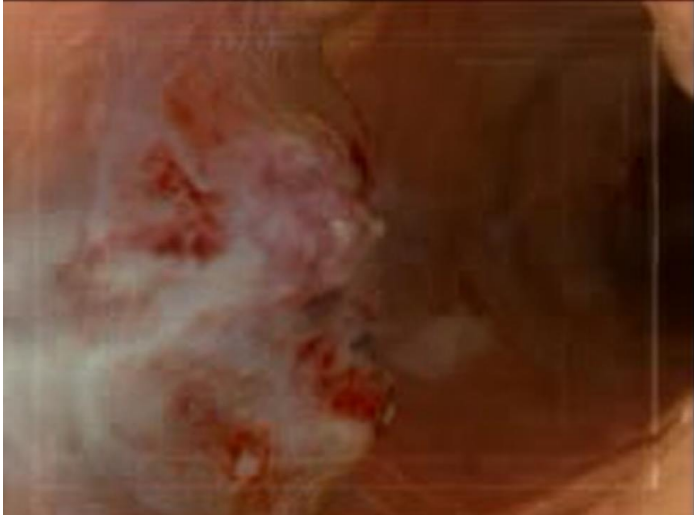

images are based on Multimodal Discourse Analysis, derived from Systemic Functional Linguistics.

When analysing TV ads, the shot is taken as the basic perceptual unit of analysis (Bateman et al., 2017; Bateman & Schmidt, 2012) where a shot is an uncut camera action (Iedema, 2011).

As mentioned in Chapter 3, the next unit relevant for the analyses of TV ads is the scene which is made up of a series of shots unfolding in the same space and time (Iedema, 2011).

Scene 1 of the TV ads start by introducing the smokers in various settings (this can be seen in the compilation of all TV ads in this campaign in [Video 4.1](#)). Scene 2 generally follows the cigarette smoke into the smoker’s throat and down the windpipe. The camera then cuts to scene 3 which depicts the range of damage that smoking causes as the chemicals from cigarettes travel inside the body. This is illustrated in Table 4.3 where viewers are shown fatty deposits being squeezed out of an aorta, a tumour forming inside the lungs and a blood vessel bursting inside the eye. These images are not simply showing us what the effects of smoking looks like ideationally, they are also invoking negative attitude just as the language does (discussed in more detail in Section 4.1.2).

| TV ad         | Shot | Still image  |
|---------------|------|--|
| <i>Artery</i> | 15   |  |

|               |   |   |
|---------------|---|---|
| <i>Tumour</i> | 8 |   |
| <i>Eye</i>    | 8 |  |

*Table 4.3. Shots of damage caused by smoking*

#### **4.1.2. How is negativity construed interpersonally?**

It is the interpersonal metafunction that does most of the work to construe negativity. In this sense, the ideational meanings enacted are all geared towards creating interpersonal meanings. Section 4.1.3 also demonstrates that the textual metafunction serves to bring salience to these interpersonal meanings.

Interpersonally, negativity is built through the construal of negative feelings and attitudes, that as is shown in Chapter 8, eventually lead to negative values being established around smoking. Linguistically, this is realised through various resources of APPRAISAL (Martin & White, 2005). In the images, this is actualised through the gruesome images and the use of dark colour palettes. The various sound resources also serve to evoke negative feelings to reinforce what is being said in the language and shown in the images.

### *Language*

In the TV and radio ads, negativity is regularly construed by the voiceover through explicit negative evaluations, implicit evaluations set up through Agent + Medium relations, and through the amplification of these negative evaluations. The APPRAISAL framework is used to examine how these linguistic resources construe negativity. First, the attitude analyses are presented, followed by the graduation analyses.

As presented in Chapter 3, APPRAISAL is a discourse semantic resource for construing interpersonal meanings and is concerned with the enactment of social relationships in texts (Martin & Rose, 2007; Martin & White, 2005). The APPRAISAL framework is concerned with how speakers and writers negotiate social relationships by telling people how they feel about people and things, how committed they are about their feelings and how strongly/not strongly they feel about people and things (Martin & White, 2005). These make up the three interacting domains of APPRAISAL: **attitude**, **engagement** and **graduation** (Martin, 2004a).

In the construal of negativity, it is the domain of attitude and graduation that are relevant. Within attitude, there are three ways of mapping feelings in discourse: affect, judgement and appreciation. **Affect** is concerned with construing emotional reactions (Martin, 2004a), **judgement** is concerned with evaluating behaviour and **appreciation** is concerned

with evaluating things, text/process and phenomena (Martin, 2004a). And as mentioned in Chapter 3, attitude in texts can be positive or negative and they can be inscribed whereby the evaluation is explicit, or invoked where the evaluation is more implicit. Invoked attitude can be provoked through metaphors, flagged through graduation and afforded through field-specific ideational lexis. In the *Every Cigarette is Doing You Damage* campaign ads, and indeed in all negative campaigns, invoked attitude is more common than inscribed attitude. This invoked attitude tends to be afforded in the texts by providing explanations of why smoking is bad so that audiences come to negatively evaluate smoking.

Another resource used to construe interpersonal meanings in negative campaigns is by graduating evaluative items. Graduation resources amplify evaluative items, therefore emphasising the position being put forward (Martin & White, 2005). Within the system of graduation there are two kinds of resources for amplification: force and focus (Martin & Rose, 2007). Force is used to turn the volume up or down, while focus is concerned with making something inherently non-gradable, into a gradable expression by either softening or sharpening it (Martin & Rose, 2007). In the NTC, there are rare instances of focus, instead evaluative items tend to be amplified through force.

### Attitude

The most explicit means of construing negativity interpersonally is through inscribed negative attitude. In the TV ads, the voiceover often construes negativity through inscribed negative appreciation of the detrimental effects of smoking on the body. Examples of this include negative actions such as *damage*, *kill*, *blind* and *paralyse*, observed in the *Brain* TV ad ([Video 4.2](#)). The attitude analysis is illustrated in Table 4.4 where appreciation is highlighted yellow and negative polarity is highlighted red. The action *damage* in the campaign slogan is found at the start and end of all TV ads, and in the radio ads.

Transcript of *Brain TV*:

“Every cigarette is doing you damage. Smoking creates blood clots which can cause strokes. Some strokes kill, blind or paralyse, others you don’t even know you’re having. This is the result of a minor stroke in a smoker, aged 38. Every cigarette is doing you damage.”

| Appraiser | Appraising item | Target  | Type                       | Polarity |
|-----------|-----------------|---------|----------------------------|----------|
| voiceover | damage          | you     | appreciation <sup>11</sup> | negative |
| voiceover | kill            | strokes | appreciation               | negative |
| voiceover | blind           | strokes | appreciation               | negative |
| voiceover | paralyse        | strokes | appreciation               | negative |
| voiceover | damage          | you     | appreciation               | negative |

Table 4.4. Inscribed negative appreciation of actions in *Brain TV* ad

As Table 4.4 shows, in these ads, negative attitude is also inscribed through linking smoking to diseases. Examples include *strokes* in the *Brain TV* ad illustrated Table 4.5, and *cancer* in the *Tumour TV* ad ([Video 4.3](#)) illustrated in Table 4.6. This linking is achieved through *smoking, tobacco smoke* and other synonymous words being the targets of these negative evaluations shown in Tables 4.5 and 4.6.

---

<sup>11</sup> Affect highlighted pink

Judgement highlighted blue

Appreciation highlighted yellow

Positive polarity highlighted green

Negative polarity highlighted red



| <b>Appraiser</b> | <b>Appraising item</b> | <b>Target</b> | <b>Type</b>  | <b>Polarity</b> |
|------------------|------------------------|---------------|--------------|-----------------|
| voiceover        | strokes                | smoking       | appreciation | negative        |
| voiceover        | strokes                | smoking       | appreciation | negative        |

*Table 4.5. Inscribed negative appreciation by linking smoking with diseases in Brain TV ad*

Transcript of *Tumour* TV ad:

*“Every cigarette is doing you damage. New research shows how tobacco smoke attacks a vital gene which protects lung cells from cancer. One damaged cell is all it takes to start lung cancer growing. Every cigarette is doing you damage.”*

| <b>Appraiser</b> | <b>Appraising item</b> | <b>Target</b> | <b>Type</b>  | <b>Polarity</b> |
|------------------|------------------------|---------------|--------------|-----------------|
| voiceover        | cancer                 | tobacco smoke | appreciation | negative        |
| voiceover        | lung cancer            | tobacco smoke | appreciation | negative        |

*Table 4.6. Inscribed negative appreciation by linking smoking with diseases in Tumour TV ad*

The diseases in Tables 4.5 and 4.6 also realise medical terms. In the medical field itself, these terms may be used technically without any sense of inscribed attitude, since terms belonging to specific fields mainly carry ideational meanings in these fields (Martin, 2002). However, the TV ads along with all materials analysed in this study are for the consumption of the general public, which means it is useful to analyse these terms not from a medical perspective but from a more everyday interpretation of a general viewer. For lay readers these technical terms likely have attitudinal meanings (Martin, 2002). This not only means these terms do not hold the technical meaning as they do for doctors and other medical professionals, it also means they are likely to be read as explicitly evaluative. For this reason, throughout this study, such terms are coded as realising explicit evaluation of inscribed attitude.

While inscribed attitude stand out in the text, it is in fact indirect evaluations realised through afforded attitude that are more prototypical in the campaign materials. These afforded attitudes are regularly set up in the TV ads and other negative campaigns through Agent + Medium relations presented in Section 4.1.1. The NUCLEAR RELATIONS analyses above demonstrated that negativity was realised ideationally by setting up agentive constructions where *smoking, tobacco smoke, cigarettes* are positioned as Agents causing damage to the body, the Medium. These Agent + Medium relations also implicitly realise interpersonal meanings by linking *smoking*, the Agent, with disease/death caused to smokers and their bodies. As a result, *smoking* and its synonyms, gain negative evaluation for causing damage, disease and death.

Taking the *Brain* TV ad as an example, Table 4.7 illustrates the Agent + Medium relations where *every cigarette* and *smoking* are Agents and *you, blood clots* and *strokes* are the Medium, caused by the Agents.

| Agent                      | Process   | Medium             | Range   |
|----------------------------|-----------|--------------------|---------|
| <b>Every cigarette</b>     | is doing  | <b>you</b>         | damage. |
| <b>Smoking</b>             | creates   | <b>blood clots</b> |         |
| <b>which [blood clots]</b> | can cause | <b>strokes.</b>    |         |
| <b>Every cigarette</b>     | is doing  | <b>you</b>         | damage. |

Table 4.7. Agent + Medium relations of Brain TV ad

This sets up *every cigarette* and *smoking* as affording negative attitude because they cause people damage and disease. Conducting a full attitude analysis of the *Brain* TV ad, including the action and all medical terms and afforded attitude arising from Agent + Medium

relations, in Table 4.8, it becomes apparent just how evaluatively laden these ads are. Over time, these negative attitudes targeted at smoking accumulate into negative values around smoking such that it becomes almost unquestionable that smoking is bad. This will be discussed in detail in Chapter 8.

Transcript of *Brain TV* ad:

*“Every cigarette is doing you damage. Smoking creates blood clots which can cause strokes. Some strokes kill, blind or paralyse, others you don’t even know you’re having. This is the result of a minor stroke in a smoker, aged 38. Every cigarette is doing you damage.”*

| <b>Appraiser</b> | <b>Appraising item</b> | <b>Target</b> | <b>Type</b>  | <b>Invocation</b> | <b>Polarity</b> |
|------------------|------------------------|---------------|--------------|-------------------|-----------------|
| voiceover        | every cigarette        |               | appreciation | afford            | negative        |
| voiceover        | damage                 | you           | appreciation |                   | negative        |
| voiceover        | smoking                |               | appreciation | afford            | negative        |
| voiceover        | blood clots            | smoking       | appreciation |                   | negative        |
| voiceover        | strokes                | smoking       | appreciation |                   | negative        |
| voiceover        | some strokes           | smoking       | appreciation |                   | negative        |
| voiceover        | kill                   | smoker        | appreciation | afford            | negative        |
| voiceover        | blind                  | smoker        | appreciation |                   | negative        |
| voiceover        | paralyse               | smoker        | appreciation |                   | negative        |
| voiceover        | minor stroke           | smoking       | appreciation |                   | negative        |
| voiceover        | every cigarette        |               | appreciation | afford            | negative        |

Table 4.8. Full attitude analysis of *Brain TV* ad

While in the *Every Cigarette is Doing You Damage* campaign, negative attitude towards smoking tends to be realised through negative appreciation, negative attitude towards smoking can also be realised through negative affect where negativity combines with the strategy of personalising. However, this occurs less frequently. In the *Breathless* TV ad ([Video 4.4](#)) of the *Stop before the Suffering Starts* campaign, for example, the voiceover uses inscribed and invoked negative affect to explain what it feels like to suffer from emphysema. The smoker (and reader) is triggered to feel fear by imagining what it would be like to suffer from emphysema, which is also supported in the visuals of the TV ad, as is discussed below. The only positive attitude is afforded by positioning death as a positive alternative to suffering from emphysema. Examples are provided in Table 4.9, with affect highlighted pink and positive polarity highlighted green.

Transcript of *Breathless* TV ad:

*“Imagine your body being buried while you’re still in it. Imagine the horror. You’d struggle but struggling only makes it worse. Imagine your whole life reduced to thinking about your next breath. Eventually, you’d welcome death. But an emphysema sufferer can go on living like this for years. If you smoke, death could be the least of your worries. Stop, before the suffering starts.”*

| Emoter | Appraising item                                    | Trigger                     | Type                 | Invocation | Polarity |
|--------|--|-----------------------------|----------------------|------------|----------|
| smoker | your body being buried<br>while you're still in it | suffering from<br>emphysema | affect <sup>12</sup> | provoke    | negative |
| smoker | horror   | suffering from<br>emphysema | affect               |            | negative |
| smoker | struggle   | suffering from<br>emphysema | affect               |            | negative |
| smoker | welcome  | suffering from<br>emphysema | affect               |            | positive |
| smoker | sufferer   | suffering from<br>emphysema | affect               |            | negative |

Table 4.9. Attitude analysis of Breathless TV ad

### Graduation

In addition to negative campaigns being highly attitude laden, these attitudes are frequently amplified to position smoking as being undeniably bad. For example, the slogan *every cigarette is doing you damage* is repeated at the start and at the end of all TV ads, and in many of the radio ads and print ads. This repetition intensifies the message, re-emphasising it

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<sup>12</sup> Affect highlighted pink

Judgement highlighted blue

Appreciation highlighted yellow

Positive polarity highlighted green

Negative polarity highlighted red

over and over (Martin & White, 2005). More specifically, the repeated use of the quantification *every*, across all these materials works to make it unquestionable that there is no safe level of tobacco smoke. This is illustrated in Table 4.10 of the *Artery* TV ad.

Another graduation resource used regularly in the *Every Cigarette is Doing You Damage* campaign is to quantify the age of smokers who have died from smoking-related diseases. These smokers tend to be young, and so raises the force of smoking as something that can kill smokers of any age, also shown in Table 4.10.

Transcript of *Artery* TV ad:

*“Every cigarette is doing you damage. This is part of an aorta, the main artery from the heart. Smoking makes artery walls sticky and collect dangerous, fatty deposits. This much was found stuck to the aorta wall of a smoker, aged 32. Every cigarette is doing you damage.”*

| <b>Appraiser</b> | <b>Graduating item</b> | <b>Target</b> | <b>Type of graduation</b> | <b>Sub-type</b> |
|------------------|------------------------|---------------|---------------------------|-----------------|
| voiceover        | <b>every</b>           | cigarette     | force, raise              | quantification  |
| voiceover        | <b>this much</b>       | fatty deposit | force, raise              | quantification  |
| voiceover        | aged <b>32</b>         | a smoker      | force, lower              | quantification  |
| voiceover        | <b>every</b>           | cigarette     | force, raise              | quantification  |

*Table 4.10. Graduation analysis of Artery TV ad*

Another sub-category of graduation is intensification which is involved in the degree of intensity of processes and qualities (Martin & White, 2005, p. 141). One means of realising intensification is by repeating items that have similar semantic meanings (Martin & White,

2005, p. 144). In the NTC, there are regular listings of threes called rhetorical triplets which strengthen the attitude being put forward by accumulating meaning (Martin, 2004a, p. 330). This is true for the *Brain TV* ad above with the listing of *kill, blind or paralyse* is used to amplify the devastating impacts of strokes caused by smoking. This listing resource is more commonly found in the *Health Warnings 2006/2012* campaigns, another negative campaigns. This is observed in Image 4.1 below in the listing of the negative consequences of blood vessel damage and narrowing: *more heart attacks, repeat heart attacks and angina*.

Front of pack

Back of pack



Image 4.1. Heart Disease 2012 cigarette pack

Negative attitude and upscaling graduation resources couple together in the *Every Cigarette is Doing You Damage* campaign to create a negative prosody towards the devastating consequences of smoking by setting up an intensification prosody. An intensification prosody involves amplifying meanings in texts by either turning up the volume or turning down the volume (Martin & White, 2005, p. 20). In the campaign, an intensifying prosody is set up

through intensifying graduation by listing the damage and disease caused by smoking. This is done within individual texts as shown above in the *Artery* TV ad, across all materials within the *Every Cigarette is Doing You Damage* campaign, and across all negative campaigns to intensify negative attitude towards smoking. This intensification prosody of the negative consequences of smoking is further reinforced by inscribed attitude of medical terminology. This is supported by Martin and White (2005) who state that inscribed attitude are deployed in texts to reinforce a prosody (p. 64). However, as illustrated previously, it is invoked attitudes that make a bigger splash in the campaign, and so also reinforce this negative intensification prosody of the negative consequences of smoking. Over the life of the NTC, these couplings of attitude and graduation establish negative values toward smoking and aligns Australians to reject smoking because of these negative consequences associated with it. This is explored and discussed in more detail in Chapter 8.

### *Images and sounds*

Working together with language, negativity is also construed interactionally in the visuals and sounds of the ads. In the visuals of the TV ads, interactionally, negativity is conveyed using dark colour palettes and through the APPRAISAL resources of appreciation and affect. In the sounds of the TV and radio ads, negativity is conveyed through the rough and vibrating voice quality of the voiceover. For the image analyses, we draw on Martin and White (2005), Economou (2009), Kress and van Leeuwen (2002) and Painter et al. (2012), and for the sound analyses, we draw on the work of van Leeuwen (1999).

Colour creates meanings simultaneously across all metafunctions (Kress & van Leeuwen, 2002). In the campaign materials of the NTC however, colour primarily creates interpersonal meanings, and to some extent textual meanings. To analyse how colour construes negativity in the TV ads, we use the scales of saturation, value, and differentiation. As explained in



Chapter 3, saturation refers to variations between colours that are intensely saturated to colours that are soft and pale (Kress & van Leeuwen, 2002, p. 356). Colours with full saturation can create excitement while colours that are less saturated can create a gentler feeling but can also create a more subdued and flat feeling (Painter et al., 2012). The scale of value refers to “the grey scale, the scale from maximally light (white) to maximally dark (black)” (Kress & van Leeuwen, 2002, p. 355). Colours that are lighter can have a calming effect while darker colours can have a gloomier effect (Painter et al., 2012). Lastly, the differentiation scale runs from the use of one colour to the use of varied colours (Kress & van Leeuwen, 2002, p. 356).

The TV ads overwhelmingly have dull saturation of colour, darker value and low colour differentiation, as illustrated by the *Artery* TV ad in [Video 4.5](#) and the *Lung* TV ad in [Video 4.6](#). Taken together, these colour choices create a subdued and sombre feeling. Coupled with this, what is represented in the TV ads themselves evoke feelings of disgust. This is most evident in the shots showing gunk being squeezed out of the aorta in the *Artery* TV ad ([Video 4.5](#)) and the tar condensing inside the lungs in the *Tar* TV ad ([Video 4.7](#)).

In addition to using dark colour palettes to convey negativity, APPRAISAL resources in images also construe negativity through the attitude sub-system of appreciation and affect. The sub-systems of appreciation and affect can further be divided into more categories. Turning first to appreciation; appreciation “can be divided into our ‘reactions’ to things...their ‘composition’...and their ‘value’” (Martin & White, 2005, p. 56). In the case of the construal of negativity in campaigns, it is the category of reaction that is prominent in images. “Reaction is related to affection” (p. 57) and therefore can be oriented to convey interpersonal meanings (p. 57). This is the case for the visuals of the TV ads which serve to shock us and evoke negative feelings towards the gruesome images. In this way, these

negative reactions to the images parallel the inscribed negative evaluations of damage and disease in the language of the voiceover illustrated in Table 4.8 above.

Moreover, negativity is also conveyed in the visuals of TV ads through negative facial expressions realised by affect: unhappiness. This visual representation of negative affect is more readily seen in the *Breathless* TV ad of the *Stop before the Suffering Starts* campaign. More specifically, the category of affect conveyed in the TV ad is a surge of unhappiness. In [Video 4.4](#), there is a sudden look of horror on the smoker's face at the start of the ad as he jolts awake and realises he cannot breathe. The look of terror on his face continues as he struggles to breathe throughout the video. In addition to his facial expression depicting fear and terror, affect can be also invoked through what Economou (2009) calls “agentive material action” (p. 115). In the case of the TV ad, negative affect is also invoked through the man jerking his hand around and clawing at the wall at 0:18 seconds, indicating a state of panic. And as his wife wakes up, she also looks miserable at having to watch her husband suffer. The negative affect in the images parallel the negative affect in the voiceover presented in Table 4.9 above. Economou (2009) also argues that such intense affect can also trigger the same emotion in the viewers referred to as shared affect. As mentioned in Chapter 2, evoking a feeling of disease or death in the viewer is a key aim of fear appeals.

Supporting the construal of negativity in the language and visuals, the voice quality of the voiceover also construes negativity. van Leeuwen (1999) identifies various dimensions to analyse voice and sound quality. In this section, the dimensions relevant for the analysis of the voiceover are: rough/smooth and vibrato/plain. A rough voice is hoarse and harsh while a smooth voice sounds clean, smooth and well-oiled. Vibrato refers to sounds that are grainy, vibrating, wavering or rumbling while; a plain voice/sound is one that is stable and unwavering. As shown in the *Artery* radio ad ([Audio 4.3](#)), the voiceovers in the *Every*

*Cigarette is Doing You Damage* campaign tend to have a rough and grainy voice.

Furthermore, in the background of the TV and radio ads, we can hear gurgling and metallic sounds. The grainy voice and gurgling and metallic sounds also evoke negative emotions, which couple with the negative attitude in language and images directed towards smoking and its deadly consequences. Together, these semiotic choices in the TV and radio ads create a feeling of dark apprehension.

When these multimodal interpersonal realisations of negativity are taken together, there is a multiplication of interpersonal meanings in the *Every Cigarette is Doing You Damage* campaign. Lemke (2005) refers to his as “*multiplying* the set of possible meanings that can be made” (p. 92). The graphic images show audiences what the actual damage from smoking looks like, which would not be possible through language alone. The language specifies in horrible detail what is happening, and the colour and sound quality create a gloomy and darkened atmosphere. Together these semiotic resources reinforce and multiply the interpersonal meanings being conveyed in the campaign.

#### **4.1.3. How is negativity construed textually?**

Adding to the ideational and interpersonal actualisation of negativity, this section explains how negativity is construed textually/organisationally across language and image by giving textual salience and prominence to the interpersonal semiotic resources of negativity.

##### *Language*

So far, we have seen that negativity in language is realised through Agent + Medium relations of smoking causing damage, disease, and death, and through APPRAISAL resources. To analyse how negativity is organised textually, we will focus on PERIODICITY at the

paragraph level. As noted in Chapter 3, PERIODICITY is part of the textual metafunction functioning at the level of discourse semantics. It is concerned with information flow and how meanings are packaged to make it easier to understand what is being said (Martin & Rose, 2007). To analyse how information is organised within a paragraph, we look at how the HyperTheme/HyperNew relates to the rest of the clause (Martin & Rose, 2007).

The slogan *every cigarette is doing you damage* is routinely positioned as both HyperTheme and HyperNew. This is illustrated in Example 4.1 below for the analysis of the *Lungs* radio ad. The HyperTheme contains the negative afforded attitude *cigarette*, the inscribed attitude *damage* and the graduating item *every*. This negative evaluation colours the rest of the radio ad by explaining that every cigarette causes damage by destroying airsacs in the lungs. The HyperNew then reinforces the position put forward in the HyperTheme i.e. *every cigarette is doing you damage*. This is a typical construction of the ads of the *Every Cigarette is Doing You Damage* campaign. Having these APPRAISAL resources in higher level Theme and New positions foreground them as being important and “puts them in position to prosodically colour the evaluation of the events in their domain” (Martin, 2004a, p. 339). In this case, it is creating a prosody of negativity.

[HyperTheme]

Every cigarette is doing you damage.

Lungs are like sponges with millions of tiny airsacs for transferring oxygen.

Every breath of tobacco smoke attacks the delicate membranes which separate them; turning the tiny sacs into larger, tar-rimmed holes.

No wonder smokers feel short of breath;

their lungs are rotting.

[HyperNew]

Every cigarette is doing you damage.

*Example 4.1. HyperTheme/HyperNew analysis of Lungs radio ad*

In addition to the HyperTheme and HyperNew foregrounding interpersonal meanings at the level of discourse semantics, interpersonal meanings are also made salient at the clause level. To explore how this occurs, we draw on Theme and New in SFL. In SFL, Theme falls under the system of THEME, and New falls under the system of INFORMATION. For the analysis of negativity, it is useful to analyse Theme and New together as waves of information in a similar manner to Martin and Rose (2007).

The Theme of the clause comes at the start of the clause and sustains continuity as the text unfolds and can be realised ideationally, interpersonally or textually (Martin, Matthiessen and Painter, 2010, p. 22). The ideational Theme, also known as the topical Theme, expresses ideational meanings and can be realised by a Participant, Circumstance or Process (Martin et al., 2010, p. 24). The interpersonal Theme expresses interpersonal meanings and can be realised by a MOOD element such as the Finite or Adjunct (Martin et al., 2010, p. 25). And

lastly, textual Themes “give thematic prominence to textual elements with a linking function” (Martin et al., 2010, p. 25).

The New elaborates on the new information being provided (Martin & Rose, 2007, p. 192). The News can pattern in discourse through negative APPRAISAL resources (Martin & Rose, 2007, p. 192). This is the case for negative campaigns where negative APPRAISAL resources are chosen as New to elaborate on the negative consequences of smoking. This is illustrated in the *Lungs* radio ad, presented in Table 4.11 with the Theme in the first and second columns and the New bolded in the third column. The topical Themes in the second column tell the viewer that what is about to come will be related to smoking. The News in the third column elaborate on smoking through patterns of negative appraisal such as *damage*, *feel short of breath* and *are rotting*, which in turn construe negativity. In the following table, the News are analysed for their unmarked patterning as the final element in the clause (this will be coupled with an intonation analysis below).

| Interpersonal Theme | Ideational Theme                   | New   |
|---------------------|------------------------------------|---|
|                     | every cigarette                    | is doing you <b>damage</b>  |
|                     | lungs                              | are like <b>sponges with millions of tiny airsacs for transferring oxygen</b> |
|                     | every breath of tobacco<br>smoke   | attacks <b>the delicate membranes which separate them</b>                     |
|                     | [every breath of tobacco<br>smoke] | turning the tiny sacs into <b>larger, tar-rimmed holes</b>                    |
| no wonder           | smokers                            | feel <b>short of breath</b>   |
|                     | their lungs                        | are <b>rotting</b>  |
|                     | every cigarette                    | is doing you <b>damage</b>  |

*Table 4.11. Theme/New analysis of Lungs radio ad*

These patterns of negative APPRAISAL as News are further supported by an intonation analysis. In spoken English, there is a continuous rising and falling of pitch with “moments of prominence marked by either relatively rapid pitch changes or extended pitch intervals” (Halliday & Matthiessen, 2014, p. 24). These moments of prominence are called **tonic prominence** “and the element having this prominence is the **tonic** element” such as the tonic syllable (Halliday & Matthiessen, 2014, p. 116). The tonic element in turn “is said to be carrying information focus” (p. 116) which is often the New since the New gives us new information. Therefore, the New can be recognised in spoken language by the element in

discourse that has tonic prominence. In the *Every Cigarette is Doing You Damage* campaign, the main tonic often falls on graduated and evaluated words.


In the *Lungs* radio ad in [Audio 4.1](#), the tonic often falls on the New elements which are often negatively evaluated items. For example, in the nominal group *larger tar-rimmed holes* at 0:15-0:18 seconds, the tonic syllable falls on *holes* which affords negative attitude since lungs are not meant to have holes. Furthermore, there is an emphasis on each syllable in the graduated item *larger* which flags negative attitude, and the negatively inscribed item *tar-rimmed*. This emphasis on the syllables brings salience to the negative evaluations. There is also another tonic syllable on the negatively inscribed New element *rotting* at 0:21 seconds, which is the information focus. There is also an instance of Marked New in the negatively inscribed item *attacks* at 0:11 seconds, which is also the tonic. This is a Marked New as it does not fall at the end of the clause. Moreover, tonic prominence is also given to the graduated item *every* in the slogan *every cigarette is doing you damage*, which reinforces that there is no safe level of tobacco as seen in the APPRAISAL analysis in Section 4.1.2.

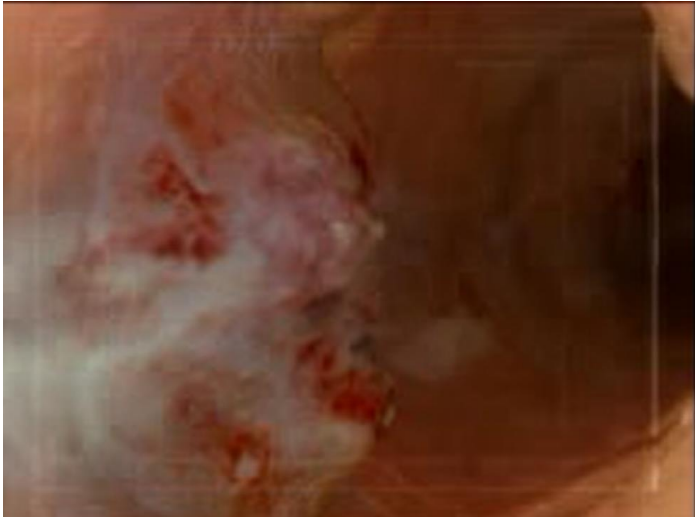

Taking all the PERIODICITY analyses together, it becomes clear that negativity is highlighted and foregrounded in the TV ad voiceover at both the paragraph and clause level. The HyperTheme of the voiceover is laden with negative evaluation, starting with the graduated invoked evaluation *every cigarette* and ending with the inscribed attitude *damage* which functions as the New element of the clause. This slogan is repeated at the start and end of the TV to drive home the message that there is no safe level of tobacco smoke. Moreover, tonic prominence tends to fall on negatively evaluated or graduated words, bringing attention to these words, and thus propagating the negative prosody of smoking causing damage.



### *Image*

In terms of the organisational meanings in the visuals of the TV ads, negativity is similarly construed through what is made salient and prominent in the visual shots. Close-ups and extreme close-ups bring salience to what is represented in the shots, thereby making the audience pay attention to what is being represented (Bateman & Schmidt, 2012). In the TV ads, the close-ups and extreme close-up work to denaturalise the various damaged and diseased organs and make the damage and disease salient, illustrated in Table 4.12. These close-ups and extreme close-ups function almost like the intensification resource of graduation, amplifying the horrible images we are seeing. This again, adds to the interpersonal meanings being created: smoking has negative attributes because it causes damage, disease and death.

| TV ad         | Shot | Still image  |
|---------------|------|--|
| <i>Artery</i> | 15   |  |

|               |   |   |
|---------------|---|---|
| <i>Tumour</i> | 8 |   |
| <i>Eye</i>    | 8 |  |

*Table 4.12. Extreme close-ups of damaged organs in Every Cigarette is Doing You Damage campaign*

The textual metafunction highlights and reinforces the interpersonal meanings being put forward in the campaign. In language, negative attitudes are placed in higher level Themes and News to colour the rest of the text. This is reinforced by the intonation pattern where the tonic regularly construes the News as negatively evaluated or graduated items. This is coupled with the images in the TV ads where close-ups and extreme close-ups make it impossible to escape the negative and gross images being depicted.

This negativity is not the only evaluative orientation that the National Tobacco Campaign construes, however. Toward the later years of the campaign, there is a marked shift toward the addition of positivity, especially surrounding quitting. The following section demonstrates how this positivity is established, and how it is contrasted with the negativity prevalent through the earlier years of the NTC.

## 4.2. Positivity

While the rhetorical strategy of negativity centres on portraying the negative consequences of smoking, the strategy of positivity highlights the positive outcomes of quitting. The analyses reveal that positive campaigns promote quitting as an alternative to smoking that will bring smokers good health and wellbeing. To illustrate how positivity is construed in campaigns across a range of semiotic resources, the *Quit for You, Quit for Two* campaign which ran from 2012 to 2015 is used as an example. Examples from other campaigns are also brought in when needed.

The *Quit for You, Quit for Two* campaign was part of the *More Targeted Approach* campaign that targeted pregnant women and their partners to quit smoking. The campaign highlighted the importance of quitting smoking to give unborn babies a healthy start to life (Department of Health, 2018c). It was relaunched in 2017 due to its initial success and at the time of writing, is on-going (Department of Health, 2018c). The campaign features a TV ad, radio ad and various print ads. To illustrate how positivity is enacted multimodally, this section will present analyses of a variety of campaign materials. It will be shown that similarly to negativity, this strategy primarily does interpersonal work, with the textual and ideational metafunctions supporting the meanings made in the interpersonal metafunction.

#### 4.2.1. How is positivity construed ideationally?

From an ideational perspective, positivity conveys what happens as a result of quitting.

Unlike the ideational construal of negativity, positivity is primarily construed ideationally through language, with images and sounds typically not showing options for representational work. Instead, the images and sounds serve an interpersonal function, which is shown in Section 4.2.2.

The language in the campaign ads explain the benefits of quitting. This is once more explored through a NUCLEAR RELATIONS analysis and an analysis of activity at the level of field. We first turn to the relationship between the clausal elements in the analysis of the *Quit for You, Quit for Two* TV ad ([Video 4.8](#)) in Table 4.13. Bolded in red, pregnant women, realised by the pronoun *you*, are regularly Agents capable of preventing smoking from harming their unborn baby such as [*you*] *lowering the risk of miscarriage and serious health problems for your baby*. The Mediums in the Agent + Medium relations, bolded in blue, are often the result of pregnant women quitting smoking, such as *improve the flow of oxygen around your body and to your baby*. The pregnant woman as Agent affects the Medium where the Medium by way of qualification involves the baby's health.

However, the Agents and Mediums alone do not give us a full picture of who is benefitting from quitting in the same manner that the Agent + Medium relations tell us who is affected by smoking in negative campaigns. In positive campaigns, it is often the Circumstances that provide us with this information. As mentioned in Chapter 3, in addition to the Medium and Agent being involved with the Process, other participants including Circumstances and Beneficiaries are also involved with the Process. Circumstances give us additional information about the Process. The most commonly used in this campaign are Circumstances of **Cause: Behalf** which indicate, “on whose behalf or for whose sake the action is

undertaken” (Halliday & Matthiessen, 2014, p. 322). The NUCLEAR RELATIONS analysis in Table 4.13 revealed a number of Circumstances of behalf bolded in purple. These Circumstances tell us that when the agentive pregnant woman chooses to quit smoking, she is not only quitting for her ‘sake’ but for her unborn baby’s ‘sake’ as well. This is regularly observed in the campaign title and slogan *quit for you, quit for two*. In this way, the Circumstance of Behalf works in a similar way to a Beneficiary since the pregnant woman and her unborn baby both benefit from quitting. As we will see in Section 4.2.3, these Circumstances of Behalf are made prominent through the voiceover’s intonation, which highlights the importance of quitting smoking during pregnancy for both mums and babies.

Transcript of *Quit for You, Quit for Two* TV ad:

*“When you’re pregnant, everything you do is for two; you’re sleeping for two, breathing for two. Everything you do is for you and for your baby. So, when you choose to quit smoking and get the toxins out of your system, you’re not just quitting for you, you’re quitting for two. You’ll improve the oxygen flow around your body and to your baby, lowering the risk of miscarriage and serious health problems for your baby. And because it’s twice as important to get the help you need, Quitline has people to support you, whether you’re already pregnant or planning to be. There’s even a free App packed with games and baby fun to get you through the cravings. Phone Quitline today and ask about: quit for you, quit for two”.*

| Medium                   | Agent            | Process               | Medium            | Circumstance       | Circumstance         | Range    |
|--------------------------|------------------|-----------------------|-------------------|--------------------|----------------------|----------|
| when <b>you</b>          |                  | 're                   |                   |                    |                      | pregnant |
| <b>everything you do</b> |                  | is                    |                   | <b>for two</b>     |                      |          |
| <b>you</b>               |                  | 're sleeping          |                   | <b>for two</b>     |                      |          |
| <b>[you]</b>             |                  | 're breathing         |                   | <b>for two</b>     |                      |          |
| <b>everything you do</b> |                  | is                    |                   | <b>for you and</b> | <b>for your baby</b> |          |
|                          | when <b>you</b>  | choose to quit        | <b>smoking</b>    |                    |                      |          |
|                          | And <b>[you]</b> | [choose to] get       | <b>the toxins</b> | out of your system |                      |          |
| <b>you</b>               |                  | 're not just quitting |                   | <b>for you</b>     |                      |          |
| <b>you</b>               |                  | 're quitting          |                   | <b>for two</b>     |                      |          |

|                 |              |             |  |  |  |  |
|-----------------|--------------|-------------|--|--|--|--|
|                 | <b>you</b>   | 'll improve | <b>the flow of oxygen<br/>around your body<br/>and to your baby</b>                      |  |  |  |
|                 | <b>[you]</b> | lowering    | <b>the risk of<br/>miscarriage and<br/>serious health<br/>problems for your<br/>baby</b> |  |  |  |
| <b>it</b>       |              | 's          |  |  |  | twice as<br>important to get<br>the help you<br>need |
| <b>Quitline</b> |              | has         |  |  |  | people to help<br>you                                |

|                    |  |                    |  |                |  |          |
|--------------------|--|--------------------|--|----------------|--|----------|
| whether <b>you</b> |  | 're                |  | <b>already</b> |  | pregnant |
| <b>Or [you]</b>    |  | 're planning to be |  |                |  | pregnant |

*Table 4.13. NUCLEAR RELATIONS analysis of Quit for You, Quit for Two TV ad*



In addition, positivity is also realised linguistically through unfolding activity series at the level of field. This is explored through the perspective of dynamic relations. As presented in Chapter 3, field, tenor and mode are the three register variables positioned above the ideational, interpersonal and textual metafunctions respectively (Doran & Martin, 2021).

Register functions at a more abstract level of analysis “since it is concerned with patterns of discourse patterns” (Martin & White, 2005, p. 27). Dynamic relations are concerned with the unfolding activity series in a text. “An unfolding series of activities can be related in one of two ways, through *implication* or *expectancy*” (Doran & Martin, 2021, p. 110). Implication relations imply a contingent relation between activities in a text.

In the *Quit for You, Quit for Two* TV ad, there is an implication series whereby the agentive pregnant woman chooses to quit smoking which then leads to toxins being removed from her body. This in turn leads to the improvement of oxygen around her body and to her baby and then to the lowering of the various risks associated with smoking during pregnancy. This activity series analysis is illustrated in Table 4.14, where the ^ symbol is used to represent the implication relation. And the + sign signifies that the activities are not sequenced in time.

|  |
|--|
| <b><i>Quit for You, Quit for Two TV ad</i></b>   |
| When you choose to quit smoking  |
| + (and)  |
| get the toxins out of your system  |
| ^ (leads to)   |
| you'll improve the oxygen flow around your body and to your baby                       |
| ^ (leads to)   |
| lowering the risk of miscarriage and serious health problems for you and for your baby |

*Table 4.14. Activity series of Quit for You, Quit for Two TV ad*

This implication series contributes to the ideational actualisation of positivity. This is because the first activity of quitting smoking leads to a series of positive outcomes to the pregnant woman and her baby. In this way, this implication series along with the NUCLEAR RELATIONS analysis in Table 4.13, also convey interpersonal meanings, since the outcomes of quitting smoking are positive. This is what we turn to in Section 4.2.2.

#### **4.2.2. How is positivity construed interpersonally?**

As with negativity, the interpersonal metafunction does most of the work to construe positivity across an array of semiotic resources. In language, this is largely construed through positive attitude and gradation while in images, it is construed through light colour palettes, and in sound, through the calm, pleasant tones that evoke positive feelings. This is contrasted to the negative attitude, dark colour palette and sounds evoking negative feelings

shown in Section 4.1.2. Taking the TV ad and two posters from the *Quit for You, Quit for Two* campaign as examples, we step through the interpersonal actualisations of positivity in language, image and sound.

### *Language*

Positivity is largely enacted in language through positive evaluation realised by both inscribed and invoked attitude. Looking at inscribed attitude to begin with, the voiceover construes positivity by positively evaluating the quitting resources available to pregnant women such as *important*, *support* and *baby fun* realised by inscribed appreciation, highlighted in yellow in Table 4.15. The improvement of the flow of oxygen from quitting smoking is also positively appreciated in *you'll improve the oxygen flow around your body and to your baby*. As each of the positive results arise due to the mother quitting smoking, these inscribed positive attitudes in turn invoke a positive judgement on the mother (this is shown through the double coding of *improve* in Table 4.15).

| Appraiser | Appraising item | Target                       | Type                       | Polarity |
|-----------|-----------------|------------------------------|----------------------------|----------|
| voiceover | improve         | oxygen flow to body and baby | appreciation <sup>13</sup> | positive |
| voiceover | improve         | pregnant women               | judgement                  | positive |
| voiceover | important       | to get help                  | appreciation               | positive |
| voiceover | support         | Quitline                     | appreciation               | positive |
| voiceover | baby fun        | quitting app                 | appreciation               | positive |

Table 4.15. Inscribed attitude in Quit for You, Quit for Two TV ad

While these inscribed attitudes are the most explicit evaluations in the TV ad, it is indirect evaluations realised through affording attitude that are more prevalent. These afforded attitudes are frequently set up through Agent + Medium relations whereby the agentive pregnant woman affects the Medium which involves the unborn baby's health such as in *you'll improve the oxygen flow around your body and to your baby*, in Table 4.16. These affording attitudes are further set up through Agent + Medium + Circumstance of Behalf relations. In the NUCLEAR RELATIONS analysis in Table 4.13, it was shown that positivity is actualised ideationally through agentive pregnant women quitting smoking for their and their baby's health. It was shown that this was realised through Circumstances of Behalf which

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<sup>13</sup> Affect highlighted pink

Judgement highlighted blue

Appreciation highlighted yellow

Positive polarity highlighted green

Negative polarity highlighted red

function in a similar way to Beneficiaries since the pregnant woman and her unborn baby are both benefitting from quitting. In this way, these Agent + Medium + Circumstance of Behalf relations also implicitly realise interpersonal meanings by linking pregnant women (Agent), with the positive outcomes of quitting (Medium) and the beneficiary of these outcomes (Circumstance of Behalf). Examples are provided in Table 4.16, where *you* as Agents are bolded in red, Mediums are bolded in blue, and Circumstance of Behalf are bolded in purple.

| Agent      | Medium     | Process               | Medium   | Circumstance        |
|------------|------------|-----------------------|--|---------------------|
| <b>you</b> |            | choose to quit        | <b>smoking</b>   |                     |
| <b>you</b> |            | choose to get         | <b>the toxins</b>  | out for your system |
|            | <b>you</b> | 're not just quitting |  | <b>for you</b>      |
|            | <b>you</b> | 're quitting          |  | <b>for two</b>      |
| <b>you</b> |            | 'll improve           | <b>the oxygen flow around your body and to your baby</b>                 |                     |
| <b>you</b> |            | lowering              | <b>the risk of miscarriage and serious health problems for your baby</b> |                     |

Table 4.16. Agent + Medium + Circumstance: Behalf relations in Quit for You, Quit for Two

TV ad

This sets up *quit* and *quitting* as affording positive judgement. As stated by Martin and White (2005), “judgement deals with attitudes towards behaviour, which we admire or criticise, praise or condemn” (p. 42). In this case, we praise the behaviour of pregnant women since quitting leads to positive outcomes for them and their unborn babies. This is illustrated in Table 4.17. Furthermore, the appraising item, *lowering*, is a graduation resource that is flagging positive attitude since it leads to a reduced risk of negative health consequences during pregnancy. This is a second evaluative function of graduation, to invoke attitude by scaling ideational meanings (Hood & Zhang, 2020). The full attitude analysis of the TV ad in Table 4.17 illustrates the extent to which positive attitudes colour the TV ad, ultimately accumulating into positive values towards quitting, discussed in detail in Chapter 8.

| Appraiser | Appraising item                      | Target                          | Type         | Invocation | Polarity |
|-----------|--------------------------------------|---------------------------------|--------------|------------|----------|
| voiceover | quit                                 | pregnant women                  | judgement    | afford     | positive |
| voiceover | get the toxins out of<br>your system | pregnant women                  | judgement    |            | positive |
| voiceover | quitting                             | pregnant women                  | judgement    | afford     | positive |
| voiceover | quitting                             | pregnant women                  | judgement    | afford     | positive |
| voiceover | improve                              | oxygen flow to body and<br>baby | appreciation |            | positive |
| voiceover | improve                              | pregnant women                  | judgement    |            | positive |
| voiceover | lowering                             | pregnant women                  | judgement    | flag       | positive |
| voiceover | important                            | to get help                     | appreciation |            | positive |
| voiceover | support                              | Quitline                        | appreciation |            | positive |
| voiceover | baby fun                             | quitting App                    | appreciation |            | positive |

Table 4.17. Full attitude analysis of Quit for You, Quit for Two TV ad

Comparing the attitude analysis of the *Every Cigarette is Doing You Damage* campaign in Section 4.1.2, and the attitude analysis of the *Quit for You, Quit for Two* campaign, a contrast of attitude type and polarity is set up. While in the *Every Cigarette is Doing You Damage* campaign, *smoking* afforded negative **appreciation**, in the *Quit for You, Quit for Two* campaign, *quitting* affords positive **judgement**. As stated previously, appreciation construes our evaluations of things (Martin & White, 2005, p. 56). In the case the *Every Cigarette is Doing You Damage* campaign, *smoking* is realised as an entity, and more specifically, an

activity entity<sup>14</sup> which has agency and can cause damage to people. On the other hand, the positive judgement of *quitting* indicates it is realised as a behaviour that we praise as morally and ethically right, as it helps care for innocent babies and children.

Positive affect also construes positivity in positive campaigns. This is seen in the *Family TV* ad ([Video 4.9](#)) of the *Don't Make Smokes your Story* campaign. This is illustrated in Table 4.18.

Transcript of *Family TV* ad:

*“Family is everything to me. I can't imagine life without em to be honest. I've had my battles with smokes, my lungs got pretty bad. Sometimes I could hardly breathe, and that was tough on everyone. I'm not sure why I smoked, I just did. My kids, Jarrah and Yani, I wanted to be there for them, so I quit. Quitting was tough, I just kept trying. Now I can keep up with them in the yard, and I've got more money to spend on better things. Mum and the aunties are pretty happy that I quit, they didn't want me to die from smokes like dad did. My name is Ted and family is my story, don't make smokes your story. For help download the Quit My Buddy App, call the Quitline or visit Quitnow.”*

| Emoter          | Appraising item | Trigger              | Type   | Invocation | Polarity |
|-----------------|-----------------|----------------------|--------|------------|----------|
| Ted             | hardly breathe  | bad lungs            | affect | afford     | negative |
| Ted             | wanted          | kids                 | affect |            | positive |
| mum and aunties | happy           | that he quit smoking | affect |            | positive |

Table 4.18. *Affect in Family TV ad*

---

<sup>14</sup> Entity types are discussed in detail in Chapter 5



### *Image and sounds*

This interpersonal actualisation of positivity is also coupled in moving and static images, and sound. In images, positivity is construed interpersonally through light colour palettes, positive affect, and eye gaze. In the sounds of the TV ad, positivity is conveyed through major chords and the voiceover's smooth and tense voice quality.

The colours in the TV ad in [Video 4.8](#) and the posters in Images 4.2 and 4.3 also construe positivity. The colours are light and pale which create softness and tenderness (Kress & van Leeuwen, 2002, p. 356). The various shades of pink create warmth, and the varied colour palette creates a cheerful and upbeat feeling. Taken together, these colour choices create a gentle, warm, positive and optimistic feeling which the audience is meant to associate with quitting.



**Quit for you.**  
**Quit for two.**

When a baby's on the way, it's twice as important to get the support you need to quit smoking. Phone **Quitline** and ask about **Quit for you Quit for two**.

.....

**They can help you beat the cravings, with tips like these:**

- **Delay:** Delay for a few minutes – the urge will pass
- **Deep breathe:** Breathe slowly and deeply
- **Do something else:** Ring a friend or practise your prenatal exercises
- **Drink water:** Take 'time out' and sip slowly

.....

**When you choose to quit, you lower the risk of:**

- miscarriage
- premature labour
- ectopic pregnancy
- SIDS

**And you'll save money.**

.....

**Download the free app**

 Go to the App Store or Android Market now to download **Quit for you Quit for two** for free.

.....

 **Australian Government**

 **Quitline**  
**137848**

[australia.gov.au/quitnow](http://australia.gov.au/quitnow)

Image 4.2. Quit for You, Quit for Two print ad – Rebecca



**Quit for you.**  
**Quit for two.**

When a baby's on the way, it's twice as important to get the support you need to quit smoking. Phone **Quitline** and ask about **Quit for you Quit for two**.

.....  
**They can help you beat the cravings, with tips like these:**

- **Delay:** Delay for a few minutes – the urge will pass
- **Deep breathe:** Breathe slowly and deeply
- **Do something else:** Ring a friend or practise your prenatal exercises
- **Drink water:** Take 'time out' and sip slowly

.....

When you choose to quit, you lower the risk of:

- miscarriage
- premature labour
- ectopic pregnancy
- SIDS

And you'll save money.

.....

**Download the free app**  
 Go to the App Store or Android Market now to download **Quit for you Quit for two** for free.

.....

 **Quitline.**  
**137848**  
australia.gov.au/quitnow

*Image 4.3. Quit for You, Quit for Two print ad – Hayley*

Furthermore, positivity is conveyed interactionally through the positive affect displayed by the pregnant women in the TV ad and posters, and through their eye gaze towards their bellies. In Images 4.2 and 4.3, both women are smiling, indicating they are happy. Their eye gaze is directed towards their bellies, which they are holding, suggesting that the trigger for this positive affect are the babies themselves. This is also the case for the TV in [Video 4.8](#), where the pregnant women are depicted in various settings, displaying positive affect while looking at their bellies, seen at 0:11 and 0:25 seconds. The pregnant women holding their

bellies also invoke a sense of protection towards their unborn babies. This display of positive affect and eye gaze directed at their bellies, coupled with the pale, light and warm colour palettes work together to convey positivity interactionally in images.

Moreover, coupled with these positive construals of interpersonal meanings in images, the sounds in the TV ad also convey positivity. The sounds in the TV ad can be divided into the voiceover and the background music. The voiceover is in the foreground and is the sound we need to pay attention to (van Leeuwen, 1999). van Leeuwen (1999) calls this the **Figure**. The background music is part of **Field** sounds which are meant to be heard but not listened to (van Leeuwen, 1999, p. 16), but nevertheless convey meanings.

The voiceover's voice quality is mildly tense which van Leeuwen (1999) describes as being bright and upbeat. This is coupled with her high and soothing voice which taken together conveys a positive feeling. This bright and soothing voice couples with the guitar being played in major chords which further adds to this bright and upbeat feeling. These bright, upbeat and soothing sound choices are in stark contrast to the gurgling, metallic sounds in the *Every Cigarette is Doing You Damage* TV ads which created a negative and dark atmosphere.

The highly positive evaluative orientation of the *Quit for You, Quit for Two* campaign creates a positive prosody towards quitting since it leads to positive outcomes for pregnant women and their unborn babies. This positive prosody towards quitting is further reinforced by multiplying the interpersonal meanings being conveyed through images and sounds as well. The images depicting the pregnant women smiling down at their unborn babies and holding their babies, multiply the positive evaluations of quitting in language. The voiceover's bright and upbeat voice also adds to the positivity in the campaigns. Over time, these interpersonal

meanings couple together with ideational meanings to establish positive values around quitting.

#### 4.2.3. How is positivity construed textually?

Textually, positivity is construed in language by the tonic element consistently falling on the Circumstances of Behalf. This is observed in the *Quit for You, Quit for Two* radio ad in [Audio 4.4](#) where the tonic elements fall on *for your baby* at 0:18 seconds, *for you* at 0:20 seconds and *for two* at 0:21 seconds, indicating they are the newsworthy elements of the text. As shown in Section 4.2.1, Circumstances of Behalf function in a similar manner to Beneficiaries whereby, it is the pregnant woman and her unborn baby who benefit from quitting. The tonic element falling on the Circumstances of Behalf emphasise the positive outcomes of quitting for pregnant women and their babies, thus construing positivity.

Moreover, positivity in the *Quit for You, Quit for Two* campaign is linked textually by similar choices in colour palettes. As shown in Section 4.2.2, the TV ad and posters all use light, pale and warm varied colours to create a gentle, optimistic, and positive feeling. The same colour choices are used in magazine advertisements, and online resources, creating the same positive feeling. This textual linkage of campaign materials by using similar colour palettes are also used in other campaigns. Usually, positive campaigns tend to have either light, pale, warm and varied colours or bright, saturated, warm and varied colours to enact positivity, while negative campaigns tend to use unsaturated, dark and undifferentiated colour palettes as seen in the *Every Cigarette is Doing You Damage* campaign materials in Section 4.1.

### 4.3. Chapter summary

This chapter has presented the first two contrasting rhetorical strategies that organise the NTC: negativity/positivity, where negativity highlights the negative consequences of smoking and positivity focuses on the benefits of quitting. While the strategies convey ideational, interpersonal and textual meanings, it is the interpersonal meanings that are regularly emphasised and reinforced, with the ideational and textual metafunctions deployed to further highlight these interpersonal meanings. This emphasis on interpersonal meanings means the two campaigns are meant to be read evaluatively. More specifically, the *Every Cigarette is Doing You Damage* campaign and other negative campaigns orient audiences to negatively evaluate smoking while the *Quit for You, Quit for Two* campaign and other positive campaigns orient audiences to positively evaluate quitting.

Across each campaign, a negative and positive prosody is set up, respectively. Over time, this negative prosody resonates across all negative campaigns to establish negative values towards smoking, while the positive prosody resonates across all positive campaigns to establish positive values towards quitting. As the NTC develops there is an interplay between negativity and positivity, with both strategies interacting with technicalising and personalising. It is these latter strategies that we now turn to in Chapter 5.

## CHAPTER 5

### TECHNICALISING/PERSONALISING

Chapter 4 illustrated the semiotic features that construe negativity and positivity in the NTC. Broadly speaking, negativity describes campaigns that tend to focus on the negative consequences of smoking, while positivity describes campaigns that tend to focus on the positive outcomes of quitting. While both strategies are realised across all three metafunctions, Chapter 4 showed that they are most strongly enacted through the interpersonal metafunction in order to build negative values against smoking and positive values towards quitting (see Chapter 8 for a more in-depth discussion of how values are built across the entire NTC).

This chapter presents the second set of rhetorical strategies used to describe how campaigns are organised: technicalising/personalising. As mentioned in Chapter 3, technicalising and personalising interact with negativity and positivity in campaigns to create different meanings. Technicalising describes campaigns that tend to focus on the technical and often medical knowledge about smoking/quitting and tend to be oriented to the general public. When combined with negativity, they focus on the damage smoking causes to the body, and when combined with positivity, they focus on how quitting repairs the body.

On the other hand, personalising describes campaigns that tend to focus on the person and their experience with smoking or quitting and tend to target more at-risk groups such as

pregnant women and the Indigenous population. Personalising campaigns also emphasise the impact smoking/quitting has on the smoker's broader social networks, including family and friends. When combined with negativity, these campaigns focus on the negative impacts smoking has on lives and livelihoods, and when combined with positivity, they focus on the positive impacts quitting has on lives and livelihoods. Put more simply, personalising is person and experience focused, while technicalising is body focused. And in this sense, technicalising also means 'non-personalising'.

In the same manner as the previous chapter, this chapter takes a metafunctional orientation to explore how technicalising and personalising strategies are actualised in campaigns across the three main semiotic resources: language, image and sound. The analyses and results of the actualisation of technicalising and personalising across all three metafunctions are presented in Section 5.1 and Section 5.2, respectively. These results are then discussed in relation to the public health and health promotion literature in Chapter 7.

## **5.1. Technicalising**

The strategy of technicalising in campaigns tends to construe smoking/quitting from a more technical and medicalised perspective. This is done by explaining how smoking damages the body, with an emphasis placed on the various diseases that smoking causes, or by explaining how quitting repairs the body from all the damage caused by smoking. Medical terminologies are often used in technicalising campaigns to build technical knowledge of smoking/quitting, with images used to visually depict various diseases and damage caused by smoking.

Although technicalising tends to combine with negativity (see Chapter 7), it is in principle an independent variable. Nonetheless, to illustrate how technicalising is actualised



metafunctionally, we provide examples mainly from the *Health Warnings 2012* campaign, but also drawing on the *Every Cigarette is Doing You Damage* campaign, and *Health Benefits* campaign.

In the *Health Warnings 2012* campaign, cigarette packs technicalise smoking by explaining how it damages smokers' bodies and leads to disease and/or death, as illustrated in Image 5.1. Technicalisation is construed through the language of the health warning messages and depicted visually in the graphic images. However, the 2012 version does show more instances of personalisation than the 2006 version. This is because campaigns often enact all the strategies simultaneously, but overall in the NTC, we have seen that campaigns have a tendency to more strongly enact one contrasting strategy over the other. And this is the case for the *Health Warnings* campaigns.

Front of pack

Back of pack



Image 5.1. Heart Disease 2012 cigarette pack

In the *Health Benefits* campaign, it is quitting that is technicalised by explaining how the body repairs itself hours after quitting smoking, shown in Image 5.2. In addition to language and images construing technicalising, sound also construes technicalising in campaigns. This is evident through the background coughing and wheezing in the *Every Cigarette is Doing You Damage* TV ads. Metafunctionally speaking, technicalising primarily conveys ideational meanings, with the textual metafunction serving to foreground the ideational meanings being created.



Image 5.2. Health Benefits poster – woman

### 5.1.1. How is technicalising construed ideationally?

From an ideational perspective, technicalising is enacted in language and image by focusing on the body parts affected by smoking/quitting. And when it is used to technicalise the negative effects of smoking on the body, there is also a focus on the diseases smoking causes. This focus on disease is also paralleled in diegetic sounds where smokers are heard coughing.

#### *Language*

To uncover how technicalising is construed in language, the ideational resources of ENTITY TYPES, NUCLEAR RELATIONS and the register variable, field, are employed. As mentioned in Chapter 3, there are six entity types: source, thing, activity, semiotic, place and time (Hao, 2020). In the construal of technicalising, we are concerned with the entity types **thing** and **activity**, while in the construal of personalising, we are concerned with **people** entities. In this study, we repurpose thing entity, to mean body parts including limbs and organs. On the cigarette packs, these activity and thing entities are regularly placed in Agent and Medium positions. Generally speaking, Agents tend to be realised by activity entities, while Mediums tend to be realised by thing entities, but not always. These thing entities realising various body parts, in turn build a large compositional taxonomy of the body parts damaged by smoking.

In Chapter 4, the NUCLEAR RELATIONS analyses were employed to show that *smoking* afforded negative attitude since it was regularly the Agent causing damage. Here, NUCLEAR RELATIONS is used to identify the entities involved in this damage caused by smoking. In the NUCLEAR RELATIONS analysis of the *Peripheral Vascular Disease* (Image 5.3) in Table 5.1,

the Agents<sup>15</sup> are realised by three activity entities: *smoking*, *smoking* and *gangrene*. The Mediums are also construed by activity entities including *peripheral vascular disease* and *amputations*, as well as thing entities denoting body part such *blood vessels*. These activity and thing entities are a typical feature of technicality, which is also often observed in scientific discourse (e.g. Doran & Martin, 2021; Hao, 2020).

Front of pack

Back of pack



Image 5.3. Peripheral Vascular Disease 2012 cigarette pack

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<sup>15</sup> Agents are bolded red and Mediums are bolded blue

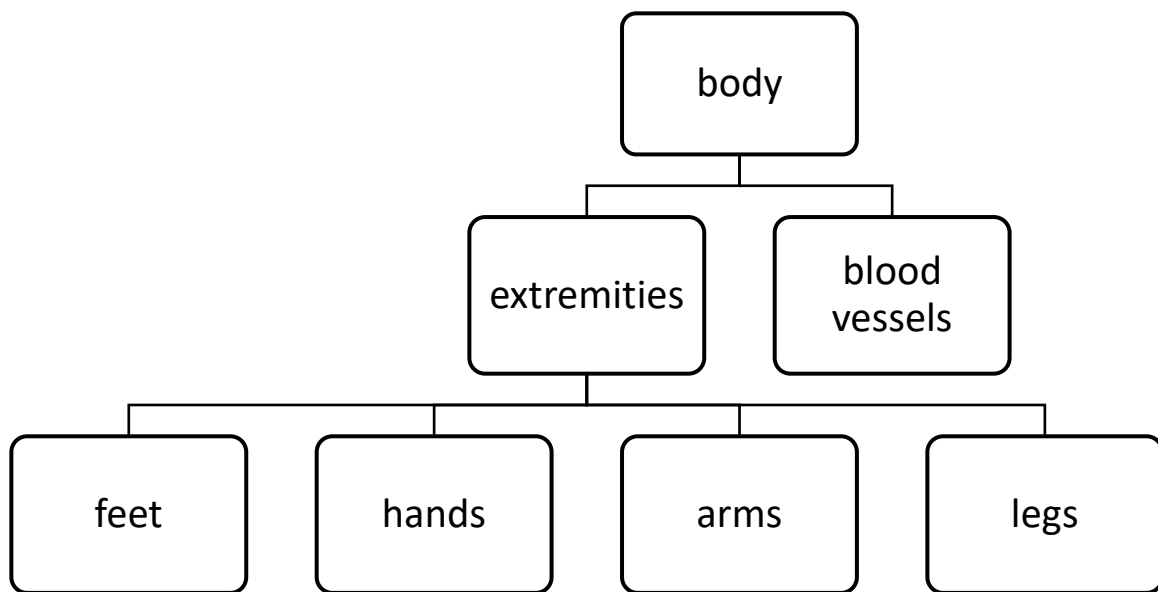
| Circumstance | Agent            | Process               | Medium  | Circumstance  |
|--------------|------------------|-----------------------|---|---|
|              | <b>SMOKING</b>   | CAUSES                | <b>PERIPHERAL<br/>VASCULAR DISEASE</b>                    |   |
|              | <b>Smoking</b>   | narrows<br>and blocks | <b>blood vessels,</b>                                     |   |
|              | <b>(smoking)</b> | reducing              | <b>blood and oxygen supply</b>                            | to your<br>extremities (feet,<br>legs, hands,<br>arms). |
| Over time    | <b>this</b>      | can result<br>in      | <b>pain, open sores that<br/>don't heal and gangrene.</b> |   |
|              | <b>Gangrene</b>  | leads to              | <b>amputations.</b>                                       |   |

Table 5.1. *NUCLEAR RELATIONS of Peripheral Vascular Disease 2012 cigarette pack*

As stated in Chapter 3, field is one of the three register variables along with tenor and mode and is concerned with “the content of language and semiosis” (Doran & Martin, 2021, p. 107). Field can construe phenomena *statically* or *dynamically* (Doran & Martin, 2021). From a static perspective, we are concerned with how entities are organised into classificatory or compositional taxonomies (Doran & Martin, 2021).

In the construal of technicalising, thing entities build large compositional taxonomy of parts of the human body that are either damaged by smoking or repaired by quitting. In negative campaigns, this compositional taxonomy makes it clear that smoking harms the entire body, and that there is no escaping this damage if you smoke. Figure 5.1 illustrates a compositional

taxonomy of the *Peripheral Vascular Disease* cigarette pack (Image 5.3). If we were to create a compositional taxonomy of all the body parts that smoking harms, it would not fit on a page.



*Figure 5.1. Composition taxonomy of Peripheral Vascular Disease 2012 cigarette pack*

This same compositional taxonomy of the body is set up in campaigns that technicalise quitting. In this case, the taxonomy shows all the areas of the body that repair themselves shortly after quitting smoking. This is illustrated in Figure 5.2 of the *Health Benefits* poster in Image 5.4.



# STOP SMOKING START REPAIRING

**In 1 week**  
your sense of taste  
and smell improves

**In 1 month**  
skin appearance is  
likely to improve

**In 3 months**  
your lung function  
begins to improve

**In 5 days**  
most nicotine is  
out of your body

**In 12 hours**  
excess carbon  
monoxide is out  
of your blood

**In 12 months**  
your risk of heart  
disease has halved

**In 1 year**  
a pack-a-day  
smoker will  
save over  
\$13,500

**Today**  
quit before  
getting pregnant  
and your risk  
of having a  
pre-term baby  
is reduced  
to that of a  
non-smoker

**EVERY CIGARETTE YOU DON'T SMOKE  
IS DOING YOU GOOD**

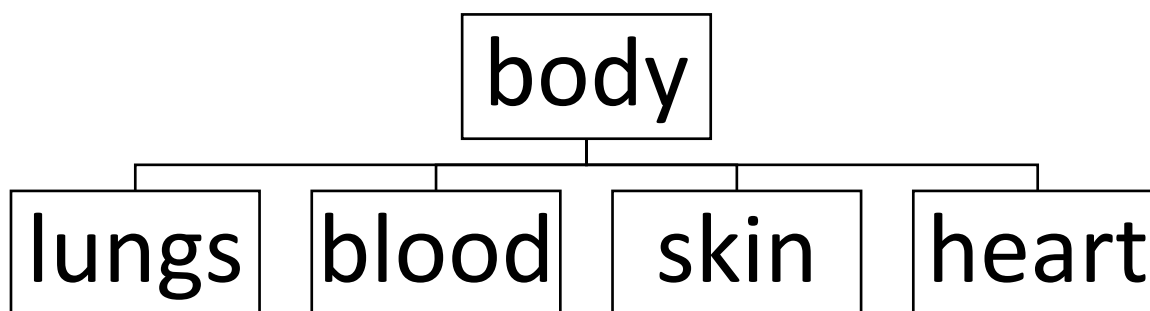
**Quit Now: My QuitBuddy**

**Quitline.13 7848**  
health.gov.au/quitnow

**Quit Now: My QuitBuddy**

**Australian Government**

Image 5.4. Health Benefits poster – woman



*Figure 5.2. Compositional taxonomy of Health Benefits poster – woman*

From a dynamic perspective, field construes phenomena in terms of activities. In the health message of the cigarette packs, there are long sequences of implication established to show the worsening damage of smoking. In the *Peripheral Vascular Disease* cigarette pack, the activities are related through implication whereby the initial activity of *smoking* leads to a series of worsening sequences of damage and disease. As can be seen in Table 5.2, each activity in the sequence is worse than the previous one, such that the initial activity of smoking can lead to amputations. This is a common feature in technicalising campaigns. These worsening sequences make it clear that as you continue to smoke, the damage to your body gets worse and worse, often leading to death.



|   |
|---|
| <b><i>Peripheral Vascular Disease 2012 cigarette pack</i></b>                   |
| Smoking   |
| ^   |
| narrows and blocks blood vessels  |
| ^   |
| reducing blood and oxygen supply to your extremities (feet, legs, hands, arms). |
| ^ resulting in  |
| pain, open sores that don't heal and gangrene.                                  |
| ^ leads to  |
| amputations.  |

*Table 5.2. Implication relations of Peripheral Vascular Disease 2012 cigarette pack*

These same implication sequences are observed in the *Health Benefits* radio ad ([Audio 5.1](#)) whereby quitting smoking leads to a number of positive outcomes in the smoker's body. This is illustrated in Table 5.3. There is, however, a difference between the activity sequences in Table 5.2 and Table 5.3. Typically, in technicalising campaigns focused on smoking, the activity sequences tend to depict the worsening damage of smoking. In the *Health Benefits* campaign, though, the activity sequences tend to list all the benefits of quitting on the body, instead of showing how one positive effect leads to a sequence of increasing benefits. This is illustrated in Table 5.3 where the activity *your body starts to repair itself* is unpacked into the subsequent activity series, signified by the = sign. The + sign signifies that the activities *In a*

*year, your risk of a heart attack is halved and your risk of lung cancer is falling too* are not sequenced in time.

Transcript of *Health Benefits* radio ad:

*“The day you stop smoking, your body starts to repair itself. In 8 hours, excess carbon monoxide is out of your bloodstream. In five days, most nicotine has left your body. In three months, your lung function begins to improve. In a year, your risk of a heart attack is halved and your risk of lung cancer is falling too. Every cigarette you don’t smoke is doing you good. Stop smoking today”.*

|  |
|--|
| <b><i>Health Benefits radio ad</i></b>                         |
| you stop smoking   |
| ^  |
| your body starts to repair itself.                             |
| =  |
| In 8 hours, excess carbon monoxide is out of your bloodstream. |
| ^  |
| In five days, most nicotine has left your body.                |
| ^  |
| In three months, your lung function begins to improve.         |
| ^  |
| In a year, your risk of a heart attack is halved,              |
| + and  |
| your risk of lung cancer is falling too.                       |
| Every cigarette you don't smoke                                |
| ^  |
| is doing you good  |
| Stop smoking today.  |

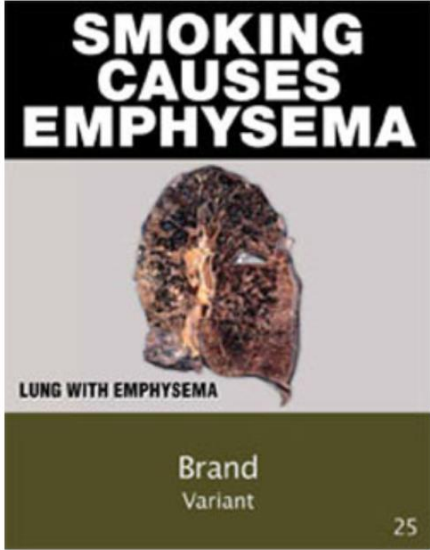
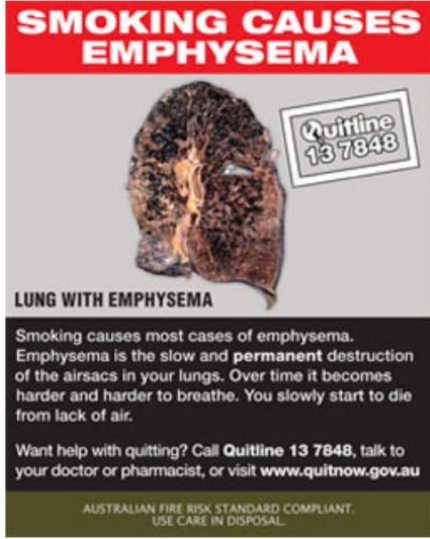
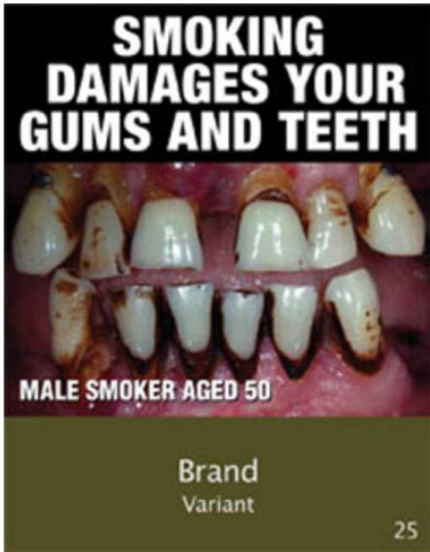

*Table 5.3. Activity sequences in Health Benefits radio ad*

## *Images*

The construal of smoking from a technical perspective in language is paralleled by similar construals in image. Representationally, images technicalise smoking by visually depicting body parts and organs damaged by smoking. Table 5.4 presents four cigarette packs from the *Health Warnings 2012* campaign. While in the images, activity sequences are not explicitly set up, in conjunction with language though, we can read the damage pictured as being caused by smoking. In a sense, the images represent the end result of the unfolding activity series, starting with smoking causing an initial damage which progressively worsens.

Furthermore, the images also represent thing entities in the same manner as language does. In all the cigarette packs in Table 5.4, the images depict body parts instead of whole persons.

These images also set up a composition taxonomy of all the body parts that are damaged by smoking including, lungs, teeth, gums, heart and tongue, again paralleling what is said in the language. Also important to note, is that the thing entities depicted in the images, and language, are often diseases and damage that cannot be seen by the naked eye alone, such as the emphysema lung in Table 5.4. This is a feature of technicalising, and is not seen in personalising campaigns.

|                       |  |  |
|-----------------------|--|--|
| Health message        | Cigarette pack   |  |
| <i>Emphysema</i>      | <p>Front of pack</p>    | <p>Back of pack</p>    |
| <i>Gums and Teeth</i> | <p>Front of pack</p>  | <p>Back of pack</p>  |

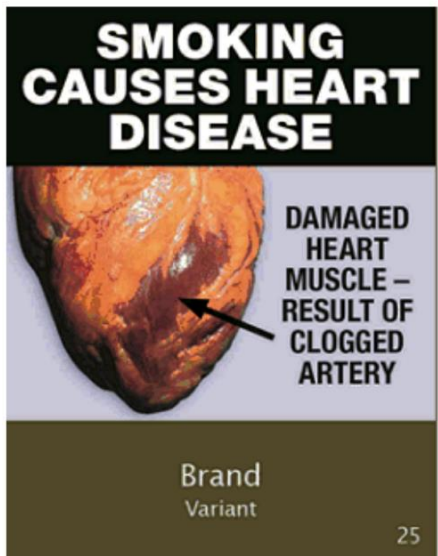

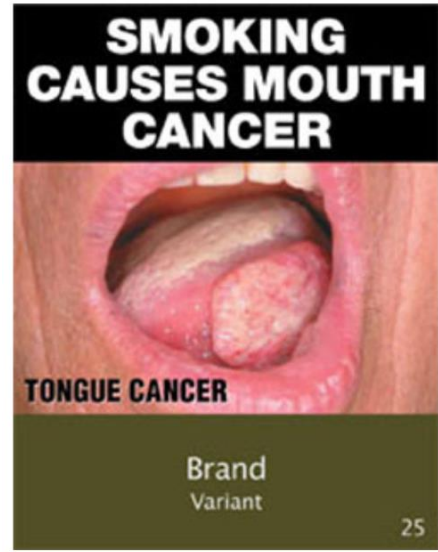

|                             |   |   |
|-----------------------------|---|---|
| <p><i>Heart Disease</i></p> | <p>Front of pack</p>   | <p>Back of pack</p>   |
| <p><i>Mouth Cancer</i></p>  | <p>Front of pack</p>  | <p>Back of pack</p>  |

Table 5.4. Example of cigarette packs 2012

In addition to the composition taxonomy of the body parts damaged by smoking, there is also a composition taxonomy set up in each image of a healthy vs an unhealthy body part, largely realised by colour. As mentioned in Chapter 3, colour can create meanings across all metafunctions (Kress & van Leeuwen, 2002). For example, in the *Teeth and Gums* pack in

Table 5.4, part of the teeth is white indicating they are healthy, and part of the teeth are brown, clearly indicating that they are diseased. The same is true for the *Mouth Cancer* pack where part of the tongue looks healthy and the other part is cancerous. And with the *Emphysema* cigarette pack, we all know that lungs should not be black. In addition to the images visually paralleling what is said in language, they also bring additional information not explained in language: they show what the actual damage and diseases look like in various parts of the body.

### *Sound*

Sound can complement language and image in construing smoking from a technicalising perspective. In the *Every Cigarette is Doing You Damage* TV and radio ads, technicalising is mainly construed through diegetic sound effects in the Ground such as coughing. In the *Tar* ([Video 5.1](#)) and *Artery* ([Video 5.2](#)) TV ads, the smokers cough at the end of each ad at 0:25 seconds to depict the negative health effects of smoking. This is also heard in the *It's not just a cigarette you're smoking* radio ad ([Audio 5.2](#)) of the *National Tobacco Youth Campaign* where the smoker coughs at the end after the voiceover has listed the chemicals found in cigarette smoke. These coughs illustrate the damage smoking causes to the lungs, and work with the language and images to construe technicalising by focusing on the damage smoking causes all over the body. These diegetic sound effects in the Ground are in stark contrast to children's laughter in personalising campaigns which can be heard in the *Don't Make Smokes your Story* campaign radio ad ([Audio 5.3](#)) at 0:20 seconds.

Ideationally, the strategy of technicalising centres on the damage smoking causes to the body, or how the body repairs itself after quitting. When combined with positivity, thing entities in language represent all the body parts that are repaired by smoking. It also construes this repair dynamically as unfolding activity series. When combined with negativity,

technicalising, is realised through thing and activity entities in language where thing entities represent diseased body parts and activity entities present smoking and the various damage caused by smoking. These thing entities are also depicted in images to visually represent the damaged/diseased body parts. The activity and thing entities are also reinforced by various sounds of disease in the Ground of TV and radio ads such as coughing. In campaigns that technicalise smoking there is also a tendency to show the worsening damage of smoking over time, with the images often depicting the end result of a long activity sequence. These analyses show that technicalising campaigns show a strong focus for construing ideational meanings.

### **5.1.2. How is technicalising construed interpersonally?**

Technicalising can be characterised as not being highly interpersonal on its own; it mainly focuses on the damage caused to the body, or the repair of the body. However, in combination with negativity, technicalising can construe a range of interpersonal meanings by invoking negative attitude through recontextualised medical lexis which will be presented in Chapter 7. This lack of interpersonal meanings in technicalising campaigns are in sharp contrast to personalising campaigns which enact a variety of interpersonal meanings as will be shown in Section 5.2.2.

To illustrate the lack of interpersonal meanings in technicalising campaigns, it is useful to present a contrast between a personalising example where interpersonal meanings are strongly enacted. In this section we analyse the lack of interpersonal meanings in the *Health*



*Warnings 2012* campaign<sup>16</sup> in comparison to the interpersonal meanings enacted throughout the *Don't Make Smokes your Story* campaign.

### *Language*

This contrast in interpersonal meanings is readily observed by exploring how solidarity is enacted in personalising campaigns, and how this is lacking in technicalising campaigns. This contrast is also observed through the opening up of the dialogic space in personalising campaigns compared to monoglossic tendencies of technicalising campaigns. These are analysed through the interpersonal discourse semantic systems of INVOLVEMENT and APPRAISAL, and more specifically, the sub-system of engagement.

As mentioned in Chapter 3, INVOLVEMENT is an interpersonal resource functioning at the level of discourse semantics, and is involved in building solidarity in texts (Martin & White, 2005). One of the sub-systems of involvement is naming, which is a prime feature of personalisation. In the *Family* TV ad of the *Don't Make Smokes your Story* campaign, Ted uses naming resources to highlight how his family members have also been impacted by his smoking and quitting. He refers to his children by their first names and also uses kin terms to refer to specific family members. These are highlighted blue in Table 5.5.

---

<sup>16</sup> As noted previously, the *Health Warnings 2012* campaign does also personalise smoking, but it has a greater tendency to technicalise smoking.

| Naming      | Examples  |
|-------------|---|
| First names | <ul style="list-style-type: none"> <li>- My kids, Jarrah and Yani, I wanted to be there for them</li> <li>- My name is Ted and family is my story</li> </ul>        |
| Kin terms   | <ul style="list-style-type: none"> <li>- Mum and the aunties are pretty happy that I quit</li> <li>- They didn't want me to die from smokes like dad did</li> </ul> |
| Group terms | <ul style="list-style-type: none"> <li>- Family is everything to me</li> </ul>  |

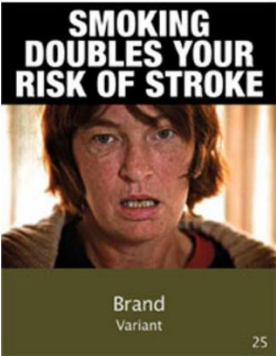



Table 5.5. Naming in Family TV ad

Since the TV ad is being narrated by Ted himself, an ex-smoker, there are lots of instances of first-person pronouns which serve to personalise the ad. These instances of first-person pronouns are illustrated in Table 5.6. The full naming analysis will be shown in detail in Section 5.2.2.

| <b>Family TV ad</b>   |
|---|
| <p><i>“Family is everything to me. I can't imagine life without em to be honest. I've had my battles with smokes, my lungs got pretty bad. Sometimes I could hardly breathe, and that was tough on everyone. I'm not sure why I smoked, I just did. My kids, Jarrah and Yani, I wanted to be there for them, so I quit. Quitting was tough, I just kept trying. Now I can keep up with them in the yard, and I've got more money to spend on better things. Mum and the aunties are pretty happy that I quit, they didn't want me to die from smokes like dad did. My name is Ted and family is my story, don't make smokes your story. For help download the Quit My Buddy App, call the Quitline or visit Quitnow.”</i></p> |

Table 5.6. First-person pronouns in Family TV ad

Naming is a common occurrence throughout the *Don't Make Smokes your Story* campaign and in other personalising campaigns. However, in the *Health Warnings 2012*, naming mainly occurs on three cigarette packs. In the *Stroke, Throat Cancer* and *Mouth Cancer* cigarette packs the smoker's first names are used to personalise the packs, along with other non-vocatives such as pronouns, kin terms and group terms which are highlighted blue in Table 5.7. Again, naming is not a linguistic feature that we regularly see in the *Health Warnings 2006/2012* campaign. These pack highlight that campaigns can employ both contrasting strategies to get across the quit message, but that they have a tendency to use more of one than the other.

| Cigarette packs  | Naming   |
|--|--|
| <p>Front of pack</p>  <p>Brand Variant 25</p> <p>Back of pack</p>  | <p><b>Cynthia</b>, a smoker for 25 yrs, had a stroke aged 39. The stroke damaged her ability to speak and move parts of her body. <b>She</b> says 'The hardest part was relying on my <b>kids</b> to look after <b>me</b> – <b>I</b> should be looking after <b>them</b>'. Don't think it can't happen to <b>you</b> – <b>younger people</b> suffer strokes too.</p> |
| <p>Front of pack</p>  <p>Brand Variant 25</p> <p>Back of pack</p>  | <p><b>John</b> was a smoker. <b>He</b> got cancer of the larynx (voice box). His voice box was removed. <b>He</b> had to learn to talk again. Now <b>he</b> can only breathe through the hole in his neck.</p>   |

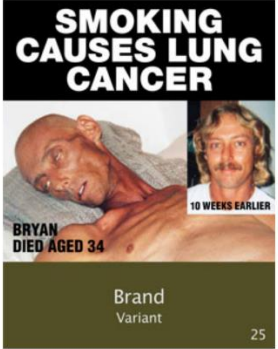

|  |   |  |
|--|---|--|
| <p>Front of pack</p>  | <p>Back of pack</p>  | <p>Bryan was a teenager when he started smoking. Like many others, he never thought it would kill him. He died aged 34, just 47 days after he was diagnosed with lung cancer. He wanted others to know – ‘this is what happens to you when you smoke’.</p> |
|--|---|--|

Table 5.7. Naming in Health Warnings 2012 cigarette packs

The cigarette packs in Table 5.7 are highly personalised. The audience knows the names of smokers and what happened to them as a result of smoking. However, in the other cigarette packs, the only reference to a person is the generic *you*, as highlighted blue in Table 5.8. Generic *you* is used to make generalisations about people and things (Berry, 2009; Orvell et al., 2017), and is equivalent to *one*, although the latter tends to be more formal (Huddleston & Pullum, 2005). The use of generic *you* is rather sparse in the cigarette packs and when they are used, it is not to refer to a specific person, but to the general population. This is because the emphasis in these technicalising campaigns is placed on the damage and diseases smoking causes to the body, and so highlight the ideational meanings in these texts as shown in Section 5.1.1.

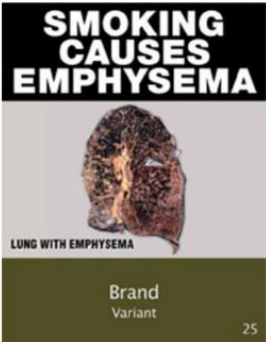



| Cigarette pack   | Generic <i>you</i>   |
|--|--|
| <p>Front of pack</p>  <p>Back of pack</p>    | <p>Smoking causes most cases of emphysema. Emphysema is the slow and <b>permanent</b> destruction of the air sacs in your lungs. Over time it becomes harder and harder to breathe. <b>You</b> slowly start to die from lack of air.</p>   |
| <p>Front of pack</p>  <p>Back of pack</p>  | <p>The cancer-causing chemicals <b>you</b> inhale with each puff go through your kidneys and bladder as your body <b>tries</b> to get rid of them in your urine. This makes smoking a major cause of kidney and bladder cancer. Blood in the urine is one of the most common symptoms.</p> |

Table 5.8. Generic *you* in health message on cigarette packs

This same lack of interpersonal meanings is also found in the *Health Benefits* campaign which technicalises quitting. There are no instances of naming on the poster in Image 5.5. The possessive *your* could be seen as an equivalent to generic *you*, since it does not refer to a specific person, but to the general population. As argued above, again, the emphasis here is on the body and how it repairs itself after quitting.



Image 5.5. Health Benefits poster – man

Another feature of the technicalisation in the *Health Warnings 2012* campaign is the use of monoglossia, part of the APPRAISAL sub-system of engagement. The sub-system of engagement is concerned with how speakers/writers position themselves in regard to what is being referred to in the text (Martin & White, 2005, p. 92). When considering the stance writers and speakers take, we consider whether the text is **monoglossic** or **heteroglossic**.

In many ways the cigarette packs are monoglossic as there is only one voice present – the writer’s –, and the health message is presented as fact through bare assertions. An example of the *Emphysema* cigarette pack is illustrated in Table 5.9 where bare assertions are underlined.

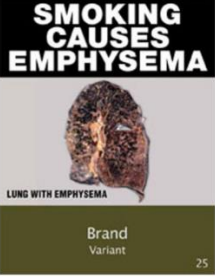

| <i>Emphysema</i> 2012 cigarette pack   | Health message   |
|--|--|
| <p>Front of pack</p>  <p>Back of pack</p>  | <p>“Smoking <u>causes</u> most cases of emphysema. Emphysema <u>is</u> the slow and <b>permanent</b> destruction of the airsacs in your lungs. Over time it <u>becomes</u> harder and harder to breathe. You slowly <u>start to die</u> from lack of air”.</p> |

Table 5.9. Monoglossia in *Emphysema* 2012 cigarette pack

The few instances of heteroglossia in the *Health Warnings 2012* campaign tends to be realised by the modality of probability (e.g. can, might). This is illustrated in Table 5.10 where the instances of modality are underlined. The use of modality here is simply giving more facts about smoking, it is not allowing in other voices.





| <i>Gums and Teeth 2012 cigarette pack</i>   | Health message   |
|---|--|
| <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>Front of pack</p>  </div> <div style="text-align: center;"> <p>Back of pack</p>  </div> </div> | <p>“Smoking causes inflammation of the gum and other tissue around your teeth (periodontitis). Symptoms <u>can include</u> gum redness, swelling, bleeding, infection and pain. The gums, bones and other tissue supporting your teeth <u>can be destroyed</u> resulting in tooth loss”.</p> |

Table 5.10. *Heteroglossia in Gums and Teeth 2012 cigarette pack*

There are instances of heteroglossia in the health messages where other voices are brought into the text, but in a similar manner to the resource of naming this is not a common occurrence. An example is from the *Stroke* cigarette pack where the voice of Cynthia, an ex-smoker, is allowed in: *She says* ‘*The hardest part was relying on my kids to look after me – I should be looking after them*’. On the whole, the health messages on the cigarette packs and other technicalising campaigns tend to be monoglossic where it is only the writer’s voice that is acknowledged.

### *Image*

In a similar manner to the health message, there is no interactional meanings being construed in the images. The images on the cigarette packs are devoid of human participants. Instead, we only see diseased body parts. The lack of human participants means there is no interpersonal relationships being built. This again differs greatly to the images in personalising campaigns which are full of human participants. In personalising campaigns, the audience is invited into the represented participants’ world, but for technicalising



campaigns this interactional work is stripped away. Instead, the interpersonal meanings conveyed in the images of the *Health Warnings 2012* campaign construe negativity. This contrast in images between technicalising campaigns that are body-focused and personalising campaigns that are person-focused are illustrated in Table 5.11. In the *Gums and Teeth* cigarette pack in Table 5.11, it is only an image of the rotten teeth and diseased gums that are shown i.e., a part of the person that has been damaged by smoking. The *Don't Make Smokes your Story* poster, however, is saturated with human participants.

| <b><i>Health Warnings</i> (technicalising)</b>   | <b><i>Don't Make Smokes your Story</i> (personalising)</b>                          |
|--|---|
| <p>Front of pack</p>  <p>Back of pack</p>  |  |

Table 5.11. Contrast of technicalising vs personalising image

Furthermore, in technicalising TV ads where people are present, they do not engage with the viewer nor with other represented participants. There is no eye contact nor any other signs to show they are engaging with the audience such as a hand gesture inviting the viewer into the represented participant's world. Rather, the represented participants are mainly used as people through which we can view body parts. This is easily seen in the *Every Cigarette is*

*Doing You Damage* TV ads. An example is the *Lung* TV ad ([Video 5.3](#)) where the smoker is all alone in the cold as she lights up her cigarette and the camera zooms in to her mouth and tracks the cigarette smoke down her throat to show how it destroys the lungs. At no point in the video does the smoker make eye contact with the viewer, nor does she engage with anyone else in the ad. In a similar manner to the cigarette packs, the TV ads are highlighting the damage smoking causes to the body.

Interpersonally, technicalising is defined by a lack of interpersonal meanings. However, when interacting with negativity, together they construe a range of interpersonal meanings including negative attitude from recontextualised medical lexis (see Chapter 7 for explanation). When analysing technicalising on its own, this medicalised lexis is more ideation focused.

### 5.1.3. How is technicalising construed textually?

Campaigns that technicalise smoking are organised to highlight the damage and diseases smoking causes to the body. This is the case for the cigarette packs. Language construes smoking technically by giving thematic status to the activity entity *smoking* and other non-people entities. In the images, technicalising is actualised by giving prominence to the diseased limbs and organs, i.e., thing entities. We explore how this is achieved on the front and backs of the cigarette packs.

The front of the cigarette pack is divided into title + graphic image. The title is written in bold white letters on a black background, as illustrated in Image 5.6 of the *Gums and Teeth* cigarette pack. This contrast brings salience to the title where *SMOKING* is a technicalised activity entity with thematic status. The Theme/Rheme analysis of the title is presented in

Table 5.12. Reading from top to bottom, the graphic image underneath the title shows an extreme close-up of diseased teeth and gums. This is the only part of the person we can see, thus placing emphasis on a thing entity.

Front of pack

Back of pack



Image 5.6. Gums and Teeth 2012 cigarette pack

|              |                             |
|--------------|-----------------------------|
| SMOKING      | DAMAGES YOUR GUMS AND TEETH |
| <b>Theme</b> | <b>Rheme</b>                |

Table 5.12. Theme/Rheme analysis of Gums and Teeth 2012 cigarette pack

The back of the cigarette packs can be divided into title + graphic image + health message. In a similar manner to the front of the cigarette pack, the title explains the various diseases caused by smoking which is in turn depicted visually. The health message then elaborates on how smoking causes disease. Table 5.13 presents the Theme/Rheme analysis of the health message where the thematic progression starts with *smoking*, to *symptoms* of periodontitis to how *the gums, bones and other tissue supporting your teeth* get destroyed. All of these Themes are non-people entities, thus foregrounding technicalising. It is important to note that

the textual analysis here, and technicalising campaigns in general, tend to highlight *both* technicalising and negativity. As mentioned in Chapter 3, while these strategies are independent, they do interact and are influenced by each other. This is one of these cases. Nonetheless, the textual analyses still support the technicality present in the cigarette packs.

|  |   |
|--|---|
| Smoking  | Causes inflammation of the gum and other tissue around your teeth (periodontitis) |
| Symptoms   | can include redness, swelling, bleeding, infection and pain.                      |
| The gums, bones and other tissue supporting your teeth | can be destroyed<br><br>resulting in tooth loss                                   |
| <b>Theme</b>   | <b>Rheme</b>  |

*Table 5.13. Theme/Rheme analysis of Emphysema 2012 cigarette pack*

The strategy of technicalising can be understood as being body focused. It highlights the effects smoking and quitting has on the body, and thus tends to be ideation oriented. The focus here is on showing how smoking/quitting impacts the physical health of the smoker. This is construed in materials statically through thing and activity entities, and dynamically through unfolding activity series. When combined with negativity, this unfolding activity series leads to worsening damage and disease, and when combined with positivity, it lists the outcomes of quitting. These body parts are conveyed in language and images, with sound also construing technicalising when combined with negativity. The strategy of technicalising is in stark contrast to the strategy of personalising that is person-focused and highlights the impact

smoking/quitting has on the person and those around them. This is what we turn to in Section 5.2.

## 5.2. Personalising

The contrasting strategy to technicalising is personalising. Personalising campaigns construe smoking/quitting in terms of how it affects the *person* and those around them, as opposed to how smoking/quitting affects the body. They tend to be more person focused and regularly feature a narrator who is reflecting on their experience of smoking and/or quitting.

Personalising campaigns have a greater tendency to combine with positivity to personalise quitting, but as with technicalising, the strategies are independent. To illustrate how personalising is actualised in campaigns, we present examples from the *Don't Make Smokes your Story* campaign, which personalises quitting, and the *Stop before the Suffering Starts* campaign which personalises smoking. The following sections will illustrate how the strategy of personalising is actualised metafunctionally across campaign materials.

The *Don't Make Smokes your Story* campaign was launched in 2015 to target smoking rates in Indigenous Australian communities. As discussed in Chapter 2, smoking rates among the Indigenous population has remained disproportionately high compared to the general population (Australian Institute of Health and Welfare, 2020c). The *Don't Make Smokes your Story* campaign was the second campaign launched to specifically target smoking rates among Indigenous Australians by using culturally targeted messages (Gould, McEwen, et al., 2013). The campaign places emphasis on the benefits quitting offers to both the smoker and their families. It follows the quit journey of Ted, an Indigenous Australian man who reflects on his quit journey and encourages others to quit for their families. The campaign features

TV ads, radio ads, print ads, an app and other resources to use on social media. Image 5.7 provides an example of one of the campaign posters.



Image 5.7. Don't Make Smokes your Story print ad – Bikes

The *Stop before the Suffering Starts* campaign was launched in 2014. Half of the materials focused on the suffering experienced by emphysema sufferers, and the other half promoted the message that although quitting might feel horrible, suffering from smoking is worse. In a similar manner to the *Don't Make Smokes your Story* campaign, it also focuses on families. Table 5.14 presents the *Breathless* poster which focuses on emphysema, and the *Symptoms* poster which focuses on the symptoms of quitting.



*Breathless poster*



*Symptoms poster*



Table 5.14. Posters from the Stop before the Suffering Starts campaign

**5.2.1. How is personalising construed ideationally?**

Ideationally, personalising is construed by the abundance of human participants in campaign materials realised by people entities, which serve to humanise quitting. This is in contrast to the non-human participants in the *Health Warnings 2012* campaign which served to dehumanise smoking. This is construed in both language and images.

## Language

To explore how personalising is actualised ideationally in the *Don't Make Smokes your Story* campaign, we again employ the register variable, field. First, we explore how personalising is construed in the *Family TV* ad from a static perspective involving entities and classification taxonomies, and then how personalising is realised dynamically through unfolding activities. The *Family TV* ad is laden with people entities, highlighted blue in Table 5.15. This is in marked contrast to the lack of people entities found on the health messages of the cigarette packs in Section 5.1.2.

| <b>Family TV ad</b>  |
|--|
| <p>“<b>Family</b> is everything to <b>me</b>. <b>I</b> can't imagine life without <b>em</b> to be honest. <b>I</b>'ve had my battles with smokes, my lungs got pretty bad. Sometimes <b>I</b> could hardly breathe, and that was tough on <b>everyone</b>. <b>I</b>'m not sure why <b>I</b> smoked, <b>I</b> just did. <b>My kids, Jarrah and Yani, I</b> wanted to be there for <b>them</b>, so <b>I</b> quit. Quitting was tough, <b>I</b> just kept trying. Now <b>I</b> can keep up with <b>them</b> in the yard, and <b>I</b>'ve got more money to spend on better things. <b>Mum</b> and <b>the aunties</b> are pretty happy that <b>I</b> quit, <b>they</b> didn't want <b>me</b> to die from smokes like <b>dad</b> did. My name is <b>Ted</b> and <b>family</b> is my story, don't make smokes your story. For help download the <i>Quit My Buddy App</i>, call the <i>Quitline</i> or visit <i>Quitnow</i>.”</p> |

Table 5.15. People entities in Family TV ad

These people entities build large classification taxonomies of people, namely, Ted's family. This is illustrated in Figure 5.3. This is contrasted to the compositional taxonomy of the *Peripheral Vascular Disease* cigarette pack which builds up a taxonomy of all the body parts damaged by smoking, illustrated in Figure 5.4.



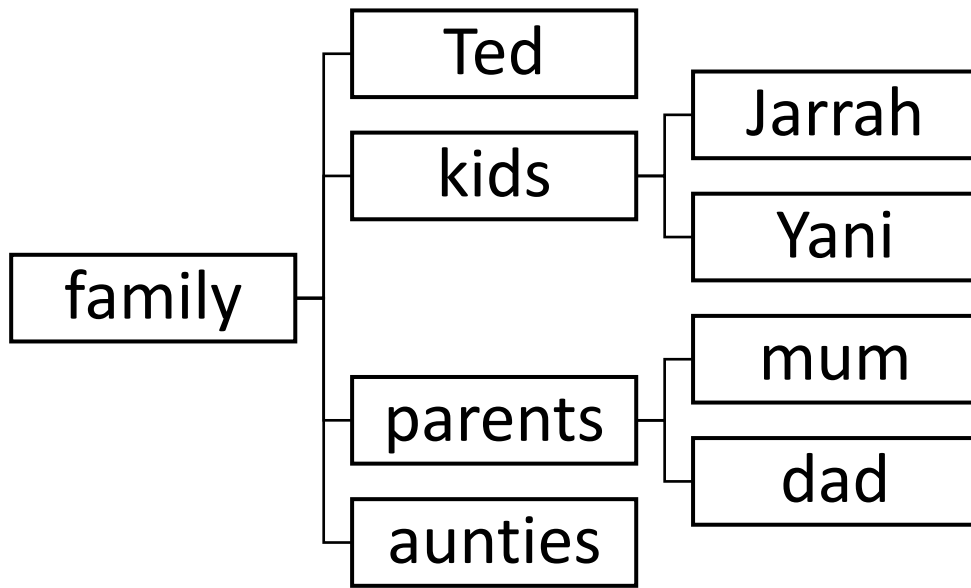


Figure 5.3. Classification taxonomy in Family TV ad

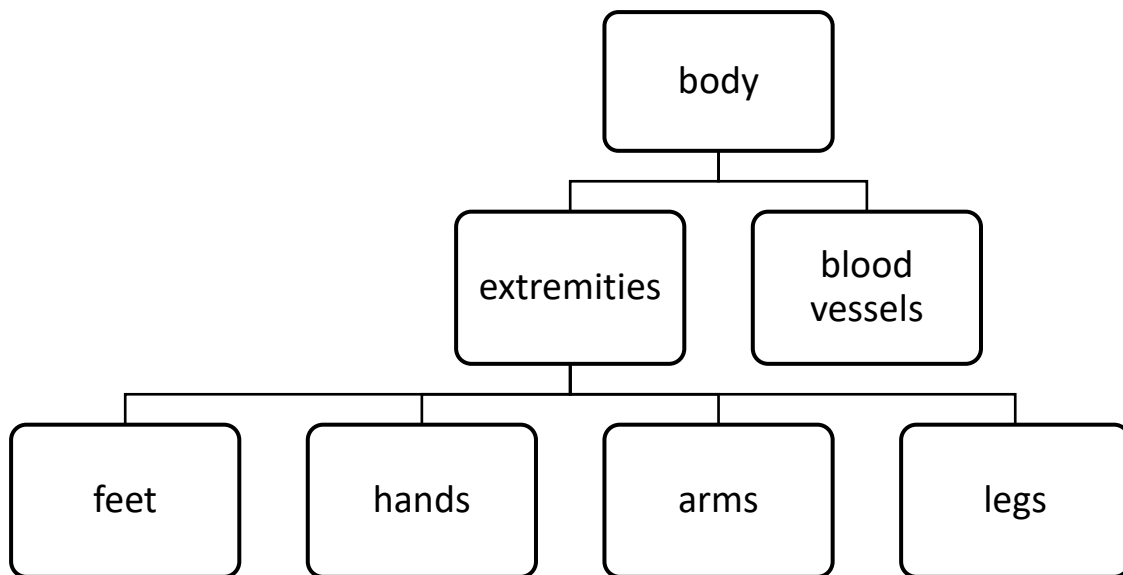


Figure 5.4. Composition taxonomy of Peripheral Vascular Disease 2012 cigarette pack

While not as frequent as the cigarette packs, there are instances of activity sequences in the *Don't Make Smokes your Story* materials. One such instance is at the start of Ted's monologue in the *Family TV ad* where he recounts his struggles with smoking. Whereas in the cigarette packs, the activity sequences lead to worsening disease and damage to the body, in Ted's case, as his smoking worsened, his family also started to be impacted emotionally.

This is illustrated in Table 5.16. The end result of smoking in the *Family TV ad* led to Ted's family also being negatively impacted, while the end result of the *Peripheral Vascular Disease* cigarette pack saw only the smoker being negatively impacted.

|                                 |
|---------------------------------|
| <b><i>Family TV ad</i></b>      |
| I've had my battles with smokes |
| =                               |
| my lungs got pretty bad         |
| ^                               |
| I could hardly breathe          |
| ^                               |
| that was tough on everyone      |

*Table 5.16. Activity sequence in Family TV ad*

### *Image*

The TV ads and posters are also full of people entities to humanise quitting. Ted is presented in various social settings involved in various activities with his family, such as playing the guitar and walking alongside his children in Table 5.17. From the language, we understand the reason Ted has time to spend with his family is because he has quit smoking. These human participants humanise quitting but also emphasise that quitting has a positive effect not just on the smoker, but on their families as well, all of which serve to build interpersonal relationships with the audience as we will see in the following section.

This is in contrast to the campaigns that construe technicalising where the entities in the images are body parts, illustrated in Table 5.17. Or in the case of the *Every Cigarette is Doing You Damage* TV ads, the only reason smokers are represented is to show the damage smoking causes once inhaled, as shown in [Video 5.4](#) of the *Eye* TV ad. Again, the difference between the representational meanings construed in technicalising and personalising campaigns involve depicting damaged body parts and representing people, respectively. One places emphasis on the body, while the other places emphasis on people.

| Technicalising images  | Personalising images  |
|--|---|
| <p>Front of pack</p>  <p>Back of pack</p>  |  |



Table 5.17. Contrast between technicalising and personalising images

### 5.2.2. How is personalising construed interpersonally?

The interpersonal metafunction plays a central role in building interpersonal relationships between the represented participants and the audience to personalise quitting. This is achieved by drawing on the linguistic systems of INVOLVEMENT and APPRAISAL and, CONTACT, SOCIAL DISTANCE and ATTITUDE in images.

#### Language

Interpersonally, personalising is construed by involving the audience with the participants. This is explored through the linguistic resource of INVOLVEMENT. As stated in Chapter 3, INVOLVEMENT is an interpersonal discourse semantic system concerned with negotiating solidarity in discourse (Martin & White, 2005, p. 33) in a similar manner to APPRAISAL. In texts, INVOLVEMENT “refers to how language constructs relative closeness” (Lee, 2006, p. 66). There are five main sub-systems of INVOLVEMENT: naming, technicality, abstraction,

anti-language and swearing (Martin & White, 2005). In the *Don't Make Smokes your Story* campaign, it is the semantic resource of naming that is involved in building solidarity between the represented participants and the audience. As mentioned in Section 5.1.2, naming can be used in the form of vocative and non-vocatives (Poynton, 1990). Vocatives can include a form of someone's name as form of address such as a first name or a nickname, and non-vocatives can include pronouns, kin terms, solidarity nominals and groups/collection terms (Poynton, 1990).

There are four types of naming used in the *Family TV ad* of the *Don't Make Smokes your Story* campaign: first names, pronouns, kin terms and groups/collection terms. These are highlighted blue in Table 5.18. These resources of naming parallel the people entities identified in Table 5.15 further reinforcing that personalising campaigns place emphasis on people and their experience with smoking/quitting.

| <b><i>Family TV ad</i></b>  |
|---|
| <p>“<b>Family</b> is everything to <b>me</b>. <b>I</b> can't imagine life without <b>em</b> to be honest. <b>I</b>'ve had my battles with smokes, my lungs got pretty bad. Sometimes <b>I</b> could hardly breathe, and that was tough on <b>everyone</b>. <b>I</b>'m not sure why <b>I</b> smoked, <b>I</b> just did. <b>My kids, Jarrah and Yani, I</b> wanted to be there for <b>them</b>, so <b>I</b> quit. Quitting was tough, <b>I</b> just kept trying. Now <b>I</b> can keep up with <b>them</b> in the yard, and <b>I</b>'ve got more money to spend on better things. <b>Mum</b> and <b>the aunties</b> are pretty happy that <b>I</b> quit, <b>they</b> didn't want <b>me</b> to die from smokes like <b>dad</b> did. My name is <b>Ted</b> and <b>family</b> is my story, don't make smokes your story. For help download the Quit My Buddy App, call the Quitline or visit Quitnow.”</p> |

Table 5.18. Naming in Family TV ad

These same forms of naming are found in other personalising campaigns, such as the *Break the Chain* TV ad. There are a number of pronouns in the TV ad, especially first-person pronouns since it is an ex-smoker reflecting on her smoking and quit journey. There are also instances of first name vocations: *Rosie* and *Barry*; kin terms: *mum*, *pop*, all illustrated in Table 5.19. These names involve the audience into the represented participants' world, thus building a kind of imaginary relationship between the audience and represented participants.

| <b><i>Break the Chain</i> TV ad</b>  |
|--|
| <p>“<b>I</b> watched <b>pop</b> die; lung cancer, from smoking. <b>Mum</b> had a heart attack from her smoking. My <b>sis</b> and <b>uncle Barry</b> have trouble breathing. <b>Rosie</b> next door had a stroke, and <b>doctors</b> say it was from smokes. <b>I</b> was smoking, for years too, but <b>I</b> quit. Cause <b>I</b> don't want our <b>kids</b> growing up thinking disease and dying like that is normal. If <b>I</b> can do it, <b>I</b> reckon <b>we</b> all can”.</p> |

Table 5.19. Naming in *Break the Chain* TV ad

In the cigarette packs of the *Health Warnings 2012* campaign, the health messages are monoglossic in that they do not allow other voices in the text. And the instances of heteroglossia are simply to modalise the probability of damage and disease. This is not the case for personalising campaigns. A feature of personalising campaigns is the presence of heteroglossia, especially in terms of opening up the dialogic space for other voices. The *Break the Chain* TV is a personalising campaign similar to the *Don't Make Smokes your Story* campaign. Both campaigns have ex-smokers as narrators and so open up the dialogic space to include the voices of those close to them. In the *Break the Chain* campaign, the narrator opens up the dialogic space to include the voices of doctors and her children, underlined in Table 5.20. This heteroglossia, especially when it involves friends and family,

illustrate how smoking/quitting also impacts those close to the smoker, thus personalising the smoking/quitting.

***Break the Chain TV ad***

*“I watched pop die; lung cancer, from smoking. Mum had a heart attack from her smoking. My sis and uncle Barry have trouble breathing. Rosie next door had a stroke, and doctors say it was from smokes. I was smoking, for years too, but I quit. Cause I don’t want our kids growing up thinking disease and dying like that is normal. If I can do it, I reckon we all can”.*

*Table 5.20. Heteroglossia in Break the Chain TV ad*

Moreover, personalising is construed in materials through emoters expressing their feelings. In Chapter 4, we explored the polarity and sub-types of affect to determine whether materials were construing negativity or positivity. Here, we are not concerned with attitude or polarity, since this is a feature of negativity/positivity, instead we are concerned with the emoters of affect. In Table 5.21, Ted and his family are regularly emoters of affect expressing how they feel about smoking and quitting. This portrays their experience in relation to smoking and quitting, further highlighting that personalising campaigns focus on how smoking/quitting affects those close to the smoker.

| Emoter                 | Appraising item                  | Trigger                  | Type                 | Polarity |
|------------------------|----------------------------------|--------------------------|----------------------|----------|
| Ted                    | can't imagine life<br>without em | family                   | affect <sup>17</sup> | negative |
| Ted                    | hardly breathe                   | smokes                   | affect               | negative |
| Ted                    | wanted                           | children                 | affect               | positive |
| mum and the<br>aunties | happy                            | that Ted stopped smoking | affect               | positive |
| mum and the<br>aunties | didn't want                      | Ted dying from smoking   | affect               | negative |

Table 5.21. Emoters in Family TV ad

This is in contrast to the cigarette packs and the *Every Cigarette is Doing You Damage* campaign where there is virtually no affect expressed. And if there's no affect, there can be no emoter<sup>18</sup>. This is illustrated in the transcript of the *Eye* TV ad in Table 5.22 where there is no affect.

---

<sup>17</sup> Affect highlighted pink

Judgement highlighted blue

Appreciation highlighted yellow

Positive polarity highlighted green

Negative polarity highlighted red

<sup>18</sup> Animals and other personified things can also express affect, but these instances do not occur in the corpus.



|   |
|---|
| <b>Eye TV ad</b>  |
| <i>Every cigarette is doing you damage. Chemicals from tobacco smoke get into your bloodstream and can damage the delicate blood vessels inside your eye. We now know that smoking is a major cause of irreversible blindness. Every cigarette is doing you damage.</i> |

Table 5.22. Eye TV ad transcript

*Image*

In addition to the abundance of human participants in posters and TV ads, the static and moving images of the *Don't Make Smoke your Story* campaign construe more interactional meanings than language does interpersonal meanings. A reason for this could relate to the ability for images to construe interpersonal meanings through eye gaze and body orientation, which is lacking in language. In the campaign, personalising is actualised in images through the communicative functions of eye gaze, facial expressions, and involvement. To illustrate this, we take the *Family* TV ad as an example, illustrated in [Video 5.5](#).

Turning first to eye gaze. At various stages throughout the ad, Ted looks directly at the viewers. Kress and van Leeuwen (2006) call this kind of image a 'demand' image as the participants' eye gaze "demands that the viewer enter into some kind of imaginary relation with him or her" (p. 118). The 'demand' image, with the represented participant looking directly at the viewer, realises a visual "you" (Kress & van Leeuwen, 2006, p. 122), as if saying, "I want your attention". Table 5.23 illustrates some examples of the 'demand' image in shots 15, 21 and 25 of the *Family* TV ad. In these three shots, the represented participants are looking directly at the camera, and therefore at the audience. These demand shots are inviting the audience to enter into an imaginary relationship with the represented participants.

To understand what kind of imaginary relationship, we need to look at the facial expressions exhibited by the represented participants.

In Table 5.23, all represented participants are smiling directly at the viewers. Kress and van Leeuwen (2006) state that this demands the viewers enter into social affinity with the represented participants. Taken in conjunction with the language, the smiling represented participants looking directly at the audience suggests that they are inviting smokers to quit smoking so that they too can be happy with their families. This parallels the emoters identified in the language analysis in Table 5.21. While these happy facial expressions relate more to positivity, these ‘demand’ shots and happy facial expressions personalise quitting as it becomes associated with happiness. And as we will see in Chapter 7, this is because the strategy of personalising regularly combines with the strategy of positivity.

| Shot | Still-image  |
|------|--|
| 15   |  |
| 21   |  |

25



Table 5.23. 'Demand' shots of Family TV ad

The 'demand' images interact closely with the image system of INVOLVEMENT put forward by Kress and van Leeuwen (2006). INVOLVEMENT has to do with how involved the represented participants are with the viewers in a similar manner that language can involve the reader. In the case of the TV ad, there is a high level of involvement between the represented participants and the viewer through the use of frontal angles, with the represented participants facing the audience face on. The 'demand' and 'involved' images invite viewers to identify with the represented participants and to also quit smoking for their families. These 'demand' images with happy facial expressions and frontal angles occur regularly in the *Don't Make Smokes your Story* campaign and other personalising campaigns to involve the audience into the represented participants' world, whether that be in relation to quitting or smoking. Oftentimes, even when the represented participants are not making direct eye contact with the viewer, they are looking at each other, and often showing affection such as hugging and kissing, seen in shots 15 and 20 in Table 5.23. This display of physical affection realises a visual 'us' similar to the language in the analyses above.

Personalising campaigns focusing on smoking are also laden with human participants. In the *Breathless* TV ad, emphysema is approached from the smoker's experience, instead of the centring on the physical damage it causes like in the *Emphysema* cigarette pack. Table 5.24

shows how the same negative consequence of smoking can be represented from a personalising perspective or a technicalised perspective in images. Looking at the images in Table 5.24, the still image from the *Breathless* TV ad depicts the emotional distress emphysema causes to the smoker and those around them. On the other hand, the *Emphysema* cigarette pack approaches emphysema from a disease perspective, showing audiences what a diseased emphysema lung looks like. This is one example of how the NTC comes at smoking from various perspectives.

| <i>Breathless</i> TV ad  | <i>Emphysema</i> 2012 cigarette pack   |
|--|--|
|  | <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>Front of pack</p>  </div> <div style="text-align: center;"> <p>Back of pack</p>  </div> </div> |

Table 5.24. Technicalisation and personalisation of emphysema

### Sounds

In addition to language and images construing personalisation interpersonally, so too do the sounds in the three TV ads and the radio ad in the *Don't Make Smokes your Story* campaign.

Ted's voice is the Figure in all TV and radio ads. He uses fragments of Aboriginal English which serves to establish a relationship between himself and the Indigenous target audience. An example can be found in the *Mates* TV ad ([Video 5.6](#)) where Ted says “*Quitting isn't easy but **yarning** with Terry from *Quitline* was great*”. Ted's voice is further personalised by being relatively high pitched and highly modulated, which is in stark contrast to the low pitched and unmodulated voice of the voiceover of the *Artery* TV ad ([Video 5.2](#)). The *Family* TV ad is further personalised by the children's laughter fading in and out of the Ground, which again, shows that smoking/quitting affects the smoker and those around them.

Campaigns that personalise smoking or quitting create a range of interpersonal meanings across all three semiotic resources. The personalisation of smoking shows smokers how smoking affects one's quality of life, and the quality of life of those around them. Being sick means you have less time to spend with your family, and it also means they must suffer from smoking-related diseases. Conversely, the personalisation of quitting shows how quitting improves your quality of life and allows you to spend more time with your family, also improving their lives.

### 5.2.3. How is personalising construed textually?

The textual realisation of personalising prioritises the human experience of quitting and smoking. This is achieved in images by bringing salience to human participants, and in language by giving thematic status to Ted and his family.

#### *Image*

In Table 5.25, human participants take up the majority of the posters. Within the human participants, it is Ted who is the most salient element. According to Kress and van Leeuwen

(2006), elements gain salience through their centre positioning, size, sharpness of focus and the amount of light falling on the element. In Table 5.25, Ted is the most salient and “the most eye-catching element” (Kress & van Leeuwen, 2006, p. 176) due to his size, centre placement and light falling on his face, and shoulders. The prominence of human participants in the *Don’t Make Smokes your Story* campaign organises quitting around Ted and his family, thus personalising the campaign.

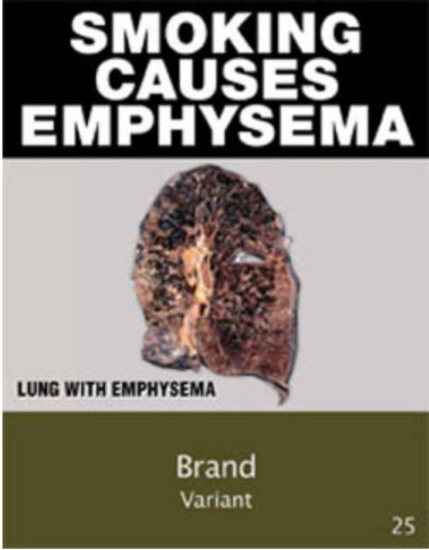
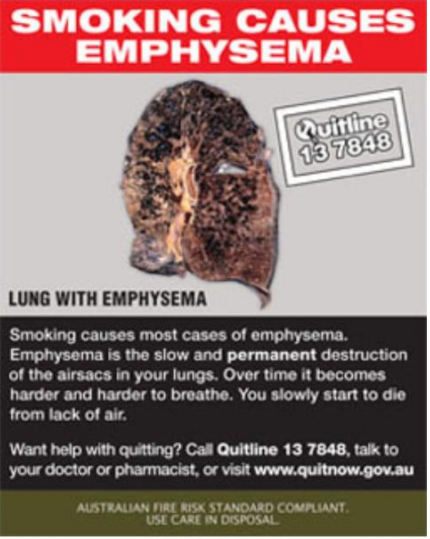
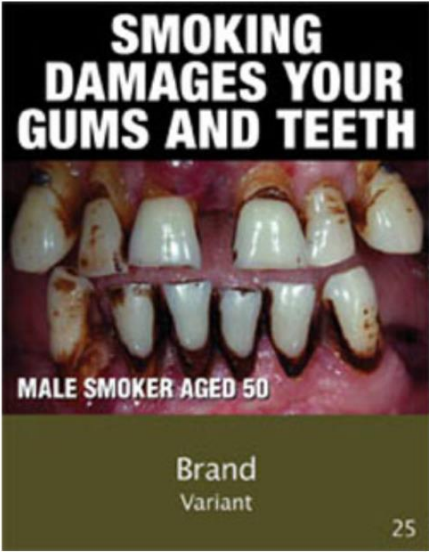

***Don’t Make Smokes your Story* posters**



*Table 5.25. Human participants in Don’t Make Smokes your Story posters*

This prominence and salience of human participants is further observed in campaigns that personalise smoking such the *Breathless* TV ad. In a similar manner to Table 5.25, in [Video 5.7](#), the smoker takes up the majority of the shots. There are mostly extreme close-ups of his face which highlight his distress at being unable to breathe. These two campaigns are in sharp contrast to the cigarette packs where it is body parts that have prominence, shown in Table 5.26.



| Cigarette packs       | Image  |  |
|-----------------------|--|--|
| <i>Emphysema</i>      | <p>Front of pack</p>    | <p>Back of pack</p>    |
| <i>Gums and Teeth</i> | <p>Front of pack</p>  | <p>Back of pack</p>  |

|                             |  |  |
|-----------------------------|--|--|
| <p><i>Heart Disease</i></p> | <p>Front of pack</p>  | <p>Back of pack</p>  |
|-----------------------------|--|--|

Table 5.26. Prominence of body parts on cigarette packs

### Language

In the *Don't Make Smokes your Story* campaign, thematic status is given to Ted and his family in the campaign to foreground the human experience of quitting. As noted by Halliday and Matthiessen (2014), the Theme is the departure of the message and “orients the clause within the context” (p. 189). The Theme is the prominent part of the message and guides the audience towards the interpretation of the message (p. 89). In the analyses, we make a distinction between marked and unmarked topical (ideational) Themes by drawing on Martin and Rose (2007) and Martin et al. (2010). The unmarked topical Theme sustains continuity within a text while the marked Theme signals a new phase in discourse (p. 192). In the Theme/Rheme analysis of the *Don't Make Smokes your Story* radio ad in Table 5.27, it is Ted, and his family, who are the unmarked topical Themes. This makes human participants the point of departure when it comes to quitting, therefore personalising the ad. *I* as unmarked



topical Theme sustains continuity in highlighting Ted on his quit journey. The use of *I* and other human participants is the language equivalence of salience in the images.

|                      |                               |                        |  |   |
|----------------------|-------------------------------|------------------------|--|---|
| <p>so</p> <p>and</p> | <p>Sometimes</p> <p>Don't</p> | <p>Over the years,</p> | <p>I</p> <p>My lungs</p> <p>I</p> <p>I</p> <p>I</p> <p>I</p> <p>I</p> <p>I</p> <p>I</p> <p>Mum and the<br/>aunties</p> <p>They</p> <p>dad</p> <p>My name</p> <p>family</p> | <p>'ve had my battles with smokes.</p> <p>got pretty bad,</p> <p>could hardly breathe.</p> <p>'m not sure why I smoked;</p> <p>just did.</p> <p>wanted to be there for my kids,</p> <p>quit.</p> <p>'ve quit before;</p> <p>just kept trying.</p> <p>get to see their smiles everyday.</p> <p>are pretty happy too.</p> <p>didn't want me to die from smokes<br/>like</p> <p>did.</p> <p>is Ted,</p> <p>is my story.</p> <p>make smokes your story.</p> |
|----------------------|-------------------------------|------------------------|--|---|

| <b>Textual Theme</b> | <b>Interpersonal Theme</b> | <b>Marked topical Theme</b> | <b>Unmarked topical Theme</b> | <b>Rheme</b> |
|----------------------|----------------------------|-----------------------------|-------------------------------|--------------|
|----------------------|----------------------------|-----------------------------|-------------------------------|--------------|

Table 5.27. Theme/Rheme analysis of Don't Make Smokes your Story radio ad

Broadly speaking, personalising campaigns tell the stories of individuals. This is the case for both personalising campaigns focusing on quitting such as the *Don't Make Smokes your Story* campaign and other campaigns that focus on smoking such as the *Stop before the Suffering Starts* campaign. Unlike technicalising campaigns that prioritise ideational meanings and lack interpersonal meanings, personalising campaigns prioritise interpersonal meanings by fostering interpersonal relationships between the represented participants and the audience. The ideational and textual metafunctions both serve these interpersonal meanings by highlighting the human participants in campaign materials. This is similar to what we saw in Chapter 4 in negative and positive campaigns where the ideational and textual metafunctions both serve the interpersonal meanings being construed.

### 5.3. Chapter summary

This chapter explored how technicalising and personalising are conveyed in campaigns across a range of semiotic resources. Campaigns that employ the strategy of technicalising educate audiences of the damage and disease smoking causes to the body, and of how the body repairs itself after quitting. In campaigns that focus on smoking, technicalising is actualised by thing entities realised by body parts, and activity entities realised by *smoking* and the diseases of smoking. Within individual campaigns, it is possible to build large taxonomies of all the body parts damaged by smoking. This damage and disease caused by smoking is often conveyed through unfolding activity series where each damage is worse

than the previous damage. In campaigns that focus on quitting, the same semiotic features apply. Thing entities establish large composition taxonomies of body parts that are repaired after quitting smoking. This repair is also realised dynamically by explaining that the body repairs itself after quitting. On the whole, technicalising campaigns highlight how the body is affected by smoking or quitting, and this is construed in language, image and sound resources.

On the other hand, campaigns that employ the strategy of personalising, focus on the effects smoking/quitting has on the person and those around them. These campaigns tend to bring a face to smoking/quitting and are thus highly interpersonal. They involve the audience with the represented participants by prioritising human participants in the materials. In such personalising campaigns, it is possible to build a large taxonomy of all the people who suffer from smoking and benefit from quitting. In campaigns focusing on smoking, the audience is invited to experience the emotional suffering caused by smoking. In campaigns focusing on quitting, human participants highlight how quitting can change the lives of smokers and their loved ones. An imaginary relationship is created where the audience is invited to share in this positive experience.

Technicalising then can be seen as being body-focused while personalising is person and experience-focused. Neither is better than the other in discouraging smoking and promoting quitting. Rather these strategies along with negativity/positivity and actual/possible behaviour tackle smoking from various perspectives to reach as many Australians as possible. In the next chapter, we present the final set of strategies used to describe the NTC: actual/possible behaviour.

## CHAPTER 6

### ACTUAL/POSSIBLE BEHAVIOUR

The two previous chapters showed that the NTC can be organised according to two sets of contrasting strategies: negativity/positivity and technicalising/personalising, respectively.

This chapter explores the third set of rhetorical strategies that organise the NTC:

actual/possible behaviour. Broadly speaking, actual behaviour refers to campaigns that focus more on a behaviour that has happened in the past or is happening in the here-and-now, where behaviour refers to either smoking or quitting, or any action/event related to smoking or quitting. Possible behaviour refers to campaigns that tend to focus on a behaviour that has not yet taken place or a behaviour that has the possibility of taking place. Although actual and possible behaviour are independent of each other, there is regularly an interplay between them throughout the NTC. Indeed, no matter how much focus is on actual behaviour, there is always an aspect of possible behaviour in every campaign, largely through smokers being urged to call or visit Quitline.

In the previous chapters we showed how each strategy can be identified by specific features in language, image and sound, for example, negative attitude is a feature of negativity, and people entities are a feature of personalising. We also showed that these semiotic features come together in texts in various ways to construe each strategy. This is not always the case for actual and possible behaviour. While there are certain features that can construe one

strategy over the other, on the whole we cannot rely on one feature alone, but on how a range of features come together in texts to construe actual or possible behaviour.

In addition, as stated in Chapter 3, while images construe negativity/positivity and technicalising/personalising independently from language, this is not the case for actual and possible behaviour. Rather, it is language that primarily realises actual/possible behaviour, which means the interpretation of images as actual or possible is dependent upon language setting up the behaviour as actual or possible. Sound also does not construe a behaviour as happening now or in the future, and so is not analysed in this chapter.

This chapter again takes a metafunctional approach to understand the construals of actual and possible behaviour. Section 6.1 presents the analysis of actual behaviour and Section 6.2 presents the analysis of possible behaviour. In Sections 6.1 and 6.2, a variety of materials are used to show how actual and possible behaviour are construed in texts. Section 6.3 presents the interplay between actual and possible behaviour.

### **6.1. Actual behaviour**

Campaigns that centre more on actual behaviour typically depict smoking or quitting as a behaviour that has happened or that is happening in the here-and-now. They also focus on the consequences of smoking and quitting as having happened or as actually happening in the here-and-now. This section draws on a number of campaigns to illustrate the linguistic features that construe smoking or quitting as an actual behaviour. First, we step through each linguistic feature individually, then we demonstrate that these linguistic features must be analysed together to determine if smoking/quitting is being construed as an actual behaviour or possible behaviour. We will see that although tense is a good indicator of whether a

behaviour has taken place or is yet to take place, this orientation can change with a Circumstance of Location. Furthermore, this section and Section 6.2 will show that there are always phases of actual and possible behaviour in all materials, and that the boundary between a campaign focusing more of actual or possible behaviour is not always clear-cut.

### **6.1.1. How is actual behaviour construed ideationally?**

Ideationally, actual behaviour is construed in texts through verbal groups that convey processes as ‘actualised’. This is in contrast to possible behaviour strategies where processes are ‘non-actualised’. The terms ‘actualised’ and ‘non-actualised’ are used by Halliday and Matthiessen (2014) to refer to the realis and irrealis realms respectively. This study adopts these terms to describe verbal groups that tend to realise actual or possible behaviour. An actualised verbal group describes behaviour that has already taken place or is taking place in the here-and-now and thus construes actual behaviour. On the other hand, non-actualised verbal groups refer to a behaviour that has not yet taken place or takes place in some indefinite fashion in the case of habitual actions, and thus construe possible behaviour.

Ideationally, actualised verbal groups are construed through the present-in-present tense, the past tense, the simple present tense for all process types except material and behavioural processes, and non-finite verbal groups with imperfective aspect (Halliday and Matthiessen, 2014). Non-actualised verbal groups on the other hand, are realised by the simple present tense for material and behaviour processes, the future tense and non-finite verbal groups with perfective aspect (Halliday and Matthiessen, 2014). These are illustrated in Table 6.1. Section 6.1.2 will also show that the imperative mood further construes possible behaviour.

| Linguistic features | Actualised verbal groups  | Non-actualised verbal groups  |
|---------------------|---|---|
| <b>Tense</b>        | <ul style="list-style-type: none"> <li>- Past tense</li> <li>- Present-in-present tense</li> <li>- Simple present tense<br/>(mental, relations,<br/>existential, verbal)</li> </ul> | <ul style="list-style-type: none"> <li>- Simple present (material<br/>and behavioural)</li> <li>- Future tense</li> </ul> |
| <b>Aspect</b>       | <ul style="list-style-type: none"> <li>- Non-finite imperfective</li> </ul>   | <ul style="list-style-type: none"> <li>- Non-finite perfective</li> </ul>   |

*Table 6.1. Ideational realisation of actual and possible behaviour*

Interacting with these verbal groups are Circumstances of Location and Extent. They specify when/where something took place or for how long/how often/how far something took place, respectively. These Circumstances can often shift the reading orientation of actual and possible behaviour depending on whether the Circumstance refers to a behaviour or the consequences of a behaviour as happening in the past, present or future.

### *Language*

Here, we step through each linguistic feature identified in Table 6.1 before exploring how they come together in texts to construe actual behaviour. To do this we look at a range of materials that tend to focus on actual behaviour, although, as mentioned previously, all materials have instances of possible behaviour urging smokers to seek help with quitting.

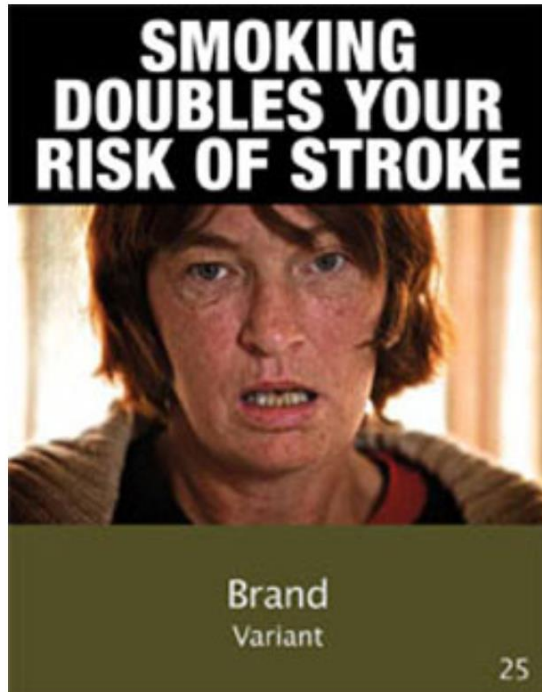
### Past tense

The past tense denotes a process that has taken place in the past, and thus has been actualised.

This is seen in the *Strokes* cigarette pack in Image 6.1 where Cynthia explains she had a

stroke which caused her permanent damage. Actual behaviour in the cigarette pack is mainly realised through the past tense highlighted pink in Table 6.2. Aspect is not analysed just yet; this will be done at a later stage.

Front of pack



Back of pack



Image 6.1. Stroke 2012 cigarette pack



|  |
|--|
| <b><i>Stroke</i> cigarette pack</b>  |
| Cynthia, a smoker for 25 yrs, <b>had</b> a stroke aged 39.                 |
| The stroke <b>damaged</b> her ability to speak and move parts of her body. |
| She says   |
| ‘The hardest part <b>was</b> relying on my kids to look after me –         |
| I should be looking after them’.   |
| Don’t think  |
| it can’t happen to you –   |
| younger people suffer strokes too.   |

Table 6.2. Realisation of past tense in *Stroke* 2012 cigarette pack

### Present-in-present tense

Actual behaviour can also be realised ideationally through the present-in-present tense which denotes that a process is taking place in the here-and-now. The present-in-present is also known as the present continuous or present progressive (Halliday & Matthiessen, 2014, p. 254). In the *Artery* radio ad ([Audio 6.1](#)), smoking is presented as a behaviour that is currently happening, and its negative consequences are also presented as immediate and dependent upon smoking. In this sense, smoking as an actual behaviour, and its immediate consequences are presented as actualised. This is presented in Table 6.3 below, where the present-in-present tense is highlighted pink.

Transcript of *Artery* radio ad:

*“Every cigarette is doing you damage. Within seconds of lighting up, chemicals from tobacco smoke are damaging your artery walls – making them sticky and collect tiny fat particles floating in your bloodstream. The more you smoke, the stickier they become, and the faster the fatty deposits build up. If you’re trying to quit, think of the TV ad squeezing out the amount of ‘fatty gunk’ found stuck to the aorta wall of a smoker....aged 32. Every cigarette is doing you damage. Call the Quitline on 131848”.*

|  |
|--|
| <b>Artery radio ad</b>   |
| Every cigarette <b>is doing</b> you damage.  |
| Within seconds of lighting up, chemicals from tobacco smoke <b>are damaging</b> your artery walls – making them sticky and |
| collect tiny fat particles floating in your bloodstream.   |
| The more you smoke, the stickier they become, and  |
| the faster the fatty deposits build up.  |
| If you’re <b>trying</b> to quit  |
| think of the TV ad squeezing out the amount of ‘fatty gunk’ found stuck to the aorta wall of a smoker....aged 32.          |
| Every cigarette <b>is doing</b> you damage.  |
| Call the Quitline on 131848  |

*Table 6.3. Realisation of present-in-present tense in Artery radio ad*

## Simple present tense

The simple present tense also enacts actual behaviour for certain clause types since it construes a process as actually happening in the here-and-now, therefore denoting an actualised process. This is the case for mental, relational, verbal and existential processes. In material and behavioural processes, on the other hand, the simple present tense construes a generalised and habitual process which tends to be more non-actualised, and thus a feature of possible behaviour. To understand the distinction between the simple present that denotes something as actually happening versus something that is a generalised or habitual process, Table 6.4 provides some examples. The simple present tense denoting something is happening in the here-and-now is highlighted pink and that denoting habitual or generalised processes is highlighted red.

| Process type | Example   |
|--------------|---|
| Mental       | <i>I think she is pretty</i> = I am actually thinking she is pretty             |
| Relational   | <i>The table is red</i> = the table actually is red                             |
| Verbal       | <i>She says to go home</i> = she is actually saying to go home                  |
| Existential  | <i>There is an apple on the table</i> = there actually is an apple on the table |
| Material     | <i>She walks home every day</i> = this is a habitual thing that she does        |
| Behavioural  | <i>She cries when she is sad</i> = this is a general thing that she does        |

Table 6.4. Simple present in all process types

To illustrate the difference between the simple present being used to show something is happening in the here-and-now, and the simple present showing habitual or generalised actions in material processes, we take a look at the *Lungs* radio ad ([Audio 6.2](#)). The simple

present denoting actual behaviour as associated with smoking is highlighted pink, and that denoting possible behaviour as associated with smoking is highlighted red in Table 6.5. The two instances of the simple present denoting actual behaviour show that the lungs are like sponges and that smokers feel short of breath now. The two instances of the simple present denoting possible behaviour on the other hand, show that cigarette smoke attacks the delicate membranes on a ‘habitual’ basis – i.e. with little sense of any actual time. The *Lungs* radio ad illustrates the shift between actual and possible behaviour in materials.

Transcript of *Lungs* radio ad:

*“Every cigarette is doing you damage. Lungs are like sponges with millions of tiny airsacs for transferring oxygen. Every breath of tobacco smoke attacks the delicate membranes which separate them; turning the tiny sacs into larger, tar-rimmed holes. No wonder smokers feel out of breath; their lungs are rotting. Every cigarette is doing you damage. Call the Quitline on 131848”.*

|  |
|--|
| <b><i>Lungs radio ad</i></b>   |
| Every cigarette is doing you damage.   |
| Lungs <b>are</b> like sponges with millions of tiny airsacs for transferring oxygen.                           |
| Every breath of cigarette smoke <b>attacks</b> the delicate membranes which <b>separate</b> <sup>19</sup> them |
| turning the tiny sacs into larger, tar-rimmed holes.   |
| No wonder smokers <b>feel</b> short of breath  |
| their lungs are rotting.   |
| Every cigarette is doing you damage.   |
| Call the Quitline on 131848  |

Table 6.5. Simple present construing actual and possible behaviour

### Imperfective aspect

Another linguistic feature that construes a process as actualised or non-actualised in the case of possible behaviour is ASPECT. The system of ASPECT relates to whether non-finite verbal groups are imperfective or perfective (Halliday & Matthiessen, 2014, p. 410). In non-finite verbal groups, the imperfective ASPECT refers to a process that is “in progress, actual, present, ongoing, steady state or (dependent) proposition, while the perfective means goal to be attained, potential, future, starting and stopping, change of state or (dependent) proposal” (Halliday & Matthiessen, 2014, p. 490). For example, in *I saw birds flying in the sky*, *flying* is

---

<sup>19</sup> *separate* here is ambiguous between being a material process, indicating an action, and thus being non-actualised, and a relational circumstantial process, indicating a relative position, and so actualised. Here it can be taken as a relational process meaning *between them*. Although, this is debatable.

the imperfective, and in *she was listening to music to learn Spanish, to learn* is the perfective. In the first example *flying* means that the process is actually happening now, while in the second example *to learn* is the goal to be attained sometime in the future. Halliday and Matthiessen (2014), however, note that there is no clear-cut boundary between the two aspects; instead they are interpreted in more general terms (p. 490).

When determining whether a non-finite verbal group has imperfective or perfective aspect, we must account for the whole verbal group and clause to determine if it is referring to an actualised or non-actualised behaviour. In the *Artery* radio ad, the instances of the imperfective show that the damage smoking causes is happening in the here-and-now. These are bolded and highlighted pink in Table 6.6. *lighting up, making, floating, and squeezing* indicate that what is happening in the body is happening as you smoke. These imperfective aspects are interpreted in relation to the verbal group they are in (if they are in a verbal group), and in relation to the whole text.

|   |
|---|
| <b>Artery radio ad</b>  |
| Every cigarette is doing you damage.  |
| Within seconds of <b>lighting up</b> , chemicals from tobacco smoke are damaging your artery walls – <b>making</b> them sticky, and               |
| collect tiny fat particles <b>floating</b> in your bloodstream.   |
| The more you smoke, the stickier they become, and   |
| the faster the fatty deposits build up.   |
| If you're trying to quit, think of the TV ad <b>squeezing</b> out the amount of 'fatty gunk' found stuck to the aorta wall of a smoker...aged 32. |
| Every cigarette is doing you damage.  |
| Call the Quitline on 131848   |

Table 6.6. Imperfective aspect in Artery radio ad

### Circumstances

The final ideational linguistic resource that conveys actual or possible behaviour are Circumstances of Location and Extent. Circumstances of location answer the questions “when” or “where”, and Circumstances of Extent answer the questions “how long/often” or “how far” (Eggins, 2004, p. 222). Circumstances of Location and Extent work together with verbal groups to construe smoking/quitting and their consequences as actualised or non-actualised. This is seen in the *Artery* radio ad in Table 6.7, bolded and highlighted pink. The Circumstance of Location *within seconds* indicates actual behaviour in combination with the other verbal groups that show that smoking is happening in the here-and-now.

|   |
|---|
| <b>Artery radio ad</b>  |
| Every cigarette is doing you damage.  |
| <b>Within seconds</b> of <b>lighting up</b> , chemicals from tobacco smoke <b>are damaging</b> your artery walls – <b>making</b> them sticky, and |
| collect tiny fat particles floating in your bloodstream.  |
| The more you smoke, the stickier they become, and   |
| the faster the fatty deposits build up.   |
| If you're trying to quit, think of the TV ad squeezing out the amount of 'fatty gunk' found stuck to the aorta wall of a smoker...aged 32.        |
| Every cigarette is doing you damage.  |
| Call the Quitline on 131848   |

Table 6.7. Circumstance of Location in Artery radio ad

Circumstances of Extent also work together with verbal groups to show that something happened in the past. An example is from the *Break the Chain* TV ad where the woman recounts her experience with smoking at the start of the ad. The Circumstance of Extent is bolded and highlighted pink in Table 6.8.



|   |
|---|
| <b>Break the Chain TV ad</b>                                      |
| Rosie next door had a stroke, and doctors say it was from smokes. |
| I was smoking, <b>for years</b> too,                              |
| but I quit.   |
| Family is everything to me.                                       |

Table 6.8. *Circumstance of Extent in Break the Chain TV ad*

These verbal groups and Circumstances need to be analysed together to understand whether smoking/quitting and their consequences are portrayed as an actual or a possible behaviour. It is possible that all these features may not occur in the same text, and that features of possible behaviour is likely to occur in the same text construing actual behaviour. However, by taking the text as a whole, we can understand whether the text is oriented towards someone's current behaviour and the consequences of this behaviour, or whether it is oriented towards a behaviour that has not yet occurred, and those possible consequences. To illustrate how these linguistic resources work together in materials to construe smoking as an actual behaviour, we present an analysis of the *Artery* radio ad, this time exploring all the linguistic features that construe actual behaviour.

The past tense, present-in-present tense, non-finite verbal groups with imperfective aspect and the Circumstance of Location in Table 6.9 are all geared towards explaining the negative consequences of smoking as smokers are actually smoking. This is the same for most of the *Every Cigarette is Doing You Damage* ads where the campaign aims to show the actual and immediate damage of smoking to the body. Overall, the campaign is more oriented towards portraying the actual damage smoking causes as the smoker smokes, even though there are

aspects of possible behaviour, especially at the end of each ad where smokers are urged to seek help with quitting. This is realised by the imperative such as **Call** *Quitline today*, and will be explained in Section 6.2.2.




|   |
|---|
| <b>Artery radio ad</b>  |
| Every cigarette <b>is doing</b> you damage.   |
| <b>Within seconds</b> of <b>lighting up</b> , chemicals from tobacco smoke <b>are damaging</b> your artery walls – <b>making</b> them sticky, and               |
| collect tiny fat particles <b>floating</b> in your bloodstream.   |
| The more you smoke, the stickier they become, and   |
| the faster the fatty deposits build up.   |
| If you're <b>trying</b> to quit, think of the TV ad <b>squeezing</b> out the amount of 'fatty gunk' <b>found stuck</b> to the aorta wall of a smoker...aged 32. |
| Every cigarette <b>is doing</b> you damage.   |
| Call the Quitline on 131848   |

Table 6.9. Actual behaviour in Artery radio ad

### Image

The interpretation of images as actual behaviour is dependent upon language. In the *Artery* TV ad ([Video 6.1](#)), as the surgeon squeezes out the “fatty gunk” from the aorta, illustrated in Table 6.10, the voiceover says “*this is part of an aorta, the main artery to the heart. Smoking makes artery walls sticky and collect dangerous fatty deposits. This much was found stuck to the aorta wall of a smoker, aged 32*”. The imperfective and past tense indicate actualised

processes. The series of shots that accompany the voiceover show the audience the actual damage that smoking causes to the aorta – by using actualised processes to describe the image, it affords an interpretation of the image as *actual* as well.

| Shot | Image   | Voiceover   |
|------|---|---|
| 12   |    | <p><i>This is part of an aorta,<br/>the main</i></p>    |
| 13   |   | <p><i>artery from the heart.<br/>Smoking</i></p>        |
| 14   |  | <p><i>makes artery walls sticky<br/>and collect</i></p> |



|    |   |  |
|----|---|--|
| 15 |  | <p><i>dangerous fatty deposits.</i></p> <p><i>This much was found stuck to the aorta of a smoker</i></p> |
| 16 |  | <p><i>aged 32.</i></p>   |

Table 6.10. Shots of actual damage from Artery TV ad

The linguistic resources identified as construing actual behaviour need to be taken together since they might also construe possible behaviour when interacting with other linguistic features. Furthermore, while images themselves cannot construe actual or possible behaviour, they are interpreted this way for being superimpose with the voiceover.

### 6.1.2. How is actual behaviour construed interpersonally?

Interpersonally, actual behaviour is construed through realis affect as described by Martin and White (2005). The opposite is true for possible behaviour which is construed through irrealis affect. Realis affect relates to emotions orienting to existing states while irrealis affect relates to emotions about possible future states (Bednarek, 2008). Realis affect is generally realised by emotive mental processes such as *I like it*, while irrealis affect is generally

realised by desiderative processes such as *I want it* (Martin, 2017). Martin and White (2005) group realis affect into three major emotions: un/happiness, in/security and dis/satisfaction, illustrated in Table 6.11. Irrealis affect is categorised separately as dis/inclination and involves desire or fear, illustrated in Table 6.12. Based on this, realis affect functions as a feature of actual behaviour since it relates to existing states, while irrealis affect functions as a feature of possible behaviour since it refers to future states.

| UN/HAPPINESS                              | Surge (of behaviour)                     | Disposition                                    |
|---|--|--|
| <b>unhappiness</b>                        |  |  |
| misery<br>[mood: 'in me']                 | whimper<br>cry<br>wail                   | down [low]<br>sad [median]<br>miserable [high] |
| antipathy<br>[directed feeling: 'at you'] | rubbish<br>abuse<br>revile               | dislike<br>hate<br>abhor                       |
| <b>happiness</b>                          |  |  |
| cheer                                     | chuckle<br>laugh <sup>2</sup><br>rejoice | cheerful<br>buoyant<br>jubilant                |
| affection                                 | shake hands<br>hug<br>embrace            | be fond of<br>love<br>adore                    |

| <b>IN/SECURITY</b>      | <b>Surge (of behaviour)</b>             | <b>Disposition</b>  |
|-------------------------|---|---|
| <b>insecurity</b>       |   |   |
| disquiet                | restless<br>twitching<br>shaking        | uneasy<br>anxious<br>freaked out                              |
| surprise                | start<br>cry out<br>faint               | startled<br>jolted<br>staggered                               |
| <b>security</b>         |   |   |
| confidence              | declare<br>assert<br>proclaim           | together<br>confident<br>assured                              |
| trust                   | delegate<br>commit<br>entrust           | comfortable with<br>confident in/about<br>trusting            |
| <hr/>                   |   |   |
| <b>DIS/SATISFACTION</b> | <b>Surge (of behaviour)</b>             | <b>Disposition</b>  |
| <b>dissatisfaction</b>  |   |   |
| ennui                   | fidget<br>yawn<br>tune out              | flat<br>stale<br>jaded  |
| displeasure             | caution<br>scold<br>castigate           | cross, bored with<br>angry, sick of<br>furious, fed up with   |
| <b>satisfaction</b>     |   |   |
| interest                | attentive<br>busy<br>industrious        | involved<br>absorbed<br>engrossed                             |
| pleasure                | pat on the back<br>compliment<br>reward | satisfied, impressed<br>pleased, charmed<br>chuffed, thrilled |

*Table 6.11. Major emotions of affect - realis (Martin & White, 2005)*

| DIS/INCLINATION | Surge (of behaviour)         | Disposition                   |
|-----------------|------------------------------|-------------------------------|
| fear            | tremble<br>shudder<br>cower  | wary<br>fearful<br>terrorised |
| desire          | suggest<br>request<br>demand | miss<br>long for<br>yearn for |

Table 6.12. *Irrealis affect* (Martin & White, 2005)

Realis affect construes actual behaviour in the *Husband* radio ad ([Audio 6.3](#)) from the *Stop before the Suffering Starts* campaign. In this radio ad, a woman describes a series of symptoms her husband is experiencing. Initially it sounds like they are symptoms of smoking, but they are in fact minor symptoms of quitting. Table 6.13 presents the affect analysis depicting how the woman’s husband is feeling in the here-and-now as he is going through smoking withdrawal. In the context of the whole campaign, these symptoms are not severe in relation to the suffering smokers experience from smoking-related diseases.

Transcript of *Husband* radio ad:

*“Woman: Paul has a pounding headache. These last few days, we’ve tried to stay out of his way. The coughing is worse. He feels anxious<sup>20</sup> all the time. And I feel so powerless, because there’s nothing I can do. It’s hard to watch him suffer. But, like the cravings, I know it’ll pass. Because I know that quitting won’t kill my husband.*

*Voiceover: It’s not always easy to quit smoking. But a little suffering now can save a lot of suffering later. Call Quitline on 13 7848, and stop before the real suffering starts”.*

---

<sup>20</sup> *Anxious* is irrealis affect and is explored in Section 6.2.

| Emoter  | Appraising item | Trigger  | Type        | Polarity |
|---------|-----------------|----------|-------------|----------|
| wife    | powerless       | husband  | unhappiness | negative |
| husband | suffer          | quitting | unhappiness | negative |
| smokers | suffering       | quitting | unhappiness | negative |
| smokers | suffering       | quitting | unhappiness | negative |

Table 6.13. *Realis affect in Symptoms radio ad*

### 6.1.2. How is actual behaviour construed textually?

As with the previous strategies, in the TV and radio ads of the *Every Cigarette is Doing You Damage* campaign, actual behaviour is construed textually in language through the HyperTheme setting up an actualised statement about smoking causing damage to the body. This HyperTheme is then unpacked to explain how smoking causes damage as the smoker is smoking. The actualised statement in the HyperTheme is then picked up again in the HyperNew to consolidate the immediate and on-going damage resulting from smoking. The HyperThemes and HyperNews are often the slogan *every cigarette is doing you damage*. Example 6.1 illustrates the HyperTheme/HyperNew analysis of the *Artery* radio ad, where the present-in-present tense highlighted pink is used in the HyperTheme and HyperNew to denote the damage being caused as you smoke.



[HyperTheme]

Every cigarette **is doing** you damage.

Within seconds of lighting up, chemicals from tobacco smoke are damaging your artery walls – making them sticky, and collect tiny fat particles floating in your bloodstream. The more you smoke, the stickier they become, and the faster the fatty deposits build up. If you're trying to quit, think of the TV ad squeezing out the amount of 'fatty gunk' found stuck to the aorta wall of a smoker...aged 32.

[HyperNew]

Every cigarette **is doing** you damage. Call the Quitline on 131848

*Example 6.1. HyperTheme/HyperNew analysis of Artery radio ad*

The strategy of actual behaviour has two purposes in the NTC: 1) to highlight the immediate and actual damage of smoking; and 2) to highlight the body's immediate and actual repair process, thus always interacting with negativity and positivity. Actual behaviour cannot be identified by one linguistic feature alone, instead it is a host of interacting features that together tend to focus on smoking/quitting and their impact as actually happening. This is also the case for possible behaviour below, where although there is always an aspect of possible behaviour in materials, the distinction between whether a text is highlighting smoking/quitting and their possible consequences, can be blurred.

## **6.2. Possible behaviour**

This section presents the results of the contrasting strategy to actual behaviour, known as possible behaviour. While the rhetorical strategy of actual behaviour tends to centre on a

behaviour that has happened and/or is happening in the here-and-now, the strategy of possible behaviour tends to focus on the possibility of a behaviour occurring or on a behaviour that has not yet happened. Campaigns that centre more on possible behaviour typically depict a particular future they want audiences to consider. This possible future can be positive or negative, depending on whether it interacts with positivity or negativity, respectively.

To illustrate this, this section steps through the *Health Benefits* campaign to show how quitting is put forward as a possible behaviour. Two posters (Images 6.2 and 6.3) and a radio ad ([Audio 6.4](#)) are selected for analysis to show how the body starts to repair itself after quitting smoking. This section also provides some examples from the *Health Warnings 2012* campaign, to demonstrate how smoking can be set up as a possible behaviour. In the same way as the metafunctional actualisation of actual behaviour in Section 6.1, possible behaviour is primarily construed linguistically as the images to do not show options for metafunctional work in this way.

# STOP SMOKING START REPAIRING

**In 1 week**  
your sense of taste  
and smell improves

**In 1 month**  
skin appearance is  
likely to improve

**In 3 months**  
your lung function  
begins to improve

**In 5 days**  
most nicotine is  
out of your body

**In 12 hours**  
excess carbon  
monoxide is out  
of your blood

**In 12 months**  
your risk of heart  
disease has halved

**In 1 year**  
a pack-a-day  
smoker will  
save over  
\$13,500

**Today**  
quit before  
getting pregnant  
and your risk  
of having a  
pre-term baby  
is reduced  
to that of a  
non-smoker

**EVERY CIGARETTE YOU DON'T SMOKE  
IS DOING YOU GOOD**

**Quit**  
100%  
Quit  
For Life

**Quitline.13 7848**  
health.gov.au/quitnow

**Quit Now:**  
My QuitBuddy

**Australian Government**

Image 6.2. Health Benefits campaign poster – woman



Image 6.3. Health Benefits campaign poster – man

Transcript of *Health Benefits* radio ad:

*“The day you stop smoking, your body starts to repair itself. In 8 hours, excess carbon monoxide is out of your bloodstream. In five days, most nicotine has left your body. In three*

*months, your lung function begins to improve. In a year, your risk of a heart attack is halved and your risk of lung cancer is falling too. Every cigarette you don't smoke is doing you good. Stop smoking today".*

### **6.2.1. How is possible behaviour construed ideationally?**

As mentioned in Section 6.1.1, ideationally, possible behaviour is construed through a range of tenses including the simple present in material and behavioural processes, and the future tense; through the use of perfective aspect in non-finite verbal groups; and through Circumstances of Location and Extent denoting a future behaviour or a habitual behaviour. In a similar way to Section 6.1.1, we step through each of these individually before exploring how they work together to construe possible behaviour in materials.

#### Simple present tense

As noted above, material and behavioural processes in the simple present tense construe habitual or generalised action. This configuration does not tie the process to any specific instance in time in the same manner as the present-in-present or the other process types in the simple present tense. Instead, the simple present in material and behavioural clauses construes a behaviour as non-actualised. To exemplify this, we take a look at the *Emphysema* cigarette pack (Image 6.4) that construes smoking as a possible behaviour. Table 6.14 presents the simple present tenses that construe possible behaviour, highlighted red. Here the simple present construes the constant damage that smoking causes to the body. This is non-actualised since it is not tied to any particular instance. Again, just as we saw with actual behaviour, there are also instances of the simple present in other process types such as

emphysema **is** the slow and permanent destruction of the airsacs which actualises the destruction.

Front of pack

Back of pack

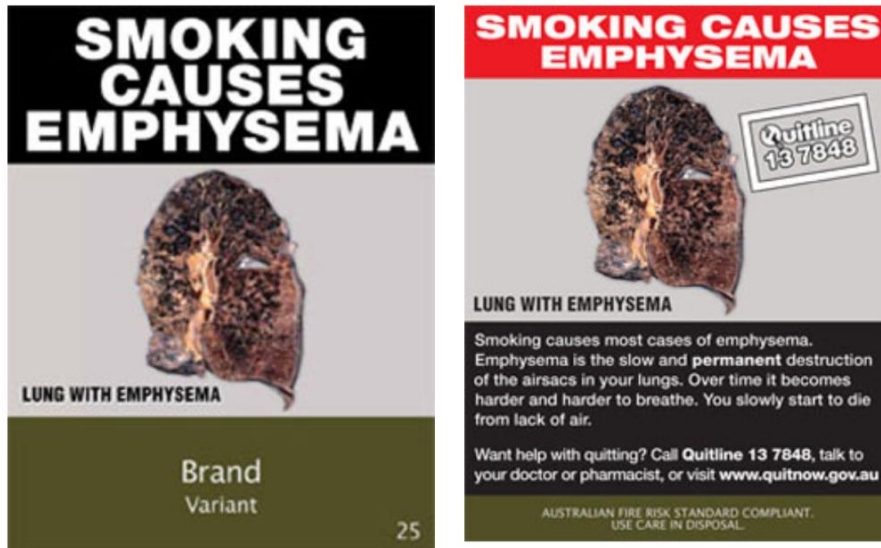


Image 6.4. Emphysema 2012 cigarette pack

| <b><i>Emphysema</i> cigarette pack</b>   |
|--|
| Smoking <b>causes</b> most cases of emphysema.                                       |
| Emphysema is the slow and <b>permanent</b> destruction of the airsacs in your lungs. |
| Over time it <b>becomes</b> harder and harder to breathe.                            |
| You slowly <b>start</b> to die from lack of air.                                     |

Table 6.14. Simple present in Emphysema 2012 cigarette pack

### Future tense

The future tense is the most obvious way of construing something as not yet actualised. The use of future tense to construe possible behaviour is seen in the *Health Benefits* poster



highlighted red in Table 6.15, though as this example shows, it is not the most commonly used resource in this regard.

|  |
|--|
| <b><i>Health Benefits poster – woman</i></b>   |
| In 1 week your sense of smell improves   |
| In 3 months your lung function begins to improve   |
| In 12 hours excess carbon monoxide is out of your blood  |
| In 1 year a pack-a-day smoker <b>will save</b> over \$8300   |
| In 1 month skin appearance is likely to improve  |
| In 5 days most nicotine is out of your body  |
| In 12 months your risk of heart disease has halved   |
| Today quit before getting pregnant and your risk of a pre-term baby is reduced to that of a non-smoker |

*Table 6.15. Future tense in Health Benefits poster*

#### Perfective aspect

As mentioned above, non-finite verbal groups with perfective aspect refer to “goal to be attained, potential, future, starting and stopping, change of state or (dependent) proposal” (Halliday & Matthiessen, 2014, p. 490). This tends to indicate that something is not yet actualised and is thus a feature of possible behaviour. Again, as mentioned previously, we cannot always rely solely on one linguistic feature to determine whether smoking/quitting and their consequences are construed as actual or possible behaviour. Taking the *Health Benefits* radio ad as an example, Table 6.16 shows the perfective aspect as referring to the benefits of

quitting as not yet actualised. The verbal group and any verbal group complexes are highlighted red with the perfective aspect bolded. The simple present tense with the perfective aspect in the same verbal group construes the benefits of quitting as a process that is not tied to any instance in time. Furthermore, as we will see below, the Circumstances of Location are a key indicator that these verbal groups need to be read as non-actualised verbal groups.

Transcript of *Health Benefits* radio ad:

*“The day you stop smoking, your body starts to repair itself. In 8 hours, excess carbon monoxide is out of your bloodstream. In five days, most nicotine has left your body. In three months, your lung function begins to improve. In a year, your risk of a heart attack is halved and your risk of lung cancer is falling too. Every cigarette you don’t smoke is doing you good. Stop smoking today”.*



|  |
|--|
| <b><i>Health Benefits Radio ad</i></b>                         |
| The day you stop smoking,                                      |
| your body <b>starts to repair</b> itself.                      |
| In 8 hours, excess carbon monoxide is out of your bloodstream. |
| In five days, most nicotine has left your body.                |
| In three months, your lung function <b>begins to improve</b> . |
| In a year, your risk of a heart attack is halved and           |
| your risk of lung cancer is falling too.                       |
| Every cigarette you don't smoke is doing you good.             |
| Stop smoking today.  |

*Table 6.16. Perfective aspect in Health Benefits radio ad*

### Circumstance

As mentioned previously, Circumstances of Location can shift the reading position from actual to possible behaviour or vice versa, regardless of the type of verbal groups in the clause. A prime example of this is in the *Health Benefits* poster. The Circumstances of Location that refer to a future time are highlighted red in Table 6.17.

| <b><i>Health Benefits poster – woman</i></b>                    |
|---|
| In <b>1 week</b> your sense of smell improves                   |
| In <b>3 months</b> your lung function begins to improve         |
| In <b>12 hours</b> excess carbon monoxide is out of your blood  |
| In <b>1 year</b> a pack-a-day smoker will save over \$8300      |
| In <b>1 month</b> skin appearance is likely to improve          |
| In <b>5 days</b> most nicotine is out of your body              |
| In <b>12 months</b> your risk of heart disease has halved       |
| <b>Today</b> quit before getting pregnant and                   |
| your risk of a pre-term baby is reduced to that of a non-smoker |

*Table 6.17. Circumstances in Health Benefits poster*

In each of the clauses in Table 6.17, the Circumstances of Location tell us that everything that follows takes place at various points in the future. This means all the verbal groups in the clause must be taken as non-actualised, even if in other contexts they would primarily construe an actualised clause. A key example in Table 6.17 is *In 12 hours excess carbon monoxide is out of your blood*. The relational process *is*, being in the simple present would be actualised under previous discussion. And indeed if you take the clause without the Circumstance, it reads that way: ‘excess carbon monoxide is out of your blood’. But adding the Circumstance overrides this and positions the tense within a non-actualised future. Therefore, all the verbal groups in the poster construe possible behaviour because of the Circumstances, highlighted red in Table 6.18. This is a key example that demonstrates how

these tenses, aspect and Circumstances must be taken together to determine whether smoking/quitting and their consequences is construed as actual or possible behaviour.

|  |
|--|
| <b><i>Health Benefits poster – woman</i></b>                           |
| In <b>1 week</b> your sense of smell <b>improves</b>                   |
| In <b>3 months</b> your lung function <b>begins to improve</b>         |
| In <b>12 hours</b> excess carbon monoxide <b>is</b> out of your blood  |
| In <b>1 year</b> a pack-a-day smoker <b>will save</b> over \$8300      |
| In <b>1 month</b> skin appearance <b>is</b> likely <b>to improve</b>   |
| In <b>5 days</b> most nicotine <b>is</b> out of your body              |
| In <b>12 months</b> your risk of heart disease <b>has halved</b>       |
| <b>Today</b> quit before <b>getting pregnant</b> and                   |
| your risk of a pre-term baby <b>is reduced</b> to that of a non-smoker |

*Table 6.18. Circumstances and verbal groups in Health Benefits poster*

Ideationally, possible behaviour is actualised in language through the interaction of the simple present tense in material and behavioural processes, the future tense, the perfective aspect, and various Circumstances set in the future. These linguistic features portray smoking/quitting and their consequences as either habitual, or as having the possibility of happening in the future.

### 6.2.2. How is possible behaviour construed interpersonally?

From an interpersonal perspective, possible behaviour is enacted in materials through the imperative mood and irrealis affect. The imperative mood is part of the interpersonal metafunction and realises proposals (commands) that have not yet been actualised. In this way, they construe possible behaviour. As mentioned throughout this chapter, there is always an element of possible behaviour in the NTC materials where smokers are urged to quit smoking. Table 6.19 presents a number of examples where the imperative is used at the end of ads to urge smokers to quit smoking. The imperatives are highlighted red. The imperative is used in negative and positive, and technicalising and personalising campaigns, demonstrating that all campaigns urge smokers to quit for a better future. Therefore, we can say that all campaigns construe quitting as a possible behaviour.

| <b>Campaign</b>   | <b>Imperative</b>   |
|---|---|
| <i>Health Warnings 2006/2012</i> cigarette packs            | <b>Call</b> Quitline, <b>talk</b> to your doctor or pharmacist or <b>visit</b> www.quitnow.com.au |
| <i>Every Cigarette is Doing You Damage</i> TV and radio ads | <b>Call</b> the Quitline on 131848  |
| <i>Don't Make Smokes your Story</i> TV ads                  | For help, <b>download</b> the “myQuitBuddy” app, <b>call</b> the Quitline or <b>visit</b> Quitnow |
| <i>Quit for You, Quit for Two</i> TV ad                     | <b>Phone</b> Quitline today and <b>ask</b> about “Quit for You, Quit for Two”                     |

Table 6.19. Imperatives in NTC materials

In addition to imperatives being used at the end of ads to urge smokers to quit smoking, imperatives are also found throughout ads that focus more on possible behaviour. An example is the *Imagine* radio ad ([Audio 6.5](#)) from the *National Tobacco Youth Campaign*. In Table 6.20, the radio ad starts with an imperative (highlighted red) urging smokers to picture their future if they smoke and ends with an imperative to urge them to aim for an alternate future i.e., quitting.

Transcript of *Imagine* radio ad:

*“Take a deep breath and imagine...hydrogen cyanide – the substance in rat poison entering your throat reaching deep into your chest. Or Benzene – an ingredient in paint stripper charging through your lungs and poisoning your blood stream. You don’t have to imagine – you just have to be a smoker. Every cigarette is doing you damage. NOW is the time to quit. Call 131 848 today”.*

|  |
|--|
| <b><i>Imagine radio ad</i></b>   |
| <b>Take</b> a deep breath and  |
| <b>imagine</b>   |
| hydrogen cyanide - the substance in rat poison entering your throat reaching deep into your chest. |
| Or Benzene – an ingredient in paint stripper charging through your lungs and                       |
| poisoning your blood stream.   |
| You don't have to imagine -  |
| you just have to be a smoker.  |
| Every cigarette is doing you damage.   |
| NOW is the time to quit.   |
| <b>Call</b> 131 848 today.   |

Table 6.20. Imperatives in *Imagine radio ad*

In addition to the imperative mood used to effect change i.e., urging smokers to quit smoking, irrealis affect also construes possible behaviour. As noted above, irrealis affect refers to future states and is realised by desiderative mental processes (Martin, 2017). This is often seen in more personalising campaigns or materials where smokers (although sometimes family members too) express a desire for the future. This is readily observed in the *Don't Make Smokes your Story* campaign where Ted expresses his desire to be around for his family and friends. Such irrealis affect is highlighted red in Table 6.21. In the *Family TV ad*, there is an instance of a desiderative mental process in the past tense, **wanted**. This is an

example of how the line between what constitute actual and possible behaviour is not always clear-cut. In this case, *wanted* is coded as actualised since it is in the past tense, and *to be* would be coded as non-actualised since that is what Ted is wishing for. This is discussed further in Section 6.3.

| <b>Campaign material</b> | <b>Irrealis affect</b>   |
|--------------------------|--|
| <i>Family TV ad</i>      | <i>My kids, Jarrah and Yani, I wanted to be there for them, so I quit</i>        |
| <i>Mates TV ad</i>       | <i>I want to be around for all the good times we [him and his friends] have</i>  |
| <i>Work TV ad</i>        | <i>I want to be there for my wife and kids</i>                                   |
| <i>Radio ad</i>          | <i>They [mum and the aunties] didn't want me to die from smokes like dad did</i> |

Table 6.21. Irrealis affect in Don't Make Smokes your Story campaign

### 6.2.3. How is possible behaviour construed textually?

Adding to the ideational and interpersonal analyses, this section presents the textual analysis of the *Health Benefits* posters and radio ad. Textually, quitting as a possible behaviour is realised through what has thematic position in language and how the language and non-language resources are organised in the posters. In this section, we present the linguistic analyses of the posters and radio ad as well as an organisational analysis of the poster.

#### *Language*

So far, it has been shown that the linguistic features of possible behaviour are enacted through the simple present in material and behavioural clauses, the future tense, perfective

aspect in non-finite verbal groups, future Circumstances, the imperative mood and irrealis affect. In the *Health Benefits* campaign, quitting as a possible behaviour is actualised textually through Circumstances of Location as marked Themes which organise language in a time sequence to signal that what happens is in the future. This is emphasised through the HyperThemes of the posters and radio ad written with non-actualised verbal groups to highlight that these benefits of quitting have not yet occurred.

In the poster, there are various Circumstances of Location such as *in 1 week, in 12 hours, in 5 days*, used as marked Themes to signal that the body has the possibility of repairing itself at some point in the future. The Theme/Rheme analysis of the *Woman* poster is presented in Table 6.22.



|                      |                     |                               |                                    |
|----------------------|---------------------|-------------------------------|------------------------------------|
| before<br>and        | In 1 week           | your sense of taste and smell | improves                           |
|                      | In 3 months         | your lung function            | begins to improve                  |
|                      | In 12 hours         | excess carbon monoxide        | is out of your blood               |
|                      | In 1 year           | a pack-a-day smoker           | will save over \$8300              |
|                      | In 1 month          | skin appearance               | is likely to improve               |
|                      | In 5 days           | most nicotine                 | is out of your body                |
|                      | In 12 months        | your risk of heart disease    | has halved                         |
|                      | Today               | quit                          | getting pregnant                   |
|                      |                     | your risk of a pre-term baby  | is reduced to that of a non-smoker |
| <b>Textual Theme</b> | <b>Marked Theme</b> | <b>Unmarked Theme</b>         | <b>Rheme</b>                       |

*Table 6.22. Theme/Rheme analysis of language in Health Benefits poster*

In the same manner, Circumstances of Location in the radio ad also mark how the body repairs itself after having quit smoking, illustrated in Table 6.23.

|                      |                          |   |                              |
|----------------------|--------------------------|---|------------------------------|
| and                  | The day you stop smoking | your body                                       | starts to repair itself.     |
|                      | In 8 hours               | excess carbon monoxide                          | is out of your bloodstream   |
|                      | In five days             | most nicotine                                   | has left your body           |
|                      | In three months          | your lung function                              | begins to improve.           |
|                      | In a year                | your risk of a heart attack                     | is halved                    |
|                      | [In a year]              | your risk of lung cancer                        | is falling too.              |
|                      |                          | Every cigarette you don't smoke<br>Stop smoking | is doing you good.<br>today. |
| <b>Textual Theme</b> | <b>Marked Theme</b>      | <b>Unmarked Theme</b>                           | <b>Rheme</b>                 |

Table 6.23. Theme/Rheme analysis of Health Benefits radio ad

Moreover, the HyperThemes of the posters and radio ad play a central role in setting up non-actualised statements where the body will repair itself when smokers quit. This HyperTheme is then unpacked to explain how the body starts to repair itself after smoking. Example 6.2 presents the HyperTheme/HyperNew analysis of the radio ad, with the non-actualised verbal groups highlighted red. The use of the non-actualised verbal groups in the HyperTheme sets up the possibility of the body repairing itself given that the smoker stops smoking. The HyperNew then sums up what has been unpacked, again through non-actualised verbal groups, with the last sentence being a command urging smokers to *stop smoking today*.

[HyperTheme]

The day you **stop smoking**, your body **starts to repair** itself.

In eight hours, excess carbon monoxide is out of your bloodstream. In five days, most nicotine has left your body. In three months, your lung function begins to improve. In a year, your risk of a heart attack is halved and your risk of lung cancer is falling too.

[HyperNew]

Every cigarette you **don't smoke** is doing you good. **Stop** smoking today.

*Example 6.2. Hyper-Theme/Hyper-New analysis of Health Benefits radio ad*

*Poster*

Turning to the organisation of the posters, in Images 6.5 and 6.6, the heading *STOP SMOKING, START REPAIRING* is placed at the very top of the poster; it can be said to be the HyperTheme of the entire poster (or in Kress and van Leeuwen's (2006) terms, the Ideal), and the HyperNew of the poster is the slogan at the bottom (or the Real): *Every cigarette you don't smoke is doing you good*; it consolidates what has already been said. The HyperTheme is written in the imperative mood, issuing a command to smokers to stop smoking and start repairing their bodies. This HyperTheme is then unpacked in the language of the labels by non-actualised verbal groups. The lines orient the viewers to the areas of the body that will improve if smokers quit. Moreover, the woman and the man in Images 6.5 and 6.6 respectively, are good- and healthy-looking people, showing smokers that this is how they will look if they quit smoking. This parallels the organisation of the radio ad transcript in Example 6.2; the only difference being that the poster also uses non-linguistic semiotic

resources such as the image and the lines pointing at areas of the body to create textual meanings. The images are only interpreted as possible since the language has already set up these benefits of quitting as non-actualised.

**STOP SMOKING  
START REPAIRING**

**In 1 week**  
your sense of taste  
and smell improves

**In 1 month**  
skin appearance is  
likely to improve

**In 3 months**  
your lung function  
begins to improve

**In 5 days**  
most nicotine is  
out of your body

**In 12 hours**  
excess carbon  
monoxide is out  
of your blood

**In 12 months**  
your risk of heart  
disease has halved

**In 1 year**  
a pack-a-day  
smoker will  
save over  
\$13,500

**Today**  
quit before  
getting pregnant  
and your risk  
of having a  
pre-term baby  
is reduced  
to that of a  
non-smoker

**EVERY CIGARETTE YOU DON'T SMOKE  
IS DOING YOU GOOD**

**Quit Now!**  
Quitline.13 7848  
health.gov.au/quitnow

Quit Now:  
My QuitBuddy

Australian Government

Image 6.5. Health Benefits campaign poster – woman

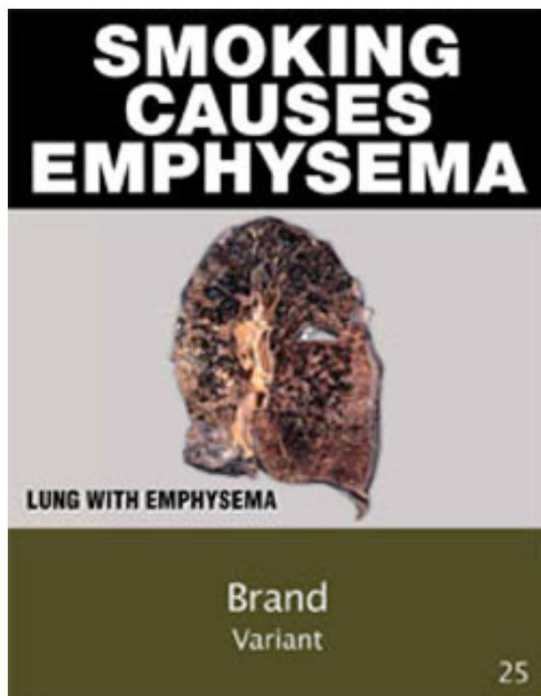


Image 6.6. Health Benefits campaign poster – man

A similar organisation structure is found on the cigarette packs of the *Health Warnings 2012* campaign whereby the heading acts as HyperTheme written in the simple present tense. This is observed in the *Emphysema* cigarette pack in Image 6.7, where the title “SMOKING **CAUSES** EMPHYSEMA” is written using the simple present tense to denote habitual action.

The image underneath shows what emphysema actually looks like, which is more actualised. This is then followed by the health message which unpacks the symptoms of emphysema that a smoker may suffer from if they smoke. The HyperNew in Image 6.7 urges smokers to seek help with **Want** help with quitting? **Call** Quitline 127848, **talk** to your doctor or pharmacist, or **visit** [www.quitnow.gov.au](http://www.quitnow.gov.au). This shifts focus from smoking to quitting.

## Front of pack



## Back of pack

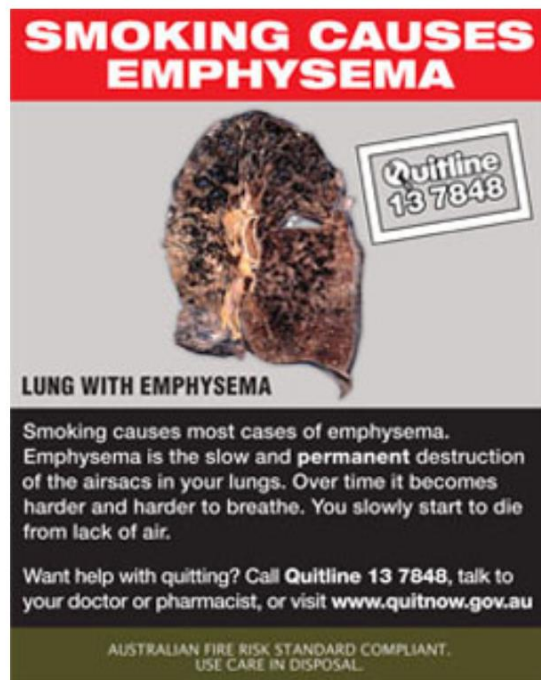


Image 6.7. Emphysema 2012 cigarette pack

The strategy of possible behaviour has two functions in the NTC depending on whether it interacts with negativity or positivity. When interacting with negativity it construes the never-ending negative outcomes of smoking. When interacting with positivity it presents an ideal future. In the same manner as actual behaviour, possible behaviour is only enacted in language, with the images needing to be interpreted based on the linguistic analyses. Possible behaviour construes both smoking and quitting and their impacts as non-actualised but tends



primarily to focus on quitting and urging smokers to quit. However, in campaign materials, there is always a back and forth set up between actual and possible behaviour.

### 6.3. Interplay between actual and possible behaviour

As seen throughout this chapter, there are regular shifts of actual and possible behaviour in campaign materials. This interplay between actual and possible behaviour needs to be interpreted in relation to negativity and positivity. As argued previously, while these sets of strategies are independent, they do interact and influence each other. This is also the case for actual and possible behaviour. The contrast between actual and possible behaviour tends to be set up in campaigns to help create a contrast between negativity and positivity. When this is the case, actual behaviour tends to combine with negativity to show the actual and current devastating effect of smoking, while possible behaviour tends to combine with positivity to promote the possible benefits of quitting. We also see instances of actual and possible behaviour combining with negativity to show the current and future consequences of continuing smoking such as in the *Stop before the Suffering* campaign. Here, we illustrate the interplay between actual and possible behaviour combining with negativity and positivity to portray quitting as the ideal alternative to smoking. We take the *Family TV* ad ([Video 6.2](#)) of the *Don't Make Smokes your Story* campaign as an example. Although this campaign is overall geared towards possible behaviour, and more specifically towards quitting as a possible behaviour, there is a shift from actual to possible behaviour in the text.

Transcript of *Family TV* ad:

*“Family is everything to me. I can't imagine life without em to be honest. I've had my battles with smokes, my lungs got pretty bad. Sometimes I could hardly breathe, and that was tough*

*on everyone. I'm not sure why I smoked, I just did. My kids, Jarrah and Yani, I wanted to be there for them, so I quit. Quitting was tough, I just kept trying. Now I can keep up with them in the yard, and I've got more money to spend on better things. Mum and the aunties are pretty happy that I quit, they didn't want me to die from smokes like dad did. My name is Ted and family is my story, don't make smokes your story. For help download the Quit My Buddy App, call the Quitline or visit Quitnow."*

To illustrate the shift between actual and possible behaviour, we bring together the tools identified in this chapter. Table 6.24 brings together the ideational and interpersonal analyses of actual and possible behaviour to identify the shift from actual to possible behaviour. The ad starts with Ted reflecting on what his family actually means to him, and him recounting his struggles with smoking. These are realised by actualised verbal groups highlighted pink. There is then a shift in *so I quit*, not from actual to possible behaviour but from smoking to quitting, and finding quitting hard. After recounting his struggles with quitting, there is then a shift to possible behaviour where he looks to the future in *My kids, Jarrah and Yani, I wanted to be there for them*. Although the desiderative mental process *wanted* is in the past tense and thus actualised, what is actually wanted i.e. to be there for his kids, is non-actualised. There are still instances of actual behaviour from this point onwards, but they combine with the perfective aspect in non-finite verbal groups to look towards a goal to be attained. For example, *to spend* in *I've got more money to spend on better things* denotes that he has not yet spent his money on better things. The ad ends with Ted urging smokers to quit smoking and telling them how to get help with quitting, realised through the imperative.



**Family TV ad**

Family **is** everything to me.

I **can't imagine** life without em **to be** honest

I **ve had** my battles with smokes

my lungs **got** pretty bad

**Sometimes** I **could** hardly **breathe**

and that **was** tough on everyone

I **m** not sure why I **smoked**,

I just **did**

My kids, Jarrah and Yani, I **wanted to be** there for them

so I **quit**

Quitting **was** tough

I just **kept trying**.

**Now** I **can keep up** with them in the yard

and I **ve got** more money **to spend** on better things

Mum and the aunties **are** pretty happy that I **quit**

they **didn't want** me **to die** from smokes like dad **did**

My name **is** Ted

and family **is** my story

|   |
|---|
| don't make smokes your story            |
| For help download the Quit My Buddy App |
| call the Quitline                       |
| or visit Quitnow                        |

*Table 6.24. Shift between actual and possible behaviour in Family TV ad*

From a textual perspective, the HyperTheme and HyperNew of the TV ad mirror the shift from actual to possible behaviour. The HyperTheme starts with Ted reflecting on what family actually means to him, to then shifting to a possible future without them in the following clause. This same shift occurs in the HyperNew with Ted first stating that his family actually is his story, to then urging the audience not to smoke and to seek help with quitting. This is illustrated in Example 6.3 with the actualised verbal groups highlighted pink and the non-actualised verbal groups highlighted red. This shift within the HyperTheme and HyperNew parallels the overall shift in Table 6.24

[HyperTheme]

Family **is** everything to me. I **can't imagine** life without em **to be** honest.

*I've had my battles with smokes, my lungs got pretty bad. Sometimes I could hardly breathe, and that was tough on everyone. I'm not sure why I smoked, I just did. My kids, Jarrah and Yani, I wanted to be there for them, so I quit. Quitting was tough, I just kept trying. Now I can keep up with them in the yard, and I've got more money to spend on better things. Mum and the aunties are pretty happy that I quit, they didn't want me to die from smokes like dad did.*

[HyperNew]

My name **is** Ted and family **is** my story, **don't** make smokes your story. For help **download** the Quit My Buddy App, **call** the Quitline or **visit** Quitnow.

*Example 6.3. Hyper-Theme/Hyper-New analysis of Family TV ad*

These shifts between actual and possible behaviour are regularly observed in campaigns. However, as we will discuss in Chapter 7, it is still possible to determine whether a campaign is highlighting the current consequences of smoking/quitting or the future consequences of smoking/quitting. And to do this, we need to look at the entire campaign, and the interactions between the language resources.

#### 6.4. Chapter summary

This chapter presented the analyses and results of the third set of strategies used to organise the NTC. The strategies of actual and possible behaviour make it clear that both smoking and quitting have current and on-going impact for the smoker and their family. In campaigns,

actual behaviour tends to construe smoking/quitting and their consequences as actualised, while possible behaviour tends to construe smoking/quitting and their consequences as non-actualised. These two strategies are regularly used in campaigns to show contrast since they combine with negativity and positivity. In these instances, actual behaviour tends to focus on the actual damage smoking causes in the here-and-now, while possible behaviour tends to depict quitting as the ideal future. Furthermore, the linguistic features enacting actual and possible behaviour must be taken together, since one linguistic feature alone cannot convey whether a behaviour is happening in the here-and-now or has the possibility of happening in the future.

Now that each set of contrasting strategies has been explained, Chapter 7 illustrates how they can be used to analyse the NTC over 22 years, and what patterns arise over these 22 years.

We will see that there is always a negativity + technicalising campaign running, but that additional campaigns become more positivity + personalising as the NTC progresses, with a regular interaction with the strategies of actual and possible behaviour.

# CHAPTER 7

## THE NTC OVER 22 YEARS

The National Tobacco Campaign is Australia's longest running public health campaign aimed at reducing smoking rates. As shown in previous chapters, the campaigns use a number of semiotic resources including language, image, video, and sound to drive home the message that smoking is bad for our health and to encourage people to quit. Chapters 4 to 6 presented the results of each set of rhetorical strategies, the semiotic resources that actualise these strategies across all metafunctions, and what meanings these strategies create in the NTC. This was done at both a macro level across campaigns and a more micro level within individual materials. What we have not seen yet is how these strategies come together and build upon each other over the 22-year life of the NTC, to develop the overall message that aims to stop people smoking. Exploring how these strategies come together and develop over time is integral in understanding the NTC in its entirety and to aid in the design of future long-term health campaigns. As discussed in Chapter 2, previous studies have tended to either present a review or overview of the NTC at various stages (e.g. Chapman & Wakefield, 2001; Hill & Carroll, 2003) or evaluated the effectiveness of specific campaigns within the NTC (e.g. Boyle et al., 2010; Cotter et al., 2010). However, studies have tended to not explore the development and progressions of the NTC campaigns and what meanings they create over the life of the NTC. This will be the focus of this chapter.

This chapter pulls together the results from Chapters 4 to 6 to explore the NTC's large-scale stability and change, as well as the patterns in the combination of strategies and resources over 22 years. We also broaden the discussion to include anti-smoking ad examples from other countries, to draw parallels to the NTC. Section 7.1 will show that throughout its course, the NTC has continued the use of negative and technicalising campaigns to maintain a 'knowledge-base' for new generations of potential smokers, while along the way, it has overlaid this with positive and personalising campaigns to present quitting as an attractive alternative to smoking. Interwoven through these campaigns are the strategies of actual and possible behaviour. This interweaving is important in 1) portraying the actual and on-going negative consequences of smoking; and 2) portraying the immediate and long-lasting benefits of quitting. Section 7.2 will demonstrate how these strategies combine in two regular patterns: negativity + technicalising and positivity + personalising, and how each of these patterns can combine with either actual or possible behaviour. Section 7.3 will explore less frequent combinations of negativity + personalising and positivity + technicalising and the meanings created by each of these combinations. These patterns of combinations are significant in targeting smoking from various perspectives, key in reaching a diverse range of smokers.

### **7.1. Progression of strategies over 22 years**

Every year in Australia there is a new possible market for smoking, with children growing into adults and becoming legally allowed to buy cigarettes. This means the National Tobacco Campaign needs to continually renew knowledge about the detrimental effects of smoking and instil it with negative values. The NTC cannot rely on 18-year-olds in 2020 taking on board public health warnings about smoking produced in the late 90s. At the same

time, for those who *have* had access to these health warnings by virtue of being older or of having education in this area, the campaign cannot rest on its laurels of only reinforcing the negative messaging, but also must offer a positive alternative that will result in a smoke-free future. This tension between the continuous renewal of warnings about smoking and providing a positive alternative of being smoke-free drives the progression of the NTC.

This section presents a synthesis of the large-scale progression and development of the strategies of the NTC across 22 years. There are three broad developments in the unfolding of strategies over time, where the NTC shows 1) a constant negative campaign running, progressively overlaid with more positive campaigns; 2) a regular technicalising campaign that gradually interacts with those more personalising; and 3) common pairings of actual behaviour or possible behaviour with either positivity or negativity, often to establish a contrast between two behaviours. The following sub-sections step through each of these progressions in detail and explain the importance and significance of their developments in making the NTC the campaign that it is today.

### **7.1.1. Development of negativity and positivity**

In principle, public health campaigns have two complementary goals: 1) to discourage a behaviour deemed detrimental to health (Mair, 2011); and 2) to promote an alternate behaviour beneficial to health (Hughes-Hallett, Browne, Mensah, Vale, & Mayer, 2016). These goals are illustrated by the large-scale development of the NTC. The ever-present negative campaign is a constant reminder to smokers, and potential new smokers, of the adverse and often deadly effects of smoking. Over time, there is an overlay of more positive campaigns on top of the constant negative campaign to offer quitting as a positive

substitute to smoking that will bring good health. This is illustrated in Table 7.1, that maps each Federal campaign along a vertical timeline from 1997-2019. More negative campaigns are redder, and more positive are greener.



| Year | Federal campaigns  |  |  |  |  |  |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 1997 | <b>Every<br/>Cigarette<br/>is Doing<br/>You<br/>Damage</b> |  |  |  |  |  |  |  |  |  |  |  |  |
| 1998 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1999 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2000 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2001 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2002 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2003 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2004 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2005 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2006 |  |  |  |  |  |  |  |  |  |  |  |  | <b>National<br/>Tobacco<br/>Youth<br/>Campaign</b> |
| 2007 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2008 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2009 |  |  |  |  |  |  |  |  |  |  |  |  |  |

|      |  |                      |  |                |                 |                 |                      |                            |                                  |                              |                            |
|------|--|----------------------|--|----------------|-----------------|-----------------|----------------------|----------------------------|----------------------------------|------------------------------|----------------------------|
| 2010 |  | Health Warnings 2006 |  | 4000 Chemicals |                 |                 |                      |                            |                                  |                              |                            |
| 2011 |  |                      |  | Cough          | Health Benefits | Break the Chain |                      |                            |                                  |                              |                            |
| 2012 |  |                      |  |                |                 |                 | Health Warnings 2012 | Quit for You, Quit for Two |                                  |                              |                            |
| 2013 |  |                      |  |                |                 |                 |                      |                            | Stop before the Suffering Starts |                              |                            |
| 2014 |  |                      |  |                |                 |                 |                      |                            |                                  | Don't Make Smokes your Story |                            |
| 2015 |  |                      |  |                |                 |                 |                      |                            |                                  |                              | Quit for You, Quit for Two |
| 2016 |  |                      |  |                |                 |                 |                      |                            |                                  |                              |                            |
| 2017 |  |                      |  |                |                 |                 |                      |                            |                                  |                              |                            |
| 2018 |  |                      |  |                |                 |                 |                      |                            |                                  |                              |                            |
| 2019 |  |                      |  |                |                 |                 |                      |                            |                                  |                              |                            |

Table 7.1. Negativity/positivity progression and development<sup>21</sup>

<sup>21</sup> A clearer version of the table can be viewed in [Document 7.1](#).

As discussed in Chapter 4, the first campaign of the NTC, *Every Cigarette is Doing You Damage*, was a negative campaign that educated Australians of the negative health consequences of smoking through graphic and gruesome images. The campaign was launched in 1997 and consisted of TV, radio and print advertisements. Each TV ad depicts a negative health consequence of smoking such as clogged arteries, strokes, blindness etc. The radio and print ads work to reinforce the TV ad messages with the radio ads also offering some more positive outcomes of quitting smoking. The campaign ran until 2005, after which two negative campaigns, *Health Warnings 2006* and *National Youth Tobacco Campaign (NYTC)* were launched in 2006. As stated in Chapter 2 the *Health Warnings 2006/2012* campaign was part of plain tobacco packaging legislation requiring graphic images and messages to be placed on the front and back of tobacco products as a means of propagating the dangers of smoking (Department of Health, 2016). These images include diseased organs, limbs and body parts caused by smoking. At the time of writing, this campaign is on-going and keeps audiences exposed to negative messages and images about smoking. The *National Tobacco Youth Campaign* was launched in conjunction with the *Health Warnings 2006* campaign to target young smokers and their smoker parents to raise awareness of dangerous chemicals present in tobacco smoke. As Table 7.1 above shows, together, these campaigns have meant there has been a primarily negative campaign ongoing throughout the entire life of the NTC.

One aspect of negative campaigns that has received considerable attention in the public health literature is the use of fear appeals in campaigns. As discussed in Chapter 2, fear appeals are regularly used in public health campaigns to discourage unhealthy behaviours (Gagnon, Jacob, & Holmes, 2010) and to persuade audiences to change these unhealthy behaviours for their personal well-being (Keene et al., 2020; Witte & Allen, 2000).

In terms of the SFL model, fear appeals implicate a range of interpersonal meanings. For example, they are evident in the *Every Cigarette is Doing You Damage and Health Warnings* campaigns through the use of negative evaluations of the diseases of smoking, combined with gruesome and lurid images, as presented in Chapter 4. However, studies also argue that excessive fear appeals can back-fire and have the opposite effects (Thomas et al., 2014). For individuals who are not socially and psychologically equipped to respond and profit from the message, fear appeals may result in consumers feeling like they lack the autonomy and self-efficacy to change their behaviour (Bayer & Fairchild, 2016; Hastings et al., 2004). One way to address issues that may arise from excessive fear appeals in negative style campaigns is to have campaigns that promote a positive alternate behaviour, such as the positive campaigns that promote quitting in the NTC. It is generally argued that the use of positive and negative appeals together in campaigns can compensate for any shortcoming of using only one or the other (Robberson & Rogers, 1988), and is the best way to target the wide range of smokers (Sifferlin, 2014).

From 2011, positive campaigns began to run parallel to the *Health Warnings 2012* campaign, (shown in green in Table 7.1). These positive campaigns encourage smokers to quit smoking by promoting good health and wellbeing. Three positive campaigns were launched in 2011 and 2012: *Health Benefits* which focused on how the body repairs itself after quitting, *Break the Chain* which targeted Indigenous Australians to quit for their families' wellbeing and *Quit for You, Quit for Two* which promoted the benefits of quitting during pregnancy. At the time of writing (2020), the *Don't Make Smokes your Story* and the relaunch of the *Quit for You, Quit for Two* campaigns are running in conjunction with the *Health Warnings* campaign, and target Indigenous Australians and pregnant women and their partners to quit smoking for their and their family's wellbeing. Using positive appeals in

public health campaigns has been shown to be effective in influencing audiences to comply with the behaviour that is being promoted (Montazeri, McGhee, & McEwen, 1998) as they too want to experience the benefits of the behaviour (Monahan, 1995).

Overall, the development of negativity and positivity has propagated the central messaging of the NTC that smoking is detrimental to health, and that quitting is an alternate behaviour that is beneficial to health. This has been achieved by first launching negative campaigns that show the horrific consequences of smoking to discourage smoking, then overlaid on these negative campaigns, positive campaigns promoting quitting.

### **7.1.2. Development of technicalising and personalising**

Interacting closely with the variation in negativity and positivity is the degree to which smoking, or quitting are generalised and technicalised or individualised and personalised. A focus on technicalisation enables the dissemination of technical knowledge about smoking/quitting to the general public, while more personalisation address individuals to think about their own personal and social situations in relation to smoking and quitting. As with negativity and positivity, these two strategies have interacted through the life of the NTC. There has continuously been a technicalising campaign running since 1997, however parallel campaigns have tended to become more personalising over time. This is illustrated in Table 7.2. In this table, more technicalising campaigns are shown in yellow, while more personalising campaigns are shown in blue.

| Year | Federal campaigns                   |  |                                 |  |  |  |  |  |  |  |  |  |
|------|-------------------------------------|--|---------------------------------|--|--|--|--|--|--|--|--|--|
| 1997 | Every Cigarette is Doing You Damage |  |                                 |  |  |  |  |  |  |  |  |  |
| 1998 |                                     |  |                                 |  |  |  |  |  |  |  |  |  |
| 1999 |                                     |  |                                 |  |  |  |  |  |  |  |  |  |
| 2000 |                                     |  |                                 |  |  |  |  |  |  |  |  |  |
| 2001 |                                     |  |                                 |  |  |  |  |  |  |  |  |  |
| 2002 |                                     |  |                                 |  |  |  |  |  |  |  |  |  |
| 2003 |                                     |  |                                 |  |  |  |  |  |  |  |  |  |
| 2004 |                                     |  |                                 |  |  |  |  |  |  |  |  |  |
| 2005 |                                     |  |                                 |  |  |  |  |  |  |  |  |  |
| 2006 |                                     |  | National Tobacco Youth Campaign |  |  |  |  |  |  |  |  |  |
| 2007 |                                     |  |                                 |  |  |  |  |  |  |  |  |  |
| 2008 |                                     |  |                                 |  |  |  |  |  |  |  |  |  |
| 2009 |                                     |  |                                 |  |  |  |  |  |  |  |  |  |

|      |  |                      |  |                |       |                 |                 |                      |                            |                                  |                            |  |
|------|--|----------------------|--|----------------|-------|-----------------|-----------------|----------------------|----------------------------|----------------------------------|----------------------------|--|
| 2010 |  | Health Warnings 2006 |  | 4000 Chemicals |       |                 |                 |                      |                            |                                  |                            |  |
| 2011 |  |                      |  |                | Cough | Health Benefits | Break the Chain |                      |                            |                                  |                            |  |
| 2012 |  |                      |  |                |       |                 |                 | Health Warnings 2012 | Quit for You, Quit for Two |                                  |                            |  |
| 2013 |  |                      |  |                |       |                 |                 |                      |                            | Stop before the Suffering Starts |                            |  |
| 2014 |  |                      |  |                |       |                 |                 |                      |                            |                                  |                            |  |
| 2015 |  |                      |  |                |       |                 |                 |                      |                            | Don't Make Smokes your Story     |                            |  |
| 2016 |  |                      |  |                |       |                 |                 |                      |                            |                                  |                            |  |
| 2017 |  |                      |  |                |       |                 |                 |                      |                            |                                  | Quit for You, Quit for Two |  |
| 2018 |  |                      |  |                |       |                 |                 |                      |                            |                                  |                            |  |
| 2019 |  |                      |  |                |       |                 |                 |                      |                            |                                  |                            |  |

Table 7.2. Technicalising/personalising progression and development<sup>22</sup>

<sup>22</sup> A clearer version of the table can be viewed in [Document 7.2](#).

The first campaign of the NTC, *Every Cigarette is Doing You Damage*, coupled its negative strategy with a technicalising strategy. It technicalised smoking by focusing on the immediate damage it causes to the body and the potential diseases that could result from this initial damage and eventual death. The TV ads showed in explicit detail how tobacco smoke damages the body once it gets into the lungs and bloodstream. The campaign ran until 2005, after which it was replaced by another technicalising campaign, *Health Warnings 2006*, in 2006, which as we saw above was also a negative campaign. The health warning messages and images on the cigarette packs depict the damage and disease smoking causes to limbs, body parts and organs through a medicalised perspective, as presented in Chapter 5.

The *Health Warning 2012* campaign is on-going, with the 2012 revamped version exposing smokers to even more diseases caused by smoking. Although it is common in the NTC for technicalising and negative strategies to couple together, the two are in principle independent. This is evidenced by the *Health Benefits* campaign that technicalised the positive effects of quitting to show how it repairs the body. Discussion of combinations such as this will be given in Sections 7.2 and 7.3 below.

As shown in Chapter 5, one of the main ways of technicalising is to use medical knowledge about smoking to explain how it causes disease and death. This is done throughout long activity sequences that lead to worsening damage, and through the depiction of body parts and organs as thing entities. It has been shown that depicting parts of the body and/or organs on cigarette packs invites the smoker to reflect on the unseen damage that smoking causes to highlight “the ways in which the physical body continues to suffer as a result of the habit” (Haines- Saah, Bell & Dennis, 2015, p. e65).

More broadly, the use of medical knowledge in public health campaigns is common practice (Törrönen & Tryggvesson, 2015), serving two functions. One, it establishes a norm about a



health behaviour for audiences to comply with (Törrönen & Tryggvesson, 2015), and two, it gives authority to the campaign to influence audiences to adhere to the health message (Gagnon et al., 2010). In the NTC, having a constant technicalising campaign means the norm that is being established is that there is no safe level of smoking since every breath of tobacco smoke causes immediate and at times irreversible damage to the body. The TV ads of the *Every Cigarette is Doing You Damage* campaign arguably take this one step further by having surgeons speak as authority figures to urge smokers to quit.

Technicalising campaigns have played a key role in the NTC in building knowledge about smoking by targeting the general public. Over time, the addition of personalising campaigns has become equally as important in personalising smoking and quitting. Personalising campaigns construe smoking/quitting in terms of how it affects the person and those around them, as opposed to focusing solely on the body. Such personalising campaigns are an integral part of public health campaigns as they have the potential to make health messages more approachable and accessible to audiences (Maibach & Parrott, 1995). Ads that focus on personal testimonials of smoking also increase the smokers' perception of being vulnerable to illness by identifying with the characters in the ads (Durkin et al., 2009). Furthermore, personalising campaigns are used to emphasise the social consequences of the person's behaviour, whether it be negative or positive (Hale & Dillard, 1995). This is certainly true for the NTC, where personalising campaigns have focused on individuals and their personal experiences with smoking/quitting. This includes how smoking impacts their and their families' day-to-day lives, and how quitting has improved their overall wellbeing and the overall wellbeing of their families.

In 2011, at the same time as positive campaigns began to emerge, campaigns parallel to long running technicalising campaigns started to become more personalising as shown in blue in

Table 7.2. There were four personalising campaigns launched between 2011 and 2015, the *Cough* and *Stop before the Suffering Starts* campaigns focused on individual experiences with smoking, while the *Quit for You*, *Quit for Two* and *Break the Chain* focused on individual experiences with quitting, with *Quit for You*, *Quit for Two* targeting pregnant women and *Break the Chain* targeting Indigenous smokers. These four campaigns focused on the lives and journeys of individuals in ways that distinctly contrast with the focus on the body that occurs in the technicalising campaigns. This reflects the argument of Clark et al. (2016) for broadening from a medical and anatomical understanding of disease to a personal understanding so that a human face is given to the disease. Furthermore, receiving information from peers can increase self-efficacy in the audience and may offer better support to the target audience (Institute of Medicine of the National Academies, 2002). This is the case for personalising campaigns where ads depict the lives and journeys of individuals and the outcomes of smoking/quitting.

At the time of writing, the personalising campaign currently running, *Don't Make Smokes your Story*, follows the quit journey of Ted, an Indigenous man who quit smoking for his family. The campaign has a number of materials showing Ted with his family or friends, and how quitting has meant he can be around longer for those he loves and cares about. This runs in parallel with the *Quit for You*, *Quit for Two* campaign which was relaunched in 2017 due to its initial success in persuading pregnant woman and their partners to give up smoking for the health of their unborn baby (Department of Health, 2018c). Pregnant women are depicted in various settings smiling and happy, which can encourage pregnant women in the audience to also give up smoking for their unborn babies.

Technicalising and personalising campaigns in the NTC work for the overall goal of discouraging smoking and encouraging quitting. Having a constant technicalising campaign

targeting the general public means Australians' technical knowledge about the infinite negative health consequences of smoking is continuously being updated. This is also true for technicalising campaigns that build technical knowledge about quitting. Paralleling these technicalising campaigns are personalising campaigns that are more personal and either stress the negative social consequences of smoking or the positive social outcomes of quitting. These personalising campaigns highlight that a smoker's behaviour has an impact on them as a person and on those around them.

### **7.1.3. Development of actual and possible behaviour**

As the previous sections showed, there is always a negative + technicalising campaign running in Australia with positive + personalising campaigns becoming overlaid over time as illustrated in Tables 7.1 and 7.2. These two developments ensure that 1) potential new smokers are continuously exposed to the negative consequences of smoking with older audiences being presented with quitting as an alternative to a smoke-free life; and 2) smoking is always technicalised so that we are continuously learning about the numerous diseases and negative effects of smoking, but that over time smoking and quitting become more focused on the individual's life and livelihood. The NTC adds to these two developments with the strategies of actual or possible behaviour.

As discussed in Chapter 6, the strategy of actual behaviour focuses on an ex/smoker's past or current behaviour around smoking or quitting, as well as the present and immediate outcomes of this behaviour. Presenting the effects of a behaviour as being immediate has been shown to increase audience's motivation to consciously attend to the message, and thus change their behaviour (Maibach & Parrott, 1995). In contrast, the strategy of possible behaviour portrays

possible futures depending on whether smokers continue to smoke or quit. Media-based health campaigns that use emotions to present future risk in relation to smoking can directly influence an individual to change their behaviour (Dunlop, Wakefield, & Kashima, 2008). The same can also be said for campaigns that use emotions to present future benefits of quitting. Moreover, in the NTC, imperatives are regularly used to urge smokers to quit smoking, which has been shown to make messages memorable (Corcoran, 2016).

As mentioned in Chapter 6, while the strategies of actual and possible behaviour are independent of the other sets of strategies, they couple with negativity or positivity to either focus on smoking or quitting. For example, the *Every Cigarette is Doing You* campaign which ran from 1997 to 2005 tended to centre on the immediate damage smoking causes to the body as illustrated in Section 6.1. On the other hand, the *Health Warnings 2012* campaign, tends to portray smoking as a possible behaviour thus warning smokers of what awaits them if they continue to smoke. In addition, the actual and possible behaviour strategies are regularly used together in campaigns and campaign materials to create contrasts between them, as shown in Section 6.3. This differs from the other set of strategies – we do not see such regular shifts and contrasts within campaigns or materials for negativity/positivity or technicalising/personalising; rather there is an overlay of one strategy over the other across multiple campaigns. For example, as illustrated in Chapter 6, the *Family* TV ad from the *Don't Make Smokes your Story* campaign first starts with Ted reflecting on his time as a smoker. He recounts being sick and his family being scared he would die. There is then a shift in language to the present simple tense to construe possible behaviour, with him ending with an imperative to urge people to stop smoking.

The strategies of actual and possible have two main functions in the NTC. Actual behaviour warns smokers that smoking has immediate negative consequences, while at the same time

promoting the immediate benefits of quitting. Possible behaviour further warns smokers of the lasting damage of smoking, while at the same time reinforcing that quitting at any stage or age will improve one's health and have enduring benefits. When coupled together actual and possible behaviour reinforce that smokers cannot escape the damage, disease and death caused from smoking, and that at the same they will experience the long-lasting benefits of quitting.

#### **7.1.4. Summary of overall development**

Over the past 22 years, the NTC has targeted smoking using different approaches, conceptualised in this thesis through three sets of contrastive rhetorical strategies. It is this varied approach that has arguably contributed to the decrease in smoking rates in Australia. As Chambers (2014) notes, “while one approach isn't going to resonate with every audience, using varied approaches from positive reinforcement, negative reinforcement, using real sufferers, relatable actors, animations, suggesting methods of prevention and hard hitting one-liners, can mean connecting with more people”. This is further supported by the decline in smoking rates in Australia with adult daily smoking rates falling from 23.8% in 1995 (Australian Bureau of Statistics, 2018) to 11% in 2019 (Australian Institute of Health and Welfare, 2020c).

Summarising the analysis so far, this section has shown that the three sets of rhetorical strategies that organise the NTC unfold in three main developments over 22 years:

- 1) Negativity/Positivity: The NTC includes a constant negative strategy that continually builds negative attitudes around smoking by showing its negative consequences. This plays a particularly important role for young people who were not around in 1997

when the NTC was launched. These negative attitudes towards smoking are regularly relayed to the public through the use of fear appeals, a common practice in public health campaigns. However, it is not enough to only have negative campaigns that present the detrimental effects of smoking, as this may lead to smokers feeling hopeless and helpless, and thus not attempt to quit smoking. Over time it becomes vital to present a positive alternative behaviour to smoking, in this case quitting, to give people hope that their health can improve. This is why positive campaigns are added to the ever-present negative campaigns.

- 2) **Technicalising/Personalising:** Interwoven with the negative strategy, there are continual technicalising campaigns that generalise smoking to the general public by exposing them to the disease and damage that smoking causes to the body, and to keep informing them of new research on the damaging effects of smoking on the body. Technicalising smoking alone, however, may not reach all smokers or potential smokers. An additional approach of reaching more smokers/potential smokers is through personalising campaigns. Over time, campaigns become more personalising and centre more on specific target audiences and on the personal experience of smoking and quitting. These personalising campaigns add a face to smoking/quitting, to show that it is people who are affected by smoking/quitting and not just body parts, prompting smokers to think about their families and how their behaviour can be harmful or beneficial to them.
- 3) **Actual/Possible:** The third development is that these negativity + technicalising and positivity + personalising campaigns are depicted in campaigns as either a current behaviour or a possible future behaviour through the strategies of actual/possible behaviour. There are regular shifts between campaigns depicting the actual or possible

effects of smoking or quitting. These regular shifts present smoking as a behaviour that immediately results in negative consequences, and that these negative consequences carry into the future. These regular shifts also present quitting as a behaviour that leads to positive outcomes at any stage.

What we then see is that there is always a negativity (red) + technicalising (yellow) campaign with additional campaigns being more positive (green) + personalising (blue) as shown in Table 7.3. From Table 7.3 it becomes clear that there is a pattern to these strategies, where certain combinations are more common than others. This is what we turn to in the next section.

| Year | Federal campaigns   |   |  |  |   |  |  |  |  |  |  |  |
|------|---|---|--|--|---|--|--|--|--|--|--|--|
| 1997 | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%; background-color: red; color: black; text-align: center; padding: 5px;"><b>Every<br/>Cigarette<br/>is Doing<br/>You<br/>Damage</b></div> <div style="width: 45%; background-color: yellow; color: black; text-align: center; padding: 5px;"><b>Health<br/>Warnings<br/>2006</b></div> </div> |   |  |  |   |  |  |  |  |  |  |  |
| 1998 |   |   |  |  |   |  |  |  |  |  |  |  |
| 1999 |   |   |  |  |   |  |  |  |  |  |  |  |
| 2000 |   |   |  |  |   |  |  |  |  |  |  |  |
| 2001 |   |   |  |  |   |  |  |  |  |  |  |  |
| 2002 |   |   |  |  |   |  |  |  |  |  |  |  |
| 2003 |   |   |  |  |   |  |  |  |  |  |  |  |
| 2004 |   |   |  |  |   |  |  |  |  |  |  |  |
| 2005 |   |   |  |  |   |  |  |  |  |  |  |  |
| 2006 |   | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%; background-color: red; color: black; text-align: center; padding: 5px;"><b>Health<br/>Warnings<br/>2006</b></div> <div style="width: 45%; background-color: yellow; color: black; text-align: center; padding: 5px;"><b>National<br/>Tobacco<br/>Youth<br/>Campaign</b></div> </div> |  |  |   |  |  |  |  |  |  |  |
| 2007 |   |   |  |  |   |  |  |  |  |  |  |  |
| 2008 |   |   |  |  |   |  |  |  |  |  |  |  |
| 2009 |   |   |  |  |   |  |  |  |  |  |  |  |
| 2010 |   |   |  |  | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%; background-color: red; color: black; text-align: center; padding: 5px;"><b>4000<br/>Chemicals</b></div> <div style="width: 45%; background-color: yellow; color: black; text-align: center; padding: 5px;"></div> </div> |  |  |  |  |  |  |  |



|      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 2011 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2012 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2013 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2014 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2015 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2016 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2017 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2018 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2019 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Table 7.3. Positivity/negativity and technicalising/personalising progressions<sup>23</sup>

<sup>23</sup> A clearer version of the table can be viewed in [Document 7.3](#).

## **7.2. Regular combinations**

In the previous section we examined the importance of the shift in campaigns over time from: 1) the ever-present negativity + technicalising campaigns which provide a constant reminder to new or potential smokers of the devastating effects of smoking; and 2) the overlay of positivity + personalising campaign to offer an alternative behaviour for a smoke-free life. This section explores the combinations of strategies presented in Table 7.3. Sections 7.2.1 and 7.2.2 present the regular combination of negativity + technicalising, and positivity + personalising, respectively. These regular patterns, in turn couple with either actual or possible behaviour to present smoking/quitting as actualised or non-actualised. This section examines the functions of these patterns in language, and image resources and their function in the NTC, including state-based campaigns, and other anti-smoking ads and campaigns from around the world.

### **7.2.1. Negativity + technicalising**

As illustrated Table 7.3 above, there is always a negativity + technicalising campaign running in the NTC. This ensures Australians are continuously exposed to the detrimental effects of smoking on their health. In the health promotion literature, the use of fear appeals through the portrayal of diseases using medical knowledge has been shown to ‘denormalise’ undesirable behaviours as they become associated with disease (Fairchild et al., 2018). This denormalisation in turn, means people are less likely to continue the behaviour. The use of fear appeals and medical knowledge in the NTC is actualised through negativity + technicalising working to highlight and technicalise the damage that smoking causes to the

body. This section explores how this is construed in language and image and how actual and possible behaviour interact with campaigns that technicalise smoking.

### *Language*

In language, negativity + technicalising portray the negative effects of smoking on the body, as opposed to portraying how smoking affects smokers and their livelihoods. This is primarily achieved through fear appeals by depicting the various diseases caused by smoking. Linguistically, this is realised by positioning smoking as Agent and the body or smoker as Medium. An example of how negativity and technicalising combine together to technicalise the negative effects of smoking is in the *Tumour* TV ad of the *Every Cigarette is Doing You Damage* campaign. This is illustrated in Table 7.4 where *tobacco smoke* is the negatively appraised Agent causing damage to the Medium *a vital gene*. As demonstrated in Chapter 4, these Agent + Medium relations technicalise smoking as an Agent that causes damage to the body, which also invokes negative evaluation for causing said damage. This mirrors results given by Gilbert (2008), who also showed that *smoking* was given an active role in the *Tumour* TV ad, while cancer was given a passive role.

| <b>Agent</b>  | <b>Process</b> | <b>Medium</b>                                       |
|---------------|----------------|---|
| tobacco smoke | attacks        | a vital gene which protects lung cells from cancer. |

*Table 7.4. Example of Agent and Medium in Tumour TV ad*

This Agent + Medium relation is extremely common in public health campaigns aiming to discourage a health-damaging behaviour. This is seen in other anti-smoking campaigns around the world, such as the UK's *Stop Smoking* campaigns. Table 7.5 below provides a NUCLEAR RELATIONS analysis of the opening sentence of a hard-hitting anti-smoking TV ad ([Video 7.1](#)) by the UK's Department of Health. The rest of the TV ad is also very similar

to the *Every Cigarette is Doing You Damage* TV ads opening with the smoker smoking and the voiceover explaining how smoking damages the body.

| <b>Agent</b>             | <b>Process</b> | <b>Medium</b> | <b>Circumstance</b> |
|--------------------------|----------------|---------------|---------------------|
| The chemicals you inhale | cause          | mutations     | in your body        |

*Table 7.5. Example of Agent and Medium, UK anti-smoking TV ad*

The examples in Tables 7.4 and 7.5 both point to the habitual damage that smoking causes to the body as we saw in Chapter 6. These two examples construe smoking as a possible behaviour since the simple present tense in each case is not tied to any specific instance. Instead, the simple present indicates that the damage caused by smoking keeps happening into the future. The simple present tense is highlighted red in Table 7.6. These two TV ads construe the habitual negative effects of smoking from a technical perspective to show that there is no escaping the damage and disease caused by smoking if you continue to smoke.

| <b>TV ad</b>        | <b>Simple present</b>  |
|---------------------|--|
| <i>Tumour</i>       | Tobacco smoke <b>attacks</b> a vital gene which <b>protects</b> lung cells from cancer |
| <i>Stop Smoking</i> | The chemicals you <b>inhale</b> <b>cause</b> mutations in your body                    |

*Table 7.6. Simple present tense in TV ads*

Another negativity + technicalising linguistic resource is the unfolding activity series of the various damage that smoking causes, as shown in Chapter 5. This again, technicalises smoking by explaining how one negative consequence of smoking leads to another consequence, which also builds negativity since each sequence is worse than the previous one.

The *Peripheral Vascular Disease* cigarette pack is a perfect example of the constant shift between actual and possible behaviour in materials. The activity sequences in Table 7.7 illustrate what happens habitually as you smoke such as *narrows and blocks blood vessels* and it illustrates what happens as you are smoking in the moment such *reducing blood and oxygen supply.....resulting in pain, open sores*. Smoking as an actual behaviour is realised by actualised verbal groups highlighted pink, and as possible behaviour by non-actualised verbal groups highlighted red. In this way, the worsening damage and disease creates an intensifying graduating prosody of negativity that occurs from the moment you start smoking and keeps going as you continue to smoke. These activity sequences not only construe smoking from an ideational perspective, they also invoke interpersonal meanings through the damage and diseases caused by smoking.

|   |
|---|
| <b><i>Peripheral Vascular Disease 2012 cigarette pack</i></b>                         |
| Smoking   |
| ^   |
| <b>narrows</b> and <b>blocks</b> blood vessels  |
| ^   |
| <b>reducing</b> blood and oxygen supply to your extremities (feet, legs, hands, arms) |
| ^ <b>resulting</b> in   |
| pain, open sores that <b>don't heal</b> and gangrene                                  |
| ^ <b>leads to</b>   |
| amputations   |

Table 7.7. Activity series of *Peripheral Vascular Disease 2012 cigarette pack*

As mentioned in Chapter 2, after Australia’s implementation of plain tobacco packaging proved effective in reducing smoking rates, many countries, including Canada, followed suite in implementing graphic health warnings on tobacco product packaging (Cancer Council Victoria, 2020), presented in Image 7.1. This intensifying graduating prosody realised through worsening activity series is also evident in Canada’s recent plain tobacco packaging laws. This is illustrated in Table 7.8 for the *Oral Cancer* cigarette pack. This cigarette pack focuses on the possible damage that smoking can cause, as evidenced by the non-actualised verbal groups highlighted red in Table 7.8.



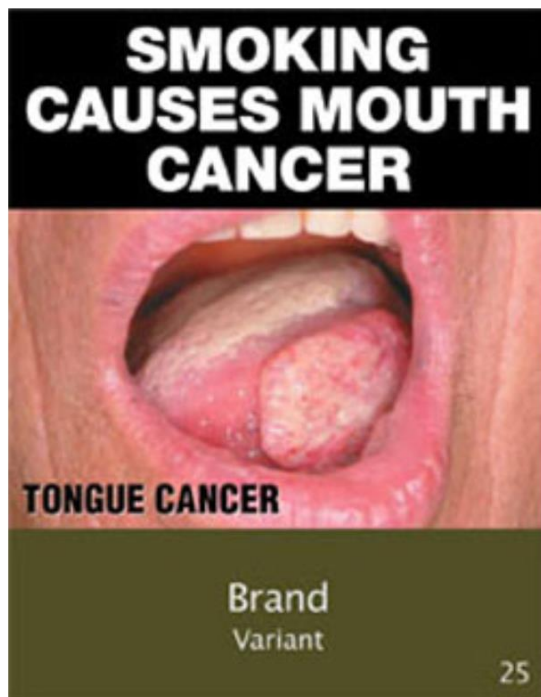
Image 7.1. Oral Cancer cigarette pack Canada

|  |
|--|
| <b>Oral Cancer cigarette pack Canada</b>     |
| Smoking                                      |
| ^ <b>causes</b>                              |
| white spots on tongue, a form of oral cancer |
| ^ Even if                                    |
| you <b>survive</b>                           |
| ^ <b>(leads to)</b>                          |
| partial or full tongue removal               |

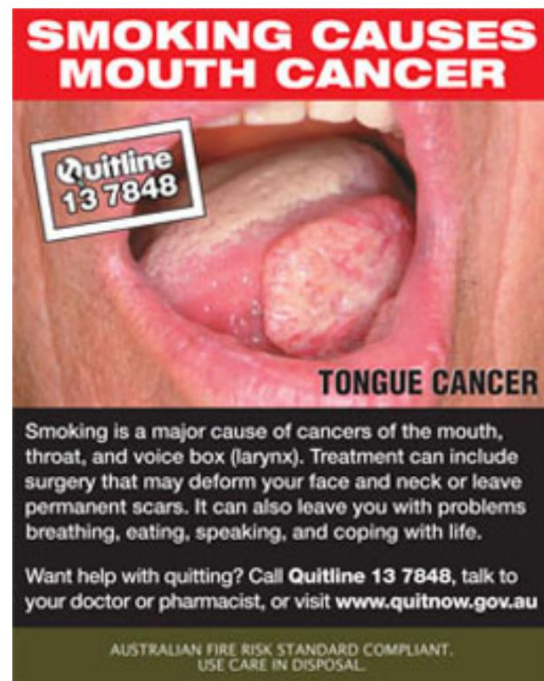
Table 7.8. Activity series of Oral Cancer cigarette pack Canada

Intensifying prosodies are also construed by listing the damage and diseases of smoking as shown in Chapter 4. These listings are prevalent in the *Health Warnings* campaigns such as the *Mouth Cancer* cigarette pack shown in Image 7.2 where there is a list of damage and disease smoking causes: *cancers of the mouth, throat and voice box (larynx), problems breathing, eating, speaking, and coping with life*. Fear appeals that centre on the various diseases that can result from an unhealthy behaviour are regularly used in social marketing to reduce said harmful behaviour (Manyiwa & Brennan, 2012).

Front of pack



Back of pack



*Image 7.2. Mouth Cancer 2012 cigarette pack*

Negativity + technicalising combine with actual or possible behaviour to either present the damage being caused by smoking as actual and present or as possible and not having occurred. This ensures that smokers, and potential smokers are aware that smoking causes damage as soon as you take the first inhale of cigarette, and this damage worsens over time if you continue to smoke. Both actual and possible behaviour have been shown to motivate audiences to attend to the message and change their behaviour (Dunlop et al., 2008; Maibach & Parrott, 1995). Dunlop et al. (2008) also showed that linking a future risk with negative emotions increases motivation to decrease the bad behaviour; this is explored further in Section 7.3.1 on negativity + personalising.



*Image*

In the same way that language portrays the damage and disease smoking causes to the body, so too do the images. This is highlighted by close-ups and extreme close-ups conceptualised through the textual metafunction. This is illustrated in Table 7.9 of the Australian *Mouth Cancer* cigarette pack and the Canadian *Oral Cancer* cigarette pack. Both cigarette packs depict extreme close-ups of the tongue looking deformed, which potentially evokes feelings of disgust. Such use of disgust in public health campaigns add the power of revulsion to messages/images that are already highly emotive (Luptop, 2015). These off-putting and technicalised images are visual representations of the health messages on the cigarette packs. However, like for many multimodal texts that contain both language and image, images often establish an evaluative orientation (Martin, 2001) in the NTC. When we look at these images, although they are technicalising the diseases of smoking, we are meant to be shocked by how graphic they are; it is the interpersonal meanings that have more salience.

| Australian <i>Mouth Cancer</i> cigarette pack  | Canadian <i>Oral Cancer</i> cigarette pack   |
|--|--|
| <p>Front of pack</p>  <p>Back of pack</p>  |  |

Table 7.9. Australian and Canadian Cigarette packs

The linguistic and image resources in negativity + technicalising, combining with actual and possible behaviour, construe smoking from a medical lens that is saturated with the negative

consequences of smoking on the body. While highly ideation focused, these recontextualised medical lexis are nonetheless highly evaluative as demonstrated in Chapter 4, and the gruesome images are also highly shocking, and thus create a range of interpersonal meanings. This regular combination is complemented by the other regular combination in the NTC: positivity + personalising.

### **7.2.2. Positivity + personalising**

The second prominent combination of strategies in the NTC is positivity + personalising. As noted above, these campaigns tend to be overlaid on the ever-present negativity + technicalising campaigns from 2011. This seems to fit with the public health trend, not just in Australia but around the world, where there has been an emergence of more positive style public health campaigns (personal observations). Some studies refer to these positive style campaigns as promoting hope rather than fear (Durkin et al., 2018; Nabi & Myrick, 2019). The strategies of positivity + personalising position quitting from a personal perspective, where it is the ex-smoker recounting their quitting journey and how their quit journey has led to their and their families' happiness. They either combine with actual behaviour to present the current benefits of quitting to smokers and their loved ones, or they combine with possible behaviour to present the future benefits of quitting. The combination of positivity + personalising addresses the hopelessness smokers may feel when confronted with messages of disease and death. Research from the Cancer Council Victoria has shown that many smokers want to quit, but lack confidence to do so (Cancer Council Victoria, 2010) and these positivity + personalising campaigns can address this issue. This section explores how positivity + personalising is organised in language and image to highlight the personal

benefits of quitting. And similarly to negativity + technicalising, they can combine with either actual or possible behaviour to present the personalised benefits of quitting as actual or as having the possibility of occurring in the future.

*Language*

In language, positivity + personalising is construed by ex-smokers recounting their quitting journeys which has led to their good health, and their families’ happiness. In their recounts, they employ a number of naming strategies including first-person pronouns, first names, kin terms and group terms which create solidarity with the audience. Personal pronouns such as *I* and non-generic *you* have been shown to make messages feel approachable to the audience (Maibach & Parrott, 1995) as they feel like they are being directly spoken to. Instances of naming are highlighted blue in Table 7.10 from the *Don’t Make Smokes your Story* campaign.

|                     |   |
|---------------------|---|
| <b>Family TV ad</b> | <ul style="list-style-type: none"> <li>- My kids, Jarrah and Yani, I wanted to be there for them</li> <li>- Mum and the aunties are pretty happy that I quit</li> </ul> |
| <b>Work TV ad</b>   | <ul style="list-style-type: none"> <li>- I wanna be here for my wife and kids</li> <li>- My name is Ted and family is my story</li> </ul>                               |

*Table 7.10. Naming in positivity + personalising campaigns*

Similar usage of the first-person pronoun *I* to recount one’s quit journey is found in positivity + personalising ads in state-based campaigns. For example, the *Win* campaign, jointly produced by the Cancer Institute of NSW and Cancer Council Victoria features a man who keeps trying to quit smoking until he finally achieves his goal: “I put my cigarette out and never lit another one”. Promoting successful quitting stories such as the *Win* campaign may

be effective in encouraging other smokers to quit as it increases self-efficacy (Durkin et al., 2018).

Additionally, families play an important role in positivity + personalising campaigns. When recounting their quit journeys, ex-smokers regularly explain how their families have also benefited from their quitting smoking. In Chapter 5, we saw how the *Family* TV ad builds a taxonomy of Ted’s family as they have benefited from his quitting smoking. Similar people entities, and more specifically, family people entities are found in other positivity + personalising campaigns. Table 7.11 highlights the family members whose lives have improved by the smoker quitting smoking. Quitting is put forward as a behaviour that can lead to a better livelihood for the smoker and those close to them. In this way, positivity + personalising campaigns build a positive relationship with the audience by prioritising interpersonal meanings.

|  |  |
|--|--|
| <b><i>Quit for You, Quit for Two</i></b> | - you’ll improve the flow of oxygen to your <b>baby</b>                                  |
| <b><i>Break the Chain</i></b>            | - I don’t want our <b>kids</b> growing up thinking disease and dying like that is normal |

*Table 7.11. People entities in positivity + personalising campaigns*

In each example in Table 7.11 positivity + personalising combines with possible behaviour to portray an ideal future where smokers have stopped smoking, and their families are living healthy lives. This is realised by the future tense and simple present tense, highlighted red in Table 7.12. In many positivity + personalising campaigns, quitting is put forward as the ideal behaviour to smoking and so often combines with possible behaviour.

|                                   |   |
|-----------------------------------|---|
| <i>Quit for You, Quit for Two</i> | - you'll improve the flow of oxygen to your baby                                  |
| <i>Break the Chain</i>            | - I don't want our kids growing up thinking disease and dying like that is normal |

Table 7.12. Possible behaviour combining with positivity + personalising

Furthermore, positivity + personalising campaigns regularly employ positive APPRAISAL resources to praise smokers for quitting. This was illustrated in Section 4.2.2 for the *Quit for You, Quit for You* campaign where it was shown that *quitting* gains positive judgment since it is a behaviour that leads to positive outcomes. And since it is pregnant women who are quitting, they in turn are also praised for quitting smoking for their unborn babies. Emoters are also regularly the experiencers of positive affect in personalising campaigns as demonstrated in Section 5.2.2.

These positive attitude are also found in other positive personalising campaigns such as the *Every Try Counts* campaign from the U.S Food and Drug Administration that encourages smokers to keep quitting through supportive messages (U.S Food and Drug Administration, 2020). In Image 7.3, *you didn't fail at quitting* affords positive judgement towards quitters, who are further encouraged to keep trying with *you just haven't finished the process*. Such campaigns that encourage smokers to keep trying foster hope, and working together with fear-based campaigns can increase quit attempts (Durkin et al., 2018).



*Image 7.3. U.S FDA Every Try Counts campaign*

The health message in Image 7.3 also illustrates the regular interplay between actual and possible behaviour in campaigns. The health message starts with an actualised verbal group to let smokers know that they *didn't fail at quitting*. There is then a switch to a non-actualised verbal group letting them know their quitting process is not over yet, before issuing a command to *keep going*. This is illustrated in Table 7.13 where actualised verbal groups are highlighted pink and non-actualised verbal groups are highlighted red. This switch from

actual to possible behaviour paints quitting as the goal to be attained, in a similar manner as the other positivity + personalising campaigns.

|   |
|---|
| <b><i>Every Try Counts poster</i></b>         |
| You <b>didn't fail</b> at quitting.           |
| You just <b>haven't finished</b> the process. |
| <b>Keep going</b> at everytrycounts.gov.      |

*Table 7.13. Actual and possible behaviour in Try Every Counts Poster*

*Image*

In images, positivity + personalising is construed by foregrounding happy people. And in a similar manner to language, these also build taxonomies of people entities. These happy people entities are illustrated in Table 7.14 from the *Don't Make Smokes your Story* and *Quit for You, Quit for Two* campaigns. Ted and his children are smiling, and Ted's eye gaze is directed at his son to the right, suggesting his son is the trigger for his happiness. Similarly, in *Quit for You, Quit for Two* poster, the pregnant woman's eye gaze also suggests the likely trigger for her smile is her unborn baby. These images are visual representations of successful quitting stories and work hand-in-hand with the linguistic resources to encourage smokers to quit smoking (Durkin et al., 2018); they represent the end result of quitting. Indeed, these images put a literal face to quitting which might serve to create a bond with those attempting to quit or those thinking about quitting.



| <i>Don't Make Smokes your Story</i>  | <i>Quit for You, Quit for Two</i>   |
|--|---|
|  |  |

Table 7.14. Images in positivity + personalising campaigns

This section presented the two main combinations of strategies in the NTC: negativity + technicalising and positivity + personalising, and each can combine with either actual or possible behaviour or both. The first combination places emphasis on the current and on-going damage smoking causes to the body, while the latter takes a more personal approach to presenting the positive effects of quitting as also immediate and far-reaching. In the grand scheme of the NTC, they serve to both discourage smoking and promote quitting. However, they are not the only combinations observed in the NTC. Next, we explore how negativity + personalising and positivity + technicalising also discourage smoking and promote quitting.



### 7.3. Additional combinations

In addition to these frequent combinations, there are two less frequent combinations that occur in the NTC. These two additional combinations are negativity + personalising which tends to centre on the devastating impact smoking has on lives and livelihoods, and positivity + technicalising which focuses on the positive effects of quitting on the body. This section examines the functions of these patterns in language, and image resources and their effects in the NTC and the health promotion literature. In a similar manner to the two regular combinations, these also combine with actual or possible behaviour to present smoking/quitting as either actual or possible. While these two combinations are not as frequent, it does not mean that they are less effective at discouraging smoking and promoting quitting. Instead, they do so in a different manner to negativity + technicalising and positivity + personalising.

#### 7.3.1. Negativity + personalising

Over time, there has been an emergence of more negativity + personalising campaigns in the NTC starting in 2011 with the *Cough* campaign. In 2012, the cigarette packs of the *Health Warnings* campaign became gradually more personalising, although the campaign itself still overwhelmingly technicalises smoking. Negativity + personalising campaigns centre on smokers, and their families, and how smoking destroys lives and livelihoods. These campaigns tend to be highly emotionally charged compared to negativity + technicalising campaigns. In the NTC, campaigns that utilise the negativity + personalising combination regularly present smokers in social settings, to reinforce that their smoking impacts those around them. Research into highly emotional and narrative driven anti-smoking ads has been

shown to increase quitting (Durkin et al., 2009; Huang, Friedman, Feng-Chang, & Thrasher, 2018). These emotional and narrative driven ads personalise the negative effects of smoking and “increase viewers’ insight into what it would be like to have a specific illness” (Durkin et al., 2009, p. 2222). This section explores how the personalisation of smoking highlights the devastating impacts of smoking on lives and livelihoods.

### *Language*

In language, the personalisation of smoking is construed through negative emotions realised by negative affect and negative appreciation of the diseases caused by smoking. Section 4.1.2 presented an APPRAISAL analysis of the *Breathless* TV ad ([Video 7.2](#)) to illustrate the distress smoking causes to smokers. Here, we explore how cigarette packs from the *Health Warnings 2012* campaign personalise the negative consequences of smoking by highlighting the heartache smoking causes to loved ones. As mentioned previously, the *Health Warnings 2012* campaign is generally a technicalising campaign, but it also has instances of cigarette packs that are more personalising. The health message of the *Smoking Kills* cigarette pack in Image 7.4 draws attention to the negative emotional states of loved ones. This is presented in Table 7.15. These instances of negative affect in non-actualised verbal groups are realised by the future tense and the imperative to urge smokers to think of the future distress their smoking will cause to their loved ones.

Front of pack

Back of pack



Image 7.4. Smoking Kills 2012 cigarette pack

| Emoter     | Appraising Item | Trigger                                 | Type        | Polarity |
|------------|-----------------|---|-------------|----------|
| loved ones | distress        | you getting a disease caused by smoking | unhappiness | negative |
| loved ones | pain            | you getting a disease caused by smoking | unhappiness | negative |
| loved ones | suffering       | you getting a disease caused by smoking | unhappiness | negative |

Table 7.15. Affect analysis of Smoking Kills 2012 cigarette pack

Similar emotionally driven ads are found in other anti-smoking campaigns around the world.

The *Worried* TV ad ([Video 7.3](#)) from the UK's National Health Service (NHS) *Smoke-Free*

campaign, depicts a confident teenage boy who is seemingly unworried about things around him, but is worried about his dad dying from smoking. This is presented in Table 7.16 where the boy's positive affect about the various troubles in his life shift to insecurity towards his father dying from smoking. These instances of negative irrealis affect reflect the boys apprehension over the future consequences of his father's current smoking.

Transcript of NHS *Worried* TV ad:

*"I'm not worried she ain't texted me back. I'm not worried about Jazz's dog. And I'm not worried about my [indistinguishable] friend. I'm not worried. But I am worried about dad smokin'. I'm worried that my dad will die."*

| <b>Emoter</b> | <b>Appraising Item</b> | <b>Trigger</b>                    | <b>Type</b>        | <b>Polarity</b> |
|---------------|------------------------|-----------------------------------|--------------------|-----------------|
| narrator      | not worried            | she hasn't texted him back        | affect: security   | positive        |
| narrator      | not worried            | Jazz's dog                        | affect: security   | positive        |
| narrator      | not worried            | <i>[indistinguishable] friend</i> | affect: security   | positive        |
| narrator      | not worried            |                                   | affect: security   | positive        |
| narrator      | worried                | dad smoking                       | affect: insecurity | negative        |
| narrator      | worried                | dad dying                         | affect: insecurity | negative        |

Table 7.16. Affect analysis of *Worried* ad from NHS

These campaigns are highly emotionally charged and emphasise the negative emotional impact smoking has on families. Such negative emotionally charged anti-smoking ads have been shown to not only evoke fear of disease and death of smokers, but to also evoke sadness for family members and loved ones who are left behind (Biener & Taylor, 2002) to urge smokers to think of their loves ones before they start smoking. Moreover, Biener, McCallum-

Keeler, and Nyman (2000) found that anti-smoking ads that depict smokers suffering from the negative consequences of smoking were effective at increasing readiness to quit smoking. This includes ads such as the *Breathless* TV ad ([Video 7.2](#)).

### *Image*

The negative affect expressed by suffering smokers and their loved ones is paralleled in images. In the *Cough* TV ad illustrated in [Video 7.4](#), the smoker has a look of worry and sadness on his face as he coughs up blood and turns to look at his family knowing the impact his smoking will have on them if he dies. A still shot is presented in Image 7.5. His eye gaze towards his family parallels the eye gaze we saw in positive personalising campaigns, but instead of the smoker in Image 7.5 smiling towards his family, he looks worried. This same worried look is since in the *Worried* NHS ad as the boy looks at his father smoking, shown in Image 7.6.



*Image 7.5. Still shot of Cough TV ad*



*Image 7.6. Still of Worried NHS TV ad*

In the state-based campaigns, children are regularly used to personalise the negative impact of smoking on families. The *Parents* TV ad was produced by Quit Victoria and Quit South Australia in 2001, but also aired in other states. [Video 7.5](#) illustrates the sadness children feel knowing that their parents will die from smoking. This sadness is intensified in the *Separation* TV ad in [Video 7.6](#) where a young boy is separated from his parent in a crowded area. The ad represents the distress children experience when their parents are no longer there. These negative emotions expressed by children serve to evoke sadness from smokers watching these TV ads (Biener et al., 2000). The daughter's sadness in [Video 7.5](#) seems to be more unrealistic affect at thinking about the fact that her dad will not be around much longer, while the distressed boy in [Video 7.6](#) seems to be more realistic affect, showing how children react when their parents are no longer here.

Smoking is further personalised in negativity + personalising campaigns by using close-ups and medium-close shots of people's faces, illustrated in the *Parents* and *Separation* TV ads. These close-ups and medium-close shots serve to literally bring a face to the devastating effects of smoking. Furthermore, as stated by Kress and van Leeuwen (2006), these types of

shots create a close social distance between the represented participants and the audience, which builds a relationship with the audience warning them of how their families will suffer if they start smoking or continue to smoke.

### 7.3.2. Positivity + technicalising

The NTC only has one largely positivity + technicalising campaign – the *Health Benefits* campaign –, although individual materials from other campaigns also at times employ positivity + technicalising strategies. In positivity + technicalising campaigns, the benefits of quitting are technicalised to focus on the positive effects of quitting on the body. This shows smokers that much of the damage caused by smoking can be reversed – given time – which can offer smokers hope. Campaigns that highlight and promote the benefits of quitting on the body, emphasise that quitting at any age regardless of how many years of smoking will improve smokers' health (Centers for Disease Control and Prevention, 2020). Positivity + technicalising tend to mostly combine with possible behaviour since the benefits of quitting continue into the future. This is not only seen in the NTC, but in other anti-smoking campaigns in other countries. Furthermore, in the campaign materials, the images do not technicalise quitting, rather the human participants actually serve more to personalise quitting. In this sense, these materials are able to link the technicalising to the personalising such that the language technicalise quitting and the images personalise quitting.

In the language of the *Health Benefits* campaign, the positive effects of quitting on the body are technicalised. This technicalisation is different to what we observed in negativity + technicalising campaigns in Section 7.2.1 where technicalised medical language was used to establish a norm around smoking as an undesirable behaviour. However, in the *Health*

*Benefits* campaign, language oriented to more everyday purposes is used to explain how the body repairs itself after quitting. For example, *In 3 months, your lung function begins to improve* and *In 12 months, your risk of heart disease has halved*, illustrated in Image 7.7. This is different to the medicalised languages used in negativity + technicalising campaigns where technical terms are more prevalent such as *peripheral vascular disease, angina, atherosclerosis, periodontitis* etc.





Image 7.7. Health Benefits campaign poster – woman

Positivity + technicalising tend to combine with possible behaviour to set the benefits of quitting in the future. As illustrated in Section 6.2.2, Circumstances of Location are used to present the benefits of quitting on the body as something that will happen in time, given that smokers quit smoking. This is illustrated in Table 7.17. These Circumstances of Location are

further coupled with various non-actualised verbal groups such as *In 1 week, your sense of smell improves* to show that there is continuous improvement (healing) to your body if you quit.

|   |
|---|
| <b><i>Health Benefits Poster – woman</i></b>                    |
| <b>In 1 week</b> your sense of smell improves                   |
| <b>In 3 months</b> your lung function begins to improve         |
| <b>In 12 hours</b> excess carbon monoxide is out of your blood  |
| <b>In 1 year</b> a pack-a-day smoker will save over \$8300      |
| <b>In 1 month</b> skin appearance is likely to improve          |
| <b>In 5 days</b> most nicotine is out of your body              |
| <b>In 12 months</b> your risk of heart disease has halved       |
| <b>Today</b> quit <b>before getting pregnant</b> and            |
| your risk of a pre-term baby is reduced to that of a non-smoker |

*Table 7.17. Circumstances of Location Health Benefits woman poster*

This similar use of everyday language and Circumstance of Location to create the ideal result of quitting is also found in other anti-smoking campaigns. In fact, many campaigns around the world tend to use the same messages. This is illustrated in Image 7.8 from the UK where the message is very similar to the *Health Benefits* poster in Image 7.7. For example, both Images 7.7 and 7.8 use Circumstances of Location to show that the body starts to repair itself hours after quitting smoking. Both posters also focus on specific areas of the body that start

to heal after smoking such as the heart and lungs. Although, it can be argued that the textual organisation of the *Health Benefits* poster is a lot clearer than that of the UK poster.

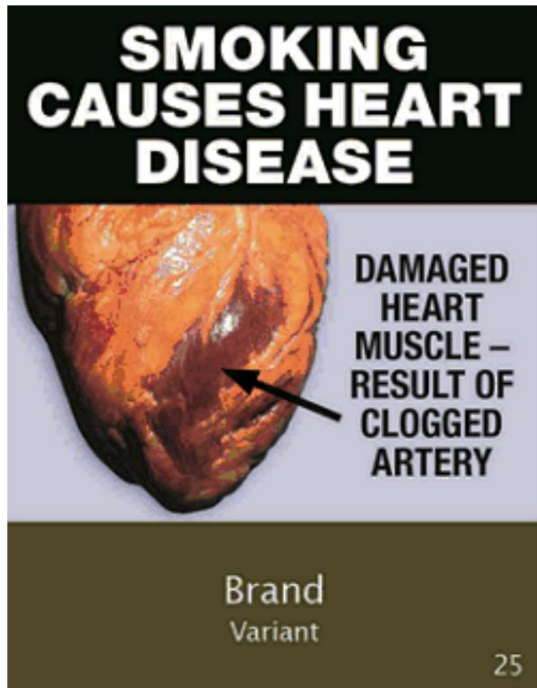


Image 7.8. UK poster of benefits of quitting

While negativity + technicalising campaigns tend to explain *how* smoking damages the body, positivity + technicalising tend to say *that* the body repairs itself after quitting without explaining how this happens. This contrast is seen when comparing the *Heart Disease* cigarette pack in Image 7.9 and the *Health Benefits* poster of Image 7.7. Table 7.18 illustrates that the health message explains how smoking damages the heart once chemicals from tobacco smoke enters the bloodstream, by setting up an implication sequence. This is different to Image 7.8 where it simply says *In 12 months, your risk of heart disease has halved*. It is possible that when technicalising smoking the emphasis is on amplifying the damage smoking causes, and one way of doing so is by explaining the worsening damage of

smoking. While when technicalising quitting, the emphasis is on the benefits of quitting and reinforcing that it is never too late to quit.

### Front of pack



### Back of pack



Image 7.9. Heart Disease 2012 cigarette pack

|   |
|---|
| <b><i>Heart Disease 2012 cigarette pack</i></b> |
| smoking   |
| ^ (leads to)                                    |
| blood vessel damage                             |
| ^ and   |
| blood supply damage to the heart                |
| ^ resulting in                                  |
| heart disease                                   |

*Table 7.18. Implication sequence of Heart Disease 2012 cigarette pack*

This difference between technicalising smoking and technicalising quitting is also evident in campaigns in other countries. Following Australia’s lead on plain tobacco packaging in 2012, France followed suit with their plain tobacco packaging legislation being fully implemented in 2017 (Cancer Institute NSW, 2020). Image 7.10 provides an example of plain tobacco packaging. In Table 7.19, the implication sequence explains *how* smoking damages the body in a similar manner to the *Heart Disease* cigarette pack in Table 7.18.



Image 7.10. France plain packaging

|                              |
|------------------------------|
| <b>France cigarette pack</b> |
| smoking                      |
| ^                            |
| clogs arteries               |
| ^ (leads to)                 |
| heart attacks and strokes    |

Table 7.19. Activity series in France cigarette pack (author's own translation)



#### 7.4. Chapter summary

This chapter explored the NTC's development and progression over 22 years, and showed how the three sets of rhetorical strategies combine to make meaning. As these analyses have shown, the NTC always has a negative and technicalising campaign running to update new knowledge about the damage smoking causes to the body with additional campaigns becoming more positive and personalising from 2011 to provide a positive personalised alternative to smoking. These then interact with actual and possible behaviour to either focus on smoking/quitting as a current behaviour, or smoking/quitting as a future possible behaviour.

This development provides us with two main combinations observed in the NTC and two less frequent combinations. The two frequent combinations are: negativity + technicalising and positivity + personalising, and the two less frequent combinations are negativity + personalising and positivity + technicalising, respectively. Negativity + personalising is important in portraying how smoking affects lives, and positivity + technicalising is important in showing that the damage from smoking can be reversed in time, thus encouraging smokers to quit. These four combinations approach smoking from different perspective which ensures that various groups in Australia are being targeted. Over time, with the progression of the NTC and the combinations of strategies, negative values are established around smoking and positive values are established around quitting. This is what we turn to in Chapter 8.

# CHAPTER 8

## BUILDING VALUES IN THE NTC

Chapters 4 to 6 presented the three sets of rhetorical strategies that organise individual campaigns in the NTC and how these are construed across multiple semiotic resources. In Chapter 7, we explored how these three sets of strategies organise the NTC over 22 years, and how they combine in specific patterns to 1) continuously update knowledge about the dangers of smoking; and 2) encourage smokers to quit for their health and wellbeing. Throughout these four chapters, it has been suggested that these sets of strategies function to establish negative values around smoking. This chapter takes up this point to theorise how negative values are established around smoking over the lifetime of the NTC and how Australians are positioned to oppose smoking. This chapter will also posit that the NTC establishes positive values towards quitting, but that these pro-quitting values are not as ‘strong’ as the anti-smoking values. To do so, we draw on various concepts and theories derived from SFL. In Section 8.1, we introduce the concept of couplings and bonds as basic semiotic units “encapsulating the values we subscribe to” (N. Knight, 2010a, p. 205). In Section 8.2, we explore the couplings and bonds involved in establishing anti-smoking values in the NTC. In Section 8.3 we propose the notion of ‘bond clusters’ and how they are used to organise bonds that have similar ideational meanings and interpersonal meanings. We bring these analyses together in Section 8.4 to provide a synoptic view of how negative values are established around smoking in the NTC. In Section 8.5 we use the analyses of the previous



sections to provide a synoptic view of how positive values are established around quitting. And lastly, in Section 8.6, we provide a comparison of the bond clusters in building negative values towards smoking and positive values towards quitting.

### 8.1. Couplings, bonds, bond networks

To understand how the NTC builds negative values around smoking over 22 years and how the Australian audience is made to align with these values, this section presents the concepts of couplings, bonds, bond networks and affiliation from an SFL perspective.

**Couplings** refer to the repeated co-patterning of meanings in texts (Painter et al., 2012, p. 143) “into particular combinations relevant to communities of the culture” (N. Knight, 2010a, p. 146). Couplings can combine “across strata, metafunctions, ranks, and simultaneous systems (and across modalities)” (Martin, 2010, p. 19). For example, intramodally there might be recurrent couplings of choices within the linguistic systems of graduation and attitude, represented as [graduation: force + attitude: neg APPRECIATION] e.g. *permanent destruction, harder and harder* etc. With couplings involving graduation, the graduation is used to scale up or scale down the coupling (N. Knight, 2010a). Another type of coupling within language is the cross-metafunctional coupling of ideational meaning with interpersonal meaning. Within the same text, there might be recurrent cross-metafunctional couplings of ideation and attitude, known as evaluative couplings (N. Knight, 2010a), represented as [ideation + attitude: neg APPRECIATION] e.g. *damaging blood vessels, toxic chemicals* etc.

In the NTC, there are regular evaluative couplings within language, and especially couplings involving [ideation + attitude: neg APPRECIATION] and [ideation + graduation + attitude: neg

APPRECIATION]. These are illustrated in Table 8.1 where in the first column, the ideation is underlined, the attitude is highlighted<sup>24</sup>, and the graduation<sup>25</sup> is bolded.

| Example   | Coupling  |
|---|---|
| <u>smoking</u> damages your eyes                  | [ideation: smoking + attitude: neg APPRECIATION]                                  |
| <b>every</b> <u>cigarette</u> is doing you damage | [graduation: ↑ quantification + ideation: cigarette + attitude: neg APPRECIATION] |

Table 8.1. Examples of evaluative couplings in language

Couplings can also occur across modalities. Studies have investigated verbiage/image couplings (e.g. Martin, 2001, 2004c, 2008; Painter et al., 2012), language and animation (He, 2020), gesture and phonology (Zappavigna, Cléirigh, Dwyer, & Martin, 2010), language and body language (Martin, Zappavigna, Dwyer, & Cléirigh, 2013), and more. In this study, there is regular ideational concurrence in image and language, as well as regular cross-modal [ideation + interpersonal] couplings. Ideational concurrence refers to ideational couplings across two modalities (Painter et al., 2012). In the NTC materials, there is frequent ideational concurrence between the disease/damage that is named and that which is depicted, illustrated in the first example in Table 8.2. However, the images in such instances do not serve to simply depict what is said in the verbiage. Instead, as argued in Chapter 4, these images serve

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<sup>24</sup> Affect highlighted pink

Judgement highlighted blue

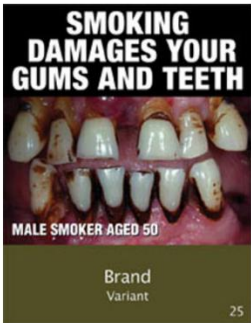

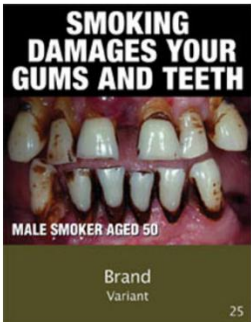

Appreciation highlighted yellow

Positive polarity highlighted green

Negative polarity highlighted red

<sup>25</sup> ↑ represents upscaling graduation and ↓ represents downscaling graduation

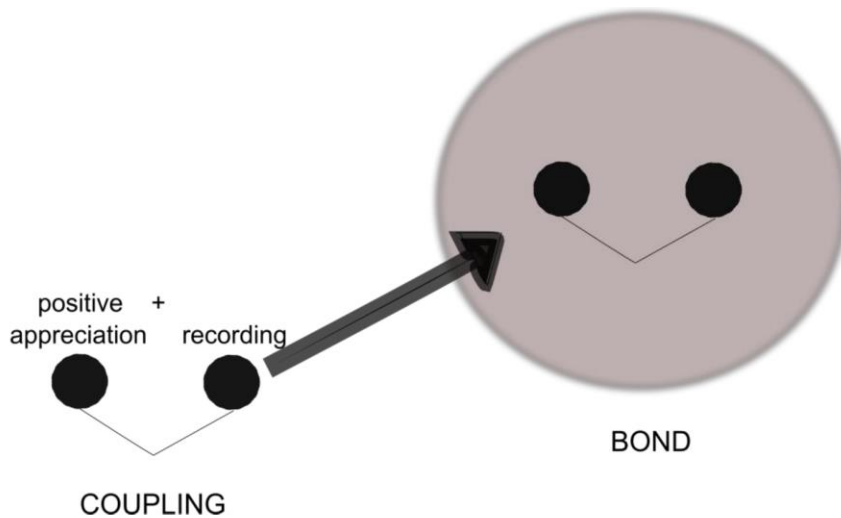
to evoke a negative reaction towards the image, and to intensify the meaning being put forward. In such instances, the images actually serve an interpersonal function: to create a negative reaction and to intensify the reaction, as shown in the second and third examples in Table 8.2. In this study, we are concerned primarily with how ideational and interpersonal meanings couple together in language and across modalities to form bonds, as it is these [ideational + interpersonal] couplings that are involved in building values and aligning the community with said values.

| Image   | Language                                     | Coupling   |
|---|--|--|
| <p>Front of pack</p>  <p>Brand Variant 25</p> <p>Back of pack</p>  <p>Image of damaged gums and teeth</p>   | <p>“smoking damages your gums and teeth”</p> | <p>[Image: ideation: gums and teeth + Language: ideation: gums and teeth]</p>  |
| <p>Front of pack</p>  <p>Brand Variant 25</p> <p>Back of pack</p>  <p>Image of damaged gums and teeth</p> | <p>“smoking damages your gums and teeth”</p> | <p>[Image: attitude: neg APPRECIATION + Image: graduation: ↑ intensifying + Language: ideation: gums and teeth + Language: attitude: neg APPRECIATION]</p> |

|  |                                      |   |
|--|--------------------------------------|---|
| <p>Front of pack</p>  <p>Back of pack</p>  <p>Image of sick-looking baby</p> | <p>“smoking harms unborn babies”</p> | <p>[Image: attitude: neg APPRECIATION + Language: ideation: sick-looking baby + Language: attitude: neg APPRECIATION]</p> |
|--|--------------------------------------|---|

Table 8.2. Image/verbiage couplings

When a coupling of ideational meaning and interpersonal meaning is shared, a **bond** is formed. The term bond, came out of N. Knight’s (2010a) work on conversational laughter, building upon Stenglin’s (2004) exploration of how people bond together in ways that build solidarity. N. Knight (2010a) argues that in a dialogic exchange, when a coupling is shared, contested or laughed off, a social bond is formed. (p. 213). N. Knight (2010a) defines bonds as “social semiotic units encapsulating the values we subscribe to as community members in the social context of affiliation and are manifested in text through attitude + ideation couplings” (p. 205). In other words, we align in communities of shared values through shared bonds. N. Knight’s (2010a) representation of a coupling forming into a bond is illustrated in Figure 8.1. Furthermore, N. Knight (2010a) explains “a coupling that is not recognised as such, and not reacted to in a particular way by another interactant, does not construe a bond” (p. 213). In other words, not every coupling in texts, whether dialogic or monologic, will necessarily form a bond.



*Figure 8.1. N. Knight's (2010a) representation of the formation of couplings and bonds*

Since N. Knight's (2010a) seminal work on social bonds, the notion of a bond forming within dialogic settings has also been expanded to monologic texts. Knox, Patpong, and Piriyaasilpa (2010) describe shared couplings between newspapers and their readers as bonds. They argue that over time as couplings are re-instantiated in texts, and "establish themselves as dominant in individual repertoires and in the shared reservoir of...public discourse.... it is likely that groups and communities will affiliate around these bonds when they are instantiated as shared couplings" (Knox et al., 2010, p. 102). In this study, we are analysing monologic texts and therefore cannot know whether readers and viewers are sharing or contesting the couplings. The term 'proposed bond' is often used in studies (e.g. Dreyfus, 2013; N. Knight, 2013) when a coupling is being negotiated but there is no evidence yet that it has been taken up as a bond. However, in this study since the same kinds of couplings occur over and over again in materials, it provides evidence that they in fact form bonds, and therefore we will use the term bonds to refer to these recurrent couplings.

N. Knight (2010b) further states that when shared couplings are re-instantiated over time and form bonds, they tend to "cluster into communities of bonds" (p. 45). N. Knight (2010b)

names these clustering of bonds **bond networks** which “organise the values of a community” (Doran, 2020, p. 155). These bond networks in turn come together into ideological networks. By ideological networks, N. Knight (2010b) means “generalized ideological divisions of community” (p. 45) which can include networks based on master identities such as gender, age and ethnicity. These ideological networks in turn come together in a culture-system of bonds which refers to a “culture’s value system” (N. Knight, 2010a, p. 267). N. Knight (2010b) calls this process **affiliation**. N. Knight’s (2010a) theory of affiliation describes “the social process of negotiating shared values in text to construct and co-identify in communities” (p. 204). In her work on conversational laughter, N. Knight (2010b) shows that when couplings are shared, contested or laughed off, interactants are negotiating their identities and community values that they affiliate with. This affiliation process is presented in Figure 8.2.

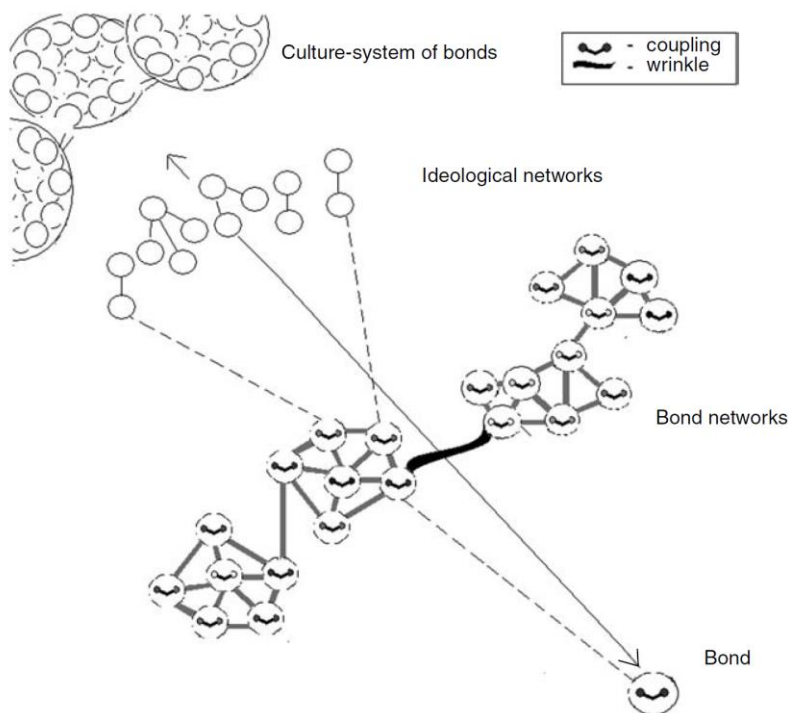


Figure 8.2. N. Knight’s (2010b) cline of affiliation realisation

This chapter draws on N. Knight's (2010c) affiliation cline to help explain how anti-smoking values are built from shared couplings forming bonds, which then cluster together to establish negative values around smoking. First, in the following section we explain how couplings and bonds are formed in materials to establish negative values around smoking.

## **8.2. Formation of couplings and bonds in the NTC**

Drawing on the concepts of couplings and bonds in Section 8.1, this section steps through recurrent couplings in the NTC and how these form bonds. This study adopts N. Knight's (2010a) representation of the formation of couplings and bonds, illustrated in Figure 8.3. In analysing how couplings form bonds, we provide a synoptic view of the overall bond network that serve to establish negative values around smoking. Future studies could also provide a dynamic perspective by analysing the logogenetic unfolding of couplings and bonds in individual texts and across the NTC over 22 years.

This study will distinguish between two types of bonds that organise negative values around smoking: a central bond and supporting bonds. The central bond that will be called 'smoking bad' is present in all negative campaigns since it is mainly negative campaigns that build negative values around smoking. The two supporting bonds relate to the role of smoking in contributing to disease, called 'disease bad' bond, and its impact on those other than the smoker, called 'impact on non-smoker bad' bond. These supporting bonds are in service of the central bond and work to reinforce it. Each of these bonds are formed intramodally through evaluative couplings in language and cross-modally in image/verbiage couplings. While it is possible that there are more supporting bonds that set up negative values around

smoking, the two identified represent a consistent messaging of the NTC: smoking harms you and others around you.

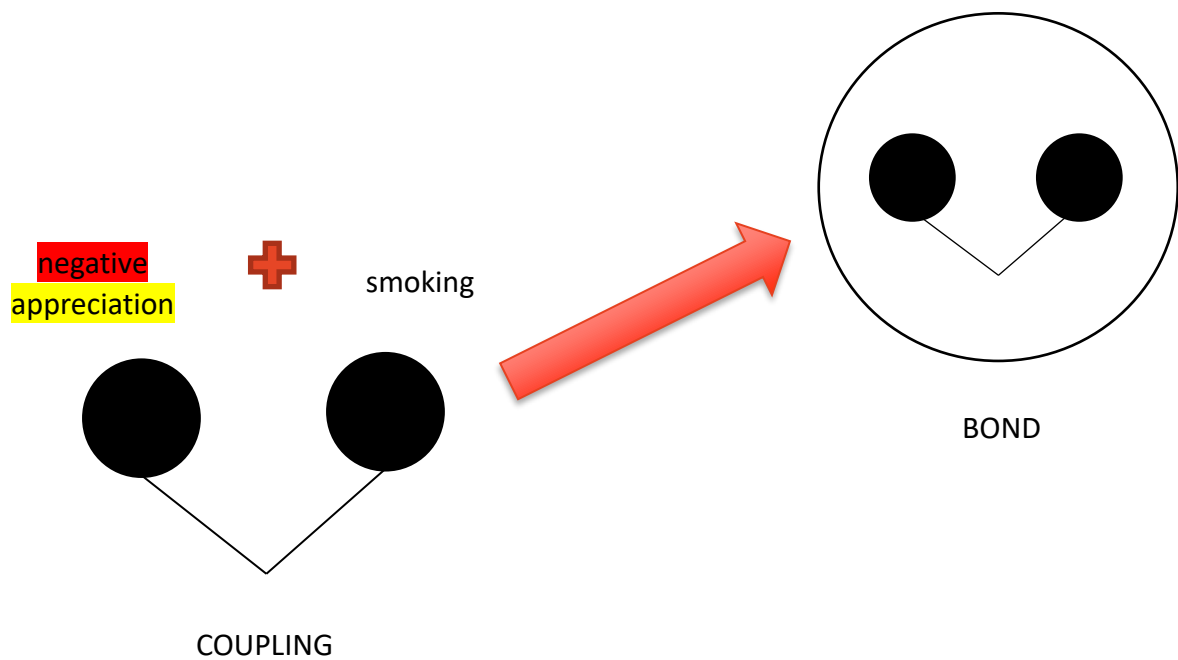


Figure 8.3. Formation of couplings and bonds in the NTC (adopted from N. Knight (2010a))

### 8.2.1. 'smoking bad' central bond

The 'smoking bad' bond is central in building anti-smoking values and occurs in all negative campaigns, whether that be campaigns that couple negativity with technicalising or negativity with personalising. This bond is formed in language through evaluative couplings realised by [ideation: smoking + attitude: neg APPRECIATION] and [ideation: smoking + attitude: neg APPRECIATION + graduation]. As explained in Chapter 4, in this study *smoking* is taken as synonymous to *tobacco smoke*, *cigarette*, *cigarette smoke* etc. When ideation and attitude couple with graduation, it tends to upscale intensifying or quantification graduation, although



there are instances of downscaling graduation. However, the effect is the same: to amplify how bad smoking is.

*Language*

In the formation of the ‘smoking bad’ central bond, *smoking* and its synonyms are coupled with negative appreciation. As presented in the APPRAISAL analyses in Chapter 4, *smoking* and its synonyms afford negative appreciation since they cause bad things to happen as shown in various NUCLEAR RELATIONS analyses where *smoking* is regularly Agent. An Agent + Medium relations analysis of the *Brain* TV ad ([Video 8.1](#)) is presented again in Table 8.3 where the Agents are bolded red and the Mediums are bolded blue.

Transcript of *Brain* TV:

*“Every cigarette is doing you damage. Smoking creates blood clots which can cause strokes. Some strokes kill, blind or paralyse, others you don’t even know you’re having. This is the result of a minor stroke in a smoker, aged 38. Every cigarette is doing you damage.”*

| <b>Agent</b>               | <b>Process</b>          | <b>Medium</b>      | <b>Range</b> |
|----------------------------|-------------------------|--------------------|--------------|
| <b>Every cigarette</b>     | is doing                | <b>you</b>         | damage.      |
| <b>Smoking</b>             | creates                 | <b>blood clots</b> |              |
| <b>which [blood clots]</b> | can cause               | <b>strokes.</b>    |              |
| <b>some strokes</b>        | kill, blind or paralyse | <b>[smokers]</b>   |              |
| <b>Every cigarette</b>     | is doing                | <b>you</b>         | damage.      |

Table 8.3. Agent + Medium relations analysis of *Brain* TV ad

In Table 8.3 *every cigarette* and *smoking* are Agents causing damage to smokers and the body. These items then afford negative attitude since they cause bad things to happen. This is presented in Table 8.4. *Every cigarette* and *smoking* do not have targets since they themselves engender negative attitude by virtue of causing damage to smokers and their bodies.

| Appraiser | Appraising item | Target | Type         | Invocation | Polarity |
|-----------|-----------------|--------|--------------|------------|----------|
| voiceover | every cigarette |        | appreciation | afford     | negative |
| voiceover | smoking         |        | appreciation | afford     | negative |
| voiceover | every cigarette |        | appreciation | afford     | negative |

Table 8.4. *Affording attitude of cigarette and smoking*

It is from these affording attitudes in Table 8.4 that the ‘smoking bad’ central bond is formed through an evaluative coupling of [ideation: smoking + attitude: neg APPRECIATION]. This is illustrated in Figure 8.4. This bond is further amplified through the upscaling quantification *every* realised by the coupling [ideation: smoking + attitude: neg APPRECIATION + graduation: ↑ quantification].

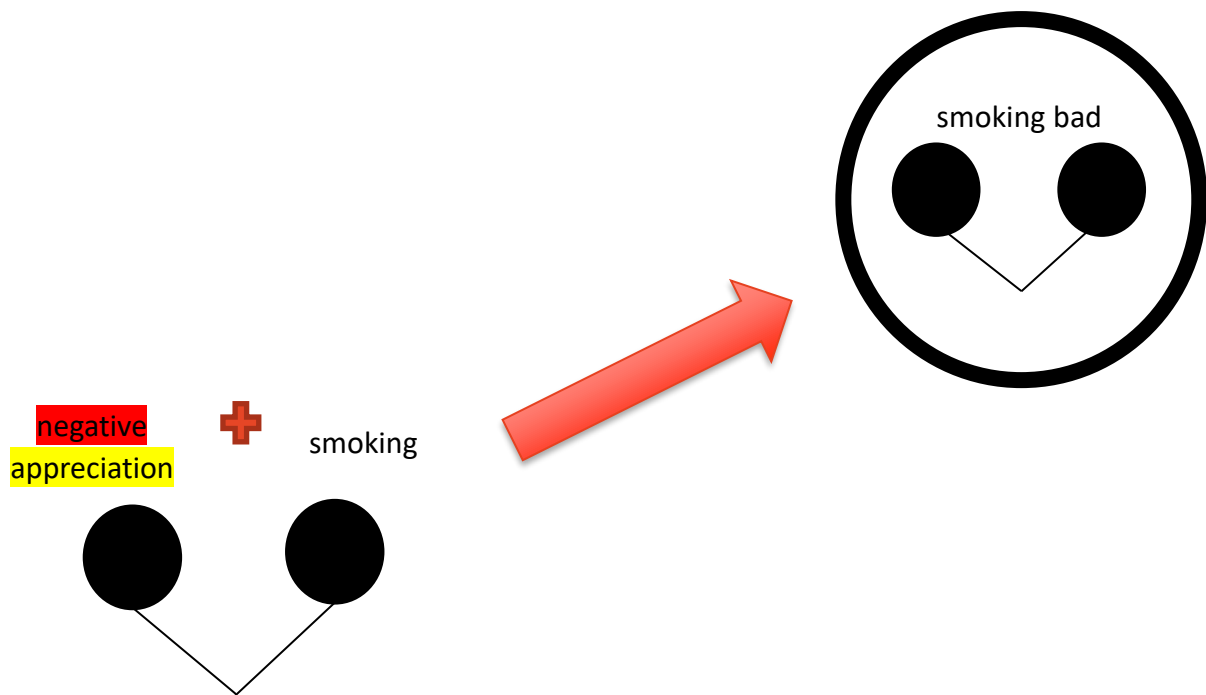


Figure 8.4. Formation of coupling and ‘smoking bad’ central bond

The ‘smoking bad’ central bond is present in all materials of the *Every Cigarette is Doing You Damage* campaign and is present in the HyperTheme and HyperNew of the campaign slogan. As discussed in Chapter 4, APPRAISAL resources as HyperThemes and HyperNews foreground these evaluations as important and “puts them in position to prosodically colour the evaluation of the events in their domain” (Martin, 2004a, p. 339). In addition to colouring the text with negative attitude, the ‘smoking bad’ bond in *every cigarette is doing you damage* also foregrounds negative values towards smoking that the rest of the text builds on.

‘smoking bad’ bonds are not directly observed in image/verbiage couplings. This is because an image of someone smoking is only conveying ideational meaning i.e., someone smoking. Instead, it is the ‘disease bad’ bonds that have image/verbiage couplings since the represented diseases evoke negative reactions shown in Table 8.8 below. In a way, the image/verbiage relations in the ‘disease bad’ bonds represent the negative consequence of smoking, and thus indirectly propose ‘smoking bad’ bonds.

The ‘smoking bad’ central bond is formed in all negative campaigns in evaluative couplings in language. Through the re-instantiation of these central bonds, negative values become established around smoking. Moreover, the supporting bonds reinforce the ‘smoking bad’ central bond by setting up negative values towards the impact smoking has on smokers and non-smokers. Over the years as these bonds are re-instantiated in the NTC, they rally the Australian public to align with anti-smoking values.

### **8.2.2. ‘disease bad’ supporting bond**

In addition to the ‘smoking bad’ central bond that appears in all negative campaigns, two supporting bonds are involved in building negative values towards smoking: ‘disease bad’ and ‘impact on non-smoker bad’. This section focuses on the ‘disease bad’ supporting bond. Supporting bonds are in service of the ‘smoking bad’ central bond, by virtue of smoking causing them. The ‘disease bad’ supporting bond is formed through regular couplings of ideational meanings relating to the diseases, illness and damage smoking causes, co-instantiated with negative attitude. In a similar manner to Liu and Hood (2019), the ideations in evaluative couplings of the ‘disease bad’ bonds can be more generalised or more specific as there is a classificatory relationship between disease and illnesses and the types of diseases and illnesses. This is illustrated in Figure 8.5. This classification means that individual texts may have a more specific coupling of [ideation: heart disease + attitude: neg APPRECIATION] forming a ‘heart disease bad’ supporting bond or an even more specific coupling of [ideation: heart attack + attitude: neg APPRECIATION] forming a ‘heart attack bad’ bond, however when read together across multiple texts, the common thread is that they are all diseases. This means it is also possible to talk about these two specific bonds more generally as [ideation: disease + attitude: neg APPRECIATION] coupling forming a ‘disease bad’ bond.

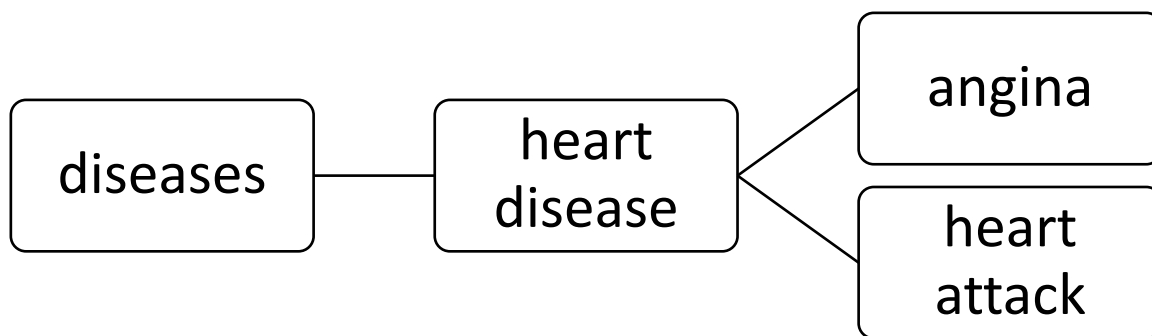


Figure 8.5. Example of classification of diseases and damage caused by smoking

Furthermore, when we look at a specific ‘disease bad’ supporting bond there are multiple symptoms that are associated with the disease, such as with periodontitis. In such instances, there is also a compositional relationship between the disease that smoking causes, and the specific damage that make up the disease. This is illustrated in Figure 8.6 in the compositional taxonomy of periodontitis. In a similar manner to the classificatory relationship between types of diseases, couplings and bonds can be more general or more specific.

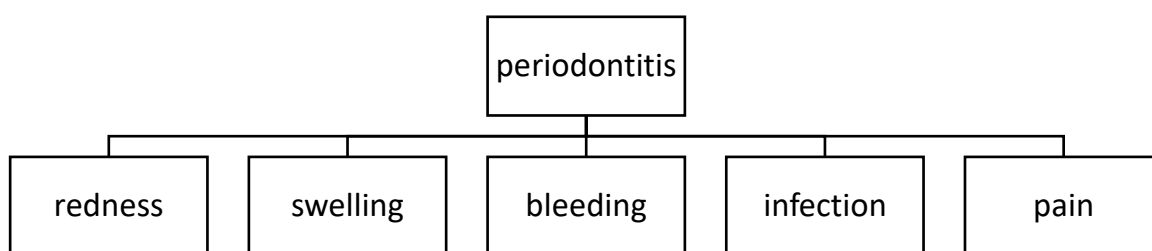


Figure 8.6. Compositional taxonomy of periodontitis

In addition, as shown in Chapters 4 and 5, there is often a contingent relation where smoking causes something to be damaged in the body, which then sets off a chain reaction where the

unfolding damage gets worse, eventually leading to what we would classify as a disease or illness. When analysing the couplings that form a ‘disease bad’ bond, we also take these ‘precursors’ to the disease as constituting the disease. This is illustrated in Table 8.5 in the implication series of the *Peripheral Vascular Disease* cigarette pack where each sequence leads to something worse. In this case, we could say that gangrene is constituted by pain, open sores, narrowed and blocked blood vessels. And so, would form a more general coupling of [ideation: gangrene + attitude: neg APPRECIATION] and a more specific coupling of [ideation: open sores + attitude: neg APPRECIATION].

| <b><i>Peripheral Vascular Disease 2012 cigarette pack</i></b>                   |
|---|
| Smoking   |
| ^   |
| narrows and blocks blood vessels  |
| ^   |
| reducing blood and oxygen supply to your extremities (feet, legs, hands, arms). |
| ^ resulting in  |
| pain, open sores that don’t heal and gangrene.                                  |
| ^ leads to  |
| amputations.  |

*Table 8.5. Activity series of Peripheral Vascular Disease 2012 cigarette pack*

### *Language*

In language, ‘disease bad’ supporting bonds are formed through the co-instantiation of negative appreciation and a disease, damage or illness caused by smoking. To illustrate this co-instantiation, or coupling, an attitude analysis of the *Brain* TV is presented in Table 8.6.

The appraising items are the diseases and damage that smoking causes, which are coupled with negative appreciation.

| <b>Appraiser</b> | <b>Appraising item</b> | <b>Target</b> | <b>Type</b>  | <b>Invocation</b> | <b>Polarity</b> |
|------------------|------------------------|---------------|--------------|-------------------|-----------------|
| voiceover        | damage                 | you [smoker]  | appreciation |                   | negative        |
| voiceover        | blood clots            | smoking       | appreciation |                   | negative        |
| voiceover        | strokes                | smoking       | appreciation |                   | negative        |
| voiceover        | some strokes           | smoking       | appreciation |                   | negative        |
| voiceover        | kill                   | smoker        | appreciation | afford            | negative        |
| voiceover        | blind                  | smoker        | appreciation |                   | negative        |
| voiceover        | paralyse               | smoker        | appreciation |                   | negative        |
| voiceover        | minor stroke           | smoking       | appreciation |                   | negative        |

*Table 8.6. Attitude analysis of disease and damage of Brain TV ad*

More generally, the coupling of [ideation: disease + attitude: neg APPRECIATION] forms a ‘disease bad’ bond illustrated in Figure 8.7. More specifically, the disease in this TV ad is stroke, and so a ‘stroke bad’ bond is formed through the coupling of [ideation: strokes + attitude: neg APPRECIATION]. The ‘strokes bad’ bond can get even more specific to constitute the things that make ‘strokes bad’. These more specific bonds include ‘paralysis bad’ and ‘blind bad’ bonds formed by [ideation: paralysis + attitude: neg APPRECIATION] and [ideation: blind + attitude: neg APPRECIATION] couplings, respectively. This is shown in Figure 8.7. This link between more general bonds to more specific bonds suggest that these bonds are fractal in the sense that we can have bonds within bonds within bonds.

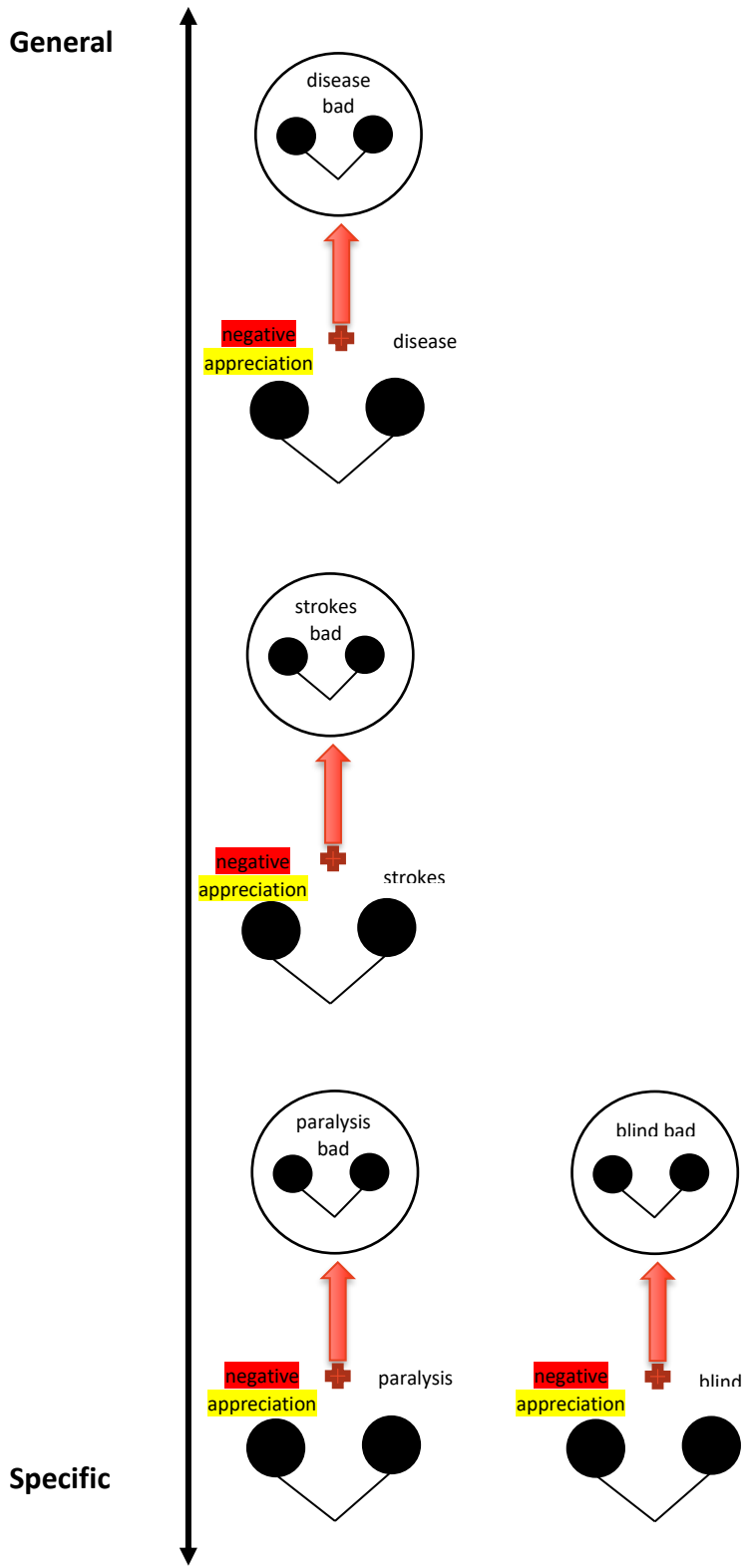



Figure 8.7. General to more specific bonds



*Image + verbiage*

As discussed in Section 8.1, one type of image and language coupling is that of ideational concurrence, whereby the ideation in the language matches what is depicted in the image forming the coupling [**Image**: ideation + **Language**: ideation]. This occurs regularly in ‘disease bad’ supporting bonds. This is illustrated in Table 8.7 of the *Brain* TV ad, where some of the shots match the voiceover in construing ideational meanings about the formation of blood clots.

| Image   | Verbiage  | Ideational concurrence   |
|---|---|--|
|  <p data-bbox="204 1279 464 1317">Image of blood clot</p> | <p data-bbox="738 831 979 1010"><i>Smoking creates blood clots which can cause strokes.</i></p> | <p data-bbox="1018 831 1385 1010">[<b>Image</b>: ideation: blood clots + <b>Language</b>: ideation: blood clots]</p> |

*Table 8.7. Ideational concurrence in Brain TV ad*

The images do not simply serve to create ideational meanings, instead they evoke a negative emotional reaction to what is being depicted. In this way, the moving images in the TV ad add more interpersonal meanings in the form of negative appreciation and upscaling graduation. The co-instantiation of linguistic resources and imagic resources are presented in Table 8.8. The language and image both tell us that what we are seeing is a blood clot which has resulted in a stroke. These ideational representations are coupled with negative attitude in

both language and image, and with graduating quantification in language, and intensifying graduating in image.



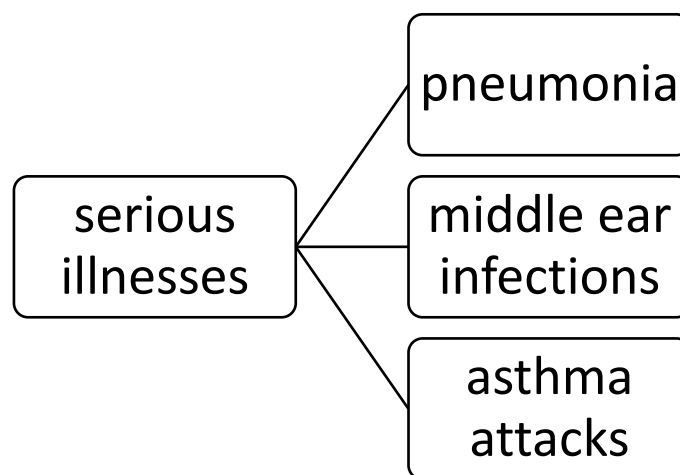
| Image  | Voiceover   | Coupling  |
|--|---|---|
|   | <p><i>“Every cigarette is doing you damage. Smoking creates blood clots which can cause strokes. Some strokes kill, blind or paralyse, others you don’t even know you’re having. This is the result of a minor stroke in a smoker, aged 38. Every cigarette is doing you damage.”</i></p> | <p>[Language: ideation: blood clots] +</p>        |
|  |   | <p>[Language: attitude: neg APPRECIATION] +</p>   |
|  |   | <p>[Language: graduation: ↑ quantification] +</p> |
|  |   | <p>[Image: neg APPRECIATION] +</p>                |
|  |   | <p>[Image: graduation: ↑ intensifying]</p>        |

Table 8.8. Formation of couplings and bonds in image/verbiage relations in Brain TV ad

The couplings that form ‘disease bad’ supporting bonds are re-instantiated across the entire *Every Cigarette is Doing You Damage* campaign, and other negative campaigns in the NTC. With each re-instantiation, their meanings get reinforced and over time strengthen the negative values around smoking to position Australians to align with these anti-smoking values. This is discussed in more detail in Section 8.4.

### 8.2.3. 'impact on non-smoker bad' supporting bond

The second supporting bond involved in establishing negative values around smoking is the 'impact on non-smoker bad' supporting bond. It is in service of the 'smoking bad' central bond by virtue of smoking having a negative impact on non-smokers. In a similar manner to the 'disease bad' supporting bond, a classificatory relationship holds between the general negative impact and diseases of smoking on non-smokers, and more specific types of diseases. This is illustrated in Figure 8.8, where smoking causes various types of serious illnesses to non-smokers.



*Figure 8.8. Classificatory relationship between types of negative impacts smoking causes to non-smokers*

Moreover, there is also a contingent relation whereby smoking causes an initial "minor" damage to a non-smoker, which then snowballs into worsening damage, disease or illness. For example, in the worsening damage that leads up to a miscarriage, smoking first reduces blood flow in the placenta and limits the oxygen and nutrients that reach the baby. These can then lead to a number of negative health consequences on the unborn baby including a miscarriage. Therefore, as with the previous section, when analysing for the 'impact on non-

smoker' bond, we also analyse for the damage that has led to the illness or disease in the non-smoker. Taking the miscarriage example, we would have a more general coupling of [ideation: miscarriage + attitude: neg APPRECIATION] and a more specific coupling of [ideation: blood flow reduction + attitude: neg APPRECIATION]. To illustrate how the 'impact on non-smoker bad' bond is formed in evaluative couplings in language and across semiotic systems of language and image, we analyse the *Unborn Babies* cigarette pack from the *Health Warnings 2012* campaign, illustrated in Image 8.1.

### Front of pack

### Back of pack



*Image 8.1. Unborn Babies 2012 cigarette pack*

### *Language*

In language, 'impact on non-smoker bad' supporting bonds are formed through evaluative couplings realised by [ideation + attitude: neg APPRECIATION] where the ideation is the disease, damage or illness smoking causes to the non-smoker which is negatively evaluated.

Table 8.9 illustrates an inscribed attitude analysis of the health message where the negative impact of smoking on unborn babies is coupled with negative appreciation.

| <b>Appraiser</b> | <b>Appraising item</b> | <b>Target</b> | <b>Type</b>  | <b>Polarity</b> |
|------------------|------------------------|---------------|--------------|-----------------|
| voiceover        | risk                   | baby          | appreciation | negative        |
| voiceover        | miscarriage            | baby          | appreciation | negative        |
| voiceover        | stillbirth             | baby          | appreciation | negative        |
| voiceover        | problems               | pregnancy     | appreciation | negative        |

*Table 8.9. Inscribed attitude analysis of Unborn Babies 2012 cigarette pack*

From a more general perspective, these couplings of [ideation: impact on non-smoker + attitude: neg APPRECIATION] form ‘impact on non-smoker bad’ bonds, presented in Figure 8.9. More specifically, they form couplings and bonds about specific types of negative impact on the unborn baby such as [ideation: miscarriage + attitude: neg APPRECIATION] forming a ‘miscarriage bad’ supporting bond.

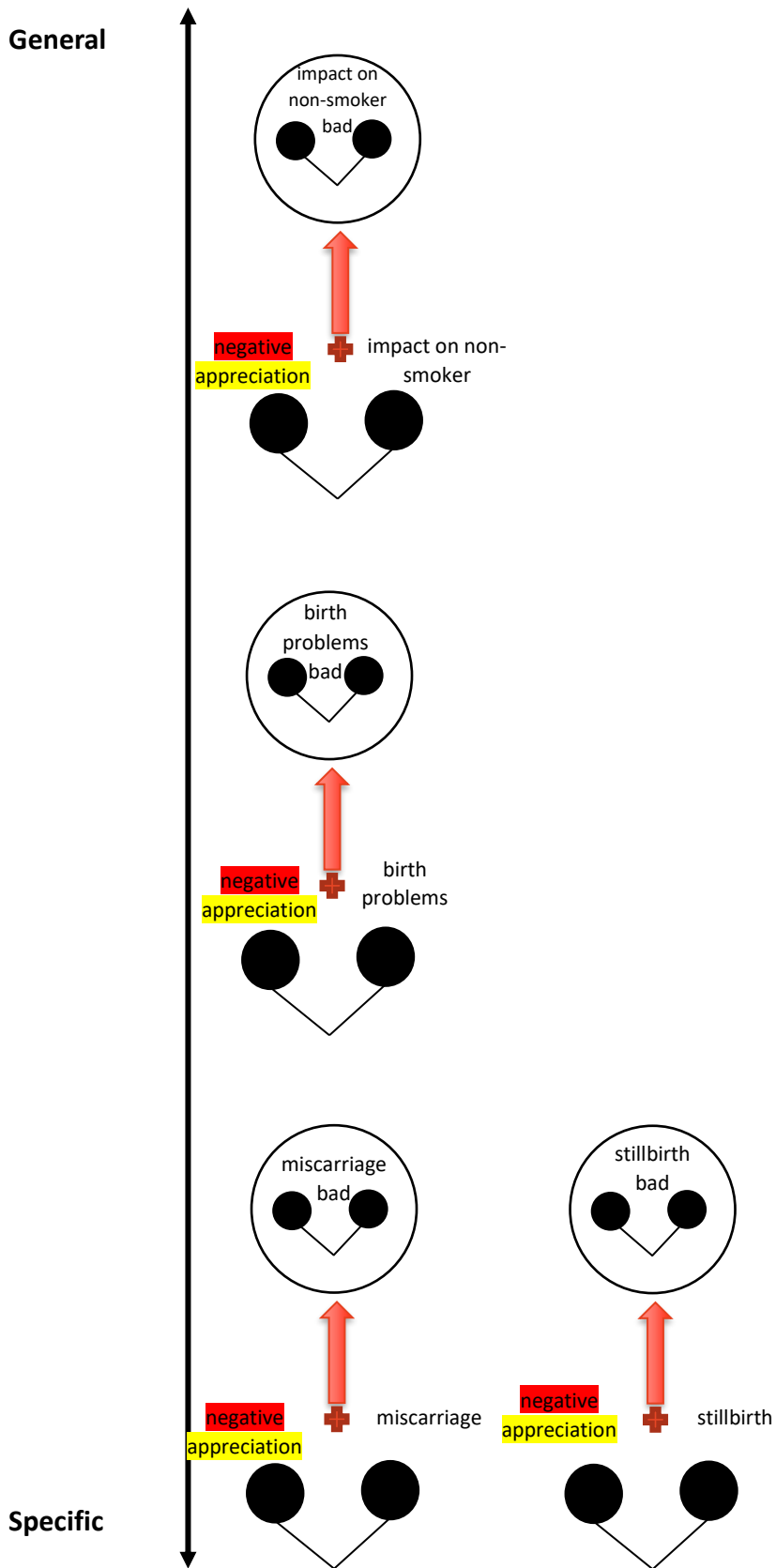


Figure 8.9. General and specific couplings of 'impact on non-smoker bad' bonds

In addition to the inscribed attitudes that couple with the impact of smoking on unborn babies, attitudes are further provoked by graduating resources. As presented in the graduation analysis in Table 8.10, the graduating items are all quantifying things. These choices of graduation have a preference of [graduation: ↓ quantification] with one instance of [graduation: ↑ quantification].

| <b>Graduating item</b> | <b>Target</b>   | <b>Type</b>  | <b>Sub-type</b> | <b>Infusion</b> |
|------------------------|---|--------------|-----------------|-----------------|
| reduces                | blood flow  | force, lower | quantification  | infused         |
| limits                 | oxygen and nutrients to the brain   | force, lower | quantification  | infused         |
| increases              | risk of miscarriage, stillbirth, premature birth, problems during birth or the baby having a smaller brain and body | force, raise | quantification  | infused         |
| smaller                | brain and body  | force, lower | quantification  | infused         |

*Table 8.10. Graduation analysis of Unborn Babies 2012 cigarette pack*

These quantifications, however, are not simply grading ideational lexis, i.e. the target of the graduation, they are in fact flagging attitude, as explained in Chapter 3. The downscaling quantification resources highlight the deficiencies unborn babies suffer from due to second-hand smoking, thus flagging negative attitude. The upscaling quantification *increases* invokes negative attitude towards the number of negative impacts that can result from second-hand smoking. These invoked attitude through graduation are presented in Table 8.11.

| Appraiser | Appraising item | Target  | Type         | Invocation | Polarity |
|-----------|-----------------|---|--------------|------------|----------|
| writer    | reduces         | blood flow  | appreciation | flag       | negative |
| writer    | limits          | oxygen and nutrients to the brain   | appreciation | flag       | negative |
| writer    | increases       | risk of miscarriage, stillbirth, premature birth, problems during birth or the baby having a smaller brain and body | appreciation | flag       | negative |
| writer    | smaller         | brain and body  | appreciation | flag       | negative |

*Table 8.11. Invoked attitude analysis of Unborn Babies 2012 cigarette pack*

Since these graduating items flag negative attitude, they also form ‘impact on non-smoker bad’ bonds through [ideation + attitude: neg APPRECIATION] couplings. Two of these supporting bonds are illustrated in Figure 8.10. While invoking attitude can generally be left to the reader to be interpreted evaluatively or not, in this context, the overwhelming negativity of the texts and the campaigns make it very hard not to negatively evaluate these graduating items as flagging negative attitude.



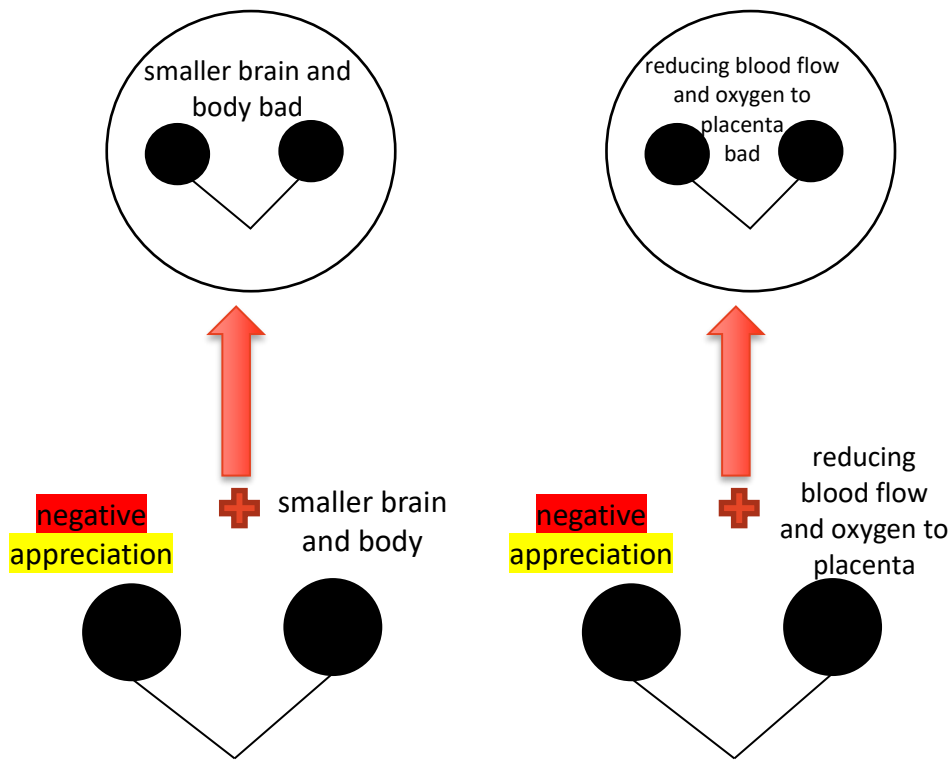


Figure 8.10. 'impact on non-smoker bad' supporting bonds

*Image + language*

The image on the cigarette pack also couples with language to form 'impact on non-smoker bad' supporting bonds. As shown in Image 8.1, the baby looks unwell from the tube attached to her nose and her ribs protruding from her chest. These evoke negative reactions from the viewers; they are meant to shock us. The baby is also smaller than she should be as stated in the health message *the baby having a smaller brain and body*. The image construes negative appreciation which couples with language to form a [Image: attitude: neg APPRECIATION + Language: ideation + Language: attitude: neg APPRECIATION] coupling and thus forms an 'impact on non-smoker bad' bond, illustrated in Table 8.12.

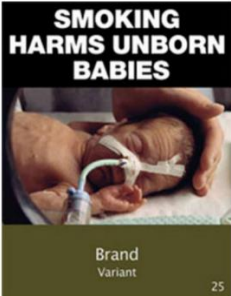

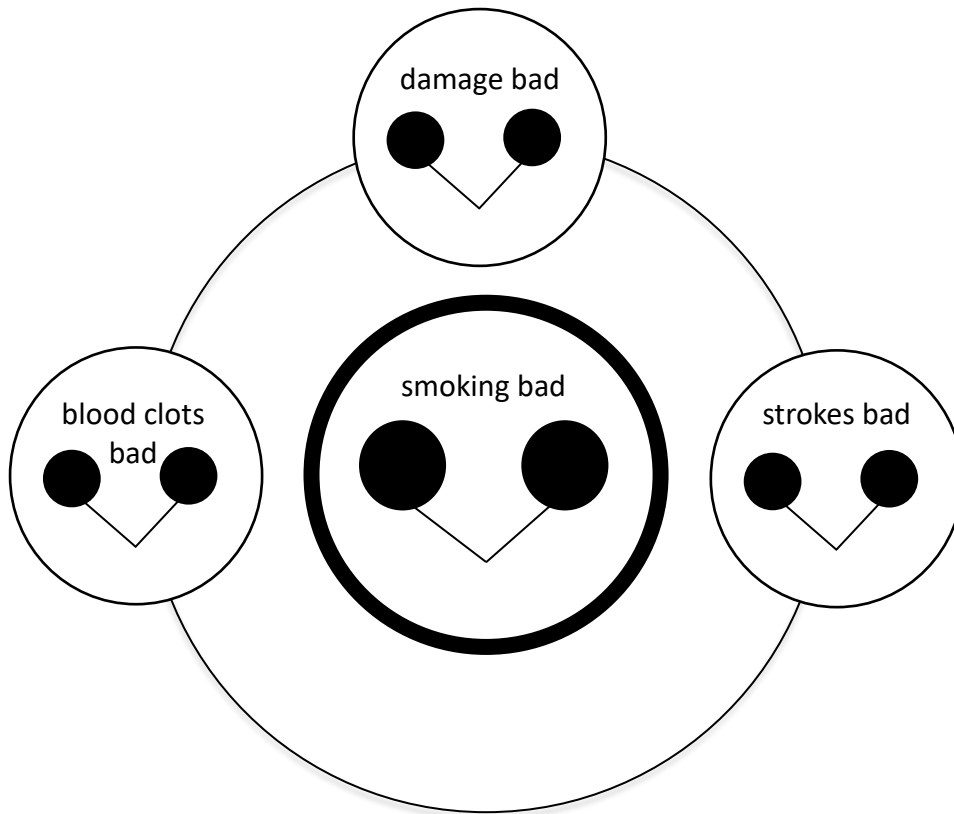
| Image  | Verbiage  | Coupling  |
|--|---|---|
| <p>Front of pack</p>  <p>Back of pack</p>  | <p><i>Smoking during pregnancy reduces blood flow in the placenta and limits the oxygen and nutrients that reach the growing baby. Smoking increases the risk of miscarriage, stillbirth or the baby having a smaller brain and body.</i></p> | <p>[<b>Image:</b> ideation: sick-looking baby + <b>Image:</b> attitude: neg APPRECIATION + <b>Language:</b> ideation: smoking impact on baby + <b>Language:</b> attitude: neg APPRECIATION]</p> |

Table 8.12. Image/verbiage coupling of ‘impact on non-smoker bad’ couplings

While this section only illustrated a few examples of the ‘smoking bad’ central bond and the ‘disease bad’ and ‘impact on non-smoker bad’ supporting bonds, these bonds can be found across the NTC. More specifically, the central bond is found in all negative campaigns since negative campaigns focus on the devastating impact of smoking. This is complemented in state-based campaigns by further supporting bonds that focus on social isolation – though these are less prominent in the Federal campaigns examined in this thesis.

### 8.3. Bond clusters

Drawing on N. Knight's (2010b) notion of bonds clustering into bond networks in the process of negotiating values, in this section, we introduce the concept of 'bond clusters' in the process of building negative values around smoking. A bond cluster draws together the 'smoking bad' central bond with supporting bonds from similar couplings of ideational meanings and attitude i.e., 'disease bad' bonds or 'impact on non-smoker bad' bonds. When various 'disease bad' supporting bonds cluster together around the central bond, they form a 'smoking harms smoker' cluster. When various 'impact on non-smoker bad' supporting bonds cluster together around the central bond, they form a 'smoking harms non-smoker' cluster. An example of a bond cluster is illustrated in Figure 8.11. These bond clusters serve to build shared values in a similar manner to N. Knight's (2010a) bond networks. N. Knight (2010b) also calls bond networks "clusters of bonds" since they organised bonds into categories (p. 45). This is exactly the case with the bond clusters identified in this study which organise bonds into categories of the negative consequences of smoking. This thesis employs the term 'bond cluster' not to replace N. Knight's (2010a) concept of 'bond network', but rather to expand on the theories of bonding and affiliation. While N. Knight's (2010a) concept of the 'bond network' originated from her study which explored how friends use laughter to bond in casual conversation, this thesis explores how attitudes and values towards smoking and quitting are established in texts (campaign materials). 'bond clusters' thus, represent how bonds come together in the NTC materials in building anti-smoking and pro-quitting values.



*Figure 8.11. Example of bond cluster*

As shown in Figure 8.11, the central bond acts as the ‘nucleus’ of the bond cluster since it is the main bond for setting up anti-smoking values and is present in all negative campaigns.

The supporting bonds then orbit the nucleus by virtue of the ‘smoking bad’ central bond causing damage to smokers and non-smokers. The ‘smoking bad’ central bond is presented by a thicker outline to indicate that it is ‘stronger’ than the other supporting bonds since it is formed more frequently than the supporting bonds. In other words, the more a coupling is re-instantiated and the more often a bond is formed, the stronger the coupling and bond, the more rallying power it has in building values.

### 8.3.1. 'smoking harms smoker' cluster

The first bond cluster we will explore is the 'smoking harms smoker' cluster which is formed with the 'smoking bad' central bond and the 'disease bad' supporting bonds. Again, we take a synoptic view of how the 'smoking harms smoker' cluster is formed. In the analysis of the *Brain TV ad* in Section 8.2, we identified the 'smoking bad' central bond, and a number of 'disease bad' supporting bonds proposed through [ideation + attitude] couplings in language and in image/verbiage relations. Figure 8.12 presents three specific 'disease bad' bonds, namely, 'damage bad', 'strokes bad' and 'blood clots' which are directly caused by smoking.

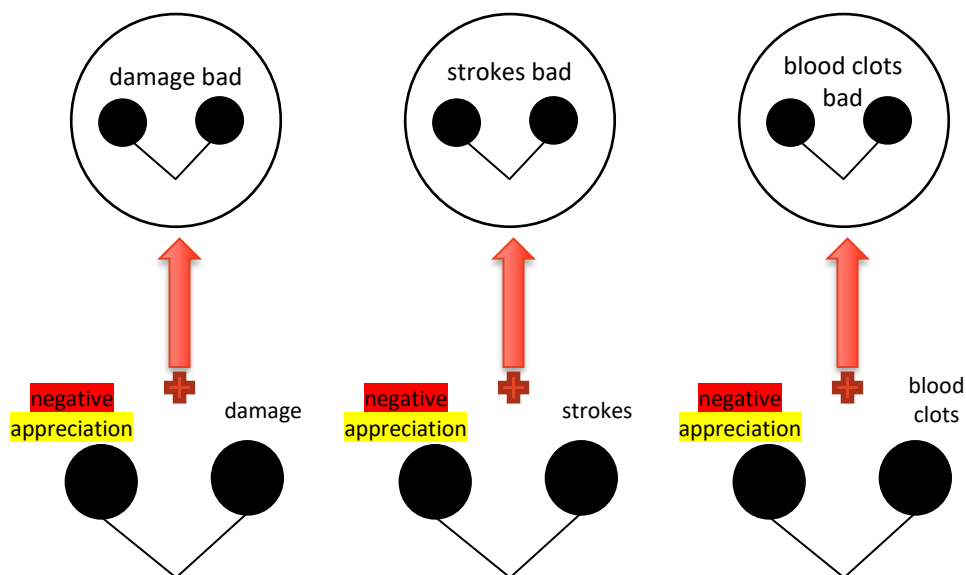


Figure 8.12. Bonds in Brain TV ad

Together with the 'smoking bad' central bond, they form a 'smoking harms smoker' bond cluster illustrated in Figure 8.13.

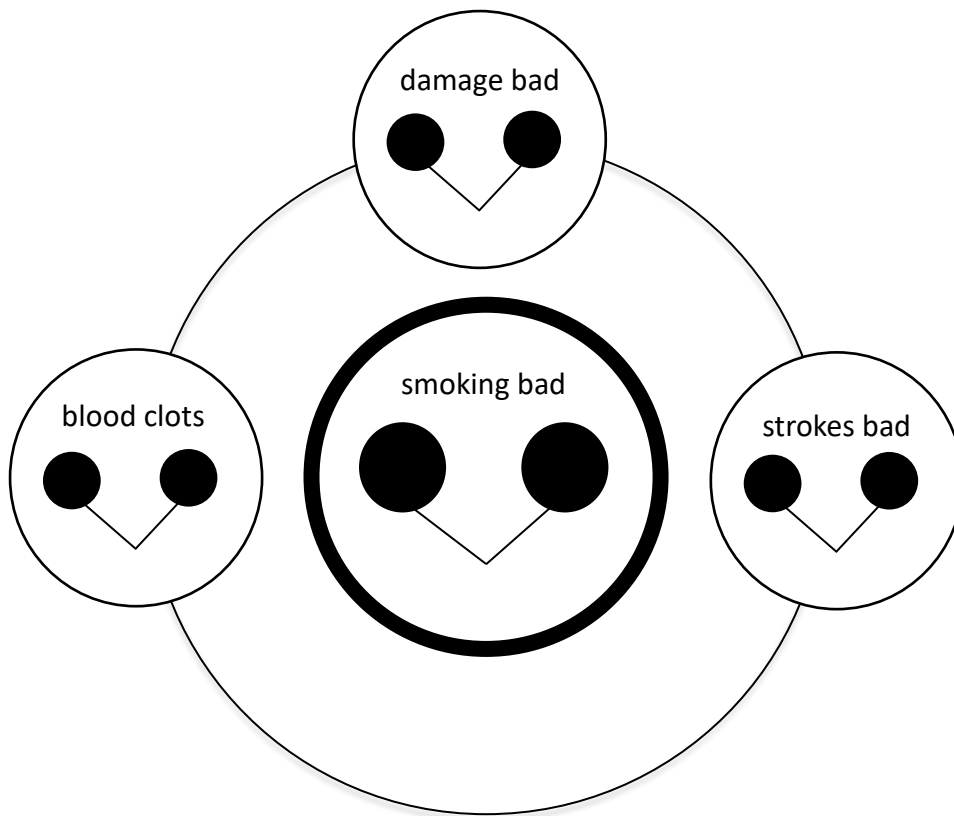


Figure 8.13. 'smoking harms smoker' bond cluster

This cluster can get more delicate by looking at the negative effects that arise from the 'strokes bad' and 'blood clots bad' supporting bonds. For example, in the *Brain* TV ad, there are other negative health impacts that can arise from suffering from strokes: the sufferer can become blind or paralysed, or strokes can kill them. These form more specific bonds that are a direct result of strokes: 'kill bad', 'paralyse bad' and 'blind bad' bonds, shown in Section 8.2.2. These more delicate bonds can then cluster around the 'strokes bad' bond which now becomes the nucleus of these other bonds as represented in Figure 8.14. In this way it is possible to account for more general bonds and more specific bonds and how they relate to each other in building values.

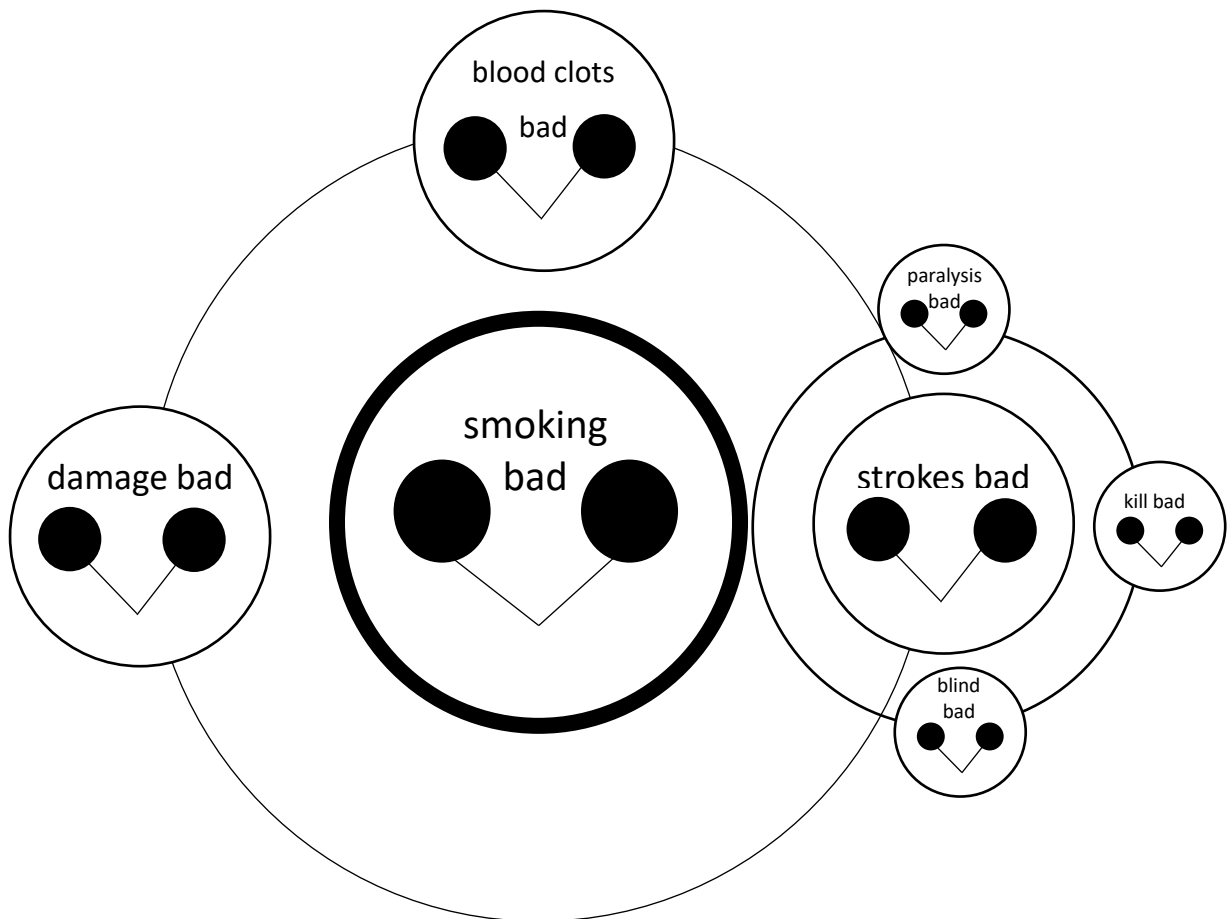


Figure 8.14. More delicate ‘smoking harms smoker’ cluster

### 8.3.2. ‘smoking harms non-smoker’ cluster

The second bond cluster observed in the NTC is the ‘smoking harms non-smoker’ cluster. Again, the nucleus of the bond cluster is the ‘smoking bad’ central bond since smoking has negative impacts on non-smokers. In this case, the nucleus is orbited by ‘impact on non-smoker bad’ supporting bonds. This is observed in the *Unborn Babies* cigarette pack. In addition to the central bond, the *Unborn Babies* cigarette pack puts forward a number of ‘impact on non-smoker bad’ bonds, illustrated in Figure 8.15.

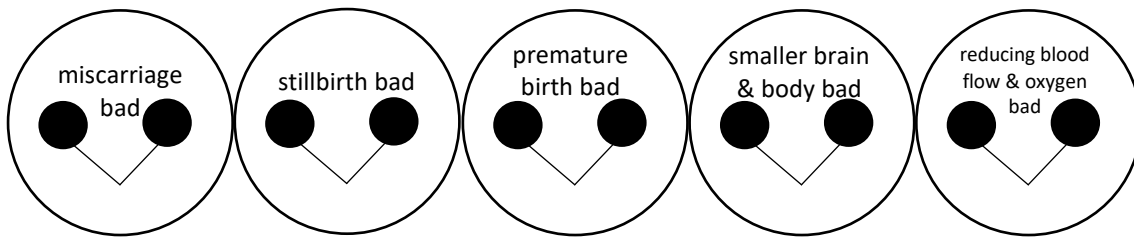


Figure 8.15. 'impact on non-smoker bad' bonds in Unborn Babies 2012 cigarette pack

When these 'impact on non-smoker bad' bonds come together with the 'smoking bad' central bond, they form a 'smoking harms non-smoker' bond cluster, illustrated in Figure 8.16.

While the 'smoking harms smoker' cluster builds negative values by highlighting the damage smoking causes to smokers, the 'smoking harms non-smoker' cluster focuses on the damage smoking causes to non-smokers, and in this case, the damage smoking causes to unborn babies.

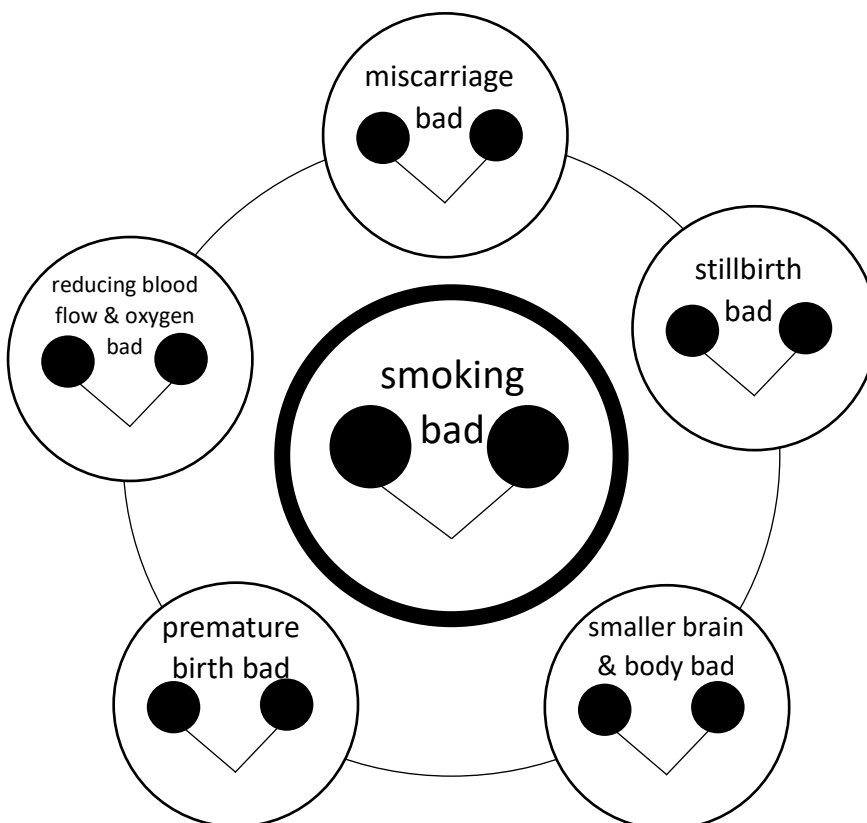


Figure 8.16. 'smoking harms non-smoker' bond cluster



The supporting bonds in both bond clusters are in service of the ‘smoking bad’ central bond. The bond clusters represent the ideational experience in terms of the negative effects of smoking e.g. blood clots, strokes, premature birth, miscarriage etc. which are coupled with negative evaluations realised by negative appreciation. In this sense, bond clusters accumulate meanings. In the NTC, they accumulate meanings about the damage smoking causes to smokers and non-smokers, building stronger and stronger sets of values. In the following section, we bring the coupling analyses, the bond analyses and the bond cluster analyses together to provide a synoptic view of how anti-smoking values are established in the NTC over 22 years.

#### **8.4. Negative values around smoking**

After 22 years of campaigning, it is commonly accepted in Australia that smoking is bad. The constant negative campaigns have continued to build negative attitude and values towards smoking. One way to conceptualise how this has been done semiotically is by drawing on N. Knight’s (2010a) process of affiliation. As mentioned in Section 8.1, affiliation “accounts for the various ways that we construct ourselves together as members of different communities of values, and is expressed in patterns of attitudes tied to particular experiences in talk” (N. Knight, 2013, p. 565). Under this model, the way members come together in communities of shared values is by sharing bonds (N. Knight, 2010b). N. Knight’s (2010b) affiliation cline is illustrated again in Figure 8.17. The affiliation process starts with a coupling being shared as a bond. The bonds then cluster into bond networks which organise “shared bonds into community values sets” (N. Knight, 2010b, p. 45). These are then connected to ideological networks which then form the culture-system of bonds (N. Knight, 2010b, p. 45).

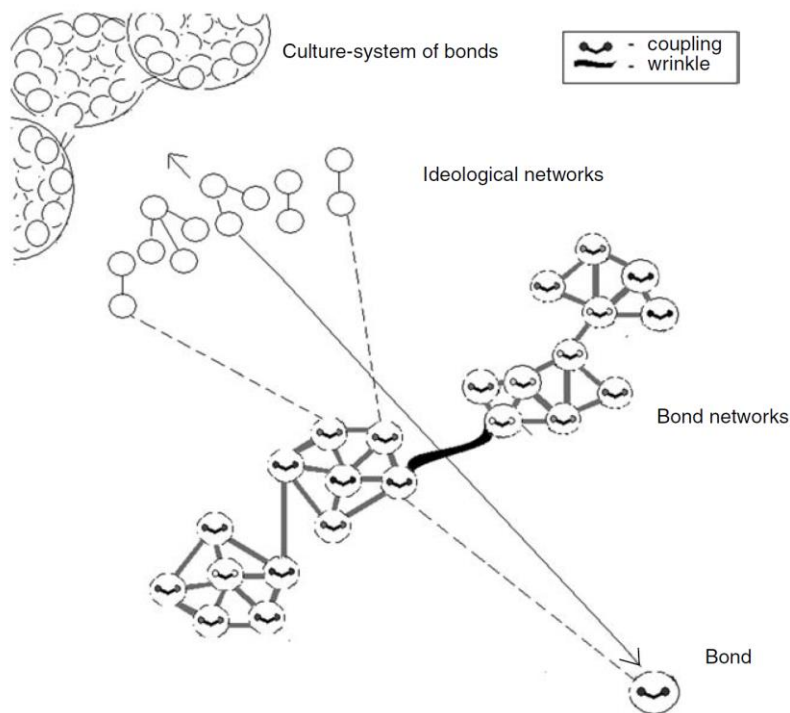


Figure 8.17. N. Knight's (2010b) cline of affiliation realisation

N. Knight's (2010b) model of affiliation illustrates how interactants in conversation negotiate their identities through bonds. In this study, we are not investigating the negotiation of identity but the negotiation of values. Drawing on N. Knight's process of affiliation, I propose a synoptic view of how negative values are built around smoking over 22 years of Federal campaigning, illustrated in Figure 8.18. Here, we step through this process of value building.

The process of establishing negative values around smoking begins with couplings of [ideation + interpersonal] meanings in language and image/verbiage relations. Couplings that are formed from [ideation: smoking + attitude: neg APPRECIATION] form the central bond in establishing anti-smoking values: 'smoking bad'. This central bond is formed in all negative campaigns since negative campaigns highlight the negative impact of smoking. Negative campaigns have been running since the start of the NTC in 1997 to propagate these negative attitude and values against smoking, as shown in Chapter 7. This constant re-instantiation of

[ideation: smoking + attitude: neg APPRECIATION] couplings make the ‘smoking bad’ central bond strong and difficult to disalign with.

In addition to the central bond, we have demonstrated that there are (at least) two supporting bonds that contribute to the formation of anti-smoking values: ‘disease bad’ and ‘impact on non-smoke bad’. These supporting bonds represent the negative impact of smoking on smokers and on non-smokers such as helpless babies, which reinforce why smoking is bad. These supporting bonds are caused by, or are a direct result of the central bond, and run from more general to more specific supporting bonds as illustrated in Section 8.2.2.

As these bonds are formed in and across texts, they form bond clusters which pull together similar ideational meanings coupled with the same interpersonal meanings, with the central bond as the nucleus holding the cluster together. In the case of the NTC, the various ‘disease bad’ supporting bonds cluster together around the ‘smoking bad’ central bond to form a ‘smoking harms smoker’ bond cluster, illustrated in Figure 8.13 above. At the same time, ‘impact on non-smoker bad’ supporting bonds cluster together around the central bond to form a ‘smoking harms non-smoker’ cluster, shown in Figure 8.16 above. These bond clusters can get quite delicate such as the ‘smoking harms smoker’ bond cluster shown in Figure 8.14 above. Over time it is likely that we would find other bond clusters, which would come together in ‘clusters of clusters’, and it is possible that there might be various ‘clusters of clusters’ organised by categories. Over the 22 years of the NTC, as more of these bond clusters cluster together, we reach a point where it becomes difficult to deny in Australian society that smoking is bad. This is illustrated in Figure 8.18.

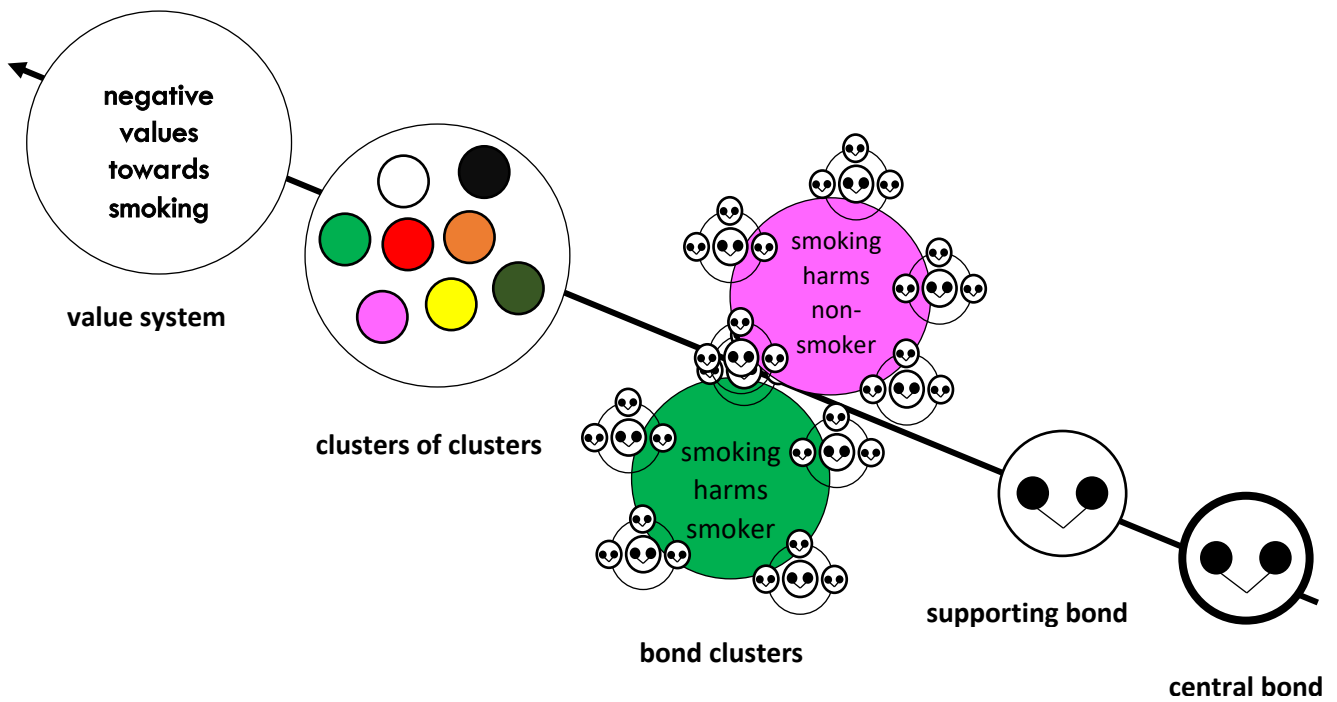


Figure 8.18. Process of building negative values around smoking over 22 years

One way to determine whether Australians have aligned and bonded with these anti-smoking values is through the theory of **bonding**. Based on the work of Martin (2004a), Stenglin (2004) explains bonding as being “concerned with the way language, and to a lesser extent images, negotiate the potential that feelings have for aligning readers into overlapping communities of ‘attitudinal rapport’” (p. 403). Through bonding we negotiate values (N. Knight, 2010a). In this study, we propose that the NTC has bonded the Australian audience into a community that shares anti-smoking values. This proposition is based on demonstrated connections between the campaign and the decline<sup>26</sup> in smoking rates since the introduction of the NTC in 1997 (e.g. Havard et al., 2018; Wakefield, Freeman, et al., 2003). As mentioned in previous chapters, the daily adult smoking rates in Australia fell from 23.8% in

<sup>26</sup> While studies (e.g. Havard et al., 2018; Wakefield, Freeman, et al., 2003) have demonstrated a connection between the NTC and reduction in smoking rates, other tobacco control measures have also contributed to this decline, such as plain tobacco packaging laws and high tobacco taxation, as discussed in Chapter 2.

1995 (Australian Bureau of Statistics, 2018) to 11% in 2019 (Australian Institute of Health and Welfare, 2020c).

While it is not possible to determine how much of this decline is due to the NTC and how much is due to other tobacco control strategies such as taxes, as discussed in Chapter 2, research from Australia was among the first in the world to show that mass media campaigns does reduce smoking rates (Havard et al., 2018; Wakefield, Freeman, et al., 2003).

Furthermore, Australia has also seen fewer young people take up smoking (Scollo et al., 2015), and the age of first smoke has increased from 14.3 years in 2001 to 16.6 years in 2019 (Australian Institute of Health and Welfare, 2020a). This provides support and evidence that Australians have indeed aligned themselves with these anti-smoking values and have bonded into a community of shared values.

### **8.5. Positive values towards quitting**

As discussed in Chapter 7, positive campaigns started running in 2011 where the benefits of quitting were made explicit. As more positive campaigns started running in parallel to the negative campaigns, bonds associated with quitting started being formed, and positive values towards quitting started to be established. However, we argue that these positive values towards quitting are not as ‘strong’ as negative values around smoking since positive campaigns have not been around for as long as negative campaigns, nor have they been as consistent. In this section, we provide a brief synoptic view of how positive values towards quitting are established by drawing on the process of value building identified in Figure 8.18.

The first step in setting up pro-quitting values is the formation of bonds through [ideation + interpersonal] couplings in language and image/verbiage relations. These bonds form a

central bond and supporting bonds. The central bond in establishing positive values around quitting is the ‘quitting good’ central bond which is an opposing bond to the ‘smoking bad’ central bond in negative campaigns. Accompanying this ‘quitting good’ central bond, there are two supporting bonds, ‘quitting heals body good’ and ‘impact on non-smoker good’. These parallel the supporting bonds surrounding negative values towards smoking.

The ‘quitting good’ central bond is formed through a coupling of [ideation: quitting + attitude: pos JUDGEMENT] where the behaviour of quitting is praised. Examples of this coupling can be seen in the *Quit for You, Quit for Two* campaign TV ad ([Video 8.2](#)) where *quitting* affords positive judgement as it leads to positive outcomes e.g. *when you choose to quit smoking and get the toxins out of your system... You’ll improve the oxygen flow around your body and to your baby, lowering the risk of miscarriage and serious health problems for your baby*. The formation of the ‘quitting good’ central bond is illustrated in Figure 8.19.

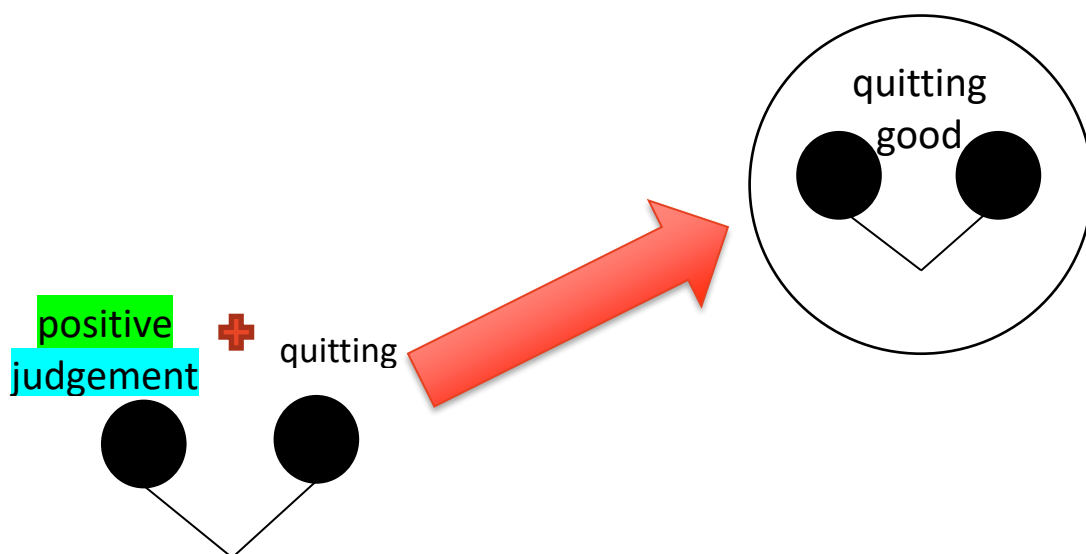


Figure 8.19. Formation of ‘quitting good’ central bond

The ‘quitting heals body good’ supporting bond is formed through the couplings of [ideation: body + attitude: pos APPRECIATION]. In a similar manner to the supporting bonds that

establish negative values around smoking, the ‘quitting heals body good’ supporting bond also establishes a classificatory relationship from more general to more specific benefits such as ‘skin appearance good’ and ‘lung function good’ supporting bonds in the *Health Benefits* poster in Image 8.2.



Image 8.2. Health Benefits campaign poster – woman

The ‘quitting heals body good’ supporting bond is formed through a coupling of [ideation: body + attitude: pos APPRECIATION]. Figure 8.20 illustrates the formation of three ‘quitting heals body good’ supporting bonds in the *Health Benefits* poster. And Figure 8.21 illustrates all the ‘quitting heals body good’ supporting bonds. Unlike the supporting bonds that serve

the ‘smoking bad’ central bond, the ‘quitting heals body good’ supporting bonds are not as readily observed in image/verbiage relations. This is because, as shown in Chapter 7, when positivity combines with technicalising, it is mainly construed in language and not in images. The images instead serve to personalise quitting.

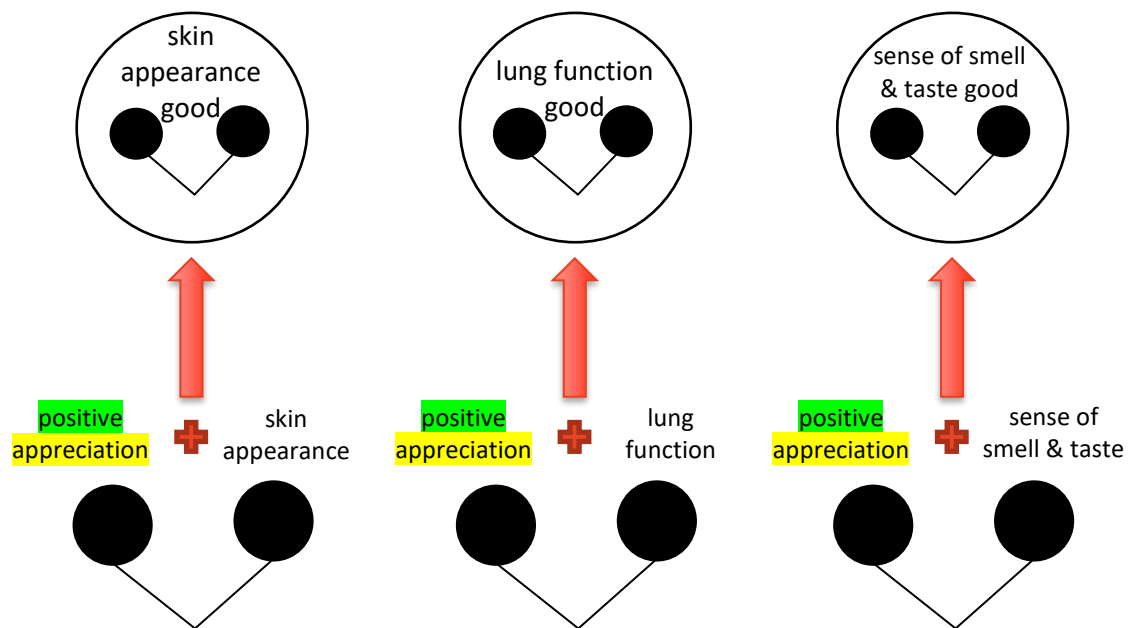


Figure 8.20. Formation of ‘quitting heals body good’ bonds in Health Benefits poster



Figure 8.21. ‘quitting heals body good’ bonds in Health Benefits poster

A second type of supporting bond involved in the formation of pro-quitting values is the ‘impact on non-smoker good’ supporting bond which can be formed through a number of different couplings. If the benefit is in regard to the non-smoker’s feelings, then the coupling is realised by [emoter + attitude: pos AFFECT]. This can be seen in the *Family* TV ad of the



Don't Make Smokes your Story campaign: Mum and the aunties are pretty **happy** that I quit.

The coupling and bond formation is illustrated in Figure 8.22.

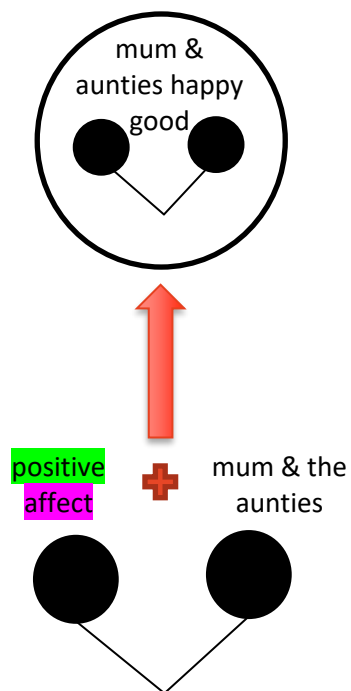


Figure 8.22. Formation of 'mum & aunties happy good' bond

When the benefit to the non-smoker is related to health, the coupling is realised by [ideation: body + attitude: pos APPRECIATION]. Examples from the *Quit for You, Quit for Two* TV ad are illustrated in Figure 8.23: *So, when you choose to quit smoking and get the toxins out of your system, you're not just quitting for you, you're quitting for two. You'll improve the oxygen flow around your body and to your baby, lowering the risk of miscarriage.* In this case the non-smoker is not expressing affect – they are experiencing health benefits from the smoker quitting smoking.

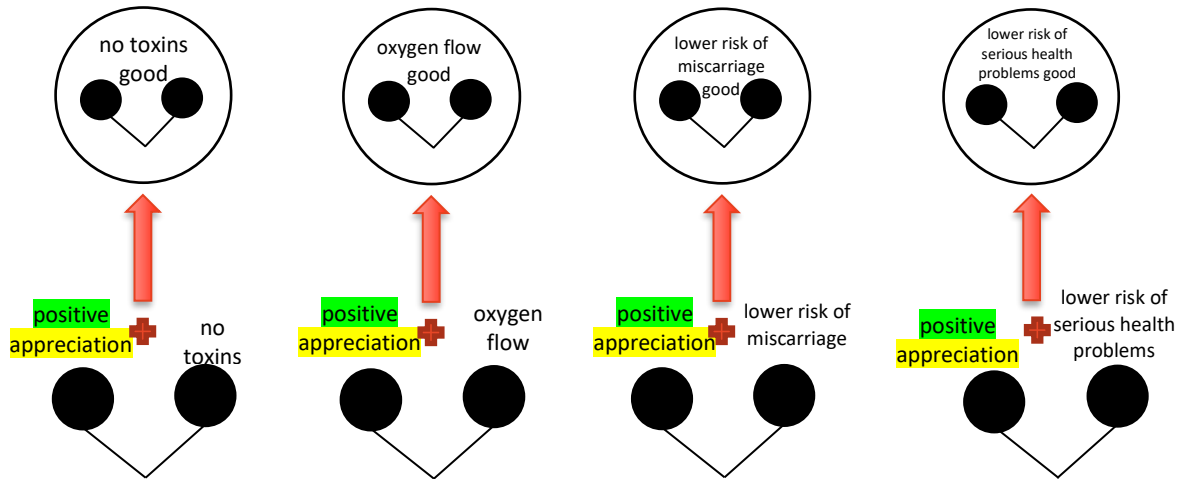


Figure 8.23. Formation of 'impact on non-smoker good' bonds

These supporting bonds then cluster together with the 'quitting good' central bond to form a bond cluster of various positive outcomes of quitting. The first bond cluster is the 'quitting benefits smoker' bond cluster and is formed through the central bond combining with 'quitting heals body' supporting bonds. The formation of this bond cluster is presented in Figure 8.24 from the *Health Benefits* poster in Image 8.2.

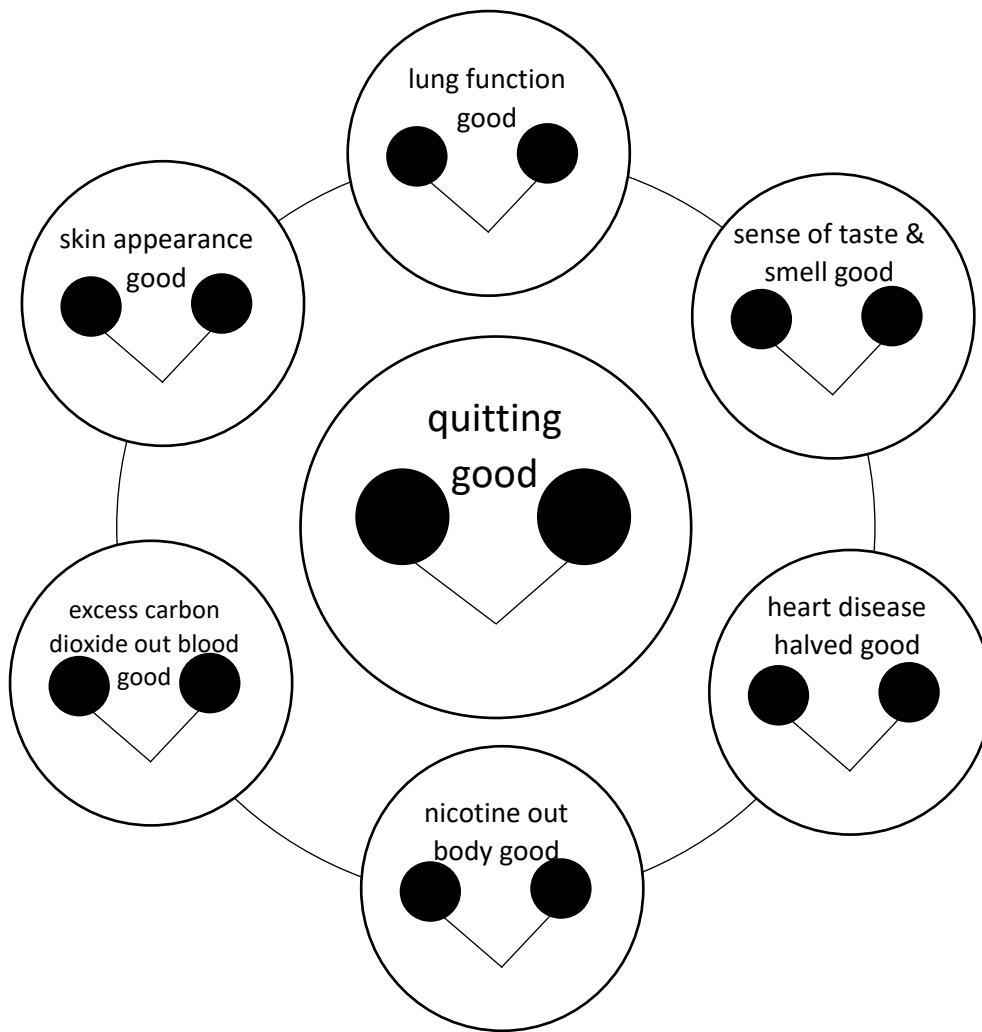
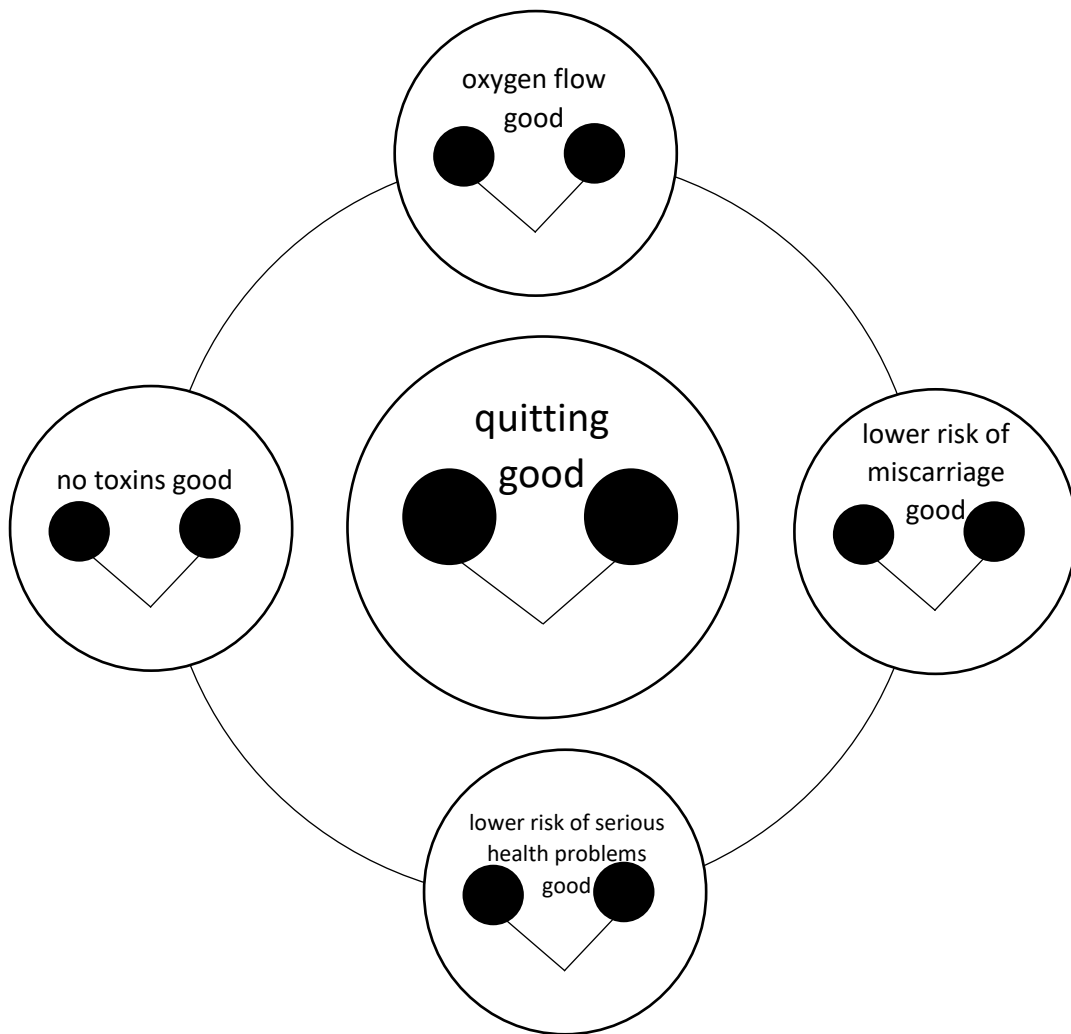


Figure 8.24. 'quitting benefits smoker' bond cluster

A second bond cluster observed in establishing positive values around quitting is the 'quitting benefits non-smoker' bond cluster formed with various 'impact on non-smoker good' bonds orbiting the nucleus. This is illustrated in Figure 8.25 from the *Quit for You, Quit for Two* TV ad.



*Figure 8.25. 'quitting benefits non-smoker' bond cluster*

Over time, bonds cluster together to establish positive values around quitting such that in Australia it becomes almost unquestionable that quitting is good. This process of establishing positive values around quitting is illustrated in Figure 8.26. First, we have 'quitting good' central bonds being established, followed by the supporting bonds. These then cluster into the two bond clusters identified so far: 'quitting benefits smoker' and 'quitting benefits non-smoker'. As more bond clusters are identified, these would cluster into clusters leading to positive values towards quitting. While anti-smoking values have been set up since 1997,

positive values towards quitting start being established around 2011. This means it is arguable that anti-smoking values are stronger and more established than pro-quitting values.

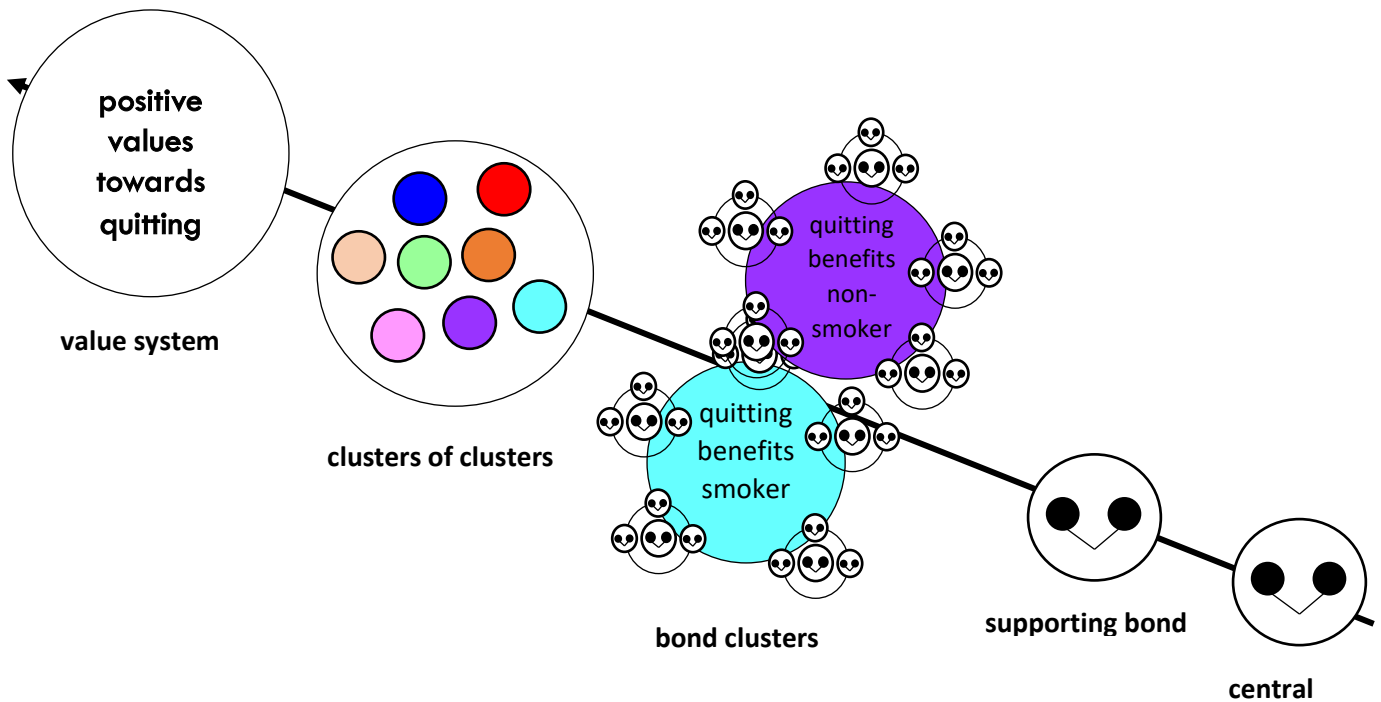
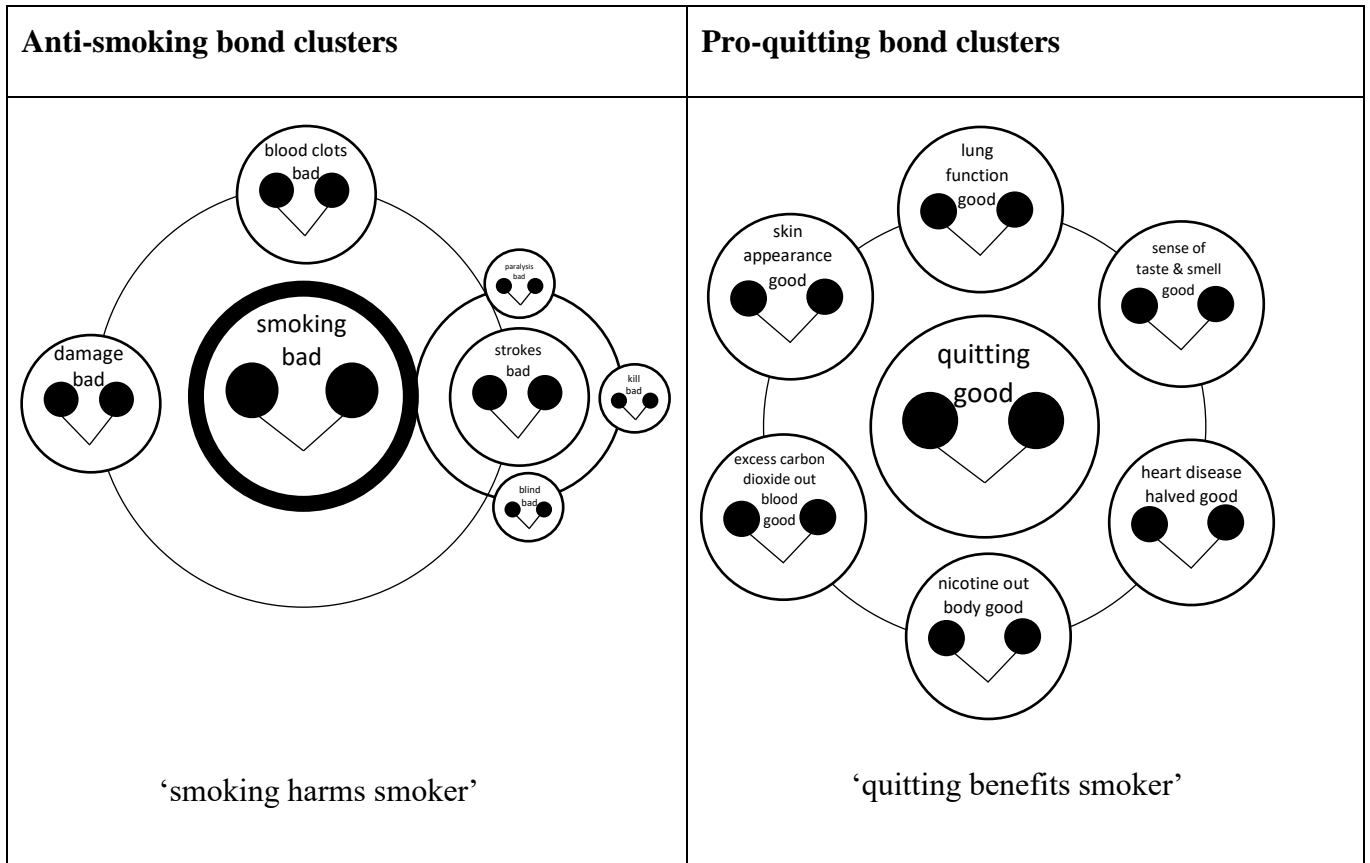


Figure 8.26. Process of building positive values around quitting over 22 years

### 8.6. Opposing bond clusters in establishing anti-smoking and pro-quitting values

As has been demonstrated in this chapter, the bond clusters in the establishment of anti-smoking and pro-quitting values across the NTC’s lifetime are similar in terms of their clustering. For every anti-smoking bond cluster identified so far, there is an opposing pro-quitting cluster that offers a solution to the devastating impact of smoking. The ‘smoking harms smoker’ cluster parallels the ‘quitting benefits smoker’ cluster, and the ‘smoking harms non-smoker’ cluster parallels the ‘quitting benefits non-smoker’ cluster. These are

illustrated synoptically in Table 8.13. These opposing bond clusters in a sense represent the tension of negative versus positive campaigns that drive the NTC.



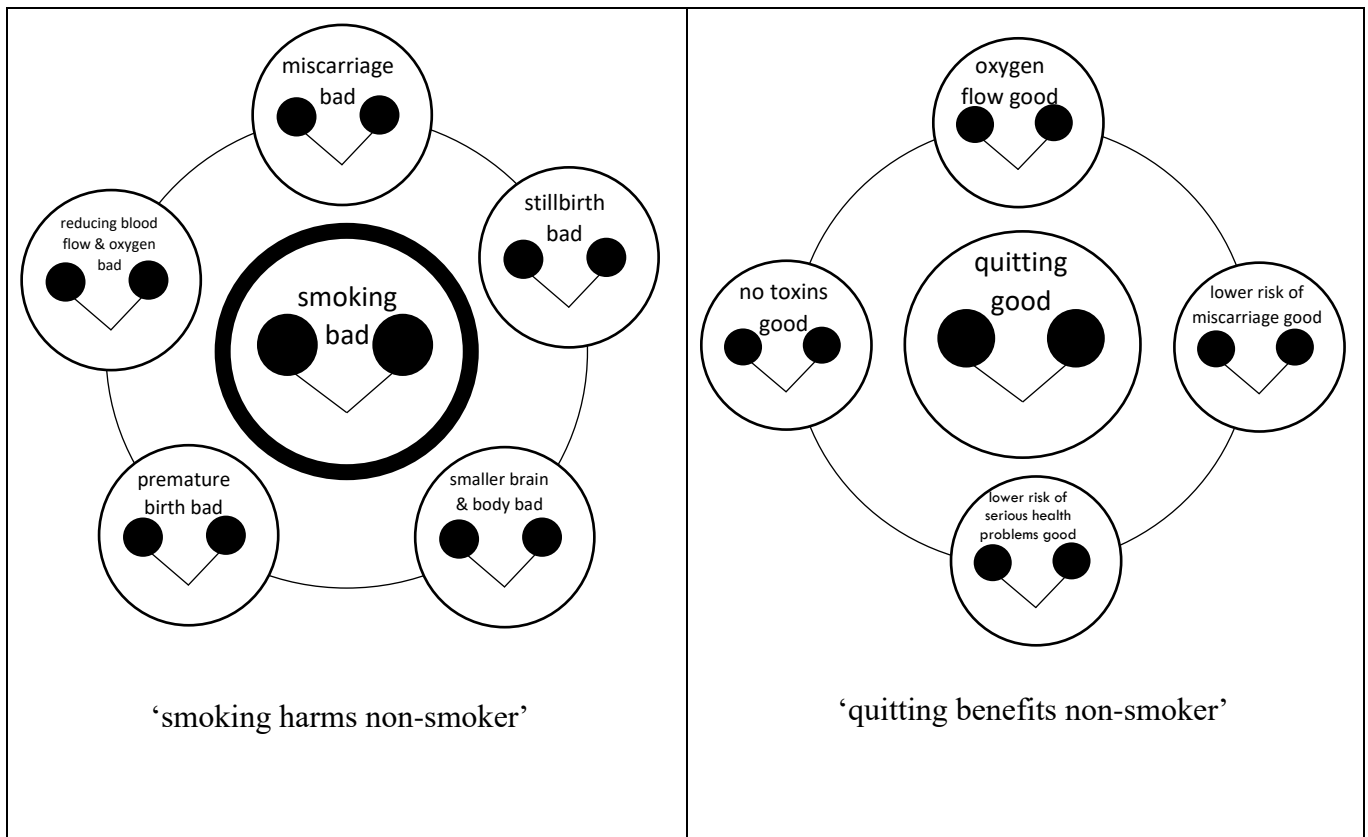


Table 8.13. Opposing bond clusters in NTC

The main differences between the anti-smoking and pro-quitting clusters, has to do with the ‘smoking bad’ central bond being more established, and thus can be considered to be ‘stronger’ than the ‘quitting good’ central bond. Furthermore, so far, we have seen that the ‘disease bad’ bonds can be more general and more specific to account for the composition and constituents of a disease shown in the ‘smoking harms smoker’ cluster in Table 8.13. However, this level of delicacy of bonds within bonds within bonds is not as readily observed in the ‘quitting benefits smoker’ cluster. This could be due to the fact that positivity + technicalising campaigns tend to explain *that* quitting repairs the body, instead of setting up long sequences that explains *how* quitting repairs the body, as discussed in Chapter 7. For this reason, the bonds in ‘quitting benefits smoker’ clusters do not have the same level of delicacy as ‘smoking harms smoker’ clusters – at least in the Federal campaigns.

## 8.7. Chapter summary

This chapter has theorised how Australians have come to bond with anti-smoking values since the inception of the NTC in 1997. It has shown that the ‘smoking bad’ central bond is re-instantiated over time in all negative campaigns, and that this central bond is reinforced by two supporting bonds: ‘disease bad’ and ‘impact on non-smoker bad’. These supporting bonds then form bond clusters around the ‘smoking bad’ central bond, namely the ‘smoking harms smoker’ and ‘smoking harms non-smoker’ which come together over time to establish negative values around smoking.

This chapter has also theorised that with the emergence of positive campaigns in 2011, pro-quitting values started being established. The ‘quitting good’ central bond is re-instantiated over time in all positive campaigns along with two supporting bonds identified so far: ‘quitting heals body good’ and ‘impact on non-smoker good’. These supporting bonds come together with the ‘quitting good’ central bond to form two bond clusters: ‘quitting benefits smoker’ and ‘quitting benefits non-smoker’, which then cluster with other clusters to establish positive values towards quitting.

These two processes of anti-smoking and pro-quitting value-building happen in parallel from around 2011, which can be represented synoptically in Figure 8.27. However, since negative campaigns have been running for a lot longer than positive campaigns, it is theorised that anti-smoking values have become more established in Australian society than pro-quitting values, and that the ‘smoking bad’ central bond is stronger<sup>27</sup> than the ‘quitting good’ central

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<sup>27</sup> This thesis has used the concepts of couplings, bonds and bond clusters to theorise how anti-smoking values have been established in Australian society since the inception of the NTC in 1997. This is not to say that this is the only means by which values are established. Consumers also have the agency to align/disalign with proposed bonds and values which has not been explored in this thesis. This is a potential area for future research.



bond. While it is difficult to say the timeframe that is needed for values to be established in a community, it is more or less clear that Australians have bonded with anti-smoking values since smoking rates have declined in Australia. Furthermore, statistics showing that this decline is being driven by fewer people taking up smoking than more people quitting (Australian Institute of Health and Welfare, 2020c) further lends support that anti-smoking values are in fact more established than pro-quitting values.

To get a clearer account of how bonds have shaped anti-smoking values in Australia, future research could explore state-based campaigns as it is possible that there are other types of bonds that reinforce anti-smoking and pro-quitting values. It is also possible that bond clusters can be even more delicate than the ones identified in this chapter. This provides a rich area for future research.

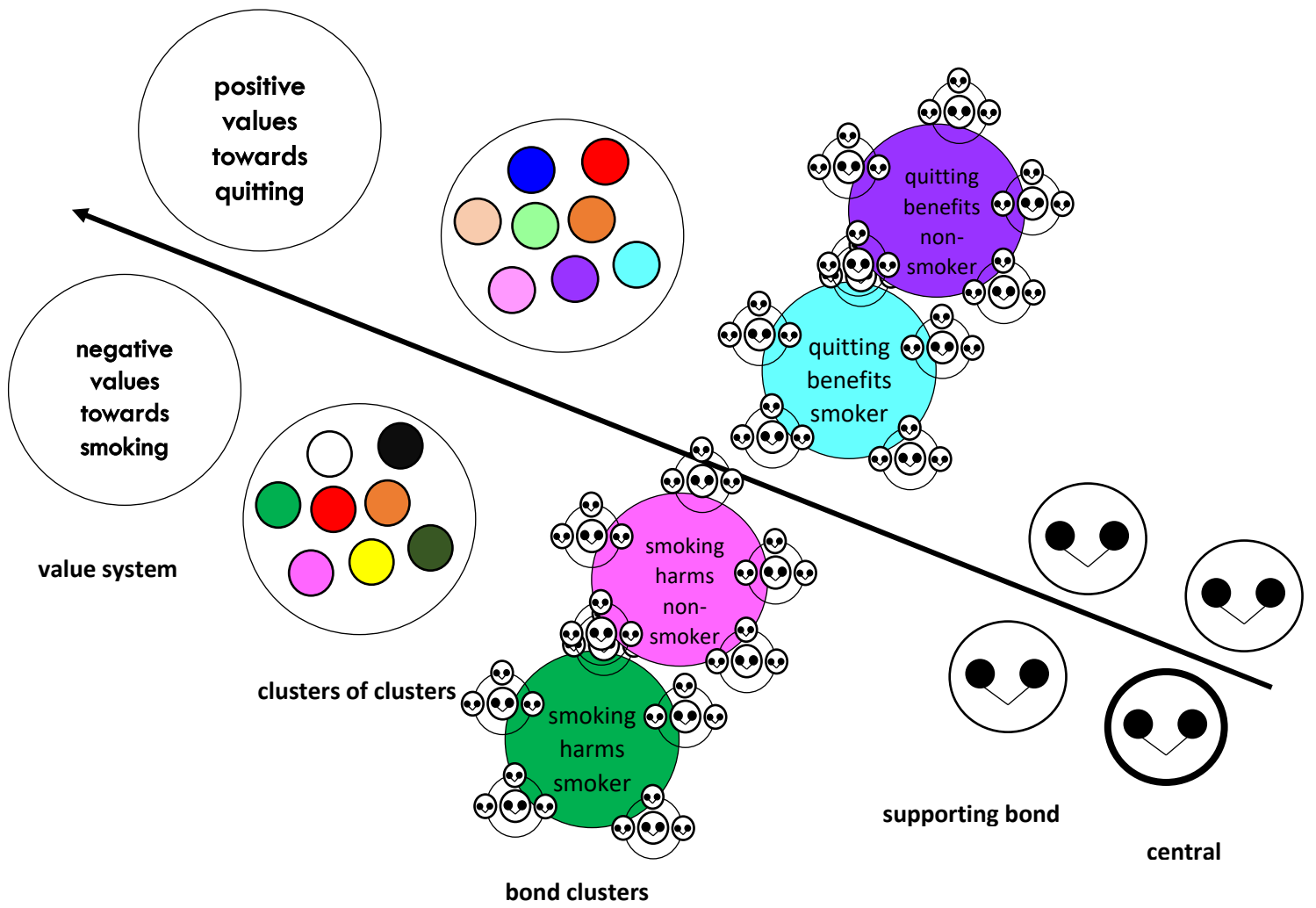


Figure 8.27. Values in the NTC over 22 years

# CHAPTER 9

## CONCLUSIONS

Smoking kills. This is the statement this thesis started off with. In the last five chapters, we explored the semiotic resources employed in campaigns to build knowledge of this – to discourage smoking, promote quitting and establish negative values around smoking and positive values around quitting. This was achieved by linking detailed texts analyses of individual campaigns and campaign materials to the broader NTC context over 22 years. This link between the micro and the macro analysis was presented through three sets of rhetorical strategies. As stated in Chapter 1, these rhetorical strategies were not only developed as a means to deconstruct and analyse the NTC, but as a means to inform the design of future public health campaigns. This final chapter will bring these threads together to look forward to how this analysis could be used to inform future campaigns.

Section 9.1 presents a summary of the major findings and considers some of the broader contributions this thesis has made to SFL and PDA research. Section 9.2 fulfils one of the aims of this thesis by stepping through how the rhetorical strategies and analytical tools introduced could be used to design a “say no to sugar” campaign. And Section 9.3 outlines some future directions for PDA research and provides some concluding remarks.

## **9.1. Summary of findings and contributions**

As stated in Chapter 1, the primary goal of this thesis was to investigate the semiotic resources employed in the NTC to discourage smoking and encourage quitting so as to inform the design of campaigns such as those aimed at excessive sugar consumption. To do so, this thesis employed PDA and SFL as its methodological and theoretical foundations. This thesis has contributed to both PDA and SFL research by developing three sets of rhetorical strategies to move between fine-grained texts analyses and broader overviews of the NTC by applying SFL-derived analytical tools. This section focuses on each of these contributions in Sections 9.1.1 and 9.1.2, respectively.

### **9.1.1. Contributions to PDA research**

This thesis employed PDA as its broad methodological approach for its emphasis on both analysis and design of positive interventions (Bartlett, 2017; Martin, 2004b). In the literature reviewed in Chapter 3, it was argued that while PDA research has been effective at providing detailed text analyses of positive discourses, it has struggled with linking these detailed text analyses to the broader context within which they are situated. This thesis has sought to address this challenge in PDA research by developing a set of rhetorical strategies that can zoom between detailed text analyses and large-scale change and development over time, in both analysis and design. Using these rhetorical strategies, Chapters 4-6 explored the meanings construed in materials and campaigns using SFL and MDA tools, and Chapter 7 linked these individual campaigns to the NTC's broader progressions and change over time. It was shown that over its 22 years, the NTC always has a negativity + technicalising campaign running to continually update our knowledge on the devastating impacts of

smoking on the body. This included new health warnings on cigarette packs to address the lack of awareness of some smoking-related diseases. For example, prior to the *Health Warnings 2012* campaign, only 26% of smokers accepted that smoking caused bladder cancer and only 27% of smokers accepted that smoking caused kidney cancer (Health Engine, 2010). Now, health warnings about smoking causing bladder and kidney cancer feature on tobacco product packaging.

Moreover, it was also demonstrated that over time, it became equally as important to provide a positive alternative to smoking, which led to the development of positivity + personalising campaigns. These positivity + personalising campaigns were particularly important in addressing smoking rates in communities where smoking rates have remained higher than the general population, including Indigenous communities (Australian Institute of Health and Welfare, 2020c). As stated in Chapter 2, the evidence suggests that the launch of the *Break the Chain* campaign in 2011 and the *Don't Make Smokes your Story* campaign in 2015 helped to reduce smoking rates in Indigenous communities (Young, 2016).

In addition, it was argued in Chapter 3 that these rhetorical strategies were developed to transcend individual texts and contexts. So far, in Chapter 7, it has been shown that these same rhetorical strategies also describe state-based campaigns within the NTC as well as anti-smoking campaigns around the world. This transcendence of any particular text or campaigns suggests that these rhetorical strategies might be more generally applicable to health promotional materials and public health campaigns more broadly. This lends support to these strategies indeed being capable of informing the design of future health interventions, and more broadly, interventions outside of health communication. These strategies can thus fulfil one of the main tenets of PDA – design. However, as Bartlett (2017) argues, for an intervention to succeed, there needs to be an analysis of context, and that success in one

context does not guarantee success in another context. Therefore, these rhetorical strategies may not necessarily be employed in the same manner in future campaigns as they have been employed in the NTC.

In informing future interventions, the strategies of negativity/positivity would help expose the issues that need tackling, while simultaneously moving away from the negative and offering a positive alternative to engender change. These would interact with the strategies of technicalising/personalising by tackling issues and proposing positive alternative from both a generalised and technical perspective by building field knowledge, and from an individualised and personal perspective by focusing on relationships. These would in turn combine with actual/possible behaviour which would keep pushing for a clear path for individuals to stay on. In Section 9.2, we will demonstrate how these rhetorical strategies might inform the design of materials to encourage Australians to eat less sugar and eat more healthy, wholesome foods.

Overall, this thesis has demonstrated how PDA research can build upon individual text analyses to understand holistic approaches to health communication by analysing how texts work in relation to their broader contexts. This thesis further demonstrated how PDA can be applied to studying long-term interventions by tracking changes and development over time, which in turn can aid in the design of future long-term interventions. These have been achieved through the rhetorical strategies developed in this thesis which relate to the goals of PDA i.e. to analyse positive discourses and interventions so as to inform the design of future interventions (Martin, 2004b).

### 9.1.2. Contributions to SFL research

As noted in Chapter 3, SFL theory has been applied to health research since the 1970s.

However, much of this research has focused on analysing the language in patient-clinician interactions (Moore, 2019), rather than explorations of health promotion materials. In particular, there has been no in depth SFL research so far analysing and describing a long-running public health campaign. This thesis has addressed this gap in SFL health research by demonstrating that SFL and MDA provide a rich set of tools to uncover the various meanings created in the NTC to discourage smoking and promote quitting.

Taking a metafunctional approach to analysing the NTC campaigns and materials, Chapters 4-6 demonstrated that the rhetorical strategies developed to analyse the NTC convey ideational, interpersonal, and textual meanings simultaneously in language and other semiotic resources. In particular, Chapters 4 and 5 showed that the NTC uses ideational meanings in a similar manner to scientific discourse to build technicality and medical knowledge about smoking and quitting, while at the same time using interpersonal meanings to elicit negative attitude towards smoking and positive attitude towards quitting. Chapter 7 further lent support to SFL and MDA tools being applied to the broader health promotion materials by analysing other anti-smoking campaigns around the world.

In addition, this thesis has also contributed to a growing area in SFL research associated with affiliation and bonding. Since Stenglin's (2004) description of the ways in which museums make people feel like they belong to "a community of like-minded people" (p. 44), research (e.g. Doran, 2020; Dreyfus, 2013; N. Knight, 2010a; Zappavigna & Martin, 2014) has explored how people bond into communities of shared values through bonds and couplings. This thesis has theorised how values are established in a community over time through bonds, bond clusters, and clusters of clusters, as demonstrated in Chapter 8. It also theorised that

bonds become ‘stronger’ and have more rallying power the more they are re-instantiated in texts. This means, depending on the ‘strengths’ of these bonds and bond clusters, values can be more or less established in a community. This provides a good steppingstone for those investigating how values are built over time. While Chapter 8 presented a synoptic view of the process of establishing values, it did not explore the logogenetic unfolding of bonds and values in the NTC. This is a site for future research to explore.

## **9.2. Implications for public health campaigns**

One of the main aims of this thesis was practical in nature. As stated in the introduction, this thesis aimed for its analysis of the NTC to enable the design of future health campaigns. One such health problem is the obesity epidemic in Australia, linked to an over consumption of certain sugars.

As mentioned in Chapter 1, Australia is currently facing an obesity epidemic with 67% of Australian adults and almost ¼ of children aged 5-17 years being overweight or obese as of 2017-2018 (Department of Health, 2019). An increase in sugar consumption is linked to weight gain (Luger et al., 2018; Te Morenga, Mallard, & Mann, 2013) which also contributes to the growing burden of chronic diseases such as type 2 diabetes, cardiovascular disease and liver disease (Sugar by Half, 2019b). More recent research has also linked obesity with 13 different types of cancers including oesophageal cancer, bowel cancer and pancreatic cancer (LiveLighter, 2019). It is reported that on average Australians consume 14-16 teaspoons of added sugar a day (Sugar by Half, 2019a) compared to the WHO daily recommended average



of no more than 12 teaspoon of free<sup>28</sup> sugar, with a strong push to reduce to 6 teaspoons of free sugars daily (World Health Organisation, 2015). Sugary drinks are the worst culprits of added sugars, with teenage boys being the biggest consumers in Australia (ABC, 2018; Cancer Council, 2019).

There are currently no Federal mass media campaign efforts to tackle excessive sugar consumption in Australia. However, over the past few years there has been a push from not-for-profits and individual states to target the excessive consumption of sweetened beverages by teenagers (The New Daily, 2019). In 2015, the Cancer Council Victoria launched the *Sugary Drinks* campaign ([Video 9.1](#)), part of the *LiveLighter* campaign, to highlight the link between sugary drinks and toxic fat which can trigger cancer (Cancer Council Victoria, 2018). An evaluation of the campaign showed that “the proportion of Victorians who consumed four or more cups of sugary drinks per week had declined from 31% prior to the campaign to 22% at the end of the campaign period. There was no such change in the comparison state of South Australia” (Cancer Council Victoria, 2018).

In 2019, the campaign was launched in Western Australia (LiveLighter, 2019). A survey conducted on the consumption of sugary drinks by Australian students, showed that Western Australia had a steep decline in the consumption of sugary drinks, coinciding with the launch of the *LiveLighter* campaign (Cancer Council, 2019). Based on these results, the Cancer Council is urging the government to air the campaign nationally (Cancer Council, 2019). Researchers and other health advocates are also pushing for a national campaign raising

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<sup>28</sup> The different types of sugars are explained in Section 9.2.

awareness between sugar and various diseases such as type 2 diabetes and various cancers (Cancer Council, 2019; McCauley, 2020).

Given the results of this thesis, the three rhetorical strategies would broadly scaffold a campaign targeting sugar consumption. To illustrate this, we will step through some suggestions for a “say no to sugar” campaign. It is important to note that although there would likely be much potential for parallels between the NTC and a sugar campaign, they will necessarily have some differences. One key difference is that while adults and late teenagers are the target for tobacco campaigns, children of all ages and their parents would be the main targets for a sugar campaign. This means that materials will have to be developed to specifically target children. For the purposes of illustration, however, our target audience in this section are adults and teenagers. Another key difference between the NTC and a sugar campaign is that while tobacco is to be avoided at all costs since every cigarette is doing you damage; free sugars can be consumed in safe amounts. Therefore, a key component of a sugar campaign would mean teaching Australians which sugars are ‘good’ and which sugars are ‘bad’ in excessive quantities. In the following sections we explore how the linguistic and semiotic resources introduced in Chapters 4-7 can be used as a broad framework for designing a campaign for Australians to consume less free sugars and increase their consumption of whole foods<sup>29</sup>. First, we need to provide more generalised descriptions of the three sets of strategies, before exploring how they can be applied to a new context.

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<sup>29</sup> To evaluate the success of this proposed model for an anti-free sugar campaign, factors such as message reach and reduction in sugar consumption and correlating these in various ways would be needed. However, using the already available materials/campaigns discussed in this chapter in combination with the rhetorical strategies, we can predict what such a campaign would look like.

### *Negativity/positivity*

In general terms, negativity describes the negative effects of a behaviour. It focuses on how the behaviour can negatively impact an individual and those around them. In contrast, positivity describes the benefits of a behaviour. It focuses on both the positive impacts the behaviour can have on an individual and their overall wellbeing, and the overall wellbeing of those around them.

### *Technicalising/personalising*

Technicalising describes the causal results and effects of a behaviour in general, in de-personalised terms and tends to target the general population. In the case of the NTC and likely for health campaigns in general, these effects are those that impact the body and the body's functions in technical terms. On the other hand, personalising describes the effects a behaviour has on people themselves and their lives and tends to target specific groups instead of the general population. Technicalising and personalising both interact closely with negativity and positivity depending on whether the behaviour benefits or hinders individuals.

### *Actual/possible behaviour*

Actual behaviour describes the *past* or *current* effects of a behaviour and their consequences. In contrast, possible behaviour describes the possible, typical or future effects of a behaviour and their consequences. Each strategy regularly interacts with negativity/positivity and technicalising/personalising so as to often create shifts between the benefits of a behaviour and the devastating impacts of another behaviour.

As shown in Chapter 7, these strategies tend to combine in regular patterns to target smoking from various perspectives in the form of negativity + technicalising, and positivity + personalising, and less frequent combinations of negativity + personalising and positivity +

technicalising. In the NTC, negativity + technicalising was regularly employed in campaigns to educate and remind Australians of the innumerable damage that smoking causes to the body. Overlaid on these negativity + technicalising campaigns, were positivity + personalising campaigns that promoted quitting as a positive alternative to smoking which leads to the overall wellbeing of smokers and their families. In addition to these regular combinations, the NTC employed negativity + personalising campaigns to highlight that smoking also affects the daily lives of smokers and their loved ones. Furthermore, positivity + technicalising materials within the NTC emphasised that quitting at any age or stage will – given time – undo the damage caused by smoking.

These same combinations are used to inform the design of a campaign aimed at excessive sugar consumption. Firstly, it is vital to explain the devastating impact free sugars have on the health of individuals through materials employing negativity + technicalising. One way of achieving this would be to build taxonomies of the ill effects of excessive sugar consumption on the body, in a similar manner to the negative impacts of smoking on the body. Ideally, such negativity + technicalising materials would keep running over a long period of time to continuously update our knowledge of why free sugars are bad in excess. In time, these taxonomies would grow to create a negative prosody of all the damage excessive sugar consumption inflicts on the body. This is explored on Section 9.2.1.

As consumers take on board the message that the overconsumption of free sugars is detrimental to health, it becomes important to provide a more positive alternative to free sugars that promotes overall wellbeing, such as eating whole foods and a balanced diet. This would be achieved by employing the strategies of positivity + personalising. One way to personalise the wellbeing that comes with eating a balanced diet, is to design materials that feature happy families enjoying life in various settings to highlight the message that healthy

eating benefits the whole family. This is similar to the strategies employed in the *Don't Make Smokes your Story* campaign. Furthermore, in a sugar campaign, it would also be vital to feature parents modelling good food behaviours for their children. This is explored in Section 9.2.2.

In addition to the two regular combinations, it is important to link the overconsumption of free sugars to an inability to live a normal life and take part in everyday activities with loved ones. This would be achieved through the strategies of negativity + personalising. This would include materials that use negative affect in language and image to express their unhappiness at not being able to take part in everyday activities, and having their lives disrupted due to a sugar-related illness. These realisations would draw parallels from negativity + personalising NTC materials such as the *Breathless* ads from the *Stop before the Suffering Starts* campaign. This is explored in Section 9.2.3.

And lastly, a successful campaign needs to additionally build technical knowledge of how healthy eating improves individuals' health and restores the body's proper functioning, through the strategies of positivity + technicalising. In a similar manner to the *Health Benefits* campaign in the NTC, such positivity + technicalising materials would use the unfolding of activity series to explain how the body can repair itself with a healthy diet, while also building a taxonomy of foods that lead to good health. This is explored in Section 9.2.4.

Interacting with each of these four combinations are actual and possible behaviour. When paired with negativity, actual and possible behaviour would illustrate both the actual and on-going detriments of excessive free sugar consumptions to people's health and overall wellbeing. And when paired with positivity, actual and possible behaviour would portray the actual and future benefits of healthy eating.

### 9.2.1. Negativity + technicalising

This section illustrates how a campaign aimed at the overconsumption of free sugars might use the strategies of negativity and technicalising together with SFL and MDA tools to design materials by drawing parallels to the NTC materials analysed in Chapters 4 to 7. Here, we propose designs aimed at adults and teenagers.

In discouraging the consumption of free sugars, it is important to first build the audience's knowledge of the different kinds of sugars, and which kinds should be avoided. The Food Standards Australia New Zealand classifies sugars as “free sugars” and “intrinsic sugars” (Food Standards Australia New Zealand, 2019). Free sugars include both sugars that are added to food/drinks such as soft drinks, biscuits and pastries, and the sugar found in honey, fruit juices and concentrates (Action on Sugar, 2019). On the other hand, intrinsic sugars include sugars naturally occurring in milk products and whole fruits and vegetables (Action on Sugar, 2019). By whole fruits and vegetables, we mean those that are unprocessed. This distinction is presented as a classification taxonomy in Figure 9.1. Importantly for any future health campaign, intrinsic sugars are not considered harmful to health and so can be considered as ‘good’ sugars – i.e. by using positivity. On the other hand, free sugars are harmful to health if consumed in excess of the daily recommended 5-10 teaspoons (World Health Organisation, 2015) and so will more likely be the target of negative campaigns.

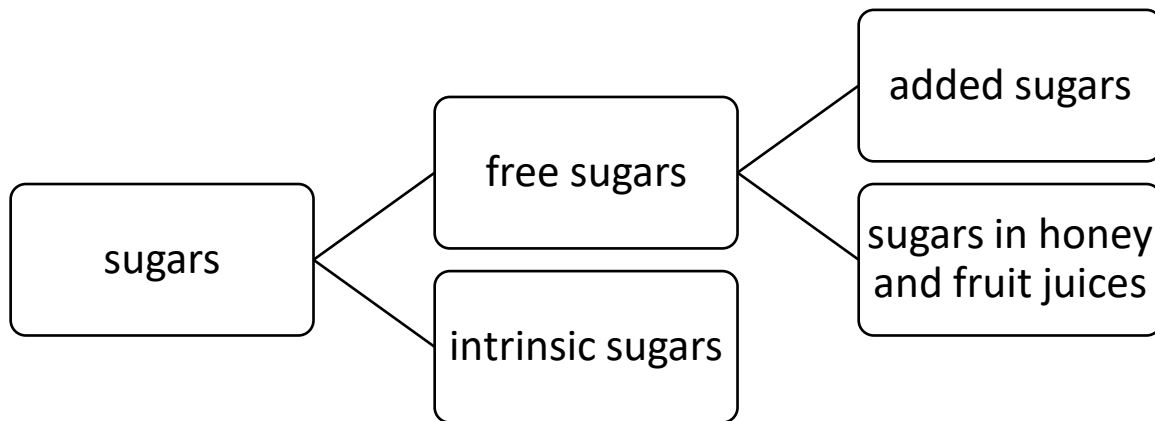


Figure 9.1. Classificatory taxonomy of types of sugars, drawn from Food Standards Australia New Zealand (2019)

In a similar manner to the NTC where negativity and positivity targeted smoking and quitting respectively, there is a similar binary distinction set up with negativity targeting free sugars and positivity targeting intrinsic sugars even though the sugar campaign is in a different field. This is because, as mentioned in the Chapter 7, the two main complementary goals of health campaigns is to discourage a behaviour deemed detrimental to health while also promoting an alternate behaviour beneficial to health (Hughes-Hallett et al., 2016). And so, in this way, there will always be this binary distinction regardless of the field.

Sweetened beverages contain the highest amounts of free sugars and teenage boys are the biggest consumers (Cancer Council, 2019). The *Rethink Sugary Drink* initiative has produced materials to discourage the consumption of sugary drinks and to encourage the consumption of water (Rethink Sugary Drink, 2021). The various sweetened beverages in Image 9.1 present a classification taxonomy of the types of drinks that contain a high amount of sugar, and so can set up a classification taxonomy of ‘bad’ sugars in a similar manner to Figure 9.1. This poster is aimed at teenagers and their parents, in a similar manner to the *National Tobacco Youth Campaign* that had materials aimed at both teenagers and their smoker

parents. This poster would also be appropriate for younger children since the amount of sugar in each drink is illustrated visually through sugar cubes.



Image 9.1. Poster adapted from Rethink Sugary Drink initiative

In a similar manner to smoking, excessive sugar in one's diet leads to a range of negative health effects including: type 2 diabetes, heart disease, tooth decay, obesity (Action on Sugar, 2019), and other lesser known diseases such as non-alcoholic fatty liver disease (Mayo Clinic, 2020) strokes (The Iowa Clinic, 2020) and 13 different types of cancers (LiveLighter, 2019). St-Onge, Roberts, Shechter, and Choudhury (2016) also found that a high sugar intake was associated with greater arousal during sleep. This can again build a taxonomy of the types of diseases that may result from a diet high in free sugars, illustrated in Figure 9.2. The classification taxonomy in Figure 9.2 can be used to guide materials for a sugar campaign where each disease/negative effect can be a new material in a similar manner to the cigarette packs, such that they saturate the campaign with negativity. Over time, the negativity of these



materials would build a negative prosody of the negative effects of excessive sugar consumption on the body, in a similar manner to the NTC. This prosody would then aid in establishing negative values against free sugar consumption.

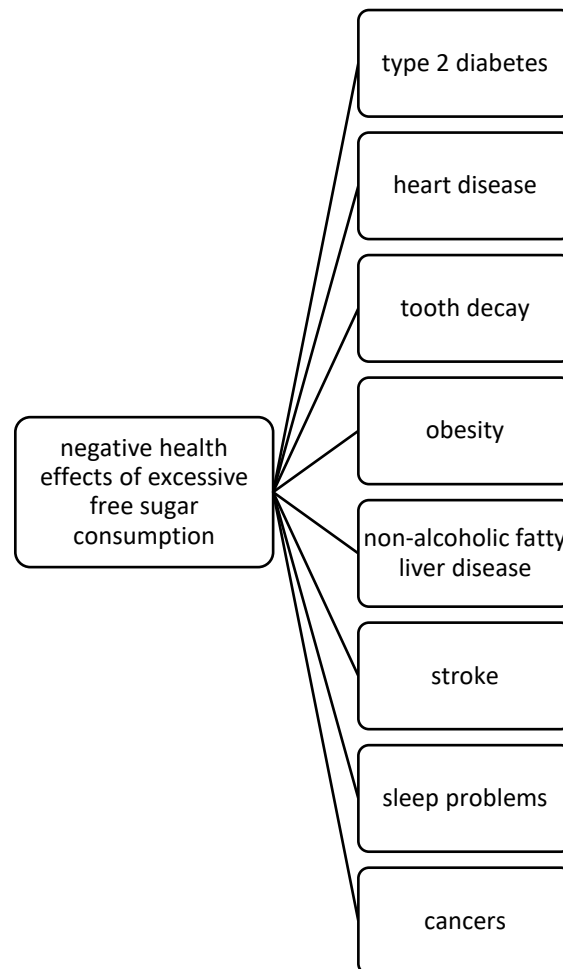


Figure 9.2. Classification taxonomy of negative effects of excessive free sugar consumption

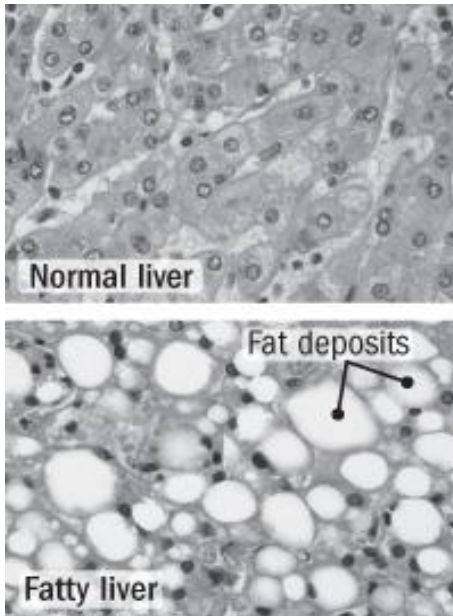
As well as building taxonomies of the negative health effects of excessive free sugar consumption, a more dynamic approach can be taken by using implication sequences. In a similar manner to the activity series in Chapter 5 where smoking leads to worsening health effects, so too does an excessive consumption of free sugars. Table 9.1 illustrates an implication sequence of excessive sugar consumption eventually leading to heart disease, signalled by the Circumstance of Location *over time*. Table 9.1 presents just one instance of

how free sugars lead to worsening disease. An implication sequence such as the one in Table 9.1 could be used for each disease/illness identified in Figure 9.2.

|   |
|---|
| <b>Heart disease and excessive sugar consumption</b>      |
| when you eat high amounts of sugar                        |
| ^   |
| your body converts high amounts of carbohydrates into fat |
| ^   |
| overloading the liver.                                    |
| ^   |
| Over time, fat accumulates in your liver                  |
| ^ (causing)   |
| non-alcoholic fatty liver disease                         |
| ^   |
| which raises the risk of heart disease                    |


*Table 9.1. Activity series of how excessive sugar consumption leads to disease, drawn from Harvard Health Publishing (2017)*

Pictures can also be used to visually depict what these diseases look like such as the image of a fatty liver in Image 9.2.



*Image 9.2. Normal liver vs fatty liver*

Drawing on materials that are already available, [Video 9.2](#) from the *Rethink Sugary Drink* initiative provides a good example of what a TV ad aimed at young people might look like. The video creates a contrast of attractive young people and their darkened and rotten teeth, illustrated in Table 9.2. The video affirms that while you might look healthy on the outside, inside, you are rotting. The image of the rotten teeth in Table 9.2 evokes negative attitude, and more specifically, negative appreciation through the dark, discoloured, teeth, and through the teeth themselves which are rotten. This is a similar message to the *Every Cigarette is Doing You Damage* campaign where negative appreciation in language and the visuals of TV ads depict the damage happening inside the body of smokers with each inhale of tobacco smoke. Image 9.3 illustrates an example of the damage smoking causes inside the body, evoking negative reaction from the viewers.

| Attractive young person   | Rotten teeth   |
|---|--|
|  |  |

*Table 9.2. Young person with rotten teeth*



*Image 9.3. Still shot from Artery TV ad*

This section has explored how the strategies of negativity and technicalising in materials can discourage the overconsumption of free sugars by illustrating how it can negatively impact the health of consumers. Using SFL and MDA tools, classification taxonomies and implication sequences across a range of materials can build both the technical knowledge of the negative health effects of excessive sugar consumptions, while also building a negative prosody of diseases associated with excessive free sugar consumption. Over time, the

campaign can keep building the taxonomies of ‘bad’ sugars and ‘good’ sugars, and the negative consequences of eating too many sugary foods and drinks. Using various semiotic resources, such a campaign would have to also target different age groups including the use of more images for small children. As more technical knowledge of the negative health consequences of excessive free sugar consumption is established, resources that are more positive and more personalising would be added.

### **9.2.2. Positivity + personalising**

While establishing that free sugars are bad for health as they cause disease, there also needs to be a positive alternative put forward that highlights the benefits of healthy eating. Such resources would feature happy individuals making healthy food choices, and more specifically, it would reinforce the importance of making healthy food choices as a family, illustrated in Table 9.3. These images give prominence to human participants and also highlight the importance of making healthy food choices as a family, since the entire family benefits from eating well. The images also highlight the importance of parents teaching their children healthy eating habits. Such materials would target parents with small children.

**Healthy food choices**

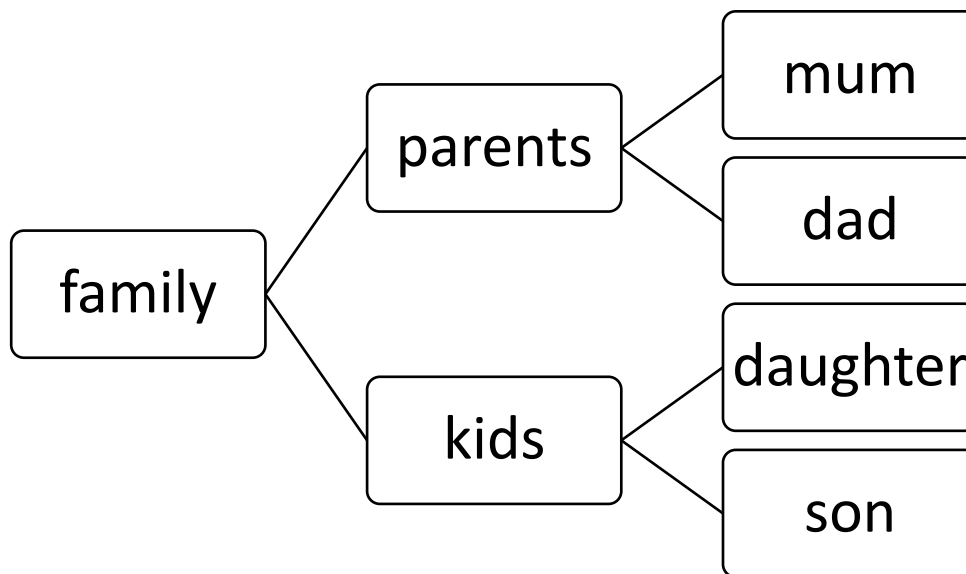






*Table 9.3. Examples of parents modelling healthy food choices for children*

These images in Table 9.3 establish a classification taxonomy of people benefiting from healthy eating in a similar manner to the classification taxonomies that showed how families are impacted by a smoker's smoking and quitting in Chapter 5. Figure 9.3 illustrates a classification taxonomy of families benefiting from healthy eating based on the images in Table 9.3.



*Figure 9.3. Classification taxonomy of family benefiting from healthy eating*

In addition, resources and materials highlighting the benefits of overall wellbeing could also employ naming strategies to build solidarity between the represented participants and the audience. This would work best by designing testimonials in a similar manner to the *Break the Chain* and *Don't Make Smokes your Story* TV ads. And furthermore, actual and possible behaviour can be used to create a shift from a past behaviour detrimental to health, and a current and future behaviour beneficial to health. Image 9.4 illustrates how such a testimonial might look like, which would also include an image of a family to further personalise the testimonial.



*“Since I was young, I’ve always had a sweet tooth. I’ve always loved eating chocolate and doughnuts. Once I moved out of home, I started eating these every day. Eventually I gained weight and a few years ago I was diagnosed with type 2 diabetes, high cholesterol and fatty liver disease. My doctor told me if I didn’t change the way I eat, I could die. And as my kids started growing up, they also started copying what I was eating, and I didn’t want them to suffer from health problems like I did. I want to be around for my kids so I decided to change the way I eat and cut down on foods loaded with sugar. Instead, I eat more fruits, natural yogurt and nuts. And my kids also eat better now. I’ve lost a lot of weight and I feel healthier than I’ve ever felt. I can run around with my kids in the backyard and help out at their soccer practice. I am happy knowing that I will be around for many years to come for my wife and kids. And my kids, Loki and Peter, love that I spend more time outdoors with them”.*



*Image 9.4. Example of positivity + personalising testimonial*

Image 9.4 features a number of positive and personalising resources, one of which being the interpersonal resource of naming, highlighted blue in Table 9.4. These naming resources highlight how the individual's health behaviour affects the lives of those she loves. It also serves to involve the audience with the represented participants, so that they too would be encouraged to change their unhealthy eating habits for their families. Some of those naming resources include the first-person pronoun *I*, kin terms *wife*, *kids*, and first names *Loki*, *Peter*.

Since **I** was young, **I**'ve always had a sweet tooth. **I**'ve always loved eating chocolate and doughnuts. Once **I** moved out of home, **I** started eating these every day. Eventually **I** gained weight and a few years ago **I** was diagnosed with type 2 diabetes, high cholesterol and fatty liver disease. **My doctor** told me if **I** didn't change the way **I** eat, **I** could die. And as my **kids** started growing up, **they** also started copying what **I** was eating, and **I** didn't want **them** to suffer from health problems like **I** did. **I** want to be around for my **kids** so **I** decided to change the way **I** eat and cut down on foods loaded with sugar. Instead, **I** eat more fruits, natural yogurt and nuts. And my **kids** also eat better now. **I**'ve lost a lot of weight and **I** feel healthier than **I**'ve ever felt. **I** can run around with my **kids** in the backyard and help out at their soccer practice. **I** am happy knowing that **I** will be around for many years to come for my **wife** and **kids**. And my **kids**, **Loki** and **Peter**, love that **I** spend more time outdoors with **them**.

Table 9.4. Naming in positivity + personalising testimonial

Positive affect from the people in the testimonial also personalise the benefits of a healthy lifestyle for the entire family. An affect analysis is illustrated in Table 9.5. The smiles of the people in the photo also parallel the positive affect in the language. Their direct eye contact with the audience invites the viewers to share in their happiness and also invites parents to

change their bad eating habits for their children. Furthermore, the represented participants are given salience in the photo by their large and centre placement, again construing personalisation.

| <b>Emoter</b> | <b>Appraising item</b> | <b>Trigger</b>                                  | <b>Type</b> | <b>Polarity</b> |
|---------------|------------------------|---|-------------|-----------------|
| narrator      | loved                  | eating chocolate and doughnuts                  | happiness   | positive        |
| narrator      | want                   | kids  | inclination | positive        |
| narrator      | happy                  | being there for her wife and kids               | happiness   | positive        |
| kids          | love                   | their mum spending more time outdoors with them | happiness   | positive        |

*Table 9.5. Affect in positivity + personalising testimonial*

In a similar manner to the *Break the Chain* and *Don't Make Smokes your Story* testimonials, creating shifts and contrasts between the unhealthy behaviour of excessive sugar consumption and the current and future benefits of healthy eating, can be employed to urge parents to change their bad eating habits for their kids' benefits. Table 9.6 presents an actual/possible behaviour analysis by highlighting linguistic features of actual behaviour in pink and possible behaviour in red. There is a shift from excessive sugar consumption to healthy eating, both construed as actual behaviour, with a further shift to possible behaviour where the narrator looks toward the future knowing she will have a long life with her wife and kids.

Since I was young, I've always had a sweet tooth. I've always loved eating chocolate and doughnuts. Once I moved out of home, I started eating these every day. Eventually I gained weight and a few years ago I was diagnosed with type 2 diabetes, high cholesterol and fatty liver disease. My doctor told me if I didn't change the way I eat, I could die. And as my kids started growing up, they also started copying what I was eating, and I didn't want them to suffer from health problems like I did. I want to be around for my kids so I decided to change the way I eat and cut down on foods loaded with sugar. Instead, I eat more fruits, natural yogurt and nuts. And my kids also eat better now. I've lost a lot of weight and I feel healthier than I've ever felt. I can run around with my kids in the backyard and help out at their soccer practice. I am happy knowing that I will be around for many years to come for my wife and kids. And my kids, Loki and Peter, love that I spend more time outdoors with them.

Table 9.6. Example of actual and possible behaviour in positivity + personalising testimonial

Materials using the strategies of positivity and personalising highlight the benefits of healthy eating for the whole family. These materials could be aimed at parents to encourage them to set healthy eating habits for their kids. In addition to the two main combinations, negativity + personalising materials can personalise the negative consequences of a diet high in free sugars, and positivity + technicalising materials can explain the health benefits of healthy eating.

### 9.2.3. Negativity + personalising

Chapter 7 showed that negativity + personalising campaigns tended to highlight the devastating effects of smoking on the lives and livelihoods of smokers and their loved ones. To highlight the negative consequences of a diet high in free sugars on families, a “say no to sugar campaign” would need to draw heavily on the interpersonal metafunction. Materials and resources would have to give prominence to people entities and highlight their emotional distress from the negative effects of excessive sugar consumption. This can be construed through people being Emoters of both realis and irrealis negative affect to portray the current and possible emotional distress families experience from disease. In a similar manner to the *Not Worried* TV ad from the UK’s NHS ([Video 9.3](#)), a child could be used as a narrator of a TV ad expressing her sadness towards an illness or disease her father is suffering from. Image 9.5 provides a script that a young girl could read as she expresses sadness of not being able to spend time with her father. Image 9.5 also features an image of a man with an amputated leg and a little girl who looks sad.

## SAY NO TO SUGAR

*“I used to go to the park with my dad all the time. But now I can’t. I feel sad when I go outside to play because he can’t play with us anymore. I’m scared that he might lose his other leg; mum says the doctors are worried”.*



*Image 9.5. Example of negativity + personalising material*


The photos and language in Image 9.4 construe negative affect to showcase the negative impact that disease can have on families. Negative affect is construed in language through unhappiness and insecurity realised by *sad* and *scared* respectively. The photos both depict individuals who have a sad and forlorn look on their faces, paralleling the negative affect in the language. Both individuals are alone in the photos highlighting how disease can separate families. This loneliness is further reinforced by their downcast eyes. This personalises the negative consequences of the diseases from excessive sugar consumption.

Currently, there are existing materials that warn families against the dangers of excessive sugar consumption. [Video 9.4](#) is a shortened version of an ad designed by *Rethink Sugary Drink*, a partnership of health and community organisation to encourage Australians to drink water instead of sugary drinks (Rethink Sugary Drink, 2021). The full video can be viewed in [Video 9.5](#).

Transcript of *Rethink Sugary Drink* video from [Video 9.4](#):

*“You wouldn’t eat 16 teaspoons of sugar in one hit, would ya? So why do we drink it? Aunty Anne at the health service said all that sugar make you put on weight. It make us sick mum, with like type 2 diabetes, heart disease, kidney disease and even cancer. It could even rot your teeth, hey?”*

[Video 9.4](#) personalises the negative impacts of excessive sugar consumption by portraying a family consuming excessive amounts of sugar. The video is organised so that the family members are the most salient participants, enacted by close-ups and extreme close-ups. These close-ups and extreme close-ups tend to occur as the narrator explains the diseases her family could suffer from, with the camera panning towards that family member. This is illustrated in Table 9.7. Furthermore, while diseases are usually medical terminologies which construe technicalising, in this case they also personalise as they show how sugar affects the whole family.

| Still images  | Voiceover  |
|---|--|
|  | <p><i>Aunty Anne at the health service said all that sugar make you put on weight.</i></p> |



|   |  |
|---|--|
|  | <p><i>It make us sick mum</i></p>                |
|  | <p><i>It could even rot your teeth, hey?</i></p> |

Table 9.7. Parallel of voiceover and shots

In addition to naming people in the video such as *aunty Anne, we* and *mum*, a video aimed at excessive sugar consumption could also use more negative affect to highlight the negative consequences a diet high in sugar has on people's lives and livelihoods, in a similar manner to Image 9.5.

#### 9.2.4. Positivity + technicalising

To urge consumers to reduce their free sugar intakes by eating more whole foods, it is important to educate them on the health benefits of a healthy diet, in addition to a healthy lifestyle as shown in Section 9.1.2.

As illustrated in Section 9.1.1, a binary distinction is set up between 'bad' and 'good' sugars through the strategies of negativity and positivity, respectively. We also showed that a classification taxonomy of the types of sugary drinks that teenagers should avoid. It is



important to additionally build a classification taxonomy of the types of drinks that can be consumed on a regular basis. The Healthy Eating Advisory Service classifies foods and drinks into three colour categories based on their nutritional content (Victorian Government, 2020). Green foods and drinks are the healthiest choices, amber food and drinks should be consumed in moderation, and red foods and drinks should be consumed rarely and in small amounts (Victorian Government, 2020). Figure 9.4 illustrates a classification taxonomy of ‘green’ drinks that can be consumed on a regular basis. Over time, this classification taxonomy can grow, and it can also classify ‘green’ foods, or foods containing intrinsic sugars. To target teenagers and children, these taxonomies can be made into posters such as the one in Image 9.1.

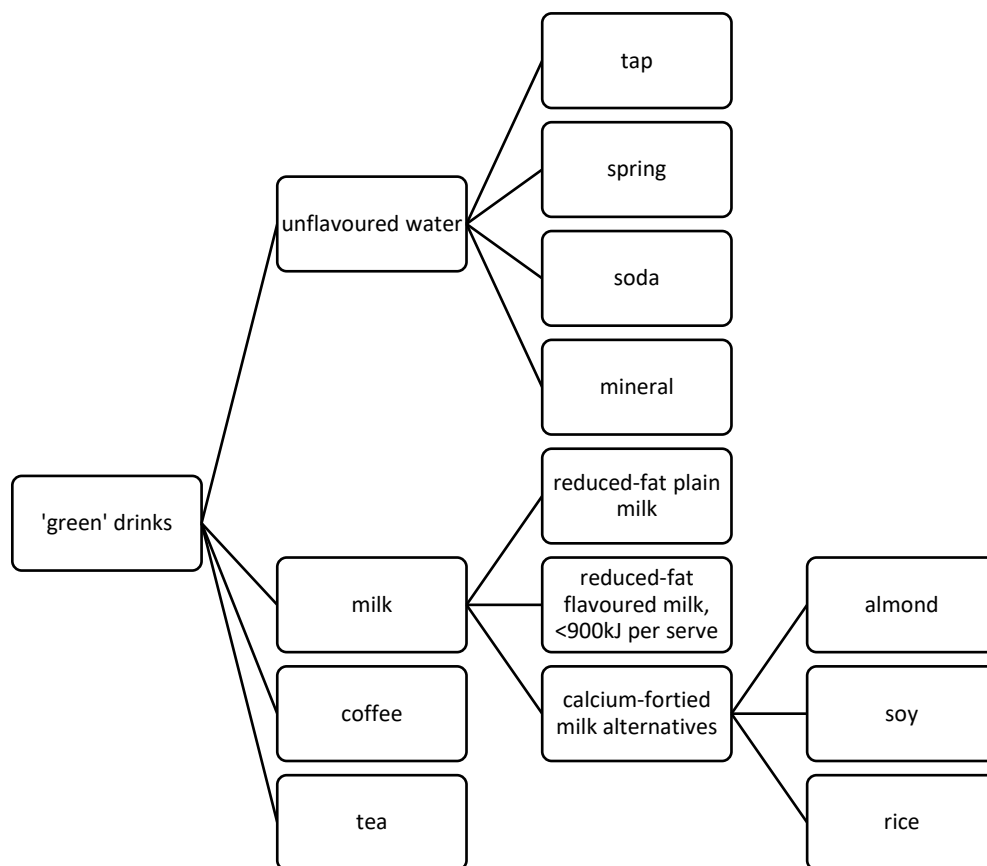


Figure 9.4. Classification taxonomy of ‘green’ drinks, adapted from Victorian Government (2020)

In addition to building knowledge of the types of drinks that can be consumed on a regular basis, it is also important to explain how healthy eating aids the body. There are multiple benefits associated with reducing one’s sugar intake. According to the World Health Organisation, lowering the consumption of free sugars can reduce blood pressure and cardiovascular disease (World Health Organisation, 2020). Furthermore, eating plenty of fruits and vegetables can lower the risk of type 2 diabetes, strokes, and certain cancers (World Health Organisation, 2021). In a similar manner to smoking, reducing the consumption of free sugars can reverse the damage caused by a diet high in free sugar intake. In this way, an implication sequence explaining how a diet low in free sugar intake can reduce the risk of diseases can be established, illustrated in Table 9.8. Such implication sequences can be used to design multiple materials, each targeting a specific health benefit of healthy eating.

|   |
|---|
| <b>Benefits of healthy eating</b>   |
| eating less free sugar  |
| ^ (leads to)  |
| a reduction in the risk of high blood pressure and cardiovascular disease |
| eating more fruits and vegetables   |
| ^   |
| lowers risk of type 2 diabetes, strokes and certain cancers               |

*Table 9.8. Implication sequence of benefits of reducing free sugar intake*

This section has outlined how the three sets of rhetorical strategies might come together in campaigns to target the excessive consumption of free sugars. However, an ad hoc approach

of promoting only a few materials here and there is unlikely to be the most effective strategy for reducing free sugar consumption, since similar materials to the ones proposed here already exist. The key is to develop a targeted and comprehensive campaign that utilises these four combinations in a systematic manner similar to the NTC. It means having a long-term campaigning effort where Australians are constantly exposed to the negative effects of excessive free sugar consumption, while simultaneously being encouraged to eat whole foods. This is key in building a prosody of negativity throughout to establish a value network of bonds that parallel the negative values towards sugar and the positive values towards healthy eating in a similar manner to the tension between anti-smoking and pro-quitting values within the NTC. Such a network of values is only possible with constant, long-term interventions.

### **9.3. Where to next?**

This thesis has sought to show how the analysis of a successful public health campaign could intervene in other areas of health. It deconstructed Australia's National Tobacco Campaign and explored how the Federal campaigns promoted the message that smoking is bad and quitting is good through the three rhetorical strategies introduced in Chapter 3. These rhetorical strategies were also employed to analyse the progress and change of the NTC over 22 years. Finally, this chapter has offered a précis of how these rhetorical strategies can transcend individual texts and contexts, by proposing a design for a "say no to sugar" campaign.

In deconstructing the NTC and using it as a model to propose the design of a campaign aimed at excessive sugar consumption, this thesis is advocating for Positive Discourse Analysis – an

approach that does not just analyse problematic texts and situations but looks to the good in order to design interventions to make a better world. The rhetorical strategies introduced in this thesis provide a platform for those interested in PDA research in the field of health promotion. By using these rhetorical strategies to design interventions, we can address the fast-growing health concerns the world faces. It is hoped that by learning from interventions that work, we can tackle these growing health concerns to improve the health of everyone and, in short, make the world a better place.

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## Appendix A – Data

### *Every Cigarette is Doing You Damage (1997 – 2005)*

| <b>Type of material</b> | <b>Material</b>        | <b>Link to material</b>                              |
|-------------------------|------------------------|--|
| TV ads                  | <i>Artery</i>          | <a href="#"><u>Artery TV ad link</u></a>             |
|                         | <i>Lung</i>            | <a href="#"><u>Lung TV ad link</u></a>               |
|                         | <i>Tumour</i>          | <a href="#"><u>Tumour TV ad link</u></a>             |
|                         | <i>Brain</i>           | <a href="#"><u>Brain TV ad link</u></a>              |
|                         | <i>Call for help</i>   | <a href="#"><u>Call for help TV ad link</u></a>      |
|                         | <i>Tar</i>             | <a href="#"><u>Tar TV ad link</u></a>                |
|                         | <i>Eye</i>             | <a href="#"><u>Eye TV ad link</u></a>                |
|                         | TV ads compilation     | <a href="#"><u>Compilation TV ad link</u></a>        |
| Radio ads               | <i>Artery</i>          | <a href="#"><u>Artery radio ad link</u></a>          |
|                         | <i>Call quit first</i> | <a href="#"><u>Call quit first radio ad link</u></a> |
|                         | <i>Coffee break</i>    | <a href="#"><u>Coffee break radio ad link</u></a>    |
|                         | <i>Cravings</i>        | <a href="#"><u>Cravings radio ad link</u></a>        |
|                         | <i>Keep going</i>      | <a href="#"><u>Keep going radio ad link</u></a>      |
|                         | <i>Lungs</i>           | <a href="#"><u>Lungs radio ad link</u></a>           |

|          |  |   |
|----------|--|---|
|          | <i>Money</i>                                   | <a href="#"><u>Money radio ad link</u></a>                          |
|          | <i>Recovery rate</i>                           | <a href="#"><u>Recovery rate radio ad link</u></a>                  |
|          | <i>Resolutions</i>                             | <a href="#"><u>Resolutions radio ad link</u></a>                    |
|          | <i>See the damage</i>                          | <a href="#"><u>See the damage radio ad link</u></a>                 |
|          | <i>Tumour</i>                                  | <a href="#"><u>Tumour radio ad link</u></a>                         |
| Print ad | <i>Something close to every smoker's heart</i> | <a href="#"><u>Something close to every smoker's heart link</u></a> |

***Health Warnings 2006 (2006 – 2012)***

| <b>Type of material</b> | <b>Material</b>      | <b>Link to material</b>                                  |
|-------------------------|----------------------|--|
| Cigarette packs         | <i>Addictive</i>     | <a href="#"><u>Addictive cigarette pack link</u></a>     |
|                         | <i>Arteries</i>      | <a href="#"><u>Arteries cigarette pack link</u></a>      |
|                         | <i>Blindness</i>     | <a href="#"><u>Blindness cigarette pack link</u></a>     |
|                         | <i>Children</i>      | <a href="#"><u>Children cigarette pack link</u></a>      |
|                         | <i>Emphysema</i>     | <a href="#"><u>Emphysema cigarette pack link</u></a>     |
|                         | <i>Graphs</i>        | <a href="#"><u>Graphs cigarette pack link</u></a>        |
|                         | <i>Heart disease</i> | <a href="#"><u>Heart disease cigarette pack link</u></a> |

|       |                                    |  |
|-------|------------------------------------|--|
|       | <i>Lung cancer</i>                 | <a href="#"><u>Lung cancer cigarette pack link</u></a>                 |
|       | <i>Mouth and throat cancer</i>     | <a href="#"><u>Mouth and throat cancer cigarette pack link</u></a>     |
|       | <i>Peripheral vascular disease</i> | <a href="#"><u>Peripheral vascular disease cigarette pack link</u></a> |
|       | <i>Quitting</i>                    | <a href="#"><u>Quitting cigarette pack link</u></a>                    |
|       | <i>Stroke</i>                      | <a href="#"><u>Stroke cigarette pack link</u></a>                      |
|       | <i>Toxic</i>                       | <a href="#"><u>Toxic cigarette pack link</u></a>                       |
|       | <i>Unborn babies</i>               | <a href="#"><u>Unborn babies cigarette pack link</u></a>               |
| TV ad | <i>Mouth cancer</i>                | <a href="#"><u>Mouth cancer TV ad link</u></a>                         |

***National Tobacco Youth Campaign (2006 – 2007)***

| <b>Type of material</b> | <b>Material</b>                        | <b>Link to material</b>   |
|-------------------------|--|---|
| TV ads                  | <i>National Tobacco Youth Campaign</i> | <a href="#"><u>National Tobacco Youth Campaign TV ad link</u></a> |
| Radio ads               | <i>Imagine</i>                         | <a href="#"><u>Imagine radio ad link</u></a>                      |



|           |   |  |
|-----------|---|--|
|           | <i>It's not just a cigarette you're smoking</i> | <a href="#"><u><i>It's not just a cigarette you're smoking radio ad link</i></u></a> |
| Print ads | <i>Indigenous parent</i>                        | <a href="#"><u><i>Indigenous parent poster link</i></u></a>                          |
|           | <i>Indigenous youth</i>                         | <a href="#"><u><i>Indigenous youth poster link</i></u></a>                           |
|           | <i>Parent</i>                                   | <a href="#"><u><i>Parent poster link</i></u></a>                                     |
|           | <i>Youth</i>                                    | <a href="#"><u><i>Youth poster link</i></u></a>                                      |

### *Cough (2011)*

| <b>Type of material</b> | <b>Material</b>       | <b>Link to material</b>                           |
|-------------------------|-----------------------|---|
| TV ad                   | <i>Cough TV ad</i>    | <a href="#"><u><i>Cough TV ad link</i></u></a>    |
| Print ad                | <i>Cough print ad</i> | <a href="#"><u><i>Cough print ad link</i></u></a> |

### *Health Benefits (2011)*

| <b>Type of material</b> | <b>Material</b>                        | <b>Link to material</b>  |
|-------------------------|--|--|
| Radio ads               | <i>Health Benefits female radio ad</i> | <a href="#"><u><i>Health Benefits female radio ad link</i></u></a> |
|                         | <i>Health Benefits male radio ad</i>   | <a href="#"><u><i>Health Benefits male radio ad link</i></u></a>   |
| Print ads               | <i>Health Benefits woman poster</i>    | <a href="#"><u><i>Health Benefits woman poster link</i></u></a>    |

|  |                                   |  |
|--|-----------------------------------|--|
|  | <i>Health Benefits man poster</i> | <a href="#"><u>Health Benefits man poster link</u></a> |
|--|-----------------------------------|--|

***Break the Chain (2011 – 2017)***

| <b>Type of material</b> | <b>Material</b>                 | <b>Link to material</b>                              |
|-------------------------|---------------------------------|--|
| TV ad                   | <i>Break the Chain TV ad</i>    | <a href="#"><u>Break the Chain TV ad link</u></a>    |
| Radio ad                | <i>Break the Chain radio ad</i> | <a href="#"><u>Break the Chain radio ad link</u></a> |
| Print ad                | <i>Break the Chain print ad</i> | <a href="#"><u>Break the Chain print ad link</u></a> |

***Quit for You, Quit for Two (2012 – on-going)***

| <b>Type of material</b> | <b>Material</b>                   | <b>Link to material</b>                           |
|-------------------------|-----------------------------------|---|
| TV ad                   | <i>Quit for You, Quit for Two</i> | <a href="#"><u>Quit for You, Quit for Two</u></a> |
|                         | <i>TV ad</i>                      | <a href="#"><u>TV ad link</u></a>                 |
| Radio ad                | <i>Quit for You, Quit for Two</i> | <a href="#"><u>Quit for You, Quit for Two</u></a> |
|                         | <i>radio ad</i>                   | <a href="#"><u>radio ad link</u></a>              |
| Print ad                | <i>Hayley poster</i>              | <a href="#"><u>Hayley poster link</u></a>         |
|                         | <i>Rebecca poster</i>             | <a href="#"><u>Rebecca poster link</u></a>        |

|  |  |   |
|--|--|---|
|  | <i>Quit for You, Quit for Two</i><br>magazine ad | <a href="#"><u><i>Quit for You, Quit for Two</i></u></a><br><a href="#"><u>magazine ad link</u></a> |
|--|--|---|

**Health Warnings (2012 – on-going)**

| <b>Type of material</b> | <b>Material</b>                                  | <b>Link to material</b>  |
|-------------------------|--|--|
| Cigarette packs         | <i>Blindness</i>                                 | <a href="#"><u><i>Blindness link</i></u></a>                   |
|                         | <i>Children</i>                                  | <a href="#"><u><i>Children link</i></u></a>                    |
|                         | <i>Emphysema</i>                                 | <a href="#"><u><i>Emphysema link</i></u></a>                   |
|                         | <i>Gums and teeth</i>                            | <a href="#"><u><i>Gums and teeth link</i></u></a>              |
|                         | <i>Heart disease</i>                             | <a href="#"><u><i>Heart disease link</i></u></a>               |
|                         | <i>Kidney and bladder cancer</i>                 | <a href="#"><u><i>Kidney and bladder cancer link</i></u></a>   |
|                         | <i>Lung cancer</i>                               | <a href="#"><u><i>Lung cancer link</i></u></a>                 |
|                         | <i>Mouth cancer</i>                              | <a href="#"><u><i>Mouth cancer link</i></u></a>                |
|                         | <i>Peripheral vascular disease</i>               | <a href="#"><u><i>Peripheral vascular disease link</i></u></a> |
|                         | <i>Quitting</i>                                  | <a href="#"><u><i>Quitting link</i></u></a>                    |
|                         | <i>Smoking kills</i>                             | <a href="#"><u><i>Smoking kills link</i></u></a>               |
|                         | <i>Stroke</i>                                    | <a href="#"><u><i>Stroke link</i></u></a>                      |
| <i>Throat cancer</i>    | <a href="#"><u><i>Throat cancer link</i></u></a> |  |

|  |                                |  |
|--|--------------------------------|--|
|  | <i>Unborn babies</i>           | <a href="#"><u><i>Unborn babies link</i></u></a>           |
|  | <i>Yellow warning labels 1</i> | <a href="#"><u><i>Yellow warning labels 1 link</i></u></a> |
|  | <i>Yellow warning labels 2</i> | <a href="#"><u><i>Yellow warning labels 2 link</i></u></a> |

***Stop before the Suffering Starts (2014 – 2016)***

| <b>Type of material</b> | <b>Material</b>              | <b>Link to material</b>                                  |
|-------------------------|------------------------------|--|
| TV ads                  | <i>Breathless TV ad</i>      | <a href="#"><u><i>Breathless TV ad link</i></u></a>      |
|                         | <i>Symptoms TV ad</i>        | <a href="#"><u><i>Symptoms TV ad link</i></u></a>        |
| Radio ads               | <i>My husband radio ad</i>   | <a href="#"><u><i>My husband radio ad link</i></u></a>   |
|                         | <i>Visiting mum radio ad</i> | <a href="#"><u><i>Visiting mum radio ad link</i></u></a> |
| Print ads               | <i>Breathless print ad</i>   | <a href="#"><u><i>Breathless print ad link</i></u></a>   |
|                         | <i>Symptoms print ad</i>     | <a href="#"><u><i>Symptoms print ad link</i></u></a>     |

***Don't Make Smokes your Story (2015 – on-going)***

| <b>Type of material</b> | <b>Material</b>     | <b>Link to material</b>                         |
|-------------------------|---------------------|---|
| TV ads                  | <i>Family TV ad</i> | <a href="#"><u><i>Family TV ad link</i></u></a> |
|                         | <i>Mates TV ad</i>  | <a href="#"><u><i>Mates TV ad link</i></u></a>  |
|                         | <i>Work TV ad</i>   | <a href="#"><u><i>Work TV ad link</i></u></a>   |

|           |  |  |
|-----------|--|--|
| Radio ads | <i>Don't Make Smokes your<br/>Story radio ad</i> | <a href="#"><u><i>Don't Make Smokes your<br/>Story radio ad link</i></u></a> |
| Print ads | <i>Bikes print ad</i>                            | <a href="#"><u><i>Bikes print ad link</i></u></a>                            |
|           | <i>Guitar print ad</i>                           | <a href="#"><u><i>Guitar print ad link</i></u></a>                           |