

ADF submission
Joint Committee on Law Enforcement
Inquiry into
Public communications campaigns targeting drug and substance abuse

Response to Terms of Reference

- a. **the efficacy of different approaches to such campaigns, including**
- i. **'shock advertising', informational campaigns and the use of social marketing;**
 - ii. **the use of campaigns aimed at various audiences, including, but not limited to, children at an age before they would typically become illicit drug users, Indigenous communities and Culturally and Linguistically Diverse groups;**
 - iii. **international approaches;**

“Shock advertising” in public health campaigns have been credited with modifying sexual (see 1987 Grim Reaper HIV/AIDS TV campaign) and driving (Victorian Traffic Accident Commission drink driving ads) behaviour.(1) The HIV prevention campaigns have been widely criticized for their role in increasing stigma and fear toward people who were living with HIV or are in high risk population groups. In contrast, the use of graphic imagery and sometimes deliberately stigmatising warnings have been credited with declines in smoking. (2)

The effectiveness of such campaigns targeted at substance use, particularly illicit drugs, has yet to be established.(3)

As a marketing tool, appeal to fear “has an intuitive appeal, but paradoxically the outcomes are often ineffective or counterproductive.” (4) While some evidence does suggest that appeal to fear may motivate some behaviour change there remains ethical and moral concerns about the impact of this fear (5) . Campaigns based on shock or fear may be ignored by the target audience for several reasons including that people reject the credibility of the message , that suggested threat or their consequences seem unlikely (especially if a person has engaged in the activity and has not experienced a negative outcome), or people becoming desensitised to the intended message.

Level 12
607 Bourke Street
Melbourne VIC 3000

PO Box 818
North Melbourne
VIC 3051

T 03 9611 6100
F 03 8672 5983
adf@adf.org.au
adf.org.au

ABN 66 057 731 192

Shock advertising campaigns that invoke fear may also result in a form of moral disgust, in particular, when the behaviour associated is illegal or seen as socially unacceptable. Eliciting a type of 'moral disgust' in a behaviour may be accompanied by other negative emotions like anger or contempt for those who are engaging in that 'disgusting' behaviour which can inadvertently increase stigma and discrimination. (5)

The World Health Organization has ranked illegal drug dependence as one of the most stigmatised health condition globally. While there is some evidence that "shock advertising" is effective in raising awareness of an issue among the general public, there is evidence of some harmful unintentional consequences of these campaigns that should be considered. (6) Specifically, some of the campaign's language, as well as symbolism and use of colour, may further isolate and marginalise people who use drugs; some of whom are the most vulnerable and historically disadvantaged Australians. The Queensland Mental Health Commissions 2018 report 'Changing attitudes, changing lives' notes that

"The use of stigmatising imagery across a variety of media may further entrench stigmatising attitudes and inadvertently create barriers to people seeking help. Campaigns or resources that aim to stigmatise drug use and create fear to deter drug use, can lead to further separation and stigmatisation of people who use drugs". (7)

The 2017-26 National Drug Strategy states: *"Approaches and policy responses aimed at reducing alcohol, tobacco and other drug harms in priority populations should be informed by evidence as it develops and should be reviewed regularly. It is also important that any responses do not inadvertently or unintentionally further marginalise or stigmatise people who are at higher risk of experiencing alcohol, tobacco and other drug related harm."*

The Federal Parliamentary Joint Committee on Law Enforcement's Inquiry into crystal methamphetamine (Ice) Final Report, published 2018, recommended *"that the Commonwealth Government ensure future public awareness campaigns engender compassion towards drug users and are targeted at and inform those people, with the objective of encouraging them to seek treatment and support"*.

In 2019, the Alcohol and Drug Foundation partnered with the Victoria Department of Health (several other organisations) and co-developed "The Power of Words" campaign. The purpose of this campaign and report was reduce the stigmatisation of people who use alcohol and other drugs to and educate and support healthcare and other professionals to reduce discrimination, improve the quality of care for this group and improve their health outcomes. Evidenced-based information campaigns such as The Power of Words are critical to achieving desired public health outcomes by not only providing information about the consequences of certain behaviours, but also pathways to seek information and help.

"Social marketing" involves the utilization of marketing techniques to promote social good and has been increasingly deployed in public health promotion campaigns over the last two decades. Social marketing focuses on effecting change in attitudes, knowledge and behaviours to support the public interest by understanding target audiences and "message framing". The Alcohol and

Drug Foundation has studied social marketing campaigns and engaged social marketing experts in the development of its campaigns and programs in a bid to maximise its efforts to drive positive behavior change. Internationally and domestically, there is a strong view that campaigns must align with audience *values*; minimise perceived price paid by individuals; be segmented and tailored; and have the flexibility to be rapidly altered, in order to be effective. The explosion of the internet and social media in particular presents challenges and opportunities to this approach.

When developing social marketing campaigns, appropriate consideration should be given to the segmentation ('at-risk' populations) and targeting of this target audience to maximise effectiveness as well as preventing stigmatisation. Public campaigns targeting drug and substance use should take account that at-risk individuals are less likely to be consumers of traditional and new media; that frontline workers and community groups should be used to disseminate information. In that respect, the Local Drug Action Team program - funded under the Australian government's National Ice Action Strategy and delivered by the Alcohol and Drug Foundation – may be of assistance.

Campaigns that aim to prevent the uptake of illicit drugs amongst young people should consider their experiences and mindset. Young people have less life experience, they are more likely to engage in risky behaviour and are more impulsive and sensation seeking.(8) Studies in the US have reported an increased use of illicit drugs among adolescents after media campaigns .(6) Campaigns targeting young people may benefit from a co-design approach but more importantly must be based on evidence and executed according to best practice (7).

There are some positive examples of this internationally, with the British Columbia Ministry of Mental Health and Addictions who has an ongoing mass media campaign 'Stop Overdose'. (9) This campaign takes a person first approach to harm reduction messaging and aims to improve understanding of overdose, support help seeking behaviour and humanise people who use drugs in order to reduce stigma and stop overdose. The campaign's key tagline is 'Stop the Shame. Stop the Blame. Stop the Stigma'. Campaign collateral can be found online, on television, bus stops, public toilets, health centres and more broadly ensuring far reaching regular exposure. This type of campaign may be beneficial to bring awareness to a community issue without relying on the hope that fear alone will stop risky behaviours.

Norway is currently rolling out a [campaign](#) aimed at delivering factual information about drugs to a wider audience without stigmatising people who use drugs. This campaign is in its infancy and no evaluation has been completed to determine efficacy but demonstrates a potential new approach to health-based messaging.

b. research and evaluation methods used to plan, implement and assess the effects of such campaigns;

Evaluation of large-scale campaigns can be difficult. Long-term investment is required to build evidence as to what works. Further, research from large scale health promotion on tobacco reduction demonstrates that for health campaigns to be effective they need to be ongoing and consistent to ensure impact.(10) This should be taken into account when designing any mass media campaign.

The ADF supports the approach taken by Western Australian Mental Health Commission:

The Mental Health Commission process in conducting public education campaigns involves the application of evidence-based practice and relevant behavioural and epidemiological data, incorporating in-house experience combined with expert external advice in the development and execution of all campaigns. The development of campaigns includes qualitative research with the target groups, guiding concept development and media production. Evaluations for a three-year campaign are conducted independently by expert social marketing researchers at the end of Year one and Year three. The evaluation then informs further development and refining of the campaign strategies and materials.(11)

While mass media campaigns can be a powerful tool to disseminate health promotion messaging they can be expensive and therefore not sustainable and not targeted enough to impact those at greatest risk of harm. These costs can be controlled through better targeting of 'at risk' populations through online marketing campaigns.

c. identifying best practice approaches to designing and implementing campaigns, including social media, digital channels and traditional advertising, to guide Australia's approach to drug demand reduction;

In its submission to this inquiry, the Commonwealth Department of Health advises that:

"...social marketing is the best-practice approach the Department has used to implement the NDC ... Successful social marketing does not always result in notable short-term changes in behavioural outcomes, and will seldom, if ever, result in universal uptake of behaviours. Campaign messages must be reinforced among the target audience in a sustained, consistent manner to encourage adoption of desired behaviours, and/or rejection of undesirable behaviours".

Along with methamphetamine, alcohol and cannabis should not be overlooked when developing approaches to drug demand reduction. Alcohol is the most common drug in Australia, and the drug most commonly used by young people. Alcohol contributes to all the leading causes of death for young people; suicide, land transport accidents, accidental poisoning, and assault. Of the young

Australians aged 14–19 years who are drinking at risky levels, 83% reported being injured as a result of that drinking in the past year. Early drinking, even sips or tastes, is connected to earlier and more harmful patterns of alcohol consumption.

d. the efficacy of the current and past National Drug Strategy in achieving demand reduction through public communications campaigns; and

The Evaluation of Phase Seven of the National Drugs Campaign, prepared for the Commonwealth Department of Health, found:

- a significant increase in awareness among young people and parents, and “higher spontaneous campaign awareness” among key at risk segments;
- a small but significant increase in awareness in the National Alcohol and Other Drug hotline and campaign website among young people and parents; and
- “a small, but significant increase in the propensity to avoid drugs among youth exposed to the campaign.”

However, the Western Australian Methamphetamine Action Plan Taskforce, which reported in 2018, noted advice from the Western Australian Mental Health Commission:

Research with the Western Australian target audience, and feedback from alcohol and other drug (AOD) experts, has found previous national (Commonwealth-run) drug campaigns have been seen as depicting unrealistic scenarios that are not representative of the experiences of majority of individuals affected by drug use; and the messaging is not seen as believable or relatable by the target audience. It is possible these messages have worked to stigmatise drug use and further discourage individuals from seeking help and support.(11)

In 2015 the Australian Government launched a media campaign ‘*Ice destroys lives*’ targeting methamphetamine use. The campaign aims included ‘to contribute to a reduction in the uptake of illicit drugs among young Australians’ and to ‘increase awareness of serious harms associated with ice use. (12) The campaign included graphic imagery of people who use methamphetamine, including violence and criminal behaviours. While the Department of Health conducted some evaluation of this campaign that demonstrated some increased awareness for a short time (13), critics noted that the evaluation did not include information to understand how many of their participants may have previously, or currently use methamphetamine or other illicit drugs and did not seek to explore the impact of the campaign on increasing stigma and discrimination toward people who use methamphetamine. (12) The campaign’s aim was well intentioned, and the findings highlight a need for funding for evidence-based campaigns that accounts for high risk groups.

e. any related matter.

It is critical the next public campaign targeting drug and substance use complements and reflects the National Drug Strategy; the National Alcohol Strategy; the impending release of the National Preventative Health Strategy; the Australian government's strong focus on mental health; and the increasing evidence surrounding Fetal Alcohol Syndrome Disorder and E-cigarettes. It is also imperative best practice models are followed to ensure any mass media health campaign does not inadvertently stigmatise people who use drugs or their families. Stigma and discrimination can reduce likelihood of people accessing services and support and consequently can, in fact increase harm.

It is also critical as a part of any public health campaign that the impression is not created that drug use is more prevalent than it is, this is particularly essential when targeting young people. There remains a fine line between educating about risk and exaggerating about the potential harm. Social norms campaigns that emphasise that most young people are not using substances should be considered.

Furthermore, federal, state and territory governments should coordinate approaches, identify synergies and look to pool knowledge and expertise in campaigning. Fundamentally, any campaign should present drug use as a social and health issue - not a moral failure. People with a drug dependence should be treated with compassion; they are often survivors of intergenerational disadvantage, sexual and physical abuse, homelessness and unemployment.

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