

# THE POLITICS OF ANTI-DRUGS CAMPAIGNS

*An insight into how government advertising campaigns could have impeded the anti-HIV effort.*

Government anti-drugs campaigns have attempted to address non-users as well as users. But images and messages that successfully deter non-users may simply have alienated drug users, making them less responsive to official sources of help and information. The latest campaign abandons harm-reduction in favour of a message which blames the drug user and accepts no social responsibility for their fate.

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FOR FIVE YEARS we have been witness to a succession of government advertising campaigns aiming to change drugtaking behaviour to reduce the spread of HIV infection. Much criticism has been levelled at these campaigns, both for not meeting their ostensible objectives and for their relentless reliance on fear techniques. However, it is important not only to question the merits of advertising as health education, but also to gauge the political and ideological significance of such campaigns.

I will suggest that not only are there inherent contradictions in the use of advertising media for the purposes of drug health education, but also that the campaigns inevitably increase the ostracism of drug users, further alienating them from society.

By distancing drug users from mainstream society, these campaigns risk undermining HIV policy initiatives which depend on making services attractive to drug users. They also alienate one of the targets of the campaigns themselves – drug users. This, I will suggest, is because the campaigns have been exploited as an ideological stratagem.

## Addicts and edicts

Health education advertising campaigns inevitably adopt the principles and techniques of the advertising industry as a whole. At its most fundamental, advertising exists to sell products to consumers. To be effective, adverts need to exploit images and beliefs that the viewer recognises as familiar and 'knows' to be 'true'. Advertisers must therefore actively define for themselves the role and identity of the viewer/buyer. This involves constructing and addressing a unified 'general public', an ideal national family unit, a stylised 'general individual'.<sup>1</sup>

These creations are, however, no more than an ideological fiction of 'normality' and 'reality' – a 'normality' which by definition stigmatises, alienates and marginalises those outside its boundaries as 'deviant' and 'other'. Faced with this denigrating sub-text, users are unlikely to heed the ads' surface message. As a result,

anti-drug advertising is unable simultaneously to address both drug users and non-users, and may only serve to further alienate drug users from the advice it gives.

## The family and the deviant

One of the most potent examples of the contradictions between advertising as a mode of communication and advertising as drug education, was the way the 1987 "Smack Isn't Worth It" campaign constructed the use of heroin as a direct threat to the family. Rooted in an equation which simply read 'using smack equals stealing', posters informed viewers that "Smack can leave a scar on your whole family". In fact, on "Mum's housekeeping", "Dad's wallet", "Alison's walkman", and so on.

Another poster, showing a young woman in a squalid room being offered money, puts forward a similar narrative of addiction. "She used to do smack for a laugh. Now she'll do anything for smack"; underneath, the text warned, "If you get really desperate for money, you might even sell your body". In both examples, heroin use is portrayed as a threat to basic values, either an anti-family threat, or (in moral disbelief) an extra-marital sexual threat.

Such an approach can easily be assimilated into Thatcherite familial ideology, where the family unit is protected at all costs. The sanctity of the family ideal is reinforced by portraying drug users as deviant corruptors who are not to be tolerated within the family, or, by extension, by the general population. In doing this, the campaign also reaffirms non-users' perceptions of users as callous, immoral thieves, degraded and desperate.

The Government's own research provides some evidence for this alienation process. An evaluation judged the 1985/6 "Heroin Screws You Up" campaign to have been "successful" in that it "fostered and reinforced negative attitudes and beliefs about heroin misuse", but admitted that in doing so it also "demoralised existing users by encouraging them to [be] even more



negative about themselves and society to be even more hostile and rejecting".<sup>2</sup> The following year, "Smack Isn't Worth It" intensified these negative opinions about heroin use and heroin users.<sup>3</sup>

To discourage non-users from using, the campaigns have to confirm their existing beliefs about drug users, establishing the common ground needed to communicate the ads' message. This makes advertising sense, but can it be justified on educational grounds? Many of the beliefs exploited are *untrue*; the campaigns operate within a fantasy land. On ethical grounds, although advertising's mythical images of the 'general public' and of 'reality' become ever more firmly protected, its 'corrupters' are cynically dismissed as insignificant.

## Infection and injection

These processes are equally present in more recent anti-drug advertising. The impact of the two 1988/9 posters, as with previous advertising, rests solely on the needle and syringe as the object of 'threat'. In one we see a needle the length of a fishing rod having 'skewered' four arms (like a kebab), alongside the statement: "Sharing your mate's works means sharing with everyone he's ever shared with".

This advertisement operates within a paradigm constructed by the 1987 "Don't Inject AIDS" campaign, in which most posters featured at least one (often massive) blood-spattered needle and syringe, with invitations such as: "Only one of these needles is free from AIDS. Take your pick" and the statement that "It only takes one prick to give you AIDS".

Educationally, these messages cannot be justified. The vital distinction between HIV and AIDS is ignored: there is no mention of a virus (HIV) which *may* cause AIDS, and no mention of AIDS as a syndrome which is *not* communicable or contagious. Moreover, the campaign appears to contradict even the most basic principles of health education by perversely enticing the viewer to "Go on. Take your pick", and by shifting responsibility on to the "prick" who becomes morally 'responsible' for transmitting the infection.

Such a purposeful association of the needle *itself* (rather than people's behaviour) with blood, disease and death may appear entirely rational, but may also be deliberately confusing. Implicit is a moral rather than an educational message. Representing injecting itself as so degrading and morally proscribed may ironically invite ambivalence among injectors about their



▲ In 1985/6, "Heroin Screws You Up" increased societal hostility to drug users and demoralised users themselves.



▲ ▼ The 1987 "Smack Isn't Worth It" campaign intensified the negative attitudes encouraged the previous year. Here heroin users were portrayed as degraded enough to break fundamental family and sexual taboos.

## IMAGES OF THE HEROIN USER



attempts to stop sharing – if injecting is already so bad, then sharing as well couldn't make it that much worse.

Although these ads may provide excellent testimonies of the horrors of injecting to those who don't inject, for injectors they will appear completely divorced from reality. This may protect non-users from injecting, but injectors themselves become alienated from an anti-sharing message (how to avoid HIV) by an overtly anti-injecting one (how to become 'normal').

Again, the research confirms this process. Non-injectors' "resistance to injecting was evoked and confirmed and they were left feeling that injecting would be as horrific as they feared", while injectors felt the "grotesque image portrayed was quite divorced from reality and that this was an attempt to stigmatise injectors by building on the fear and myth rather than demolishing it... a betrayal of the establishment's fear of injection and junkies".<sup>4</sup>

## Class fear and prejudice

The 1988/9 television advertisement codenamed *Tracing* (remember the red dot jumping from infector to infected?) again exploited familiar and potent stereotypes of the injecting drug user and their supposed environment. Needle-sharing occurs among scruffy, emaciated youths in a rundown urban environment, with a voice-over in scouse. The exploitation of class fears and prejudices seems blatant, as does the conjunction of drug use, criminality and physical degradation previously perpetuated by the "Smack Isn't Worth It" and "Don't Inject AIDS" campaigns.

These advertisements manipulate prejudices deeply rooted in the mythical and stereotypical representation of the drug user: their effects may only be adverse. About *Tracing*, the qualitative campaign research showed that drug users thought "the sordidness... did not fit in with their

1. Williamson J. *Decoding ideology and meaning in advertising*. London: Marian Boyars, 1978.

2. Andrew Irving Associates Limited. *Anti-misuse campaign: qualitative evaluation research report*. January 1986.

3. Research Bureau Limited. *Anti-misuse of drugs campaign evaluation. Report of findings of stages I-VII*. July 1989.

4. Cragg, Ross and Dawson Limited. *1988/1989 misuse of drugs anti-injecting campaign: qualitative research report*. July 1989.



lifestyles, and they objected to this 'stereotyped' portrayal of drug users which at times was positioned as a government attempt to smear them'.<sup>4</sup>

## Whose responsibility?

Any ambivalence over whether to take a moralistic anti-drugs line or to target specific risky behaviours seems fully resolved in the current 1990 campaign. Attempts to provide practical harm-reduction information are abandoned in favour of an anti-all-drugs message of 'drug use kills', identifying any drug use with inevitable loss of self-control and ultimately death.

In one of the television ads we see 'Chris', who decides to take drugs and dies, while his friend turns down the offer and lives. Representing individuals as rational and autonomous decision-makers means Chris can be blamed for engineering his own fate. Decisions about health behaviour therefore become decisions about personal morality.

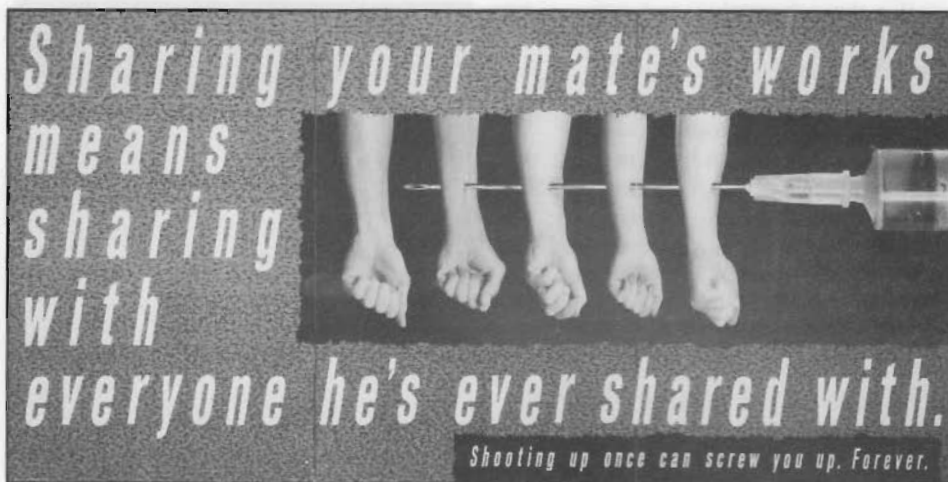
In another commercial a woman takes drugs at a party and ends up unconscious in hospital. The doctor turns to her friends saying, "You can go now", to which they reply, "But, we're her friends". A slide door closes between the doctor and the friends, creating a symbolic division between her 'friends'—enemies, health—disease, and morality—deviance. Here drug use is represented as a medical problem resulting from irresponsible behaviour, where not only the woman herself, but also her so-called 'friends' are held responsible.

This ad leaves viewers no clearer about why drug overdose deaths occur and how they can be avoided. If such deaths continue, who is responsible—the party-goers who die in ignorance, or the government which chose not to inform them of the risks in a realistic manner? Contrast this ad's approach with that of the Brighton Drug Advisory and Information Service (DAIS), whose local campaign specifically warned of the dangers of mixing drugs and alcohol, one of the commonest causes of overdose death.

## Politics or education?

So to what extent can anti-drug advertising actually be seen as health education? The central problem of the mass media health education strategy is revealed in the evaluations: while non-users' fears are "confirmed in an emotionally powerful way", there is evidence of "deflection and distancing" by drug users themselves.<sup>4</sup> Drug users, it seems, simply become further alienated from the educational potential of anti-drug advertising and by extension from the Government's primary objective of changing health behaviour.

It is hard to believe that ministers commissioning anti-drugs campaigns were not advised of the vast body of theory and research which could have predicted such an



▲► By 1988/9 the ostensible focus was on preventing the sharing of needles and syringes. But the sub-text of the imagery was anti-injecting. Together with the sordidness of the TV ads (see right) the impact was merely to further alienate drug users.



◀ ▲ This year's campaign (poster left, TV ad above) blames the drug user for their 'inevitable' death while failing to give concrete advice on how to avoid drug overdose fatalities.

outcome. It might be more realistic to suggest that expert advice has been systematically ignored. Why should this be?

THE CAMPAIGNS HAVE not solely aimed to prevent non-users being initiated into drug use, as they have also targeted drug users. It is commonplace to suggest that they also serve as a political *marketing* ploy to acknowledge the Government's concern over problematic drug use. But one might

also tentatively suggest that the campaigns are of more covert significance: as an *ideological* stratagem to protect conservative moral ideologies by opposing these to popular perceptions of the drug user as 'addict' and 'deviant'. The "effects" may indeed 'last forever'; the more drug users become alienated from mainstream society, the more they also become alienated from the help and information sources they might some day require. ■