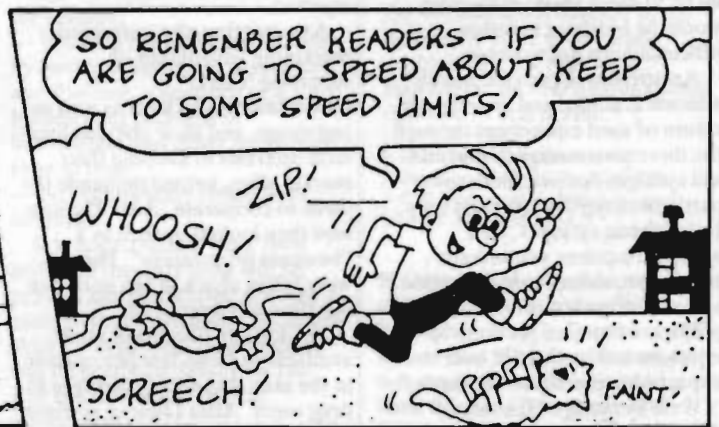
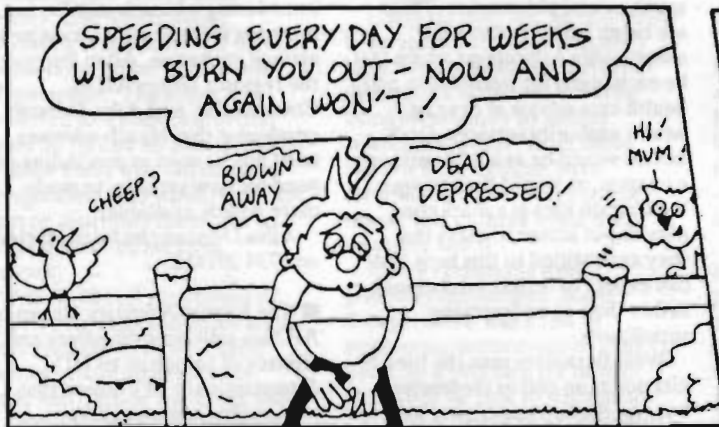




From May 1988, Merseyside Police can caution you for your first offence of possessing a small amount of any drug - but you must be co-operative, and it is discretionary.

Telephone

for more information.



TOP The end frames from *Two Ways to Get Busted*, written by Russell Newcombe for Mersey RHA. In the first scenario (top left) an uncooperative defendant caught with a small amount of a drug protests his innocence and ends up in court. In the second (top right) he owns up to having the drug for his own use and receives the benefit of Mersey police's mercy.

in health and local authorities in Merseyside. A series of lessons on what not to do with amphetamines is summed up in the last frame by the catchline 'keep to some speed limits!'

CENTRE Frames from *Willy Whizz* by the same author, the prototype drug education strip cartoon that led to resignations

BELOW Frames from a story in the unique *Streetwise* comic by the Redfern Centre in New South Wales, showing how a drugging household reacts to the bad news about AIDS. The comic is supported by the Australian Government's National Campaign Against Drug Abuse.



SERIOUS FUN

Drug education through popular culture

Good jokes circulate like wildfire, comics are passed around, pop songs chorused on the way to school. Can youngsters learn as they laugh?

Russell Newcombe

VIRTUALLY NO RESOURCES are readily available for professionals who want to do drug education with people determined to continue to use drugs other than alcohol or tobacco. The exception is the limited information about safer injecting being made available as a response to the spread of HIV. However, there is one direct communication channel greatly under-used but with immense potential for drug education, particularly outside the school environment. This is popular leisure culture, particularly the pop culture of young people. In contrast to 'serious' cultural forms, the distinguishing features of pop culture are humour and fun.

Based largely on age and class, the wide social gap between these two 'leisure cultures' partly explains the origins and psychological appeal of many popular culture forms within the younger and more marginalised sections of society. Serious consideration should be given to the possibility that these groups are more likely to access, retain and act upon information derived from popular culture than that derived from formal/official sources.

Educating about drugs through pop culture must be a strategy worth investigating in view of the high levels of ignorance and misconceptions about drugs among young people, despite the growing numbers who have received some form of school-based drug education.¹ It is likely to be particularly successful where formal education is inappropriate or inadvisable, or where leisure or entertainment is a function of the agency (eg, in youth clubs, community centres, street agencies, and in the home).

At least four 'channels' of pop culture can be explored for their drug education potential: games; jokes; cartoons and other story forms; music and associated promotional devices; and drug paraphernalia.

The author is a psychologist working at the Drug Education Research Project of South Sefton (Merseyside) District Health Authority. This paper is based on a longer report available from the author at The Maryland Centre, 8 Maryland Street, Liverpool L1 9BX, phone 051 709 3511.

Games — an under-used resource

The main advantage of games over other pop culture devices is that they can be used as an interactive educational tool in group settings, either with drug users alone, or together with their friends and families. Games are a much under-used method of raising awareness and increasing knowledge about drugs in settings such as youth clubs and educational institutions. Given the sales figures of such products as *Monopoly* (Waddington) and *Trivial Pursuit* (Horn Ashby International), games might also be a vehicle for bringing drug education into the home. *Trivial Pursuit* provides us with a successful formula that could be used to develop drug education board games based on question-and-answer principles.

Until recently the only drug education games available were the card games provided with the *DrugWise* pack (Lifeskills/TACADE/ISDD) and by TACADE (*Drugs — What Do You Know?*). Both have proved very popular with many teachers and youth workers. Neither has a significant harm-reduction component but they do have the advantage of being more likely to be perceived as fun than routine learning, and provide a useful starting point for the development of more marketable drug education games.

The only drug education games with a clear harm-reduction component are the two in the *High Profile* drugs pack for youth workers (ISDD, 1988). *Drugs and Risk-taking* is a card game in which players take one card from each of three piles (drug, situation, and frequency of use), and then state any health risks and problems they think the combination might pose (eg, sniffing glue on a building site most days of the week). Other players can challenge or add to what is said. This structure introduces players to some of the main variables determining the harm from drugtaking, and to the array of consequences which can follow from their interaction.

The second *High Profile* game, *Uppers and Downers*, combines a quiz with a snakes and ladders board game. Players whose dice throw lands them on a snake-head square only go down if they get the

question wrong; players who land on the bottom rung of a ladder only go up if they get the question right. The *High Profile* games are limited in the amount of information they can convey and in their game structure, but they do represent an advance into new educational territory.

Another area of game playing ripe for development by drug educationalists is the 'moral dilemma' board game, exemplified by *A Question of Scruples* (Milton Bradley) in which players presented with one of over 200 moral dilemmas must choose what they would do. However, such games may be more attractive if they cover a broad range of behaviour. A game based on moral decisions about interpersonal relationships, with an emphasis on such prominent youth dilemmas as drugtaking and sexual behaviour, might be as 'narrow' as one could get and still interest a variety of people.

As with *Scruples*, the focus could be on inferences about and responses to other people's drugtaking and sexual behaviour, meaning the players are not put in a personal 'hot-seat'. The educational value of such games depends not so much on the answers given, but on the debate that inevitably arises from trying to formulate a suitable response. Two possible dilemmas might be:

■ While walking home one day you see your brother sniffing glue with a friend on a building site. What do you do?

■ You have spent the evening at your boy/girlfriend's house and are about to leave, when your friend's father offers you a lift home. You know he has drunk five pints of beer. Do you turn down the offer?

Quizzes, board games and other games can also be simulated on computers. Computerised games are more easily played by one person, and have the scope to be instructive about a much wider range of issues and types of drug use. They also provide an environment in which role-playing games can be made far more interesting, with sophisticated branching plots plus graphics and sound effects.

A harm-reduction software game has the potential to incorporate the massive amount of drug information needed to cope with the attitudes and beliefs of a wide variety of people, while still being sensitive to differences in the current player's level of involvement in drugs. ▷

Jokes — old but effective

Jokes and humorous verse have the great advantage of being short stories voluntarily passed from one person or group to another. They are a primary form of everyday communication (like gossip) and the best ones are repeated for decades or even centuries. They also tend to be about anxiety-provoking or feared subjects and are therefore suitable for communicating about such a taboo subject as drugs.

Although constructing memorable, enduring jokes or verses which manage to be amusing, non-trivialising, and to carry an educational message is difficult, it is by no means an unrealistic idea (see examples below).

No matter how distasteful such jokes may be to some people, they are being told and retold. Promoted in the proper way, they could be at least as effective as mass media campaigns and leaflets in getting the intended message across to the target audience.

One advantage of the joke over most other story devices is that if it is not understood the meaning will often be provided by the teller, usually in the form of clues which enable the audience to make the necessary inference themselves. The joke is thus a superior narrative device for education about drugs. Ancient communication channels such as joke-telling are also much cheaper than their modern counterparts, particularly television and newspapers.

AIDS/drug humour

One clear example of an educational joke, first heard in a Liverpool pub in June 1987, concerns safer sex rather than safer drug use, and goes something like this:

Pat meets Chris at a party. After dancing the night away, Pat asks Chris to come back for a cup of coffee. They eventually end up having sex. Afterwards, Pat suddenly sits bolt upright in bed and exclaims: 'Oh my God, I forgot all about the safer sex stuff!' Puzzled, Chris asks, 'What do you mean?' Pat replies: 'We didn't use a condom, and I forgot to ask you whether you've got the AIDS virus.' Chris angrily retorts: 'Cheeky bastard! Of course I haven't got AIDS!' to which Pat replies: 'Thank God, I don't want that again!'

Another example, this time a more long-standing joke about drug use often told with tobacco as the subject:

Jill calls around to see her friend, Steve, and finds him 'chasing the dragon' in his bedroom. Jill sighs and says: 'Steve, when I saw you last week you said that you were going to come off the smack.' Steve replies, 'Yeh I did, I've come off smack loads of times, it's easy!'

Cartoons . . .

The main advantages of cartoons over other communication media are:

— they have greater appeal to those more likely to be at risk of drug problems (young, anti-school youths);

— they provide a positive emotional context in which to present advice about drugs (humour and entertainment, rather than fear and lecturing).

Perhaps the most notable example in the drugs field is the Health Education Council's anti-smoking Superman project aimed at 7 to 14 year-olds. Implemented through animated TV cartoons, strip cartoons in comics and magazines, and through single-frame posters, the project, successfully reached and interested its target group.²

However, it is a satirical cartoonist, rather than a health educationalist who has provided us with the best example of risk-reduction through the medium of a strip cartoon 'super-hero' — Steve Bell's Captain Condom, who humorously warns *Guardian* readers about HIV and AIDS. For instance, at the end of one of the first episodes, Captain Condom holds his name-plate up to the reader and advises: "Remember: don't screw around, and, if plunging plonkers appear an unavoidable part of the menu — use one of my little friends here!!"

Free comic books and comic strips have also been used in the USA, Australia and Holland to educate about drugs, sex and other issues of relevance to the young and not so young — notably the unique Australian comic, *Streetwise* (see below).

Considerations such as those behind *Streetwise* led in Merseyside to the *Willy Whizz* cartoon strip, a prototype example

Streetwise fun

Streetwise, published by Redfern Legal Centre in New South Wales, is the only comic concerned with education about drugs and other issues outside the context of HIV/AIDS. The rationale of its approach has been described as follows:

"Instead of pages of dry information, there are short, punchy stories. Instead of 'you should' and 'you ought', here is 'you can'. The emphasis is on kids taking responsibility for themselves. The message for young people is: you do have rights, there is something you can do, you don't have to take it . . . The pictures are footnoted with phone numbers and addresses for help or further information. The language is real talk, and the characters are recognisable people — parents, teachers, counsellors, youth workers."

. . . and comics

of harm-reduction drug education aimed at amphetamine users, whose popularity revealed the demand for such resources among professionals working with young drug users.³ Controversy over *Willy Whizz* following its coverage in local and national newspapers⁴ led to local politicians making accusations of obscenity and calling for an inquiry, as well as to the resignations of those involved from their health authority posts and from local authority drug committees.

The 'alternative comic' is perhaps the most suitable vehicle for harm-reduction cartoons such as *Willy Whizz*. Developed by the counter-culture of the 1960s, the alternative comic is defined by its distinctive artistic style, its subcultural sense of humour, 'street' language and content, by distribution from unusual outlets, and by its appeal to the young and/or rebellious. As such it has advantages as a medium of communication to drug users.

Britain's first AIDS prevention comic, aimed primarily at drug injectors, has recently been published by the Lifeline Project in Manchester (see report in news pages). *Smack in the Eye* is being distributed to drug users in the Greater Manchester area, providing useful information about safer sex and safer drug use. It has been criticised more for its 'explicit' language and depictions of sexual acts than for its drug-related content. However, *Willy Whizz* remains the only harm-reduction cartoon aimed at promoting safer drug use outside the context of AIDS prevention.

1. For example, the research commissioned by the Government found that nearly one in six of the 700 13-20 year-olds surveyed believed the totally unfounded proposition that heroin makes "you go blind", and almost two-thirds wrongly believed that heroin "always kills you in the end" (RBL, *Heroin Misuse Campaign Evaluation: Report of Findings*, 1986). Despite the evidence, several studies have reported that young people tend to believe alcohol and tobacco are less damaging than heroin or other illegal drugs. For instance, a survey of teenagers on social science courses in 1985 found that 56% said heroin was the greatest danger to society.

2. Jacob M. "Superman versus Nick O'Teen — a children's anti-smoking campaign." *Health Education Journal*: 1985, 44, p.15-18.

3. *Mersey Drugs Journal*: 1987, 1(2), p.11.

4. See, for instance, *The Sunday People*, 6 September 1987; *The Daily Post*, 7 September 1987.

5. Schwartz *et al.* "Popular music and drug lyrics: analysis of a scapegoat." In: US National Commission on Marijuana and Drug Abuse, *Drug Use in America: Problem in Perspective*, USGPO, 1973.

6. Burgess R. "Sex drugs and rock'n'roll." *Youth in Society*: June 1988, p.24-25.

7. Fraser A. "Wraps against AIDS." *Druglink*: 3(4), p.13.

8. Dorn N. *See You in Court*. ISDD, 1987.

9. *Streetwise*, 1987.

Pop music culture

Pop songs have a long history of drug-related themes, though there is little evidence to back the assertion that some pop stars' drugtaking has encouraged drug use among their fans.⁵

Could pop songs be used to communicate safer drug use information to youngsters engaged in experimental or recreational drug use? 'Just Say Some' — or 'Just Say Maybe' — lack the evangelical ring of 'Just Say No', but they do have a more humorous and relevant message for many determined drug users. If 'Just Say No', with its unrealistic message about how easy it is to refuse drug offers, was as effective as some claim, then there are no obvious reasons why harm-reduction messages could not be just as effectively communicated through pop songs.

One contemporary form of pop music with distinct advantages for harm-reduction education is the 'rap' — partly because it appeals to the younger end of the market, but more particularly because rap is a stylised song form in which the lyrics are one of the focal points. As Burgess concludes, "rock music changes with the times and its place in the socialisation of young people is ignored by professional drug workers at their cost."⁶

A related form of pop culture that needs to be explored is the use of humorous rhymes and catchy maxims as messages on promotional devices, including T-shirts, caps, posters, stickers and badges. Messages could include suitably modified versions of such harm-reduction advice as: 'Keep to the speed limit'; 'Only jerks share works'; 'Spread the word not the virus'; and 'Don't make being stoned hard work — have a day off'. Longer rhymes, eg, 'Be a tooter not a shooter — stick that powder up your hooter,' are more likely to be effective if used as part of a general harm-reduction programme offering more detailed information to back-up the shorter messages.

Drugs paraphernalia

Drugs paraphernalia includes all items and accessories connected to the sale and consumption of drugs. Like promotional devices, these can be used for harm-reduction messages, including where to obtain confidential help for drug problems. Indeed, what better way is there to ensure that relevant information reaches drug users than by wrapping their drugs in packaging carrying that information, or printing messages on the materials and equipment needed to take the drug?

Legal drug paraphernalia is already used for this purpose. For instance, packaging warns about the tar content of cigarettes, their health risks, and suggests how to reduce these risks (eg, leave a longer stub, take out of the mouth between puffs, don't inhale). Packaging for syringes distributed by some pharmacies and drug agencies now warns against sharing injection equipment.

Despite its potential, the use of illicit drug paraphernalia to promote safer drug use has hardly been attempted, partly because of the legal implications (see next column). Cannabis users could be reached through messages on king-size cigarette papers, 'roach cards' and packaging on pipes and bongs; although now definitely illegal, cocaine and amphetamine sniffers could have been reached through messages on pocket-size mirrors or 'snort kits' (packs containing a mirror, blade and 'snorting' tube).

The best — and perhaps only — example of this approach to date is DAIS's 'wrap-pad'.⁷ Dealers in powdered drugs (notably cocaine, heroin, and amphetamine) have traditionally packed the drug in envelopes formed from small sheets of paper. In Brighton, the Drug Advice and Information Service (DAIS) provides pads of paper squares to clients. Each is printed with messages about safer sex and safer drug use, help numbers, and dotted fold-lines. Some clients may decide to use these pads to package drugs they are selling, or may give the pads to their drug dealer for this purpose.

The major advantage of this approach, beyond its cost-effectiveness, is that information about safer drug use and drug services can now reach drug users who are not known to any official agencies, and who shun formal sources of education and advice.

The legal snags

Anyone intending to produce, distribute or use harm-reduction materials should be aware that they may be open to prosecution under at least four acts of parliament.

► Under the 1977 Criminal Law Act they may be accused of conspiring or inciting other people to contravene the Misuse of Drugs Act (or even of conspiring to incite other people) — for instance, by causing people exposed to the materials to possess or produce controlled drugs. However, prosecution of drug professionals under this law is very unlikely.

► Second, they may be charged under the Children and Young Persons (Harmful Publications) Act of 1955 if they allow children to be exposed to materials portraying activity that is criminal, violent or cruel, or repulsive or horrible (unless the focus is on the adverse consequences of drug use, rather than on portraying drug use itself).

► Third, the Drug Trafficking Offences Act of 1986 includes provisions relating to the supply of drug 'paraphernalia'. This law makes it an offence to supply (but not to possess) any article which may be used to take or prepare controlled drugs, excluding syringes. This means providing drug users with harm-reduction information in the form of 'wrap-pads' or 'message-mirrors' may be illegal, partly depending on whether it can be proved that the supplier believed they would be used to take or prepare drugs.

► Finally, and most conceivably, producers or distributors of harm-reduction materials may be charged under the Obscene Publications Act of 1959 if the materials are thought likely to corrupt or deprave a significant proportion of people exposed to them. Furthermore, it is the *consequences* of distributing the materials (eg, encouraging people to use drugs) which count, not the *intentions* of the distributors (eg, to reduce harm). Given that children are generally regarded as more easily corrupted than adults, producers and suppliers of harm-reduction materials aimed at under-16s are most vulnerable to prosecution.⁸

Perhaps, then, it is time for health professionals and drug workers involved in producing and implementing harm-reduction materials to raise their heads above the parapet, and to send newly produced drug education materials to the Director of Public Prosecutions to clarify these points of law. At least this would help reduce the anxieties of front-line workers who have to shoulder the personal and professional responsibilities of counselling and advising people determined to take drugs. □