Marketing the Anti-Drug Message: Media, Source and Message Credibility Interactions

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ABSTRACT

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Illicit drug management in Australia

Drug abuse and the need to control illegal substance usage is a high priority for the Australian Government and many governments around the world. The Australian government

has a three-pronged approach to illicit-drug management: supply reduction, demand reduction and harm minimisation. The first two are prohibition measures intended to prevent/reduce illicit-drug use. Supply reduction is the realm of the police and customs departments who seek to reduce drug supplies through detection and conviction of drug suppliers, and preventing drugs entering the community. Despite extensive efforts to prevent the supply of illicit drugs, prohibition has never successfully eradicated drug availability (Webster, 1998).

Demand reduction is the concerted effort of government to educate the public to reject drug use, and sanction those who use drugs through legal penalties (Commonwealth of Australia, 1994). Prohibitionists believe that strong legal penalties and police enforcement coupled with public education can achieve a reduction in demand for illicit drugs (Australian Parents for Drug Free Youth).

Harm reduction or harm minimisation is a response to the reality that despite the concerted efforts of numerous Governments to achieve supply and demand reduction in an attempt to prevent drug use, people will still obtain and use drugs. Harm minimisation is an approach that strives to reduce the potential harm created by using drugs (Single, 1996).

Social marketing, that is, the marketing of ideas rather than goods or services, has a significant role to play in achieving some of these objectives, particularly the objectives of demand reduction and harm minimisation.

In Australia, the legal status of illicit-drug use has followed the prohibition approach of the United States. The management of illicit-drug use however, shifted in Australia in 1985 with the introduction of the National Campaign against Drug Abuse (NCADA). This was Australia's first formal policy shift toward the concept of harm minimisation (Single, 1996). This shift signalled a new recognition by the Australian Government that young people who use drugs need information to reduce their individual risk (Single & Rohl, 1997).

Two leading academics, Professor Single, University of Toronto and Professor Rohl, Australian Institute of Police Management,

conducted an independent evaluation of the National Drug Strategy (NDS). Their final report highlighted the importance of harm minimisation in the work done by the NDS (Single & Rohl, 1997). Consequently, harm minimisation remained a cornerstone of the National Drug Strategic Framework 1998-99 to 2002-2003. This five-year plan for the strategic direction of National Drug Policy clearly states that harm minimisation is the philosophy underpinning its approach to illicit-drug use (Australian Department of Health and Ageing). However, the balance between prohibition and harm minimisation in individual anti-drug campaigns has varied according to the political agenda of the day (Lenton, Ferrante, & Loh, 1996).

Increasingly social marketing mass media campaigns worldwide are being used to attempt to influence and inform young people and parents about the dangers of illicit drug use (Beck, 1999; Fitzgerald, 1997; McCaffrey, 1998). In the United States a five-year program costing $1 billion dollars has been designed to discourage illicit drug use (Beck 1999). This program signalled a new level of commitment to social marketing in the United States. Previously, public service announcements had utilised only free-to-air time in the broadcast media. Inevitably this meant that previous anti-drug messages had been untargeted and marginalised (Beck, 1999; Fitzgerald, 1998).

In Australia, the Federal and State Governments have also included media campaign expenditures in their budgets. In 1996, the Health Department of Western Australia launched the 'Drug Aware' illicit-drug campaign. In 1998, the 'Drug Aware' marijuana campaign was re-launched with the following objectives:
· "To prevent or delay the onset of marijuana use among young people aged 16 to 20 years of age;
· To motivate regular, dependant marijuana-users to quit;
· To increase parental knowledge of illicit-drug related issues; and
· To encourage effective communication between parents and young people about drug use issues" (The Health Department of WA 1999, p. 14).
Subsequent campaigns to prevent marijuana use were undertaken in 1998/99 and again in 2000/2001. We decided to investigate young people's (18-24 years) responses to media campaigns that promote anti-marijuana messages, and

specifically asked them about the 1998/99 campaign messages and materials. The campaign had the objective of discouraging use in non-users (prohibition) as well as providing risk information for users (harm minimisation).

We chose to investigate anti-marijuana campaigns because it is the drug most commonly used by young people in our society (Australian Institute of Health and Welfare, 2000; Preboth, 2000). Using marijuana represents the most common form of illegal behaviour undertaken by young people, and in many cases the only illegal behaviour (Lenton et al., 1998). The Australian Institute of Health and Welfare 2000 statistics are worth noting;
· Forty-five percent of the total population over the age of 14 years had 'ever used' marijuana (up from 37% in 1995); and
· Seventy-three percent of 20-29 year olds had 'ever used' the drug, 78.3% of males and 66.9% of females.
With such wide usage in youth society, the messages sent to young people must be credible to those who have used the drug, as well as non-users.

Drug use level affects message processing

This study sought to investigate whether source and message credibility of anti-marijuana media campaigns varied according to the audience's level of marijuana use. Glassner and Loughlin's (1987) book on illicit-drug use by adolescents described a one-year in-depth ethnographic study of a community with mean demographics for the United States. This study provided insight into some of the non-user and user categories used in the current study. Glassner and Loughlin did not seek to investigate the impact of media campaign messages, but they did refer to the messages society sends to young people. Glassner & Loughlin found that non-users strongly believed the messages promoted by government campaigns and the general media about the dangers of illicit-drug use (Glassner & Loughlin, 1987). Anti-drug messages reinforced the beliefs of non-users. Users were more sceptical when it came to government messages about drugs (Glassner & Loughlin 1987).

Brandweek, a New York marketing publication, reported in April 1998 that it requested 'Mad Dogs and Englishmen', a New York Advertising Agency, to undertake research into anti-

drug media campaigns (Kouns & Danielson, 1998). The objective was "to see what kids have to say about using drugs, the ads that try to dissuade them from using, whether they do or do not indulge, and why" (Kouns & Danielson 1998, p. 1). The research used focus groups of children aged 8 - 16 years, recruited off the streets of New York. The top line findings of this research included that young people knew that drugs were bad for them, but felt that the messages they received about drugs overstated or exaggerated the danger (Kouns & Danielson 1998). This research reported that young people felt that marijuana was 'demonised' by these media messages, which led to reduced effectiveness and credibility in all anti-drug advertising.

Several other researchers in the United States (Brown, D'Emidio-Caston, & Pollard, 1997; Wright, 1998) have also raised concerns about the impact of "demonising" drug use. Quoting research conducted by Dr. Joel Brown of Berkeley University, Wright states that "research shows that kids who are taught that pot is as bad as heroin are more likely to experiment with heroin if they tried marijuana and experienced few consequences. Those kids suspect that if they were lied to about pot, then they were probably lied to about hard drugs as well" (Wright 1998, p. 2).

Other researchers have also highlighted concerns about the credibility of media messages that try to prevent drug use. Beck (1998) referred to the U.S. campaign "Just say NO" to drugs. "Once again, American youth appear to be serving … notice of a growing rejection of what many dismiss as 'Just Say No' propaganda. Perhaps the most alarming casualty of this approach has been the substantial loss in credibility inevitably fostered by such drug education. Particularly among target populations possessing considerable drug experience, reliance on disinformation should be regarded as contraindicated" (Beck 1998, p. 45).

A similar finding came from Australian researchers, Jones and Rossiter (2001) who concluded that marijuana use was related to a reduction in the believability of anti-marijuana messages.

The Western Australian government has placed significant focus on educating parents as part of their anti-illicit drug social marketing campaign strategy (Government of Western

Australia, 1995). In a paper that underpins the Western Australian Drug Aware policy, researchers in the United States applied the theoretical framework of source credibility to determine that parents and teachers were the most trusted and credible sources of drug information among a sample of 223 adolescents (Mayton, Nagel, & Parker, 1990). We question the reliability of this evidence as the methodology required school principals of 27 secondary schools to select "a representative cross-section [of students] from their class rosters" to participate in the study (Mayton et al., 1990). Given that the research was being conducted into the effectiveness of drug education, and funded by the US Department of Education, we feel that there is doubt whether school principals would provide a true cross-section of students, that is, including known users. Furthermore the research did not report any measurement of the respondents' experience with drug use. Without that information it is possible that this sample of students had no experience or had only experimented with drugs. In which case, it would be expected that they would be open and favourable to parents and teachers as sources of information.

Method

This study employed two forms of qualitative research. Eight focus groups were held, each with 4-8 participants, 18-24 years old, recruited by an independent market research company. All participants were also screened to ensure they had been resident in Western Australia for the past 5 years, and thus had likely been exposed to the same anti-drug campaigns. The focus group profiles were as follows:

Male, no personal marijuana use	Female, no personal marijuana use
Male, light marijuana use	Female, light marijuana use
Male, heavy marijuana use	Female, heavy marijuana use
Male, ex-marijuana use	Female, ex-marijuana use

Non-users were screened to ensure they had never used marijuana. Light use was defined as being users who have used marijuana weekly or less often, over a minimum of the last six months. This definition was designed to filter out experimenters. Heavy marijuana use was defined as consistent use of marijuana more than once a week, over at least the

past six months. In reality the level of use by heavy users that attended the groups was far higher than weekly, with most using several times a day. Ex-users were screened to ensure that they had used marijuana for a period of six months or more and since ceased all use.

Discussion of anti-marijuana campaigns began with unprompted recall of messages and discussion of marijuana use. Participants discussed the sources they trusted, and the sources they felt were not valid. Then the groups were shown and asked to comment on press advertisements (see Figures 1-4) and radio advertisements from the 1998/99 Drug Aware Marijuana campaign.

In-depth interviews were subsequently conducted with ten additional members of the target population to provide further insight into themes developing from the focus groups. All groups and interviews were recorded and then transcribed. Nud*ist (QSR N5) was used to analyse the data.

Results

Non-marijuana users
In line with Glassner & Loughlin (1987), we found traditional sources such as parents, school and the Government were highly credible to non-user males and females. However, non-users did not believe that media messages had influenced their decision to reject marijuana use. While some non-users enjoyed receiving negative messages about marijuana because it reinforced their personal values, generally non-users did not believe that they were at risk of using marijuana under any circumstances. They believed this position would not change if media campaigns advocating rejection of marijuana use ceased to exist.

Non-users held a number of beliefs about the reasons they had rejected marijuana use. Gender appeared to differentiate the experiences of non-users, but there was a consistent belief amongst all non-users that family upbringing was a significant influence on their decision-making. 'I don't need that, I thought I was like too good for it … I think that's your upbringing' (F, non-user).

Though non-users generally reported that their family upbringing had been influential on their decision not to use, males also discussed being influenced by their experiences: 'Most of my personal opinions are formed from seeing other people using it, I thought they were dickheads, and I thought I don't want to use it' (M, non-user). Males appeared to be more inclined than females to have first-hand knowledge of the effects of marijuana use through observation: 'I tend to agree ...the effects I saw it have on friends of mine and changes to their lifestyle, were definitely ... a large influence' (M, non-user).

Female non-users, on the other hand, appeared to have less personal experience with observing others. Instead, non-using females tended to report that they had no interest in trying marijuana: 'I am not interested in taking it' (F, non-user); 'I have never wanted to use it.' (F, non-user). The explanation for this lack of interest comes from associating with like-minded peers and perceptions that they are not the "type" to use drugs: 'Different circle of friends, and influences. Good goals, good families, ... then you don't tend to think about it too much. You know it is there, and you see its effects, but you don't actually think: Should I?' (F, non-user). For the female non-users particularly, the decision to reject marijuana use was an issue of self-image; drug use did not fit with their perceptions of themselves as 'good girls': 'I think the reason I didn't was that there was something in my head that said it was ... I didn't do it, because I didn't do bad things' (F, non-user); 'you know how you said you were too good ... I was like that' (F, non-user).

Non-users were sceptical about the value of social messages because they did not perceive that they were effective: 'People still take up smoking; they still haven't hit the nail on the head. Advertising doesn't seem to be the answer'. (F, non-user). Some non-users believed that the messages were ineffective because the Government used the media to target people who were already using: 'I think for people that are already using it, ... it is too late and they will say "oh yeah they will try anything to get us to stop using it" ... I think you have to get people before they become users, as opposed to afterwards'(M, non-user).

Marijuana users (overall)

Users viewed media campaign messages with an array of strategies that disassociated the message from their personal situation. One strategy was to reject messages on the basis that they were inaccurate. ... 'drug campaigns just say ..."you will die" if you do this ... people just brush it off and say they are sensationalising it all ... that's the worst case scenario'(M, heavy user).

The knowledge that media campaigns are undertaken by government departments was sufficient evidence for some users that anti-marijuana media messages could not be trusted: '...you can tell they are misleading, they are written by the West Australian Government' (M, light user). The conclusion appeared to be that government sources could not be trusted because they were biased toward a political agenda of prohibition: 'It is all very biased, very government; it is always the same rehashed information. If you want to go looking on the Internet you will find more balanced information' (F, light user). The extent of distrust shown toward the Government was evident from the following verbatim, which illustrates that some users believed the Government will misuse statistics to achieve their agenda: 'I view with a degree of apprehension any official government statistics and numbers that are released. I always look at the Government with a lot of suspicion anyway, because I think they adjust the numbers to suit their agenda' (F, light-user). In a similar vein, the Government was an untrustworthy source of research information: '...when they use statistics, they need to tell you where they did the research, did they do it properly, or did they just do it all shonky, if it has been done right, or is it just government propaganda' (F, light-user).

Light users
Another rationalisation was to reject messages on the basis that they were not personally salient: ' ... they don't even aim it really at us. They just aim it at the extremes, and kids. So you don't really make any connection with it, because that is not you' (F, light user). This was particularly evident in the light user groups: '... for heavier users that do sit on the couch and have lost all their friends ... maybe, it's good for them' (F, light user).

The light users generally did not discount the accuracy of the information in the media messages they were shown, but felt

these messages only related to heavy users. Light use was not perceived by this group to hold any real risks. The gateway theory risk, that being a light user will lead to heavier use and/or use of other illicit drugs, provoked some strong opposition: 'Those ads imply that if you smoke it that is what you end up like, and we are all sitting here as evidence that that is not what happens' (F, light-user).

Some users believed that the Government source lacked expertise because they were out of touch with the realities of marijuana use: 'I think there is a definite case of naivety in some of their ideas, and their perceptions of drugs. ... I would picture in my mind a lot of the people responsible for those ads would be pen pushers ... generally speaking, people in charge of that [are] people who have never experienced taking drugs or being addicted to something. Someone like that just doesn't have the same depth of understanding' (F, light-user). The perception that the source of these messages held no knowledge of the realities of youthful drug-use reduced credibility with users: 'If they asked real people what would happen, these ads would change drastically ...because they would get a different perspective of what marijuana use is...' (M, light user).

Heavy users
Heavy users were more inclined to discount the accuracy of the information. 'They are not believable once you have tried it' (M, heavy-user).

Users were inclined to reject sources that were perceived to exaggerate the risks: 'It [social marketing media campaigns] had no effect on me whatsoever... you know when you are doing it that it is bad but they are just reinforcing it, making it into an issue. They just exaggerate it to the point you just think it is stupid' (F, heavy user).

The perception that the messages were exaggerating the facts led to message and source rejection by some users: '... when they get really excited like that, they lose all credibility with anything else they say. You won't believe anything else they say if they say something that strong, which is obviously lies' (M, heavy user).

1998 Marijuana Campaign

Press advertisements used in the 1998 Marijuana Campaign by the Western Australian Health Department were shown to group members and respondents to gauge their response to the messages and sources. These advertisements were presented in a large poster format.

Three of the press advertisements contained the same written messages, with different headings and graphics. These three advertisements ran with the same messages printed in small print in the bottom left hand corner. The messages were:
· Marijuana is not a social drug. Friends and partners tend to lose interest in you if you're just veging out all the time. (Anti-social message/Social threat)
· Marijuana can impair your short-term memory, concentration, coordination, logical thinking and motivation. (Cognitive message/Physical threat)
· Marijuana smoke contains more tar and higher levels of cancer-causing chemicals than tobacco. (Link to Cancer and Tobacco/Physical threat).

The order of these messages was changed to match the theme of the advertisement. All three advertisements contained the following call to action: Pick up a brochure detailing the facts about marijuana. Call in at a Drug Aware community pharmacy or phone (ADIS) on (08) 9442 5000 or 1800 198 024. There were two images used to portray the anti-social message, one relating to the cognitive message and finally, an advertisement that appealed to regular marijuana users.

The anti-social message
The following discussion relates to the two advertisements that had graphics relating to the anti-social results of using marijuana.

Figures 1 & 2: Anti Social Message

Marijuana does amazing things for your social life.

After a while mull smokers only find time for mull smoking.

The message that smoking marijuana results in anti-social behaviour was popular among some non-users, particularly the females. The anti-social nature of marijuana smoking appeared to be more evident to non-users who were 'left behind' when groups go to smoke: 'A lot of people see it as a social drug, "oh yeah, I will just go around the corner with my friends and have a quick one mull", and when you listen to that, it's well, "hang on a second, where have all my friends gone?"'(F, non-user). For some non-users, the thought of going with the group was more fearful that being left behind: 'things like smoking marijuana, they take you out the back, it's almost like going into the haunted castle, and you think … maybe not' (F, non-user).

Some non-using males were able to stay in the group and simply not partake: 'I told them no and that's it. But most of the time it was just friends that were doing it and offering out of being friends. They didn't know whether you use marijuana or not, and it was just easy, well for me, it was just easy to say no thanks, don't use it.' (M, non-user). This ability to remain within the group but abstain from marijuana use was discussed by the males, but not female non-users. Some male non-users showed scepticism toward the imagery in the 'anti-social' advertisement because it was inconsistent with their

personal experience: '... he is singled out. I am sure there would be other people, because every time my friends smoke marijuana they are together' (M, non-user).

For users, there was a serious loss of credibility associated with the anti-social message. ' "Friends and partners will lose interest in you" - that is only if those friends or partners don't smoke. They are trying to alienate people, 'if you do this everyone is going to think this of you' and 'you're not going to have any friends' - everyone is going to abandon you. It is just not right!' (M, light-user). Similarly, '... if you have just got a group of friends ... say 4, 5 people, ... come over and just put some tunes on, and then you pull out a bong, that is sociable' (M, light-user). The credibility loss of this proposition eroded confidence in the source: '...but looking at this "marijuana is not a social drug" - ... I ... think - what would you know?' (M, light-user).

Users in this study saw marijuana smoking as a very social behaviour, something they do with their friends at parties, on weekends or when they have nothing else to do: 'I wonder when it says marijuana is NOT a social drug. Well for me, that is just entirely wrong, because it is only a social drug for me' (F, light-user). This message was unbelievable to ex-users as well: 'messages like you don't have a social life when you use drugs ... I had a social life' (M, ex-user).

A few believed this message was slightly credible, but not important. The heavy using females were most aware of the anti-social potential of marijuana: 'it happens, of course, like after a session if you have been out with your friends and stuff you want to go home and just sit on the couch and be boring. When I have a session, 90% of the time it's with people, I am seeing my friends, it is all what we all like to do … we see each other that way' (F, heavy-user).

Another perspective from the female heavy-users was that it was a person's right to be anti-social if they wanted to be: 'Yeah, but I don't think that really matters, if people do that. I don't see why it should be an issue. If people do it and that is what they want to do, just let them do it. It is not like hurting anyone, they are just hurting themselves, if they have no social life, who cares?' (F, heavy-user).

The male heavy-users saw no credibility in this message:
'Every afternoon after work, if I work that day, I ring up the
boys and I go for a smoke with them. So it is very social' (M,
heavy-user).

The cognitive loss message
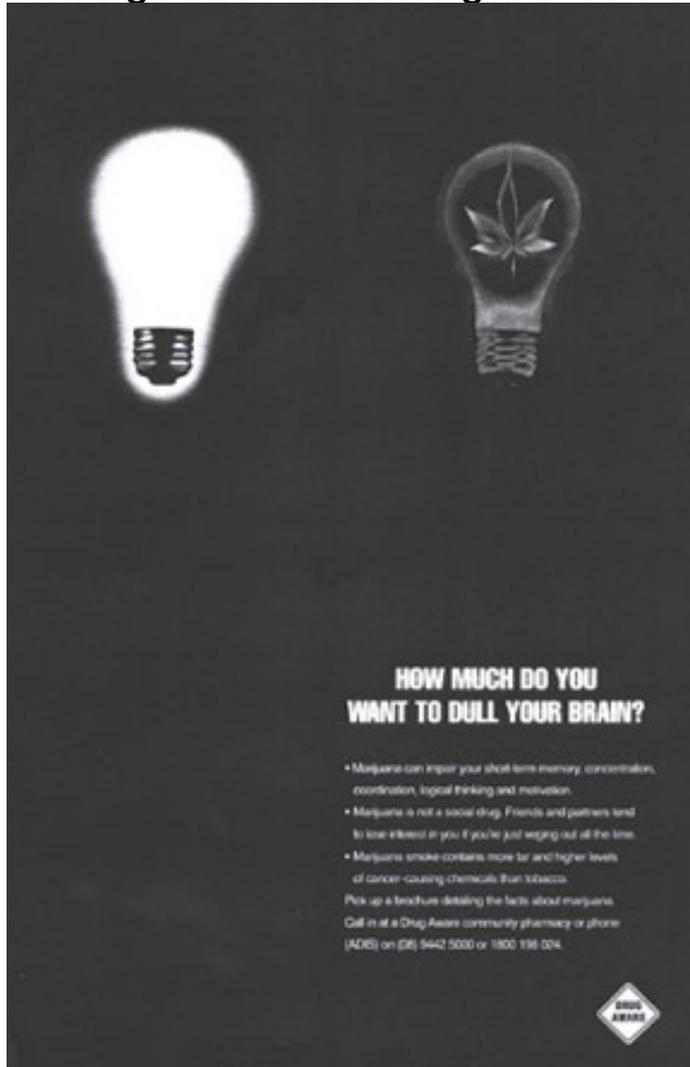
Figure 3: Cognitive Loss Message
The cognitive loss message contained images of a bright light
globe next to a dull one that contains a marijuana leaf. The
caption reads, "How much do you want to dull your brain?"

There was a wide variety of beliefs displayed in relation to the
cognitive impacts of marijuana use. This variety appeared
indicative of individual personal experience.

Some non-users were very concerned about the potential cognitive impacts of marijuana use: 'doing damage to your mental health. ... I think ...that has been my major deterrent. I never want to risk my mental health by taking something like that just as an experimentation'(F, non-user). The extent to which this message was credible to non-users appeared dependant on their personal knowledge of people who use: 'I wouldn't say it is an accurate message that all marijuana smokers are ... I mean I know a lot of people that smoke marijuana and I wouldn't have thought they were particularly challenged' (M, non-user).

Some users accepted the idea that marijuana use affects motivation: 'I think the motivation definitely goes down' (F, light-user); 'Makes you totally listless and unmotivated', (F, light-user,; though it was considered an individual issue, not something that affects everyone: 'I reckon that's bullshit [that] ...it makes you unmotivated... I can play a game of footy, have a bong, and play the same game of footy... It doesn't affect my motivation' (M, heavy-user). In a similar vein, some felt affronted by the message: 'it irritates me, because it is not true, again. If you want to sit around doing it all day you will, but if you don't, you don't have to' (M, light-user).

On the issue of cognitive ability, there was some acceptance of the message '... I am pretty dumb, I didn't used to be as dumb as I am ... it pisses me off. I was doing my TEE ... but I was still smoking mull all the time, and I failed my TEE' (F, heavy-user). 'I think it is has made me a bit dumber as well. And it is a bit frustrating at times ... I used to be smarter...' (F, heavy-user).

Some felt that the cognitive loss messages were an attempt to insult heavy-users: 'they are trying to pay out on us. It is trying to say like, you are all dumb bastards, but like it is not ... Like I just want to go and have another cone' (M, heavy-user).

Memory loss was one cognitive impact acknowledged as inevitable by most users. 'Your memory goes down. Even after I stopped I was mixing up words and stuff ... you mix words and join them together, and things like that' (M, ex-user); 'Short-term memory is a big one. My partner uses relatively

often, and his memory is shocking. I know that my memory is impaired, and my mid term memory is impaired from the time I was using, because I was a heavy user for years' (F, ex-user).

argued that marijuana had enhanced their coordination: 'I find that I actually drive just the same, if not better' (M, heavy-user).

Appeal to regular users
The fourth advertisement targets regular/long term marijuana users with a self-completion survey about the side effects of long term/regular marijuana use.

Figure 4: Appeal to Regular Marijuana Users

The bland format of this advertisement led some participants, particularly the non-users, to assume that it was of little value. However, some heavy-users (the target audience) regarded this advertisement quite positively.

This advertisement involved quite a lot of text that was not well received by the non-users: 'Too much to read' (F, non-user); 'I am not going to read that' (F, non-user). This was likely to be a result of the low salience this advertisement had for non-users: 'It looks like it is being directed toward a user, so I would answer no to all of them' (M, non-user).

Most of the light-users agreed with the non-users; they thought it was ineffective: 'Too many words ... Wouldn't catch your attention ... Very bland' (M, light-user).

Some heavy-users were more enthusiastic: 'whilst it is all scare factor, whoever wrote it - they know … they have been there' (F, heavy-user). The messages in this advertisement appeared to spark interest in many of the heavy-users: 'Interesting, it is fairly applicable to me. Yes I would read it if I saw it' (M, heavy-user).

At the same time, it had the undesired effect of being reassuring for some heavy-users whose personal use had not resulted in all of the symptoms listed. The potential for unintentional messages being received from this advertisement was illustrated by this comment from a heavy-using male: 'That ad actually made me feel better about my dope smoking because they repeat one of the questions, it is about memory, and I spotted it, so I thought, I must be fine, I deserve a few more cones' (M, heavy-user).

Risks associated with raising awareness

Some users felt that media campaign messages can be counter-productive by creating a level of curiosity in drug-use: 'the more they publicise it the more you want to do it' (M, light user). In a similar vein, there was recognition that the prohibitive approach can create more curiosity than cure: 'The "don't do it" message … you tell people "don't touch it, it is hot", they are still going to touch it to see how hot it is … I think you have to let people make their own mistakes, that is the only way they are going to learn. If you make too big a deal about anything they will always want to see what the big deal is' (M, ex-user).

Credible sources for users

Some users thought that medical practitioners would provide credible information: 'Basically the moment I hear the word marijuana and the effects from a medical person, that is when I sit up and take notice' (M, light user). 'Doctors are cool. Whatever you are on, you have to tell the doctor... he doesn't tell anyone... they have to have a professional opinion... that is why they are doctors. Doctors aren't allowed to say anything that you tell them ... it is like the priest isn't it' (M, heavy user). Some users also saw a practical basis for talking to doctors about their drug-use history: 'He can check out if you're healthy or not and tell you how it affects you' (F, light-user). The willingness of some users to hear messages from doctors could provide an opportunity for doctors to introduce discussion on illicit drug use, even when the purpose of the visit is unrelated: 'the doctor ... maybe I wouldn't go specifically to a doctor to ask, but next time I was there I might ask' (F, heavy user).

Alternative information channels

With regard to appropriate channels to use for drug-related messages, both users and non-users felt the Internet offered a private and confidential method for accessing the information they require: 'Internet, I think you would get both sides, if you went to ADIS (Alcohol and Drug Information Service) you would get all of the negative things that it does, whereas the Internet would also have all of the herbal benefits ...' (F, non-user).

The Internet is convenient, anonymous and has a broad range of information: '... the Internet is good, because you don't have to leave the house and you don't have to ask people' (F, light user). Users believed that they could assess the credibility of an Internet site, and medical credentials provided one method of establishing credibility: '... a special doctors' web site - obviously - you are not going to go to any old web site'; 'I have never actually actively sought out information, but I would probably look to the Internet, I would be looking ... for sites that look quite legitimate...' (F, light user).

Some users had looked for information relating to their personal experiences. One female looked for information regarding her father's use of marijuana for medical reasons:

'on the Internet, I have found things about health, how it works and stuff…. to see the side-effects, and also for medicinal reasons.'

It was also noted that, like the risk of messages raising awareness, the broad-based nature of the Internet offers users more than health related information. The Internet is also a source of practical 'how to' information: 'Depends on what sort of information, like if you want to know what it does, you ask your friends, if you want to know about growing it you go to the Internet.'

Limitations

This study utilised cross-sectional qualitative research methods, and thus does not provide generalisable statistical information, or reliable causal linkages. This study must be read with due consideration to the limitations of such a research methodology. Most of the participants were students with middle-class backgrounds. The sample was drawn from the suburbs of Perth, Western Australia. Thus, this study may not reflect the variations that could be evident in different socio-economic environments or geographical locations.

Discussion

The data from this study supports Glassner and Loughlin's (1987) research, which indicated that non-users accepted and believed anti-drug messages. It also supports the concept that once marijuana has been used, scepticism exists toward any source that does not have personal experience (Glassner & Loughlin, 1987). Furthermore, this data supports our earlier suggestion that the Western Australian Government's faith in Mayton, et al's (1990) research on source credibility, using a sample of students chosen by the school principals, may be misplaced. It may be that only non-users feel positively towards parents and teachers as a source of information about drugs.

Jones and Rossiter (2001) suggested that ex-users were likely to hold views that were more negative toward drug use than either users or non-users. This finding differs from the current study that found ex-users were not particularly negative to marijuana use per se; rather they felt that marijuana use was

no longer desirable for them. The difference between Jones and Rossiter's study and the current study may be explained by the way each study defined 'ex-users'. Jones and Rossiter did not provide a definition but it is possible their ex-users included experimenters. Our definition excluded experimenters as we felt that those who have used for a period of time, and ceased to use are likely to have different views to those who have tried marijuana once or twice and rejected it (experimenters). This view is supported by the findings of the European Monitoring Centre for Drugs and Drug Addiction (2000) report that found that ex-users had a plethora of reasons for ceasing use, but that ex-users did not hold negative attitudes towards the use of marijuana by their peers.

For users, all sources that were perceived to have an agenda were seen as untrustworthy. The inherent association between government sources and prohibition messages reduced credibility. Likewise, most parents and school programs were assumed to advocate prohibition, so they were not credible sources. However, the same cynicism applied to drug dealers or users who were perceived as overly enthusiastic - they were also dismissed as untrustworthy. For non-users there were no perceived benefits in the social marketing as it is currently undertaken.

Conclusions

To conclude, there was very little support from both users and non-users for media campaigns such as 1998/1999 'Drug Aware' Western Australian Department of Health campaign. Both users and non-users felt that they were not influenced by the campaigns, although they may be underestimating the influence of advertising, in line with people's assessment of marketing's influence on them generally. More importantly, segmenting the sample according to levels of marijuana-use provided insight into the way experience with marijuana appears to affect source and message credibility. In our sample, young non-users generally accepted the message and the source but felt that the mass media approach had little or no influence on their decision to reject marijuana use. Young users felt that the messages were either inaccurate or lacked personal salience. Generally, a message relating to the effect on cognitive ability could be seen as believable by users

provided it was not exaggerated, as this message was consistent with users' own experience. Government as a source for anti-drug campaigns was seen as unreliable by users.

We suggest that it is worthwhile to consider segmenting the market for anti-drug campaigns into non-users and users. For non-users the strategy would be similar to the current one. For users, however, the emphasis should be on harm minimisation. The messages should be less alarmist and more credible (eg cognitive impairment) and the source should be more believable.

Alternative sources with more credibility that were suggested by the respondents were medical Internet websites and medical practitioners; these were both considered sources of valid and accurate information, in a confidential environment. There was recognition from both users and non-users that the Internet offered a range of views, and varying levels of accuracy, but there was a perception that balanced information can be found there, particularly from medically based web-sites. Websites can also direct young people to services that are available to assist them when and if problems occur.

Social marketers could use an 'upstream' approach by targeting general practitioners with the suggestion that it would be helpful for them to interact pro-actively with young people about illicit drug use. Education and resourcing of medical practitioners could provide an essential link between young people and important medical information. Social marketing practitioners could consider using a well-known and admired medical source, such as Professor Fiona Stanley, Australian of the Year 2003, as a spokesperson in anti-drug campaigns.

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