## LAW REFORM, DRUGS AND CRIME PREVENTION COMMITTEE

## Inquiry into supply and use of methamphetamines, particularly 'ice', in Victoria

# Melbourne - 16 June 2014

## Members

Mr B. Carroll Mr J. Scheffer Mr T. McCurdy Mr D. Southwick Mr S. Ramsay

Chair: Mr S. Ramsay Deputy Chair: Mr J. Scheffer

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Executive Officer: Ms S. Cook Legal Research Officer: Mr P. Johnston

## Witnesses

Mr D. Appel, Chief Executive Officer, Lifelounge Group.

The CHAIR — Mr Appel, welcome to the public hearing of the joint parliamentary Law Reform, Drugs and Crime Prevention Committee. Thank you for your time this afternoon. As you know, this committee is conducting an inquiry into the supply and use of methamphetamines in Victoria. I thank Mr Southwick, who suggested you would be able to provide some evidence to the hearing in relation to the work you are doing as CEO of Lifelounge Group. Thank you for your time this afternoon.

There are some conditions under which you will be providing evidence to the committee, and if you will just bear with me, I will read the conditions under which you will do that. All evidence taken at this hearing is protected by parliamentary privilege as provided by the Constitution Act 1975 and further subject to the provisions of the Parliamentary Committees Act 2003, the Defamation Act 2005 and, where applicable, the provisions of reciprocal legislation in other Australian states and territories.

It is important that you note that any comments you make outside the hearing, including effective repetition of what you said in evidence, may not be afforded such privilege. Have you received and read the guide for witnesses presenting evidence to parliamentary committees?

Mr APPEL — I have, yes.

The CHAIR — Thank you. It is also important to note that any action which seeks to impede or hinder a witness or threaten a witness in the evidence they would give or have given may constitute and be punishable as contempt of Parliament. We are recording the evidence and will provide a proof version of the Hansard transcript at the earliest opportunity so you can correct it as appropriate. We invite you to make a verbal submission, and obviously the committee would like to ask questions of you once you have finished that.

#### Overheads shown.

Mr APPEL — Thank you, Chair, and thank you for having me here today. This is a pretty serious and growing issue, and it is great to see that a committee has been formed to at least address it and take some steps in the right direction. As a starting point, my expertise, and certainly what I bring to the table here today, is very much around marketing and communications. I established a business called Lifelounge in 1999, and our focus is very much specialising in connecting brands and government agencies with the youth and young adult audience. What we have grown to understand over our years of working with this audience is how they are effectively always on and always connected and very much in charge of influencing the mainstream.

How we go about establishing our speciality within the market is through three core areas of our business. We have what we call 'community', and within community we have a number of websites that connect with the youth and young adult audience on a daily basis. They connect with them on lifestyle interests around music, sport, travel, fashion, entertainment, photography, art, design — all of the cultural aspects of what makes young people tick.

We connect with over half a million young Australians every month across our network, and we are then in a position where we can, on a quarterly basis, extract data or insights from this audience, which helps us shape a research product that we have called the Lifelounge Sweeney Report. It is a product in partnership with Sweeney. It is a quarterly report that details all of the values, attitudes, trends and behaviours around what is in particular the 16 to 30-year old market within Australia, and it is weighted geographically as well so that we can understand specifically how Victorians differ to other states and territories around the country.

We then have the third aspect of our business which we call 'ideas', which is effectively a creative agency. That agency is registered with the Department of Premier and Cabinet on the marketing services register, and as such we have put a number of social marketing campaigns together for various government agencies over what is now nine years. I know it is nine years because we first got on board when my son was born. I was actually putting a submission together whilst we were still in hospital, so that is how I know it is nine years.

With the knowledge we have around the research that we generate and the campaigns we have built, I was fortunate enough to cross paths with David, and subsequently I have had a chat with Sandy. A few questions were sent my way, some of which I feel quite confident in answering, others which probably do not necessarily tap into my area of expertise, but I will run through them. I have some case study examples that I think might be of interest to the committee, which we can then further unpack and discuss.

One of the first questions was very much around the specifics of the TAC and road trauma campaigns and drink driving. We have the TAC as one of our clients. We have been working with the TAC for the better part of eight years. What we focus more around, though, is their youth risk-taking programs, and I will come to them as some of the other questions further relate to them. What I will say just in terms of the differences between what we are dealing with here with the methamphetamines and ice issue and the TAC and road trauma is legal versus illegal. When you run a red light you are conscious of running a red light and you know that you have done the right or the wrong thing. When you drive without a seatbelt on or decide to drink and then drive, they are all conscious decisions, and whilst they may not be legal by the letter of the law you are in a position where are you making those decisions.

When it comes to my understanding of methamphetamines and the use of ice, I suspect you are very much conscious at the time of consuming it, but the behaviour that follows due to the chemical reactions that take place in the brain really put you in a position where you are not necessarily in control and you are not necessarily as conscious as you should be about the decisions that you are making. When you are dealing with this sort of issue it goes far beyond behavioural acts and it very much comes into psychological acts and the psyche of the brain and how it works and the nature of what sort of chemical conduction ice actually represents. That sees you in a very different state of mind than you are when you are driving a vehicle or at least in a different state of consciousness than when you are deciding whether you should run that red light, whether you should drive with a seatbelt or whether you should have another drink before you drive. The question I was asked was very much around the TAC and road trauma and not necessarily to the extent that we do that sort of work, but I still think there are some interesting concepts to take on the legalities of a legal action versus an illegal action.

Moving on to the next question, which was more around the effectiveness of mass media campaigns in the area of drug education and how useful scare campaigns are, being in the youth market I can say generally that young people tend to find themselves quite invincible and they believe that 'this won't happen to me'. I am making specific reference to scare tactics here. What we find is that if young people are being spoken down to and they are being told, 'Don't to this, don't do that, look at the effects of this', and really rattling the cage around shock tactics and scare tactics, they will rebel against that just because of the nature of the composition.

Therefore these scare tactic campaigns tend to increase anxiety among the broader community, including parents, and they are the ones who feel the brunt of these particular campaigns. Then you are dealing with a segment, in parents, that feel compelled to tell their kids, and so the kids are being told through scare tactics in mass media campaigns and then their parents, 'Don't, don't! No, no!'. Let us face it, kids' brains are not fully formed until the age of 25, so they are not in a position where they are making very rational decisions. When they are being told 'No', their natural reaction is going to be 'Yes'.

The issue we have with young people is very much around how we connect relevantly with them as opposed to how we scare them, because they are not easily scared. They have not had enough experience in life to understand right from wrong or, 'How is this really going to affect me? Because I'm fighting fit, I'm feeling good, I'm confident'. What they are really trying to do at that younger age — the 16 to 24-year-old age — is very much to define themselves as though they are prepared to take risks without thinking about the flip side of it. Their mindset is very much in a trial mode; they are not in a fully consciously evolved mental state where they are prepared to make a rational decision. That puts them in a very challenging position when it comes to issues they are confronted with in all circumstances of their lives.

We deal with it on a brand side of things. Brands like to put things in front of young adults to trial, trial, trial, because we know they are not going to become brand loyalists until their brains are fully formed and they have had enough time with independent experiences to be able to make up their own minds. The younger you are, the more you look to your peer network to define who you are as an individual. That is a very challenging position to be in as well, because if your peers do not think you are cool or you are doing the right thing, you can be easily cast out of your social network, and for a young person that is almost more scary than trialling something or doing the right or the wrong thing.

**Mr SOUTHWICK** — How do you validate that against, say, the Quit campaign and other smoking campaigns that have used imagery on cigarettes and clear graphic ads that over the years have seen a huge reduction in youth consumption of tobacco?

Mr APPEL — That is more of a health and image thing. Young people are very health conscious so they are very much into their image. We dub them healthy hedonists. They will go out at the weekend, they will push the limits, they will party and they will have fun, and then on Monday morning they will exchange the cocktail for a juice, they will exchange the nightclub for the gym and they will get back into a rhythm of looking after themselves — this is generally speaking. Then at the weekend they will let their hair down a little bit again, and they will get back into that health mode. Image is everything for them.

I saw some conflicting research recently about the whole tobacco advertising issue where, I think, Nielsen was reporting one thing and the tobacco companies were reporting another thing. What I feel, and this is anecdotal by the way, is that they have pushed the graphic messages so far that it would not surprise me if tobacco sales did not start to increase again. Because if I am a smoker and I have been smoking for a number of years and I see a foot that does not look like mine on a cigarette packet, then that pushes me further away from believing that this is actually something that is going to happen to me, and therefore I will keep doing it.

I think there was a time when the messaging was relevant: it may cause harm if you are pregnant or whatever. The real-life situation references were taking place that made people think, 'Wow, I am a female who is going to get pregnant or I am pregnant. I do not want to harm my baby'. I think it comes down to relevant messaging and not pushing the scare tactic too far to the point where it becomes out of reach and it does not feel like: 'It could happen to me'. I think that is probably my perspective on the issue of tobacco.

I am also very aware of the campaign that took place in 2007, the federal campaign, and I suppose the tactics that were used there were very hard hitting and they were also in the vein of scare tactics. I think it was probably an interesting way to introduce it, because it did bring it from zero to hero pretty quickly in terms of the size of the issue. But again in terms of the disconnect, 'Is this something that could happen to me?', I do not think it would have resonated with everybody. I am not necessarily sure it would have stopped the trial, and clearly it has not, because the issue has become a much bigger one since 2007. What it did do was increase the awareness that there is this drug on the market and this drug on the market is pretty extreme, with the bugs under the arms and the scratching and all those sorts of things. I think it was one way of bringing a campaign like that into the market, but I think the challenge that has taken place since 2007 is that there has not been any continuity. There was one campaign and then there has kind of been nothing really consistently in the market since then. If you look at the TAC, at tobacco advertising to a certain extent and certainly at drinking responsibly and things like that, there has been consistent messaging in the market year on year, which I think helps raise awareness, which is the first hurdle, and then changes behaviour, which is the second hurdle.

To that, we did actually do a campaign in 2007 as well. The Lifelounge agency was responsible for this one. This campaign was very much an awareness campaign because there was a big misconception in the marketplace around the purity and cleanliness of the drug ice, purely by the name and also by the sight of the substance when in actual fact things like paint thinner, battery acid and fertiliser are all ingredients of this and to think that that is something that you would put into your body by choice goes very much against what the name of the actual product suggests.

This was a campaign we developed to help educate the market around the ingredients within ice. The way we actually delivered it to market was very much around the notion that the ingredients are not pure and clean but the ingredients are very much filthy and dirty. With 'Ice: It's a dirty drug', the mediums we used and the visual communications with this outdoor site in a prominent area within St Kilda — over an eight-week period the vines really took over the billboard and on the other side of that it said, 'Fertiliser: one of the ingredients of ice' and 'Ice: It's a dirty drug' — really started to bring that notion to market. The challenge with all of this in terms of effective advertising is that you can do one campaign in the market, but unless it is followed up the ability to really get that cut-through right into the mindset of people and then put the power of decision making into their capable hands becomes somewhat disconnected.

The CHAIR — We will tease out a lot of this. Obviously this is of significant interest to us because a lot of the evidence we have collected is about education and messaging. The question I want to ask is about it being almost an oxymoron. You have talked about ice, which provides a picture or a vision of clean, sharp and fresh, and then you have talked about a dirty drug in almost the same message. Is ice the common word used through that demographic? If you use meth, you do not get an oxymoron, but if you use ice, you do. I agree with everything you said around the ingredients. How far do you push the dirty chemicals going into bodies that are quite attuned, as you said, to health and wellbeing? That again is another oxymoron, almost. Would you care to comment on that? When you talk about a dirty drug and ice, to me that is incompatible.

Mr APPEL — That is the point: young people would look at one consistent message and just see it as white noise, but if you have a double entendre — something that has a double meaning — it actually makes them stop and think about it for a second. That is what we are looking to do here: to actively disrupt the mindset so that they can pause in their busy lives — with hundreds of advertising messages coming to them every day, from the minute they wake up in the morning to the minute they go to sleep at night — and be challenged by something that it is short, sharp and single-minded in terms of hitting them not with multiple messages but with a message that makes them think about and challenges what they believe about something versus what something actually is. It gives them the answer right then and there so that they do not have to discover anything more than what we have positioned the message to deliver. It was delivered that way on purpose — it was a conscious decision by us as an organisation — and they are not necessarily referring to it as meth. The research was showing that they were actually calling it ice. I think in New Zealand they called it P for a little while, and ice has been the general word that people have picked up and dubbed this particular drug.

**Mr SOUTHWICK** — Probably intentionally, too, because of the clean nature of the word.

**Mr APPEL** — Absolutely. Everybody looks to justify and rationalise and feel good about whatever it is they are doing even if they know it is not a good thing, so if you can put a name to it that does not make you feel dirty doing it, then that is where we start to get some cut-through.

Mr CARROLL — We have also received some evidence that because the word ice has sort of dirtied the drug up a bit there is a cohort of drug takers who will now refer to it as a shard. They are actually quite nimble. It will not be referred to as ice; it is the shard or something else, to get away with that sort of connotation.

Mr APPEL — Yes, and I think it will continually evolve. I do not think anything stays with things once. You are hearing terms all the time like ecstasy and then MDMA and then Molly. Terms and terminologies continually evolve like brands evolve, so remaining on the pulse people want to be referring to things differently to gain access to wider markets and to be able to reinvent themselves so that if people have come off it they can come on it as something different. A classic example is in America where with ecstasy taking at dance parties and big raves people were dying and the government came down really hard on them. It was all around: ecstasy and dance and trance parties. Because there is such big money in it, the industry there reinvented itself as EDM, electronic dance music. That was another way to just reposition the same industry in a different light so that people could feel okay about going there and engaging with it again.

Mr SOUTHWICK — As a marketer dealing with other marketers that are really trying to push this product out and, if they are being as nimble as Ben was saying a minute ago, interchanging names, how do we tackle something if we have a huge campaign and effort to devalue the word 'ice' and something else just pops up? Where is the strategy that actually sits across the board from here and ensures that we are making sure the whole of the methamphetamine area is seen as bad?

Mr APPEL — It is a great question. I do not think there is a simple answer to it, but there is a strategic answer to it. The strategic answer is that we are dealing with methamphetamines, as your committee reference would suggest, and therefore we need to be consistently in the marketplace, because at the moment ice is effectively reaching mainstream. It is in the clubs; it is everywhere. When we did this campaign in 2007 it was emerging. What we need to do is have a strategy that is consistently in the market dealing with the issue of methamphetamines, and when ice has reached that mass market we have to be out there with a mass market message. With shard coming into the equation now, we need to have another campaign that is very much targeted at the market where that is.

You can segment the market. We would look at a pyramid-type diagram. At the pointy end, that is where the issue really needs to be cut off because that is where the supply is coming from. Then as it starts to get more commercially and more widely distributed, that is when the names and everything start to change. At the moment ice is probably, as I said, approaching mass mainstream. We need to do some research into where the next level is being reinvented by terminology, and we need to make sure we have a task force and a market there campaigning against that.

Mr CARROLL — Are you able, Dion, to talk us through these images? The first one is on a bin — 'Ice. It's a dirty drug'. Then you have 'Fertiliser: one of the ingredients ...'. Then you have 'Ice. It's a dirty drug'. They are very plain. I know it is sometimes the context, but is there any market testing that shows that that messaging has worked?

Mr APPEL — Again, Ben, this was a campaign that took place in 2007, and the recall on it is pretty high even to this day. Recently we were briefed by the Department of Health, which is about to put a campaign in to market. We are on the pitch list for that at the moment. This campaign was spoken about then, and the acknowledgement of this campaign still resonates today, seven years later.

The reason why we went with this particular look and the channels we chose was very much around tackling that issue of purity. We purposely went with a white background and bold text, and we purposely chose bins and bill posters, which is where young people tend to go — not the bins, but the bill posters — for their information. Usually when you do these campaigns the bill posters are refreshed during the campaign period. We said no to that. We wanted them to curl, and we wanted them to get dirty. We chose bins because bins are filthy, bins are dirty — that is what we wanted. When we did sponsorship of music festivals we actually went in there and said, 'We want to sponsor these festivals', and they said, 'You can have signage here, here and here'. We said, 'We want bins, we want toilets, we want the filthiest places'. It was all about tapping into the psyche and letting the campaign become filthy in its own right via the channels in which we chose to place it and the colours that we chose that would easily get quite dirty over time.

Moving on from this campaign, another question was around the Montana Meth Project, which has received a lot of publicity — and rightfully so. They did a lot of research in their local market in relation to this particular campaign, and they had a lot of support that the shock tactics and the like would actually resonate quite well with the community. If we have to look at their community versus ours, there are some differences. I think we need to take that into account when we are putting a campaign like that up on a pedestal. At the same time, I have seen all of the clips in relation to that project, and if you look at where it started to where it ended, it sort of started to get into the more emotional side of things as opposed to the hard-hitting scare tactic side of things. So it did evolve once the scare tactics came out, and they could see how effective or ineffective it was being. It did not get more shocking in its tactics. It actually got less shocking in its tactics, and it became a lot more emotional and situational in terms of how it was connecting with its audiences. It is a good campaign, and it is something to be aware of.

It is something we speak about a lot in the agency, certainly with the work we are doing currently. It has evolved to a place where it would be resonating now with a lot more of the mass market, and it has done that for a couple of reasons. It has done that because it has positioned itself as a project as opposed to a campaign. There is a very different subtlety in those words. A campaign feels a bit more one-off, and a project feels ongoing. A project is something you can add to and build on, and it can actually become something quite ownable. People can feel like they contribute to a project. I think their terminology there is bang on. I think they have done a great job with regard to that, and they are in that notion of 'This is not a one-off — here today, gone tomorrow — campaign; this is an ongoing issue that we need to be able to tackle'. Therefore there is some continuity with regard to that particular campaign or project.

Mr SOUTHWICK — Just before you move off that, in relation to the Montana Meth Project, it now appears they were using youth to empower youth to deliver the message by street art and all of that sort of thing. Do you have examples of where that works really well? Because it is actually empowering youth in the campaign as opposed to being communication in that one-way direction.

**Mr APPEL** — I am going to give an example, David, in two questions time that relates to a peer-to-peer program, which I think is where you are going there — that is, having stuff created for youth by youth, effectively. I will go to that in a minute.

#### Mr SOUTHWICK — Okay.

Mr APPEL — There was another question asked around advertising campaigns that aim to prevent, reduce or alleviate the effects of drugs and drug abusers who have already commenced some form of drug abuse. I think the focus on awareness and education building for those at most risk is very important. That is a pertinent element in how we tackle these problems, because you have the supply issues, which is an enforcement issue, but then you also have how it relates to people who are going to be confronted with it.

Education is a very important component of tackling this issue on an ongoing basis, but it needs to be very targeted and it needs to be very relevant. I am not sure if you have come across this campaign, but it is a campaign that was put into market earlier this year by DrinkWise. This is work that was not done by us, but I think it is a good example of how young people could relate to a campaign because it was delivered in their language and in their environment. This taps a little bit into what you were saying, David. Essentially drinking is not illegal, but the issue of binge drinking and educating young people about how to drink responsibly is very much something the community needs to help with from an educational perspective. Has anybody seen this campaign?

#### Mr SOUTHWICK — No.

Mr APPEL — It is worthwhile having a look at it. What they did was that they understood there is a lot of binge drinking happening amongst young people, and that is causing issues — health issues and other issues. Do not be hard on yourselves about the fact that you have not seen this campaign; that is a good thing, because it was a very targeted campaign. It was targeted at 18 to 24-year-olds to help them understand the ways in which you can drink responsibly. We are not going to tell you not to drink, because that would be a challenge that would be very hard to overcome, but what we can do is educate you about how to drink correctly.

A fair bit of research went into creating a figurehead that males and females would be able to relate to. Here you see this James Bond or *Mad Men*-style campaign that has the lead character being this gentleman up at the top of this slide. What he did was he spoke in a very eloquent and a very sophisticated way but in a way that is very relatable to young people. He asked, 'Do you want to be the drunk on a chair in a bar who ends up falling off and looking like a complete dick, or do you want to be the cool guy who does the right thing, is in control of himself and ends up being the popular one?'. There were all of these situations — and there were a number of episodes, which would be worth watching — where effectively there is this guy educating you about the right ways to drink responsibly, because the flip side of that is you being shown up as somebody you probably do not want to look like.

That campaign was very effective. It was only delivered in the online environment. It was heavily pushed through social media as well, and it was extremely targeted. I assume there are no 18 to 24-year-olds in this room, which is why you have not seen it, because all the advertising for this was pushed specifically at that market. You will understand that the language used in it is not something you could put on television, but that is what resonates with young people. At the end of the day they are not mass consumers of television. So this is the right environment. Results from the 'How to Drink Properly' campaign found that about 80 per cent of 18 to 24-year-olds who saw the campaign thought about the benefits of alcohol moderation. The language used and the way in which it was depicted using animation and not real people, but using real situations, coupled with the channels that it was delivered through gave a number of ticks in terms of being able to deliver something relevantly for young people.

**Mr CARROLL** — I noticed, Dion, that it is all males.

**Mr APPEL** — There were some females. There were a number of episodes, Ben. If you jump onto YouTube, you will see them one after the other.

**The CHAIR** — Was that the preferred medium?

**Mr APPEL** — Yes, YouTube was. I would have to get the exact channels; I do not know them off the top of my head. I viewed them on YouTube, but I am sure they used other mediums as well to direct people through to viewing the content. There was another question asked about — —

**Mr SCHEFFER** — Just before you go to that, how was it evaluated? Did it have an effect?

**Mr APPEL** — Yes. I have some research results here. I have a whole article that talks about the results from this campaign. If you would like me to circulate that, I could do that separately.

Mr SCHEFFER — Yes.

Mr APPEL — There were a number of ways that it was evaluated. I do not know all of them off the top of my head. I have just put one down there, which was more around recall and how people would use something like this. It is a high number — 80 per cent — considering how they might change their behaviour.

The next question asked was about separate forms of advertising for different target audiences. That would be a possibility. You do have multiple target markets and you should potentially consider doing that, but the challenge is having multiple messages in the market which then become quite hit and miss. In an ideal scenario you would have one core message that would be consistently delivered in a very targeted way to different audiences. That would be my take on something like that.

We recently did a campaign for VicRoads. You will remember that towards the end of last year fines and demerit points went up quite considerably in Victoria. You have young people, who have basically been born with a mobile phone in their hand and do not know how to disconnect from it, getting their licences. You have a market where we had to deliver this 'Higher fines, more demerits', which was our line that we came up with for it, to young drivers but also to the wider market as well. It was the same message, but for young people we created an idea around 'Sneaky face'. Sneaky face is the action that people tend to take without knowing it when they are driving. They look at the road and at the phone at the same time, creating quite a cheeky, sneaky-looking face. That was how we introduced young people to the campaign. For the older market it was simply all about there now being a higher fine and more demerit points — \$433 and 4 demerit points. You do not need to know anything more than just 'Do not use your phone in the car'. The idea around this was just to demonstrate that one core message delivered two different ways can be done to achieve effective cut-through to multiple target audiences.

The next question I was asked was around some examples of useful and effective advertising programs that have been developed in Victoria and other states and territories in regard to health and welfare issues more generally. One thing we need to understand is awareness versus behaviour changes, because they are two very different campaign objectives. One thing we are very proud of

is a program that we have been running for eight years now with the TAC called 'Vanessa'. The aim of this was to create a peer-to-peer program to communicate issues around road safety in the environment of young people. We were a part of a big research project that understood that young people do not necessarily think road trauma is going to happen to them. When they see certain advertising, it is like, 'It's not going to happen to me'. But they are very much in the high-risk category, being inexperienced on the roads, so we needed to come up with a way in which we could connect with them relevantly in their environment. For this program we did some research and found that young people value their mate's life more than they value their own. 'It's not going to happen to me', so we cannot get through to them on that level. If we ask, 'What happens if you are driving and something happens to your mate', the penny drops. You can hear the silence for a mile. It is like, 'That cannot happen'.

This program is all about looking after and helping your mates in certain situations and getting that social responsibility and care message to young people. We have vehicles that go to universities, TAFEs, sporting events and music festivals — anywhere there is an environment where young people congregate and in some instances would be exposed to drinking and partying. We are not there as an authority; we are there as a mate who is there to help look after you. We have young, trained professionals in the 18 to 24-year-old age bracket who we have educated around road safety messages and also situation analysis of what might take place within these environments. We connect the messages and we are able to deliver road safety messages in their environment. It is a highly effective campaign for that reason alone. Young people are listening to and understanding road safety messages through this program that is delivered by their peers in their environment. We are very proud of how this program has evolved over the years and the number of young people that it connects with on an annual basis.

In terms of using real people versus actors in campaigns and as images, I am sure there is a debate around this. Real people play an important role in getting the authenticity and the message correct. I was fortunate enough to attend a hearing at the City of Port Phillip that we came down to listen to and heard Jimmy give a testimony around his experience of dealing with ice. When we recently submitted for the Department of Health we spoke to a couple of other reformed addicts as well. I think their messages and the scenarios and situations they have found themselves in and how quickly it escalates from 'I feel like I'm in control' to 'I am totally out of control' are very important. Being able to depict them as realistically as possible is what is going to resonate with people. Putting these guys in front of a camera or as the image on the medium will probably miss the mark a little bit. Actors are skilled in being able to deliver a message in a very believable way, so I would go with professionals, but I would use real people's experiences to be able to bring them to life in a believable way.

What preventative advertising, education messages or programs should be developed to reduce the uptake of methamphetamine and other drug use? There are probably going to be many of these. Unfortunately there is no silver bullet here either. There is no one way of fixing all this, but I think we need to be in the market consistently and have a strategy that tackles all aspects of the challenge, certainly from a communications perspective. I understand there is an education and enforcement component to all of this as well. But I think there has been a lot of media in the marketplace at the moment, and more and more is there.

There is that weighting of the benefits of what this is — there it is up on the screen. The positives or the pleasures and pains are what this recent article spoke to. You have to report on both, but I think that clearly the patterns of abuse and the pain element are really heroed here as opposed to the pleasurable elements. I think we really need to talk to the effects that something like this — use of methamphetamines — can actually deliver. I think that is probably a good example of how it should be reflected if it is going to be reflected in terms of the good and the bad. That is probably most of what I was asked to talk about. Are there any other things that are glaring?

**The CHAIR** — Thanks, Dion. I might throw it open to the committee to cover off any question that you have not. I appreciate that you have responded to the questions that Sandy provided to you; thank you for that. I invite the committee to ask any questions.

Mr McCURDY — You spoke about one core message. We were talking about the scare campaigns scaring the parents more so and causing the anxiety there. Can you have a message that gets through to above 35s and below 12-year-olds — with a scare campaign, but it is a different campaign altogether — in the user group, or is that not effective at all?

Mr APPEL — I think in an ideal world you would have one core insight that then gets channelled to different markets, and you obviously have to speak different languages as you address it. The sneaky face is how young people understood the VicRoads thing, whereas with the older people it is very much directed to higher fines, more demerits. The idea here is that there is a legislative change. How do we communicate that to young people in an engaging way? How do we communicate it to a mature audience in a very direct way? The answer is: as long as we are able to craft the right insight that leads to a single-minded proposition, how that proposition is communicated can happen in different ways.

The education piece is a very interesting one, isn't it? How young do you start educating people about drug issues, let alone just methamphetamines? I suppose it is going to be different for everyone. I have a nine-year-old, who is my oldest. I do not think that he is coming into this, but if he had a sibling who was 15 or 16, which was quite possible, then nine is not too young. I think it is an interesting challenge: where do you start educating?

#### **The CHAIR** — Where do you?

Mr APPEL — It is a fair question. I think it has to be upper primary; that is my honest opinion. I do not think you can wait until secondary school to start educating. I remember that when I was going to school — which was a while back now — the worst thing that probably happened was marijuana, and I was probably 16-plus when I heard about it for the first time. But now with everything — from sexual issues through to drug and consumption issues — they are getting younger and younger, so I would think that grade 4 or grade 5 is not too young. They are pretty mature these days, especially with the access to technology and what they are exposed to. It is scary.

**The CHAIR** — On behalf of the committee I thank you very much for your time this afternoon; we appreciate it. This is an important issue — not indifferent, I guess, to some social problems associated, like obesity and diabetes, where the public knows that eating McDonald's on a regular basis is not healthy but they continue to do so regardless of the messaging. I hope that is not the case with drugs like meth. I am still a little unclear how best to message. I know you have talked about consistent messaging and target messaging, and what we have heard has indicated that the shock tactic like the grim reaper has not been an overly successful program, so there is some middle ground, perhaps.

Mr SOUTHWICK — I want to clarify something before you leave, because I think this is really important. We did hear earlier evidence about the cautiousness in terms of going for the straight-off shock tactics, but you later went on to scare, you were sort of waking people up a little bit and moving into this emotional messaging, which tends to have been long-lasting and then moves ultimately from being a campaign to a project. Is that something that you would be recommending without a whole lot more research? Is what you are seeing the sort of thing that can be a useful strategy for the mass market?

Mr APPEL — That was very much in relationship to Montana Meth Project and how that started and where it ended. That seems to have worked over there. Would that work here? I do not know — possibly in 2007 when we had that big campaign about bugs under skin, that really shock part, but we never really followed through with it to the emotional part. It is hard to comment on whether that would be an effective strategy today, but I think that there are elements of that that should definitely be explored, but the overarching thought from me would be that this is a problem that is not just going to disappear on its own, and it needs your help at the top and a strategy that is going to be in market long term and consistently.

**Mr SOUTHWICK** — To finish off from my perspective, are you saying that it needs a campaign but that further research needs to be done with the market to determine exactly what that campaign might look like, and what we used in 2007 may not necessarily work in 2014?

Mr APPEL — I think a program is required as opposed to just a campaign, so a long-term commitment. We have a pretty sophisticated market, so in determining whether shock tactic versus emotional tactics are the best way to go we should probably look into that a little bit more. Anecdotally I would say you would connect more relevantly, and certainly with the younger audience these days, with understanding the right sort of environment and situations. Trying to connect real life with real outcomes would be the best way to connect relevantly with them. We have done some research recently, and we have gone in in terms of, 'We're not going to try and scare you. We're going to try and educate you or at least create awareness that you might be in this situation and you could very quickly be in this situation, so you need to be aware of that', as opposed to, 'Here is a situation that is going to shock you, and you could be in that situation'. I still think to this day, certainly with the young people, that will not work.

Mr SOUTHWICK — Educate you rather than shock you?

**Mr APPEL** — Yes, through real-life situations, like sitting in a lecture theatre, being at a nightclub, being on a worksite — in environments and situations where you can relate to it.

**The CHAIR** — Do you think that messaging would work in the education system as well, rather than shock — more general empowerment and additional messages?

Mr APPEL — In an education environment, people are willing to learn, so you can be a bit more factual in that environment. You could take them on a bit more of a journey, and you could show them from trial right through to addiction what each of those stages looks like. You do not have the luxury of doing something like that when you are communicating, because there are too many messages, but when you are in the education system I think a proper syllabus could be created that talks about and educates what the drug is, what the effects of the drug are, the situations that you are most likely to be encountered with it and how you should approach that particular situation if you do come into contact with it, because a lot of young people, as I said very early on in this, have not defined themselves, so they are looking to others.

It is like peer pressure back in the days. If you said no to that drink that somebody offered you under the age of 18, then you could be seen to be defriended, and that is a very big issue for young people. We sit around here saying, 'It doesn't bother me; if I don't want to hang out with somebody who I think is doing the wrong thing, I won't', but when you are younger you are kind of peer pressured into doing something that you may know is not right, so in the education system I think understanding how to deal with these situations is a pretty important thing to educate people on too.

**The CHAIR** — All right. We had better leave it there. Thank you again for your time.

**Mr APPEL** — Thank you very much. I appreciate the opportunity to be here. You are all doing a great job.

Committee adjourned.