KEY PRINCIPLES FOR THE REPORTING OF DRUG ISSUES

Australian National Council on Drugs

Final Report

Prepared in consultation with the School of Professional Communication
University of Canberra

R. Warwick Blood & Kerry McCallum

3 June 2005
EXECUTIVE SUMMARY

The project aimed to establish a key set of principles for the alcohol and drug sector (AOD), and for journalists and editors, for the responsible, accurate and ethical reporting of drug issues.

Method:

The approach involved monitoring news coverage of drug and alcohol issues throughout the time-frame of the project, and reviewing the current research literature on the nature and extent of the reporting and portrayal of drug issues by news media.

It was recognized at the outset that media guidelines are more often than not contested by media professionals, including journalists and their editors, and by various stakeholders who have an interest in promoting what they view as responsible and accurate media coverage.

We talked to editors and journalists about the reporting and portrayal of drug issues in everyday professional practice, their understanding of current media guidelines, and their responses to concerns and criticism about their reporting practices. We also talked to nominated representatives of the AOD sector about news reporting and portrayal of drug issues and the concerns they held. Additionally, we talked to drug users and carers about their perceptions and understanding of contemporary reporting practices.

Finally, we established small reference groups of journalists and AOD sector representatives to discuss the themes and issues identified in individual discussions with journalists and the AOD sector to arrive at a draft set of key principles.

Media Reporting & Research:

In summary, research points to sensationalized headlines and broadcast leads, inaccuracies and unnecessary dramatization of issues, and stereotypical representations of key positions and policies, as prominent concerns. Unnecessary descriptions of the effects of and methods of drug use are also seen as highly problematic. Drug issues are characteristically framed by the news media as a moral sickness; as an individual responsibility (rather than societal); depictions of drug users as the threatening other, or drugs users as criminals, or dirty, unkempt, etc.; drug use as deviance; drug use as a societal risk of contagion.

It is important to recognize that there is no uniformity in news media representations of drug issues. The research reviewed covers a wide time-period which encompasses changing social, medical and legal frameworks that clearly impact on news coverage.

Views from the AOD sector:

In summary, the AOD sector and the reference groups believed that the existing media guidelines on drug issues provided by the Australia Press Council (See, http://www.presscouncil.org.au/pcsite/activities/guides/gpr246_2.html) are adequate despite reservations about how some issues are covered. There is, however, little recognition within the
sector of the Australian Press Council guidelines and similar documents produced for broadcast media.

Overall, the sector thought inaccurate and insensitive reporting often led to serious breaches of privacy and some sector representatives voiced concern about the role the media played in perpetuating negative ‘socio-cultural values’, especially in the language used to report drug users. Most agreed that it is the responsibility and role of those working in the sector to ‘shift the media’s language’ and reduce stigmatising reporting. Further, the representatives thought the sector should promote a vehicle for publicising examples of good and bad media reporting of drugs issues, and be actively involved in promoting media awards for ‘best practice’.

**Views from Journalists & Editors:**

Generally speaking, there was strong resistance to guidelines or principles (or even style books) addressing concerns about news coverage or language in drug issues stories. Most journalists were unaware of the Australian Press Council guidelines and did not place much value in such voluntary guidelines. Interestingly, even those journalists with an excellent reputation for reporting drugs and drug issues were unaware of the Australian Press Council guidelines.

Some journalists and editors viewed the Australian Press Council guidelines as ‘far-reaching’ and, perhaps, the most prescriptive of all media guidelines produced by the Council. But most journalists/editors did not think guidelines or principles would help improve the nature, style or extent of news coverage. Rather, personal contacts and professional relationships between journalists and the AOD sector were seen as far more valuable and worthwhile in promoting accurate and responsible coverage.

The overall view was that continuing professional relationships between the AOD sector and the news media were vital for accurate and responsible coverage. Education of cadet journalists and broadcast reporters was viewed as useful but only as a complement to actual practice.

**Views from Drug Users & Carers:**

Predictably, most drug users were unhappy with media coverage and many were angry at how they were treated by journalists and editors. The main issues concerned the news media’s use of language (junkies, addicts) in describing drug users, and their portrayal as unclean, or as criminals – rather than drug use as a health issue. A constant theme was their anger over the media portrayal of drug users as ‘others’ – as an underclass or sub-culture that is outside ‘normal’ society. Of equal concern, was the invasion of privacy by journalists and their editors.

Most believed media guidelines or statements of principles would be of little value because, as they saw it, journalists were unlikely to take note of them and were more interested in creating a sensationalized story.
Guiding Principles for the AOD Sector:

This report sets out a list of guiding principles for the sector centred on practical issues of engagement with journalists, developing understandings of the media and the role of journalists, and ways of dealing with issues of concern.

Recommendations:

The project recommends that the AOD sector with the cooperation of the ANCD actively promote the media guidelines developed by the Australian Press Council on ‘Drugs and Drug Addiction’ and state publicly that this is a standard by which Australian media should be held accountable.

Additionally, the project recommends that a statement about media language be endorsed by the sector because inappropriate language often has unintended consequences for people using illicit drugs, their families and carers.

These guidelines should also be applied to broadcast media and it is recommended that the sector write to all Australian radio and television newsrooms stating that the AOD sector endorses the Australian Press Council guidelines.

Other supporting recommendations are detailed in the report including awards for best practice, a web-based monitoring site, development of an educational resource for journalism educators, and future research.
KEY PRINCIPLES FOR THE REPORTING OF DRUG ISSUES

1. **Aim:**

The project aimed to establish a key set of principles for the alcohol and drug sector (AOD), and for journalists and editors, for the responsible, accurate and ethical reporting of drug issues.

A distinction can be made between ‘media guidelines’ (or similar resources) and ‘a set of key principles’. Media guidelines are usually designed as a resource for editors and journalists to assist them in their reporting and portrayal of a specific issue or sets of issues. By key set of principles’ it is meant the underlying or guiding rules and values of everyday practice that will assist in the responsible and accurate news reporting of drug and alcohol issues.

The project recognizes that all media guidelines – whether they focus on news reporting of drug issues, or some other topic – either explicitly or implicitly encompass underlying philosophies, values and professional practices.

We also recognize that media guidelines are more often than not contested by media professionals and organizations, especially journalists and their editors, and by other stakeholders who have an interest in promoting what they view as responsible and accurate media coverage.
2. The Project’s Framework:

Most discourse about drug issues in news media reports is official discourse – what people in government, the AOD sector, health and medical professionals and researchers say. There is, of course, no one official ‘voice’ for the AOD sector or a prevailing dominant discourse. Experts disagree on many and complex policies, issues, research and treatment strategies.

There is no prevailing discourse in media reporting and representation; what Urbis Key Young (2003) labels as ‘variable’ quality in media coverage reflects inter-media differences in reporting, and differences across media genres. Indeed, across the media sector, editors and journalists often openly disagree about how drug issues should be covered and have criticized their colleagues in some specific instances. And, among drug users and their carers, there are many competing positions, viewpoints and arguments.

How diverse audiences interpret news reports about risk information – such as news about drugs and drugs issues – has been the focus of academic interest in recent years primarily because of the central role risk plays in contemporary public and political debate. According to sociologists Ulrich Beck (1992, 1995) and Anthony Giddens (1994), the new ‘risk society’ is characterized by our preoccupation with managing diverse risks in our everyday lives, and the mass media are seen to play a key role in this socio-cultural transformation (Kitzinger and Reilly, 1997). Such research addresses the role the mass news media plays in socially defining risk knowledge for audiences (Lupton, 1999b: 7).

Kitzinger and Reilly (1997: 320-321), for example, observe that the UK news media play a significant role in stimulating public concern about particular risks, and are devoting increasing coverage to scientific uncertainty. News coverage of risks is selective and research has demonstrated that in reporting risk stories (as with most news) the news media do not simply reflect expert assessment of risk or parallel ‘official’ risk incidence data (Cottle, 1998; Kitzinger and Reilly, 1997; Conrad and Markens, 2001).

We view the contestation of knowledge as a cultural activity involving a struggle over different discursive constructions of drugs issues – in the media, by editors and journalists, by medical and health professionals, and by audiences, including drug users, dealing with these issues in everyday experience (Phillips, 2000; Lupton, 1999a, 1999b; Phillips, 1999). The meanings various audiences attribute to a health risk, for example, develops through the continuing and often changing representations of that risk in media content, as well as through other social and cultural practices. Risk knowledge results from the interplay between expert and lay discourses, and media discourses – it is a public battleground in which each stakeholder attempts to persuade others of the validity of their interpretation of a given risk.

Recent theorizing and research on news framing processes (Reese, Gandy and Grant, 2001) informs our analysis. Miller and Riechert (2001: 109) implicitly link their definition of news framing to the contestation over risk knowledge. They define news frames as:
an on-going process by which ideological interpretive mechanisms are derived from competing stakeholder positions. These selectively representative frames are manifest in the choice and range of terms that provide the context in which issues are interpreted and discussed.

Similarly, Schon and Rein (1994: xviii) argue that parties to policy controversies view issues, policies and policy situations in different and conflicting ways that “embody different systems of belief and related prescriptions for action, often crystallised in generative metaphors”.

Our focus is on how stakeholders frame (or ‘angle’ or ‘pitch’) drug issues and related information in their communication with each other, with policy-makers, government, and with the media. Demonstrating that editors and journalists frame news in particular or characteristic ways inevitably leads to questions about the consequences of those framing decisions.

In communication with each other, each stakeholder – the media, the AOD sector, drug users and their carers, and the public – seek to assert their position and the validity of the claims they are making.

It is within these dynamic interactions over contested and (often competing) sources of information that media guidelines and key principles of substantive content and debate need to be negotiated.
3. **Method:**

Our approach in meeting the project’s aims involved:

1) Monitoring news coverage of drug and alcohol issues throughout the time-frame of the study;

2) Reviewing the current research literature on the extent, nature and portrayal of drug issues by the mass news media;

3) Reviewing existing media guidelines and similar resources on the reporting and portrayal of drug issues;

4) Reviewing the Australian government’s media guidelines on the reporting of suicide and mental illness for comparative purposes;

5) Talking to editors and journalists about the reporting and portrayal of drug issues in everyday professional practice, their understanding of current media guidelines, and their responses to concerns and criticism about their reporting practices;

6) Talking to nominated representatives of the drug and alcohol sector about news reporting and portrayal of drug issues, their perceptions and understanding of contemporary reporting practices, and exploration of specific concerns about such practices;

7) Talking to groups of drug users and carers about news reporting and portrayal of drug issues, their perceptions and understanding of contemporary reporting practices, and exploration of specific concerns about such practices;

8) Establishing small reference groups of journalists and alcohol and drug sector representatives to discuss the themes and issues identified in individual discussions with journalists and the alcohol and drug sector to arrive at a draft set of key principles;

9) Analysing interview material using framing and discourse analytical methods – the competing stakeholder positions identified through our research were analysed in the context of existing literature on media depictions of drug use, public knowledge and government policy.
4. Reporting & Portrayal of Drugs & Drug Issues in the News Media:

Most national and international research investigating the representation or portrayal of drug and related issues in the media uses both quantitative (usually content analysis) and qualitative methods (primarily discourse analytic methods or narrative analyses).

It is important to continually recognize that there is no uniformity in news media representations of drug issues. The research reviewed covers a wide time-period which encompasses different and changing social, medical and legal frameworks. Thus, research must acknowledge this shifting relationship between media representations of drugs and changing contexts of drug policy and care (cf: Cross, 2004: 21).

Baseline studies examining the extent and nature of drug news reporting over longer time periods are rare. But a number of studies have used quantitative methods to assess the frequency of media reporting of illicit drugs. Frost, Frank and Maibach (1997) quantified US print news depictions of mortality, and found that deaths from illicit use of drugs were the most over-represented of all causes of death (see also: Forsyth, 2001). While no equivalent data is available for the Australian media, Teece and Makkai (2000) found that between 1995 and 1998 there was an overall increase in the number of Australian media stories about drugs and crime. Blood, Williams and McCallum (2003) found that from 2000-2002 news stories about illicit drugs in the major metropolitan daily newspapers featured strongly but remained relatively consistent in number. Pennington (2002) has argued that the public discussion of illicit drugs risk contrasts starkly with actual causes of drugs deaths in Australia. He observed that of 22,700 deaths attributed to drugs in 1997, 18,200 were ascribed to tobacco, 3700 to alcohol, and about 800 were attributed to the use of illicit drugs.

A second body of research has studied public knowledge and opinion concerning drugs. For example, Fan (1996) conducted quantitative framing research correlating media content with survey data and found that the number of respondents agreeing that ‘drugs’ was the most important problem in the United States rose from five percent to 60 percent between 1985 and 1994. He found these changes in opinion correlated with increased media descriptions of drugs as ‘crises’. Blendon (1998) analysed 47 national surveys in America conducted between 1978 and 1997 on public opinion towards drugs issues. The study reported that Americans were most concerned about the relationship between drugs and crime, and that that drug use was seen as a moral rather than a public health issue. The study found support for current US drugs policies and support for criminal justice responses to illicit drug use.

Wright and Pearl (2000) found that knowledge and experience of illicit drug use by young people in the UK rose significantly between 1969 and 1999, but knowledge of the effects of drugs remained limited. In Australia, ADCA (2002) found that the community perceived heroin to be Australia’s most significant ‘drug problem’ compared with alcohol and tobacco; a statistic that was not supported by patterns of drug-related morbidity and mortality. McAllister (1995), nevertheless, found strong support among the Australian public for policies to reduce alcohol consumption and promotion, and some support for restricting the availability of alcohol.
These quantitative studies provide useful benchmark statistics indicating that compared with other drug risks, illicit drugs are over-reported by the media and that the coverage is often at variance with official mortality and morbidity data.

A number of studies have used qualitative research methods to address the nature of the media coverage, or the way the media constructs or ‘frames’ illegal drugs and drug users.

In his seminal study, Bell (1985) examined the routine ‘conceptual frameworks’ the media used to interpret drug problems. He found that the media ignored the broader social context in its portrayal of illegal drugs and their use, portraying illegal drugs as intrinsically dangerous compared to ‘local, mundane, legal drugs’. Concern about individual drugs risk was balanced by a concern by the media for knowledge and control at the social level, through crime and punishment. Bell concluded that media reporting of drugs works to pacify media audiences.

Recent studies have used examples of the portrayal of particular issues in the media to extend Bell’s critique of the way the media constructs illegal drugs and their use. For example, Elliott and Chapman (2000) analysed the construction of heroin users within print media from 1992-1997, in the context of the debate about a proposed heroin trial in the ACT. They argued that despite attempts by proponents of the trial to depict heroin users as an ‘ill us’, the dominant media portrayal of heroin-dependent people was as a ‘threatening other’ and drug use as a ‘moral sickness’. Similarly, Blood, Williams and McCallum (2003) identified media frames of ‘crime and deviance’, ‘drugs as contagion’ and ‘societal and personal risk’ in their analysis of the Sydney Daily Telegraph’s reporting of the proposed Sydney heroin injecting room. The frames move from descriptive accounts (usually individualistic centred news items) to more active representations of drugs and drug users focused on the atypical or extreme case, which is generalised to represent the ‘typical’.

The media has also been found to: combine negative portrayals of drug use with negative racial stereotypes (Rodd and Leiber, 1997); portray illicit drug use as a greater risk than other health risk behaviours (Charles and Shivas, 2002); and portray a sensationalized image of the ‘drug trade’ (Boyd, 2002). For example, Meyers (2004) used a narrative analysis, informed by critical and feminist theories, to examine news stories about ‘crack mothers’ in American news. The focus was on the media labelled ‘battle to save the babies of crack mothers’. She argued that depictions of race, gender and class combine to reinforce negative stereotypes about African American women. In contrast, Homan (2003) and Blackwell (1991) have shown that the media can frame some users as ‘innocent victims’, powerless against drugs and drug dealers.

A number of studies have raised concerns about the way the media portrays legal drugs such as alcohol and tobacco. Media reporting and advertising of alcohol is said to present alcohol consumption as a ‘normal’ leisure activity, particularly for young adults (Jackman and Hill, 2003; Duff, 2003). Roberts (2002) found that one popular Australian television series portrayed excessive alcohol use as an appropriate solution to emotional problems. This research suggests that the media portrays the consumption of licit drugs as routine compared with the alarmist portrayals of the risks associated with the consumption of illicit drugs.
Other qualitative research has examined the impact of the media’s portrayal of drugs use on Government policies. For example, Fox and Mathews (1992) argued the media has helped create the drugs ‘crisis’ and has provided strong support for prohibitionist policies. Homan, (2003) examined the role of the Sydney Daily Telegraph in creating a ‘moral panic’ regarding teenage use of the drug ecstasy, following the 1995 death of Sydney school-girl, Anna Woods. Homan argued that the Telegraph set the key terms for the debate about ecstasy consumption and played a crucial role in influencing the policy responses of the NSW State Government.

Similarly, in her analysis of the Federal Government’s 1997 decision to withdraw support for a heroin trial in the ACT, McArthur (1999) concluded that talkback radio and tabloid newspapers were harnessed as advocates against the trial (see also Lawrence, Bammer and Chapman, 2000). Blood, Williams and McCallum (2003) found that individual media commentators inserted themselves into the policy debates as vocal opponents of the Sydney heroin injecting room trial. Bessant (2003) argued that the Melbourne Herald-Sun promoted the crisis and influenced policy regarding substance inhalation (see also Watts 2003; Pennington, 2002; Christie, 1998).

Chan (1995) took a more considered approach to the debate about the media’s role in drugs policy. While she agreed that ‘crime is increasingly being politicized and public policy toward crime and justice is largely driven by media-generated stories’, she also argued that media reporting of crime supports crime policy reform driven by other stakeholders, as well as public perceptions. She argued that because it is newsworthy, criminology news can be misused and sensationalized by the media, and warned researchers to be fully informed about media debates when providing information to the media.

From one perspective, both qualitative and quantitative research often demonstrates distinct advocacy positions on the part of researchers that, to some extent, reflect the narrow media framing of political debates about these issues (Elliott and Chapman, 2000). Those involved in writing about drug issue debates and policies have tended to align themselves as supporters for policies of harm minimization or supporters of abstinence or zero tolerance policies. Dillon (1998), for example, addressed the role of the drug and alcohol sector as advocates for a harm minimization position. Thus, a number of writers have used their research articles to critique not only media practice but policy outcomes (eg, Watts, 2003; McArthur, 1999; Pennington, 2002).

Finally, Guilianotti’s (1997) discourse analysis approach provides a more distanced appraisal of media discourses surrounding illegal drugs. Arguing that the media provides a guiding role for public discussion of drugs, Guilianotti identified four dominant discourses on drugs in the British media, based on the typology of societal or sub-cultural and public or private discourses.

Societal-public discourses concentrate on official statistics and professional knowledge. Societal-private statements use normative assumptions about drugs threats to private citizens. Sub-cultural-public accounts focus on the association between particular social groups and drugs. Subcultural-private statements concentrate on the personal agency of drug users.
Guilianotti argued that a singular moral position on drugs is now outmoded and that the social impact of these discourses are ‘incalculable’. Guilianotti’s approach can be contrasted with much academic literature, which appears to concentrate on the media’s ‘societal-private’ statements of drugs risk to individual members of society. This conclusion suggests that there is room for a study that provides a more reflexive analysis of the various discourses about the way the media reports drugs and drug use in Australia.

In summary:

1) News media can produce distorted views of drug and related issues but, importantly, these distortions are by no means uniform across differing media or media genres.

2) There are significant differences in reporting practices and representations across differing media genres.

3) Research on reporting and portrayal of drugs on television current affairs programming and talkback radio is very rare and more systematic research is clearly needed.

4) Research points to sensationalized headlines and broadcast leads, inaccuracies and unnecessary dramatization of issues, and stereotypical representations of key positions and policies, as prominent concerns.

5) Unnecessary descriptions of the effects and methods of drug use (either in newspaper text, or video or photographs) are also seen as highly problematic.

6) Drug issues are characteristically framed by news media, and dominant frames include: moral sickness; individualist responsibility (rather than societal); the threatening other; drugs users as criminals, dirty, unkempt, etc.; deviance; drug use as risk of contagion (societal risk); drugs and drug users as a source of fear and violence.

7) Characteristic news frames about drug issues may have an impact on public opinion and the ways government, policy makers, and the public, act upon these issues.

8) Stereotypical representations of drug users are common. These representations may lead to the stigmatizing of drug users.

9) There is no on-going systematic evaluation of media performance. Research is either limited by the time-frame examined, or is focused on specific incidents or ‘news events’.

10) The lack of systematic research is especially the case in examining non-fictional television programming. Investigations of the reporting and portrayal of drug issues in popular magazines is rare.

11) More research is needed on the changing pattern in the reporting of tobacco and alcohol, and illicit drugs.
12) There is little research on media, drugs issues and comorbidity.

The review of the research informed our analyses of interviews with selected participants from the alcohol and drug sector, journalists and editors, and with drug users and carers.
5. Monitoring Australian Media Coverage of Alcohol and Drug issues

The project’s budget did not allow for a systematic investigation of media coverage of alcohol and drug issues given its focus on media guidelines and key principles for the reporting and portrayal of drug issues. We did, however, monitor prominent news stories throughout the study’s time-frame and also relied upon analyses reported in Urbis Key Young (2003) and Blood, Williams and McCallum (2003).

We sought to identify the dominant discourses in the Australian media’s reporting and representation of drug issues in order to set a framework for negotiating a set of key principles for the media and the AOD sector. Caution should be exercised in generalizing from our observations given the lack of systematic monitoring.

In summary:

1) Prominent news stories we monitored in both metropolitan and regional press, and broadcast media, often lacked sufficient context; that is, they promoted stereotypical representations of illicit drugs and their effects, of drug users, of the relationships between drug use and crime, or used inappropriate language. The reporting of so-called ‘party drugs’ at ‘raves’ was often framed around risk to youth and their families with little or no accurate information provided. Most news stories did not include helpline contacts for drug users or their families.

2) Drug users most often emerge on the news media agenda in relation to crime, community fear, or revelations about drug use, particularly among the young or celebrities.

3) There are profound differences in reporting and portrayal of drug issues across differing media genres; for example, between radio news and radio talk-back, television news and television current affairs, and between news in the news sections of newspapers and opinion columns.

4) Simplistic distinctions between so called metropolitan broadsheet newspapers (meaning quality) and so called ‘tabloid’ newspapers (meaning poor quality) offer very little in analyses of media performance – ‘good’ and ‘bad’ examples of reporting and portrayal can often be found in the same newspaper.

5) Equally, some talkback radio programs, especially on the ABC and SBS but not exclusively, present accurate and responsible representations while other talkback radio programming is sensationalized, unnecessarily dramatic and includes talkback-host-promoted stereotypical representations of drug issues.

6) Unnecessary descriptions of the effects of and methods of drug use (either in newspaper text, or video or photographs) are also seen as highly problematic.
7) Language and media labels used to describe drug users and drug policies and/or treatments remain a concern.

8) In contrast to this coverage, we identified news reports by ABC and SBS radio, and by medical and social affairs reporters in metropolitan newspapers that present accurate and responsible reporting. Such examples may serve as a template for others in the news media.

9) A clear example of media impact on government policy emerged during the project’s time-frame. The revelations by *Sports Illustrated* of steroid use in major league American basketball prompted coverage by other mainstream US and international media, and finally action and reaction by policy makers with the ‘widespread condemnation of professional basketball, namely its apparent inability to police itself’ (Denham, 2004: 51).

10) We identified a changing pattern in the reporting of tobacco and alcohol with the effects of these licit drugs now widely reported, reflecting in part social and cultural change and the work of the AOD sector. But often alcohol and tobacco issues are focused on risks to young people.

11) There is very little awareness of the inter-relatedness (comorbidity) of drug issues and other medical and health issues, and social issues, in news media coverage. The exception is where a ‘public crisis’ emerges, as for example in the 2005 media coverage of cannabis use and subsequent mental illness.
6. Guidelines for the News Media & the AOD Sector:

Initially, we searched for Australian or overseas reports of systematic evaluations of media resource kits or guidelines for the reporting of drug issues. There are very few examples and available resources tend to be ‘media education kits’. Examples include: Alcohol and other drug media education project (WANADA, 2000), Media Guidelines for Reporting on the Non-Medical Use of Drugs (CEIDA, 1989), and the Australian Drug Foundation’s (1993), The Media Machine: Sitting in the Driver’s Seat, A Health Professional’s Guide to Media Liaison.

6.1 Australian Press Council Guidelines

The Australian Press Council’s Media Guidelines (2001) are, arguably, the most prominent set of guidelines on reporting drugs issues. To our knowledge, there has been no systematic evaluation of these guidelines on drugs and drug addiction. The guidelines state:

“Responsibly report public debate about drug use and addiction;

The harmful effects of any particular drug should not be exaggerated or minimised;

Avoid detailed accounts of consumption methods, even though many young people are generally familiar with them;

Outlining the chemical composition of a drug may be justified in some reports, but avoid providing any details which could assist its manufacture;

Do not quote the lethal dose of any particular drug;

Guard against any reporting which might encourage readers’ experimentation with a drug, for example highlighting the ‘glamour’ of the dangers involved;

Highlight elements of a story which convey the message that preventive measures against drug abuse do exists, and that people can be protected from the harmful consequences of their addictive behaviours;

Bear in mind the arguments of those who point out that tobacco and alcohol use and addiction are another major aspect of the drug story.”


6.2 Suicide & Mental Illness Guidelines

The development of the Australian government’s media resource kit, including guidelines, for editors and journalists, on the reporting of suicide and mental illness news informs the project.
The original resource kit, *Achieving the Balance* was released in 1999. A revised version, *Reporting Suicide and Mental Illness* was released in 2002.

*Achieving the Balance* was developed in active co-operation with editors, journalists, media industry associations, the Australian Press Council, and health and medical professionals. In preparation for a revision of this resource, a systematic media monitoring project of 12 months duration was conducted by the University of Melbourne and the University of Canberra using quantitative content analysis of Australian news media, and qualitative news frame analyses of selected news stories, news features and broadcast material. (For full reports of this work, see Francis *et al.*, 2004; Pirkis *et al.*, 2002; Blood, Putnis and Pirkis, 2002; Pirkis *et al.*, 2001; Blood *et al.*, 2001).

Throughout this media monitoring project, researchers met regularly with a Media Reference Group, which comprised medical and health professionals, consumers, and media industry representatives. Media groups included the Australian Internet Industry Association, the then Federation of Australian Radio Broadcasters, the Federation of Australian Commercial Television Stations, the Australian Press Council, as well as advertising industry groups. These discussions provided the opportunity for open dialogue between the Commonwealth Department of Health and Aged Care, consumers, the media, and input from the on-going research. Participants, to a greater or lesser extent, viewed this process as an opportunity to discuss frankly their concerns and assessments of this and various other proposed communication strategies. This group continues to meet on a regular basis to support the government’s initiatives on suicide prevention and mental health strategies.

Clearly, the Commonwealth of Department of Health and Aged Care recognized that media resources (which include guidelines) needed to be produced in active conversation with relevant stakeholders, including editors and journalists, and media industry associations. This did not mean, of course, that there was agreement on all issues all of the time or that there will be agreement on issues in the future. Indeed, the contrary was often the case.

It is clear that the resource kits and guidelines are contested by many editors and journalists, and that many others are unaware of their existence. Evidence of the contest over meaning can be seen in the Australian Press Council’s response to research on suicide copycat effects. The Council (2000: 6) dismissed Hassan’s (1995) evidence on copycat suicides – the only Australian study – as ‘tenuous at best’ and questioned whether there is a causal relationship between newspaper reports and actual suicide in Australia and overseas. While promoting responsible and sensitive coverage, the Council has argued that *resource kits or guidelines should not be prescriptive or start from a presumption of harmful effects* (our emphasis).

Significantly, the media monitoring project identified a few news items that did not comply with the suggested guidelines but appeared to have other positive features. For example, a news feature in the *Sydney Morning Herald* (16 September 2000) on the inquest in Darwin into the death by suicide of a young Aboriginal boy was analyzed to show how a story can depart for valid reasons from suggested guidelines. In this case, it appeared that the journalist’s intention was to describe in shocking and graphic detail the method of suicide as a way of drawing attention to the seriousness and national issues involved. Vulnerable groups, of course, could
interpret the story in different ways. But can we reasonably expect editors and journalists to take account of all possible audiences and audience readings?

Based on our research of this resource and guidelines we note that:

1) Resource kits (including guidelines) need to be developed over a long time frame in active cooperation with editors, journalists and professional media associations, as well as with medical and health professionals and consumers (people diagnosed with mental illness) and their carers;

2) Despite the widespread distribution and promotion of the resource kits and guidelines many journalists and editors are unaware of their existence;

3) Many editors and journalists will react negatively to such resources;

4) Information and guidance provided in such resources will always be contested, especially by some editors and journalists;

5) There is considerable value in systematic evaluations of the guidelines and media performance over a substantive time-frame – such data provide a baseline for future comparative research;

6) Guidelines are never absolute. Non-compliance may occur in news stories and features, and broadcast material leading to other positive outcomes;

7) Guidelines need to be supported by continuing personal contacts with media professionals and media industry groups.
7. Views from Editors & Journalists:

We interviewed editors and journalists in Sydney, Melbourne, Brisbane and Adelaide. Additionally, we talked with a small group of senior journalists, including a representative from the Australian Press Council, in Canberra, and interviewed senior social affairs/medical reporters in Sydney and Melbourne.

1) Editors and journalists we spoke to thought the news media generally did a very good job in reporting drug issues – and it was only the ‘tabloids’ and some commercial television programs that might be questioned. There was a tendency to defend ‘journalism’ (or all journalists, editors, producers) even though they recognized that some misrepresentation and overly sensational reporting did occur, and they were well aware of differences in style and tone between differing media, and across differing media types (or genres). Some journalists/editors we interviewed recognized that while they were responsible and accurate in language use other journalists were not – and this behaviour could reinforce stigma.

2) All agreed there had been more news coverage of alcohol and tobacco related illnesses and policy and far less coverage about illicit drug use and policies, especially during the last year.

3) In reporting alcohol and drug issues, quick access to expert comment was seen as vital. NDARC received particular mention as a good, independent, objective news source because of direct access, and easy to understand research findings that were given relevant context.

4) On the other hand, journalists who had written extensively on drugs and drug issues were well aware that, at times, they were ‘used’ or manipulated by the AOD sector. Some thought it was often difficult to talk to the AOD sector about research, new treatments, policy, etc. because of the complexity of the issues and the language used. Journalists and their editors had to write a story and make it easily understandable to a wider public.

5) Many journalists were aware of the connections between media exposure and public opinion, and the way the issues or event was then acted upon by policy makers and government. Some admitted they make mistakes or misrepresent issues but pointed to problems that occur in sub-editing (especially headlines) and production. They welcomed feedback from the AOD sector on these occasions. Many journalists/editors we spoke to had never personally received a formal complaint from sources in the AOD sector.
6) Generally speaking, there was strong resistance to guidelines or principles (or even style books) addressing concerns about news coverage or language in drug issues stories. Most journalists were unaware of the Australian Press Council guidelines. Interestingly, even those journalists with an excellent reputation for reporting drug issues were unaware of these guidelines. Yet the guidelines were seen as a valuable resource for journalists and their editors. The reference groups viewed the guidelines as ‘far-reaching’ and, perhaps, the most prescriptive of all media guidelines produced by the Council.

7) Personal contacts and professional relationships between journalists and the AOD sector were seen as far more valuable and worthwhile in promoting accurate and responsible coverage.

8) Most senior journalists/editors pointed to their in-house codes of conduct in dealing with sensitive stories, ethical issues, and privacy matters.

9) Most agreed that additional internet resources would be useful, and that they would welcome information regarding ways to gain direct access to AOD workers who could act as spokespeople. A list of personal contacts (who were definitely available) would be helpful. Others preferred to maintain their personal contact with AOD sector representatives.

10) The reference groups agreed that media commentators or talkback radio hosts should be able to report about drugs and drugs issues without restriction. On language, they admitted that there was often a clear distinction between how social affairs or medical/health reporters covered issues, and how ‘tabloid’ media covered issues.

11) The overall view was that continuing professional relationships between the AOD sector and the news media were vital for accurate and responsible coverage.

12) Education of cadet journalists and broadcast reporters was viewed as useful but only as a complement to actual practice.
8. Views from the AOD Sector:

We interviewed representatives from the AOD sector in Sydney, Melbourne, Adelaide and a rural/regional community. In addition, small reference groups of AOD sector representatives discussed the issues in Canberra and Sydney.

1) Many AOD representatives were very satisfied with their working relationships developed over time with news journalists and editors, and prominent media spokespeople within the sector often told how they devoted considerable time and effort to be ‘on call’ for journalists. Journalists respected this effort, and the commitment to on-going relationships.

2) Nonetheless, some AOD representatives pointed to problems they had experienced with journalists and editors. Most concerns about media coverage centre on over-dramatization of facts, the reduction of complex issues to ‘black and white stories’, serious omissions of facts, the language used or, less often, factual inaccuracies. Concern was raised about stigmatising reporting and its impact on the families of drug users. Inaccurate and insensitive reporting often led to serious breaches of privacy.

3) Representatives voiced concern about the role the media played in perpetuating negative ‘socio-cultural values’, especially in the language used to report drug users. The AOD sector had an important role in ‘shifting the language’ and changing the culture of drug reporting.

4) Considerable concern was raised about how some sections of the media tried to ‘play up’ divisions within the sector but, overall, representatives thought the key players were doing a reasonable job of playing down perceived divisions and differing points of view.

5) The reference groups believed that, at times, they were successful in promoting a common agenda.

6) Most AOD representatives dismissed the work of some columnists and commentators. Many wore the criticisms from these journalists as a ‘badge of honour’.

7) Significantly, most prominent AOD media spokespeople talked of their experiences in re-directing or re-framing a story idea generated by a journalist toward a storyline that more accurately reflected current knowledge, practices and policies. They used these examples to illustrate the nature of trust they had developed with journalists and editors.

8) Most agreed that alcohol and tobacco had received more media coverage in recent years.
9) All AOD spokespeople we talked to spoke highly of the accurate and responsible coverage by principal medical, health and social affairs journalists in metropolitan newspapers and radio. Health and medical specialist reporters were valued as key contacts by many in the sector.

10) Few organisations attach any importance (or resources) to developing relationships with non-news media; for example, in influencing the nature of Australian television drama, even though fictional portrayals of alcohol and drug issues, and drug users, are often seen as a concern in these programs. For example, many pointed to excessive alcohol use in reality television programming.

11) Most representatives we interviewed had a good working knowledge of news and journalistic routines but thought that many other people, particularly those in smaller agencies, had limited knowledge and experience and would benefit from media training.

12) There was general agreement that the ANCD could act as a central point for co-ordinating media complaints and highlighting responsible ‘best practice’ journalism. Representatives also discussed the constraints faced by smaller agencies in dealing with the media because of resource constraints in staffing, and the lack of adequate media training.

13) AOD sector representatives agreed that existing media guidelines provided by the Australia Press Council are adequate despite reservations about some issues raised in this document.

14) It is the responsibility and role of those working in the sector to ‘shift the media’s language’ and reduce stigmatising reporting.

15) The sector representatives believed that the ANCD should establish a vehicle for publicising examples of good and bad media reporting of drugs issues, and be actively involved in promoting media awards for ‘best practice’.
9. **Views from Drug Users & Carers**

We interviewed drug users and carers in Canberra and Adelaide in small discussion groups comprising six to eight people.

1) Predictably, most were unhappy with media coverage and many were angry at how they were treated by journalists and editors.

2) The news media’s use of language (junkies, addicts, etc) in describing drug users, and their portrayal as unclean, or as criminals, were the main issues and concerns. Yet in discussions with us, many drug users used the words ‘junkies’ and ‘addicts’.

3) A constant theme was their anger over the media portrayal of drug users as ‘others’ – as an underclass or sub-culture that is outside ‘normal’ society.

4) Of equal concern, was the invasion of privacy by journalists and their editors. Our discussions revealed numerous examples.

5) Users were concerned that most often they appeared in the media at times of individual or personal crisis – in the courts, via the police rounds, in violence, or in ‘exposes’ of ‘life on the streets’.

6) Most would be willing to talk to the news media more but were highly suspicious and distrusting of journalists. Often this mistrust resulted from what they described as ‘bad experiences’ with journalists.

7) Most say they are resigned to the fact that there is little they can do about the way they are reported and portrayed in the news media. Some drug user advocates suggested that letters to the editor are useful but others were unsure of this strategy.

8) Most believed media guidelines or statements of principles would be of little value because, as they saw it, journalists were unlikely to take note of them and were more interested in creating a sensationalized story.

9) Many attempted to justify their circumstances by comparisons to the widespread societal abuse of alcohol and tobacco.

10) News coverage was not the only issue for drug users. Participants in one focus group of 20 to 40-year-olds raised, unprompted, concerns about fictional portrayals. Popular television programs mentioned, which included stereotypical and stigmatizing depictions, included *The Bill* and *CSI*. 
11) Some of the participants revealed personal experiences with the media that clearly had a long-lasting, profound impact on them and their families. A young woman recalled her shock and distress at watching the television program, *Beauty and the Beast*, with her young son when Stan Zemanek said ‘junkies should have their children taken off them’. She had great difficulty dealing with her distressed son.

12) Other participants revealed perceptive analytical skills in their reading of television news, and considerable reflexivity about the coverage. For example, two male participants understood how television news is often ‘constructed’ – with video clips from the station’s library files. The man described how a commercial TV station ‘dug up’ old archival image of used needles scattered on a cobble stoned laneway in a news story. ‘There are no cobble stone lane ways in Canberra’, he said. The video clip was from a much earlier story about Redfern and, in his view, added to the stigmatization of drug users.
10. Guiding Principles for the AOD Sector:

Based on our individual and group discussions with representatives from the AOD sector, we propose a set of guiding principles for the AOD sector, concerning working with journalists, stigmatizing language, and dealing with issues of concern.

10.1 Working with Journalists:

1) AOD sector representatives should openly state at the outset of interviews with journalists that they endorse the guidelines set by the Australian Press Council on ‘Drugs and Drug Addiction’. Know the current website address of these Australian Press Council guidelines, and have a printed copy available during the interviews.

2) Always record interviews with journalists, whatever the medium or genre.

3) If you are not the right person to speak to, suggest someone who is better qualified to speak. And, if you have been interviewed, be prepared to name people who can further assist development of the story.

4) Do not expect all news media or journalists to deal adequately with complex topics, issues, etc. News most often reduces the complex to the simply understood.

5) Remind journalists and editors that it may be useful for their audiences to include information about where they can access further information, advice or help.

6) The way a journalist or editor frames a story – the news angle they take – is always open to discussion. You have the right to contest the news angle taken. Talk to the journalist and the editor and explain why you are concerned. Suggest an alternative or competing news frame for the future. Journalists welcome constructive feedback.

10.2 Stigmatizing Language:

1) Always challenge reporting and depiction of drug users in stereotypical and stigmatizing language. Remind editors and journalists that drug users are people who need help and support.

2) Avoid clichés and stereotypes! What does ‘harm minimisation’ really mean in practice? What does ‘zero tolerance’ really mean in practice? Both positions are overarching approaches that have very different meanings in differing contexts and situations.

3) Challenge news reports or features that give detailed descriptions (or photographs or video) of the methods of drug use. Such depictions may have valid shock value but may also have profound consequences. Negotiate with journalists and editors.
4) Guard against any reporting or depictions that might encourage audiences to experiment with an illicit drug. Drug user groups should be especially aware of this concern in publications for their members.

10.3 Issues of Concern:

1) Always challenge sensational claims – the newest, best, instant treatment, this is the most powerful, potent drug, etc. Editors and journalists are naturally attracted to this type of news angle. Suggest a better angle!

2) Expose popular myths that surround drug issues. For example, editors and journalists may inadvertently distort drug use patterns because of a lack of reliable and valid data. Always have data at hand to support your position.

3) There are profound cultural, economic, political and social differences between Australia and overseas countries and illicit drug usage patterns also differ dramatically. Challenge the dominant idea that what happens elsewhere may happen here, and vice versa.

4) Most drug deaths are related to the context of taking the drug – not the drug’s toxicity.

5) Recognize that there is no ‘media’ as such but differing media (television, radio, television, the internet, etc.) and importantly, different media genres.

6) Recognize that the ‘media’ are us; they are part of our community. Each genre has its own imperatives for what makes a good news story about drugs and drug issues.

7) Newspaper columnists and radio talkback personalities have the right to express their beliefs and opinions as boldly as they like; that is what they are employed to do. But these views and positions can be contested.

8) Always challenge media talk of drug issues being resolved by single factors. Drug use and addiction are complex issues. Openly recognize that drug use can be associated with other medical conditions, including mental illness.

9) Recognize that people in the AOD sector represent a variety of viewpoints and policies, and it is highly unlikely that journalists will talk only to one person. Represent your position as accurately and fairly as possible.

10) Exercise extreme caution in making a complaint about a news story. Can the issue be resolved by direct contact with the journalist and editor?
11. **Recommendations:**

Editors, journalists and people working in the drug and alcohol sector want to report both licit and illicit drug issues accurately, fairly and responsibly. Drug use, treatment and policies are significant health and social problems for all Australians. We recommend that AOD sector supported by the ANCD should:

11.1 Actively promote the media guidelines developed by the Australian Press Council on ‘Drugs and Drug Addiction’ and state publicly that this is a standard by which Australian media should be held accountable.

We believe these guidelines are a very useful departure point for the AOD sector. Currently, the Australian Press Council offers broad guidelines for newspapers’ consideration when reporting drug-related issues, which were developed in consultations with the newspaper industry. Importantly, AOD sector endorsement of the Australian Press Guidelines can be positioned as recognition of the collaborative effort of the Council, editors and journalists, and the newspaper industry.

Additionally, the sector might add a note about news language and ‘labels’, which could be done in the process of endorsing the Australian Press Council guidelines. We suggest:

11.2 The AOD sector recognizes that care should be taken in the use of media labels and language used to describe people using illicit drugs. Inappropriate language often has unintended consequences for people using illicit drugs, their families and carers. ‘Drug user’ and or ‘injecting drug user’ are the preferred descriptions rather than the various ‘street’ labels.

The Australian Press Council guidelines refer only to newspapers. Thus, we recommend that:

11.3 The AOD sector supported by the ANCD write to all Australian radio and television newsrooms stating that the sector endorses the Australian Press Council guidelines and that is through these guidelines that it holds broadcasters accountable.

Drawing on the experiences of monitoring the reporting and portrayal of mental health issues, we further recommend that:

11.4 The National Drug and Alcohol Awards Committee should seriously consider collaborating with the Walkley Awards to promote excellence in drugs issues reporting.

These awards, administered by the Media, Entertainments and Arts Alliance, are the most prestigious journalism awards in Australia and sector support for an excellence award will further boost the goal of promoting accurate and responsible reporting of drug issues. We also recommend that:
11.5 The AOD sector supported by the ANCD should consider gaining support for the development of a website (along the lines of SANE Australia’s *Stigma Watch* for mental illness) that tracks good and bad journalistic practice in reporting and portraying drugs and drug issues.

By this process, issues of concern in news coverage can be identified and corrected. *Stigma Watch* is a valuable resource for the mental health sector and for journalists. The onus is on the AOD sector to collect this information and to write to the media outlet concerned for a response. Issues concerning inappropriate or potentially stigmatizing language used by the media should be actively published on the new stigma website.

We also recommend that the sector play an active role in journalism education:

11.6 The AOD sector supported by the ANCD should consider gaining support for funding the development of an education resource kit detailing journalistic best practice in drugs issues reporting and portrayal (similar to the *Response Ability* resource produced by kit developed by the NSW Hunter Institute of Mental Health for reporting mental health issues).

The *Response Ability* resource provides practical exercise-based and resource material for universities. Many Australian university journalism courses used this resource in cooperation with the Journalism Education Association (JEA).

We caution against the ANCD establishing a formal complaints procedure. Rather, the AOD sector should be made aware of the procedures established by The Australian Press Council. Most complaints are dealt with by mediation rather than by a formal hearing by the Council. In recent years, complaints to the Council about news and current affairs coverage of drugs and drug issues have been minimal. For broadcast news and current affairs reports, the ANCD should take the leading and coordinating role in promoting the AOD sector’s issues directly with the broadcaster concerned, and by publishing the complaint and response on the new stigma website.

Throughout our consultations, we were alerted to concerns about fictional portrayals of drug users and drugs issues, especially on television. We recommend that:

11.7 Further exploration is required to address the impact of the portrayals of alcohol and drug issues in fictional media genres, especially television and cinema.
References:


CEIDA (1989), Media Guidelines for Reporting on the Non-Medical Use of Drugs. Centre for Education & Information on Drugs and Alcohol, Sydney.


Fan, D. (1996), ‘News media framing sets public opinion that drugs is the country’s Most Important Problem, Substance Use and Misuse 31(10):1413-1421.


