

# Can Health Communication Help to Tackle Youth Drug Addiction Problems in Hong Kong, China?

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**Abstract:** Overall, there are impacts of mass media on public health issues. However, whether the impacts are positive or negative, effective or ineffective, rely very much on a wise use of health communication tactics and a close collaboration with various parties including public health specialists, media gatekeepers as well as the target audiences etc. This paper attempts to discuss whether health communication contributes to tackle youth drug addiction problems in Hong Kong, China.

**Keywords:** Mass media, health communication, public health, youth drug abuse.

## INTRODUCTION

In general, there are impacts of mass media on public health problems. However, whether the impacts are positive or negative, effective or ineffective, intended or unintended, depend very much on careful adoption of appropriate models of health communication and the close collaboration with various parties including but not limiting to public health specialists, healthcare professionals, media gatekeepers, social marketing personnel, government organizations as well as the public. Nevertheless, the most important party is the main yet often neglected stakeholder, the target audiences of the health messages. Ongoing evaluation is crucial for fine-tuning the health communication strategies to timely suit the target audiences with specific but ever changing problems. This paper discusses how health communication is adopted to address the youth drug abuse problems in Hong Kong, China.

## IMPACTS OF MASS MEDIA ON PUBLIC HEALTH PROBLEMS

“Media is message” is a phrase by Marshall McLuhan which means the media influences how the message is perceived [1]. Mass media includes any medium for transmitting mass communication (a message created by a person or a group of people to be sent to a large audience or market). It includes radio, television, internet, newspapers, magazines etc. [2]. It is one of the most common and most powerful ways of promoting health education [3].

According to Egger *et al.* [4], mass media in all forms is a necessary component of health promotion campaigns when message or information is regarded as the “product”. This “product” relies on mass media for “sale” (reaching people and encouraging them to act) in the “market” (communities). The ultimate goal of media messages is to appeal individuals to take action. To fit for “sale”, there should be some useful mass media strategies. For mass media campaigns to execute sustainable impacts on public health problems, they should be planned thoroughly and implemented carefully basing on good communication principles and close collaboration with professionals/specialists in public health and media fields.

There are a number of advantages and disadvantages of using mass media for health education [3]. For instance, it is good that public knowledge (literacy) and public awareness of health issues can be enhanced quickly and effectively. Besides, emotional responses can also be evoked which may cause immediate behavioral changes. It also helps to influence public opinions and set agenda for debate. However, some disadvantages also exist. For example, it is difficult to get immediate feedback and interaction from the target group(s). Hence, whether the target audiences grasp the intended message correctly/completely/easily cannot be known promptly. Worse still, the target audiences may simply ignore or hate the message delivered by the mass media when the channels are either too old-fashioned or in a preaching manner.

## OVERVIEW OF YOUTH DRUG ABUSE IN HONG KONG

As for the youth drug abusers under the age of 21, there has been an alarming rising trend in recent years,

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with over 2900 reported cases in 2007, representing an increase of 34% in three years. Worse still, there was an increase of 22% in the first half of 2008 over the same period in 2007. In 2007, the rate of youth drug abusers under the age of 21 was 0.34% which was 1.6 times of the rate of drug abusers of the total population (0.21%). Being more worrying, the mean age of youth drug abusers has dropped from 17.4 in 2003 to 17.1 in 2007 [5]. Distressingly enough, both the number and proportion of youth poly-drug abusers were rising which were 3138 and 26.9% respectively in 2005. The youth incline to touch different kinds of drugs in an attempt to have better peer identification, greater relief of boredom or higher euphoria etc or simply due to some misconceptions on the harmful effects of such drugs [6]. According to Narcotics Division of Hong Kong Special Administrative Region [7], it is a widespread erroneous conception among the youngsters which makes them think psychotropic substances are less harmful than “traditional” narcotics (e.g. heroin). The confusion is attributed to the nomenclature. Using inconsistent Chinese terms may lead to distorted understanding of the severity and hence reduce desire to seek help in youth at risk as they may claim that they are just taking some “medications” without abusing any drugs. In order to improve communication with the youth, tailored alternative Chinese terms have been adopted as “appropriately” as possible to clearly connote the severity of drug abuse. For the current preventive education and publicity, the generic reference to drug abuse and the terms of psychotropic substances in Chinese has become negatively phrased as poisonous while the use of rather neutral terms has been averted.

## **ROLES OF HEALTH COMMUNICATION ON ANTI-DRUG ISSUES**

Health communication “uses communication strategies to inform and influence individual and community decisions that enhance health” [8]. While mass media can be used as an important channel of health communication to convey a health message to a bulk of audiences in the community, whether the message can effectively reach the target groups cannot be guaranteed. Hence, it is worth further investigating whether a message is hard to reach the youngsters. The hard-to-reach audiences refer to those who are not responsive to mainstream mass media campaigns. They can be further sub-divided into those who have low access to the mainstream media (hard-to-reach group) and those who are impervious to media campaigns (hard-to-influence group).

Undoubtedly, it is crucial to devise strategies for effective adoption of health communication *via* mass media campaigns. Generally, there are several key elements of success. They include 1) specification of a well-defined target audience; 2) formative research to understand the target audience and pre-test the contents (e.g. the acceptance and/or appeal of the intended message); 3) establishment of message according to current knowledge, needs, motives and preferences of the audiences; 4) a media plan to guarantee exposure to the campaign; 5) procedures of progress evaluation; and 6) a long-term commitment [9].

According to McAlister *et al.* [10], Social Cognitive Theory (SCT) has been used to analyze a variety of public health problems by providing a comprehensive understanding of why and how one changes his/her own health behaviors as well as why and how the social and physical environments influence him/her. The key concepts of SCT can be summarized into five categories including 1) psychological determinants of behavior, 2) observational learning, 3) environmental determinants of behaviors, 4) self-regulation and 5) moral disengagement. Self-efficacy belongs to psychological determinants of behavior. It refers to a person’s beliefs about own ability to perform behaviors that bring desired outcomes. Persuasion is one of the methods for boosting self-efficacy. It aims to tell people that they can manage to perform a desired behavior and encourage them to take the first step by increasing their confidence. The slogan by Radio Television Hong Kong (RTHK) – “Say no to drugs; Say yes to love”, is an example which serves to urge the youngsters to refuse drugs and encourage them to welcome and treasure the love, care and support from others such as parents, teachers, healthcare professionals, government, non-government organizations, peers and general public etc.

It is also essential to figure out which of the media channels are competent in promoting a better reach to the youth population. Internet medium seems to be a good choice. The popularity of its usage by youth is high and constantly increasing. Hence, the internet is potentially powerful for disseminating anti-drug messages to both the general youth and those at risk. Online resources are now being offered and updated through the website of Narcotics Division of the Hong Kong Government and other websites scattering over the internet. Some novel approaches such as developing interactive online games and quality multi-media contents have been adopted to enhance the

youth engagement. The website also provides a one-stop platform to facilitate easy access to the online resources and services offered by other sectors including the non-government organizations catering preventive education, treatment and rehabilitation services [7]. Other potential online opportunities to reach the youth such as forum, web log (blog), YouTube (a popular video sharing website) should be further explored.

In Hong Kong, there was a 2-year territory-wide campaign organized by Narcotics Division starting in 2008. It aimed at fostering an anti-drug atmosphere as well as mobilizing various sectors of the community to participate. A variety of activities and programs had been implemented under the theme of "No Drugs, No Regrets. Not Now, Not Ever". The overall goal was to convey the dreadful consequences of youth drug abuse to the public (an example of fear appeals). It included a series of new Announcements in the Public Interest (APIs) depicting real-life situations as well as some publicity materials, an anti-drug theme song (in rapping mode) by celebrities, and large-scale projects like a drama production project in collaboration with a radio station and a short-film competition using the Government's Youth Portal platform [7].

### **EFFECTS ON ANTI-DRUG CAMPAIGNS BY HEALTH COMMUNICATION**

There are three kinds of effects by health communication on drug education and prevention media campaigns. They include intended effects, unintended/unwanted effects and unexpected effects. The intended effects are, for example, a decrease in drug use or an increase in the knowledge of the harmful effects of drugs. Unintended/unwanted effects may occur too, especially in large-scale campaigns with great impacts on the public. For instance, the arousal of curiosity about drugs among young population may result which is opposite to the intended. The unwanted effects may include the marginalization of drug abusers who find themselves even more socially isolated after the launch of the campaigns. As for the unexpected effects, one example is the British anti-heroin campaign which successfully made a considerable rise in the private fundraising activities for drug education projects [11].

Looking more closely on intended effects, the goals include adoption (starting doing or believing something), continuance (keeping doing or believing something), improvement (doing something better or

deepen a level of belief), deterrence (not starting doing or believing something), discontinuance (stopping doing or believing something) and reduction (doing it less or believing it less strongly) [12]. Dominant code can be used to describe the act that the audiences interpret the message in chorus with the intended meaning [13] and hence intended effects result. The changes in beliefs, feelings, knowledge or behaviors may occur immediately or later ( sleeper effect). On the other hand, it is also possible that no change occurs. It is rather fine if the target audiences remain dormant to the messages having come across them (i.e. as if they had never been persuaded). Worst still, some audiences may have their resistance increased to any future persuasion attempts [12].

As for the messages per se, there are two cognitive routes, namely central route and peripheral route, in the processing of persuasive messages, which in turn affect the outcomes. In central route, the target individual uses a rational approach to relate the incoming message to his own existing knowledge and beliefs. He would not make final decision until the pros and cons of the message have been consciously analyzed and weighed. Favorable evaluation makes the persuasive message successful and vice versa. In peripheral route, the target individual uses a rather intuitive approach without much investigation or scrutiny of the persuasive message. He is not quite aware of the persuasion attempt which tends to be processed subconsciously. In terms of the outcomes, central route processing produces attitude change which not only is persistent and resistant to change but also predicts behavior, while peripheral route processing merely results in temporary attitude change [12].

According to the Prospect Theory, gains and losses are evaluated subjectively. The displeasure due to loss is greater than the pleasure resulting from the same amount of gains. Hence, it is the choices being framed in terms of gains or losses that make people respond differently [14]. Gain-framed messages convey the benefits when/from performing a behavior whereas loss-framed ones depict the costs of not performing a behavior. Generally, it will be more persuasive for the former when the outcomes are certain and for the latter in case of uncertainty or risk [15]. The abovementioned 2-year territory-wide campaign organized by Narcotics Division, adopts this kind of framing. The depiction of the awful consequences (e.g. frequent urination, terrible appearance of death etc) of youth drug abuse in a series of TV advertisements is an example of loss-

framed messages. On the other hand, there is a well-known slogan "No Drugs, No Regrets" which can be regarded as a gain-framed message. It affirms that people who refuse drug would never have regrets. Yet, research is needed to evaluate whether or not such messages are persuasive, and the reason(s) behind. The persuasion is highly sensitive to individual youngsters who are unique in many aspects such as educational background, family background, upbringing experiences and peer dynamics etc. Hence, the messages should at least be relevant to the youth even if not stemming from their own needs and desires at all, for instance, age-appropriate, gender-appropriate, culturally/sub-culturally relevant (e.g. using common language with reference to different socio-economic class and/or education level, such as using slang or "trendy words").

### **CRITIQUE ON EFFECTS OF HEALTH COMMUNICATION ON ANTI-DRUG MASS MEDIA CAMPAIGNS**

As far as the health message itself is concerned, there seems to be a negative perception toward RTHK that it, as a government organization, is quite old-fashioned which only serves to convey official message in a bureaucratic tone. Despite the continuous great and active efforts of RTHK in conveying anti-drug messages through different means and strategies such as producing documentaries and drama as well as creating a slogan "Say no to drugs; Say yes to love", youngsters seem not very attentive to such. Hence, it at least cannot permeate the young population if not draw them out at all. This is an example of ineffective reach of target group. It is worth further investigating whether this young people group belongs to hard-to-reach audiences. By definition, the hard-to-reach audiences refer to those who are not responsive to mainstream mass media campaigns [4]. It is crucial to further differentiate such people into those who have low access to the mainstream media (e.g. Cable TV may not be installed due to geographical and/or monetary constraints) and those who are impervious to media campaigns (e.g. due to distrust of government, poor mentality, resistance to preach). The former is regarded as hard-to-reach group whilst the latter hard-to-influence group. In this case, RTHK is free of charge and has very large geographical coverage, it is its image that fails to attract youngsters. Hence, more precisely, the young people group belongs to hard-to-influence category.

The above discussion reveals that the impacts of media message are so sophisticated that they cannot

be clearly understood without good research approach(es). The Hall's encoding/decoding model is a commonly used research approach [13]. This model emphasizes the production of media messages by media professionals (encoding) and the subsequent interpretations of the messages by audiences (decoding). The decoding process takes place in a social context in which individual audience has the right to accept, adapt or reject the messages. This model contains four major codes, namely, professional code, dominant code, negotiated code, and oppositional code. Professional code refers to the production techniques to encode meaning within the media message. Dominant code is the act that the audiences interpret the message in chorus with the intended meaning. Audiences who operate the negotiated code can adapt or reject the message depending on whether it fits with the experience of their own world. Oppositional code refers to the audiences who recognize but ultimately reject the intended meaning. Focus group interviews or in-depth interviews with the target audiences can be used to explore their interpretations of the messages. This lays an essential foundation for further modification or refinement of the mass media messages.

### **CONCLUSION**

The success of anti-drug mass media campaigns relies heavily on a wise use of health communication tactics and a close collaboration with various parties including public health specialists, media gatekeepers together with the target audiences. In order to form a basis of evidence-based practice, more resources have to be invested on research for evaluating the effectiveness of health communication on anti-drug mass media campaigns.

### **REFERENCES**

- [1] Wikipedia. The medium is the message 2009. Retrieved April 30, 2013, from [http://en.wikipedia.org/wiki/The\\_medium\\_is\\_the\\_message](http://en.wikipedia.org/wiki/The_medium_is_the_message)
- [2] Lane B. What is mass media? The Changing Role of Mass Communications and the Media Industries 2007. Retrieved April 30, 2013, from [http://medialiteracy.suite101.com/article.cfm/what\\_is\\_mass\\_media\\_](http://medialiteracy.suite101.com/article.cfm/what_is_mass_media_)
- [3] Mass Media and Health Education 2013. Retrieved April 30, 2013, from <http://www.educationforum.co.uk/Health/mass.htm>
- [4] Egger G, Spark R, Donovan R. Health promotion strategies and methods (2<sup>nd</sup> ed.). Sydney: McGraw-Hill 2005.
- [5] Narcotics Division, HKSAR. Youth drug abuse: Trends, characteristics and challenges 2008. Retrieved April 12, 2013, from <http://www.nd.gov.hk/en/report/pdf/yda/chapter2.pdf>

- [6] Narcotics Division, HKSAR. Fourth three-year plan on drug treatment and rehabilitation services in Hong Kong (2006-2008) 2006. Retrieved April 12, 2013, from [www.nd.gov.hk/pdf/Fourth\\_Three\\_Year\\_Plan\\_English.pdf](http://www.nd.gov.hk/pdf/Fourth_Three_Year_Plan_English.pdf)
- [7] Narcotics Division, HKSAR. Preventive education and publicity 2008. Retrieved April 27, 2013, from <http://www.nd.gov.hk/en/report/pdf/yda/chapter4.pdf>
- [8] Healthy People. Health communication and health information technology 2010. Retrieved April 26, 2013, from <http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=18>
- [9] DeJong W, Winsten JA. The use of mass media in substance abuse prevention 1990. Retrieved April 5, 2013, from <http://content.healthaffairs.org/cgi/reprint/9/2/30.pdf>
- [10] McAlister AL, Perry CL, Parcel GS. How Individuals, Environments, and Health Behaviors Interact: Social Cognitive Theory. In: Glanz K, Rimer BK, Viswanath K, Eds. *Health Behavior and Health Education: Theory, Research, and Practice* (4<sup>th</sup> ed.), San Francisco, CA, Jossey-Bass Inc. 2008; pp.169-188.
- [11] Buisman WR. Drug education: Programmes and methodology. An overview of opportunities for drug prevention 1995. Retrieved April 6, 2013, from [http://www.unesco.org/education/pdf/332\\_53.pdf](http://www.unesco.org/education/pdf/332_53.pdf)
- [12] Hargie O, Dickson D. *Skilled interpersonal communication: Research, theory and practice* (4<sup>th</sup> ed). London: Routledge 2004.
- [13] Devereux E. *Understanding the media* (2<sup>nd</sup> ed). Los Angeles: SAGE Publications 2007.
- [14] Prospect Theory 1981. Retrieved April 13, 2013, from [http://epse501.freeservers.com/prospect\\_theory.htm](http://epse501.freeservers.com/prospect_theory.htm)
- [15] Rothman AJ, Bartels RD, Wlaschin J, Salovey P. The strategic use of gain- and loss-framed messages to promote healthy behavior: How theory can inform practice. *J Commun* 2006; 56(s1): S202-S220. <http://dx.doi.org/10.1111/j.1460-2466.2006.00290.x>

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